

Outcomes and Long-Term Implications of the European Support Instrument Grant Project for Rapid Increase of Covid Convalescent Plasma Collection

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I have no conflict of interest to declare



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Agenda

- Background & aims
- Monitoring methods
- Results
- Positive impacts and future applications of the projects results
- Major problems
- Take home messages

Background



- The ESI grants for “**Increasing Capacity for Covid-19 Convalescent Plasma Collection**” have financed **20 projects** (EU ESI grants projects) organised in **13 Member States** (BE, BG, DE, DK, ES, FI, FR, HR, IE, IT, PL, RO, SI) and the **UK**:
 - 6 projects ran from 01 September 2020 to 30 June 2021;
 - Upon request, 1 project was extended until the 15 August 2021;
 - the remaining 13 projects were extended until the 15 October 2021.
- Funds went from EC directly to beneficiaries:
 - 77 Blood Establishments (BEs) applied for funds;
 - 67 BEs received funds.

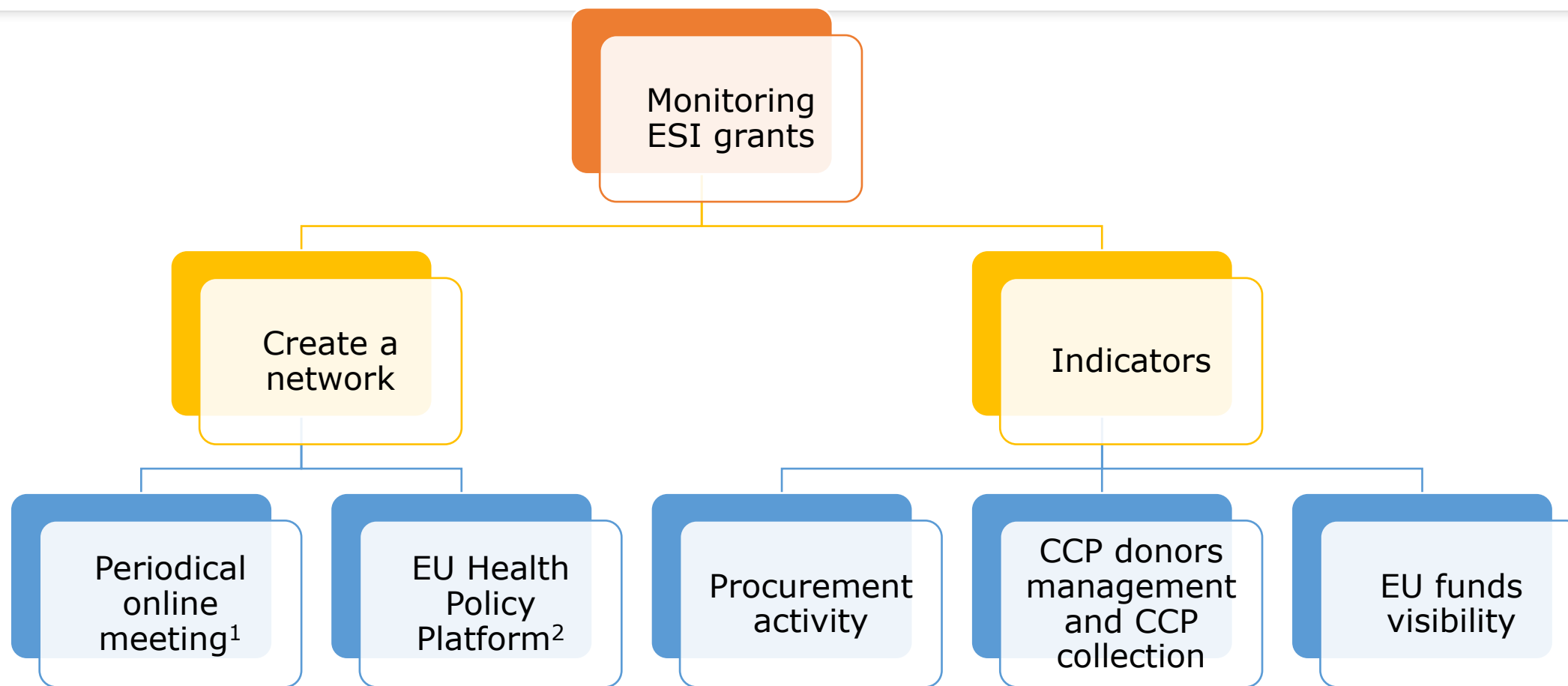
Aims

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- The overall aim of the projects was to **increase the capacity** of the public and NGO blood services in the EU **to collect plasma by plasmapheresis** from donors that had recovered from Covid-19;
- The increase in plasmapheresis capacity would have a **secondary long-term benefit** of helping to address a significant dependence of the EU on the US for an adequate supply of plasma donations for the manufacture of essential medicinal products.

Technical Support for the monitoring of ESI grants for Increasing Capacity for Covid-19 Convalescent Plasma Collection

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Monitoring methods

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1. During the EU ESI grants projects

- A short **survey** to periodically monitor the progress of the EU CCP ESI grant projects and collect the indicators was created through EU Survey;
- In order to give a support to the ESI grants beneficiaries, a network formation among them is encouraged, through **online meetings** and the participation to **EU Health Policy Platform**.

2. At the end of the EU ESI grants projects

a **Final Report** of the activities performed using the funds received through the ESI grants by filling in a template form, which was provided by the Commission.

Results: survey data analysis

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Participation to meetings and surveys

- The online **monthly meetings** were attended by the majority of the project coordinators (more than 70%);
- The registration to the **EU Health Policy Platform** (EU HPP) has always been low, no more than 15% of beneficiaries have registered;
- The participation to the **monthly survey** has been stable and, every month, involved 65% of the beneficiaries.

Procurement activities

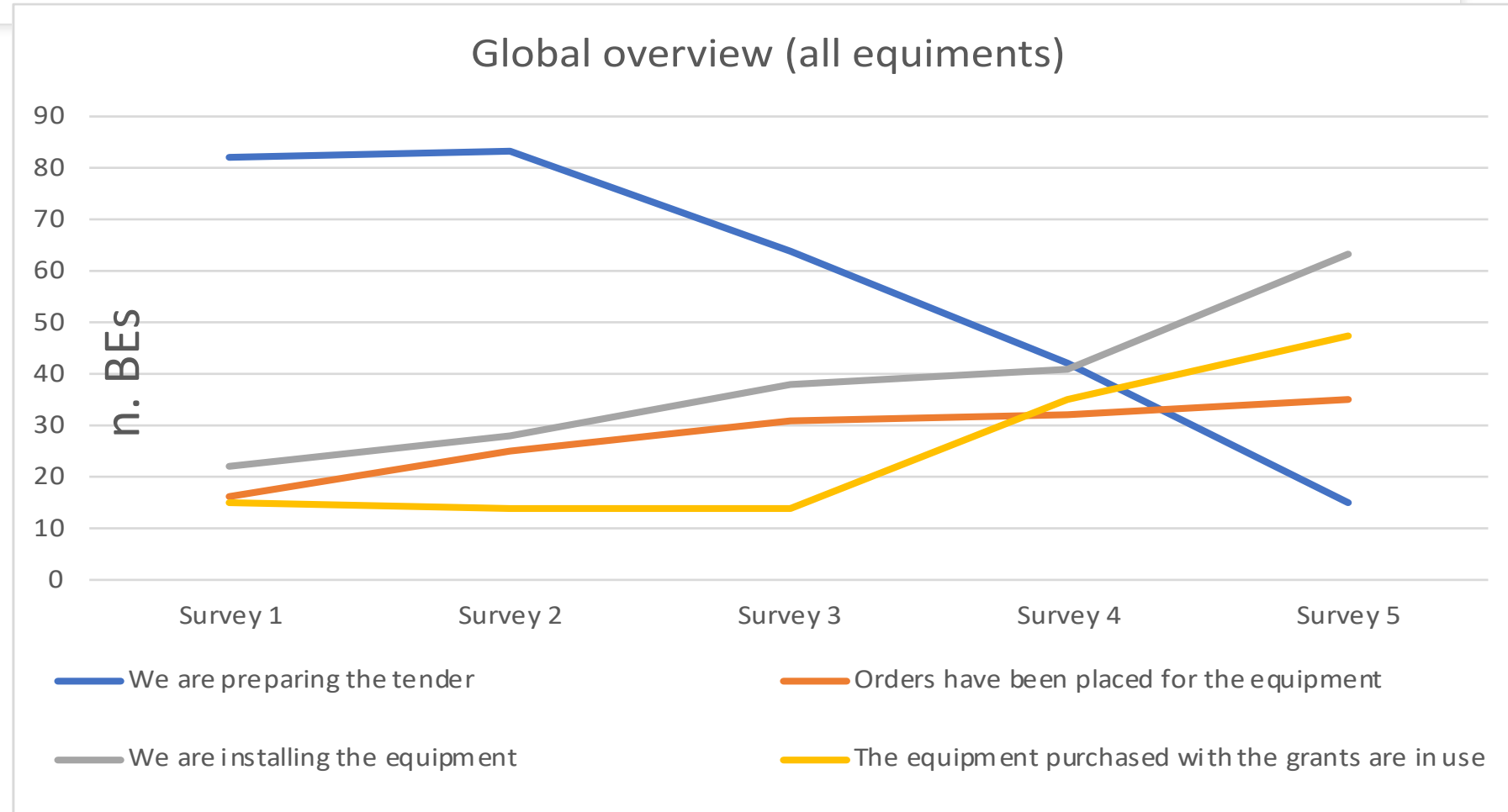
- The funding from EC directly to beneficiaries for the purchase of equipment and materials was possible but it was very challenging, particularly when one beneficiary had applied on behalf of its affiliated entities;
- The procurement activities required a long time, mainly because agreements had to be signed between the beneficiaries and its affiliated entities.

Results: survey data analysis

Procurement activities

were mainly completed just before the deadline of the last survey (31st August 2021):

- 68.8% have reported that they were installing or using the equipment purchased with the grants;
- 31.3% was still in the process of preparing the tenders or placing the orders.

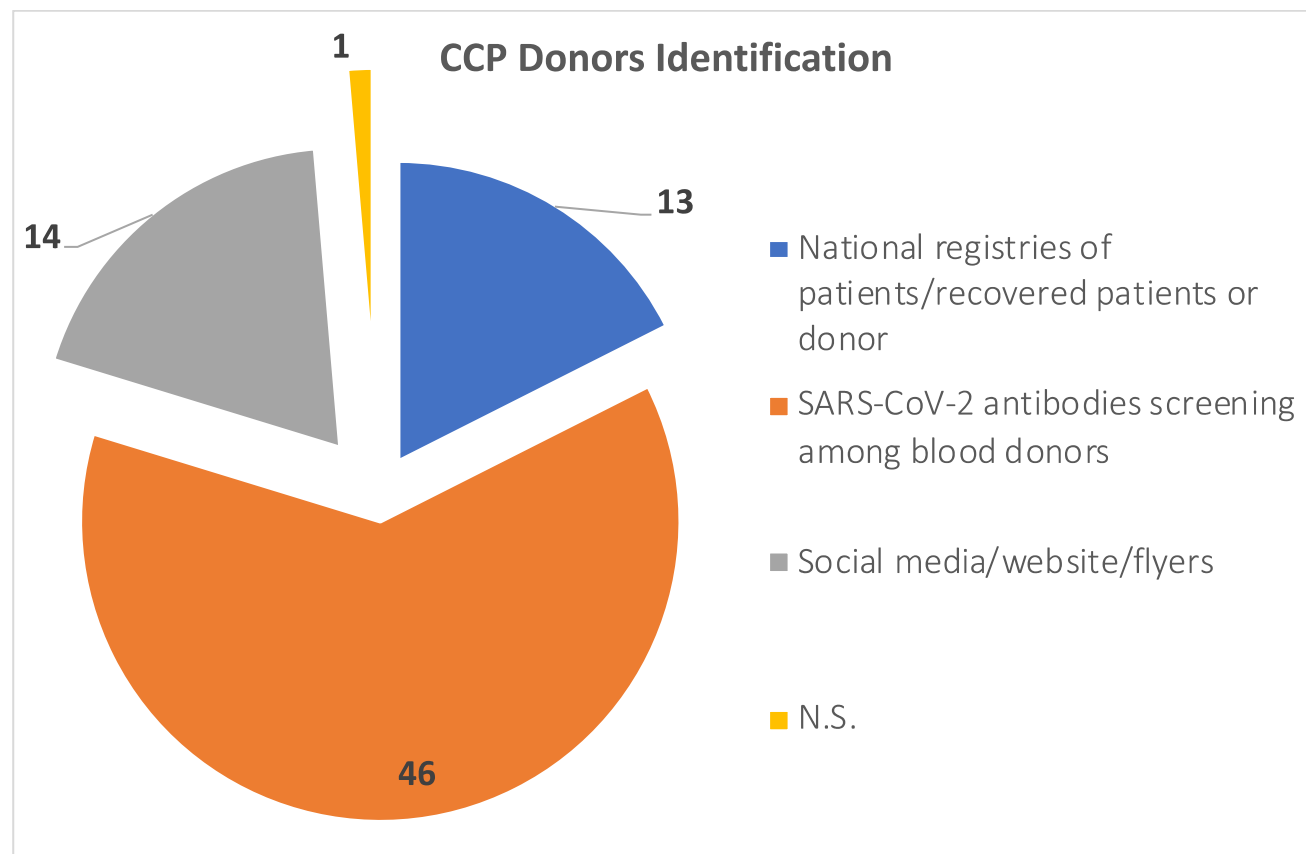


Results: survey data analysis

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Identification and recruitment of CCP donors

- 62.2% SARS-Cov2 antibodies testing,
- 17.6% the registries of recovered patients or donors
- 18.9% Social media/website/flyers



Results: survey data analysis

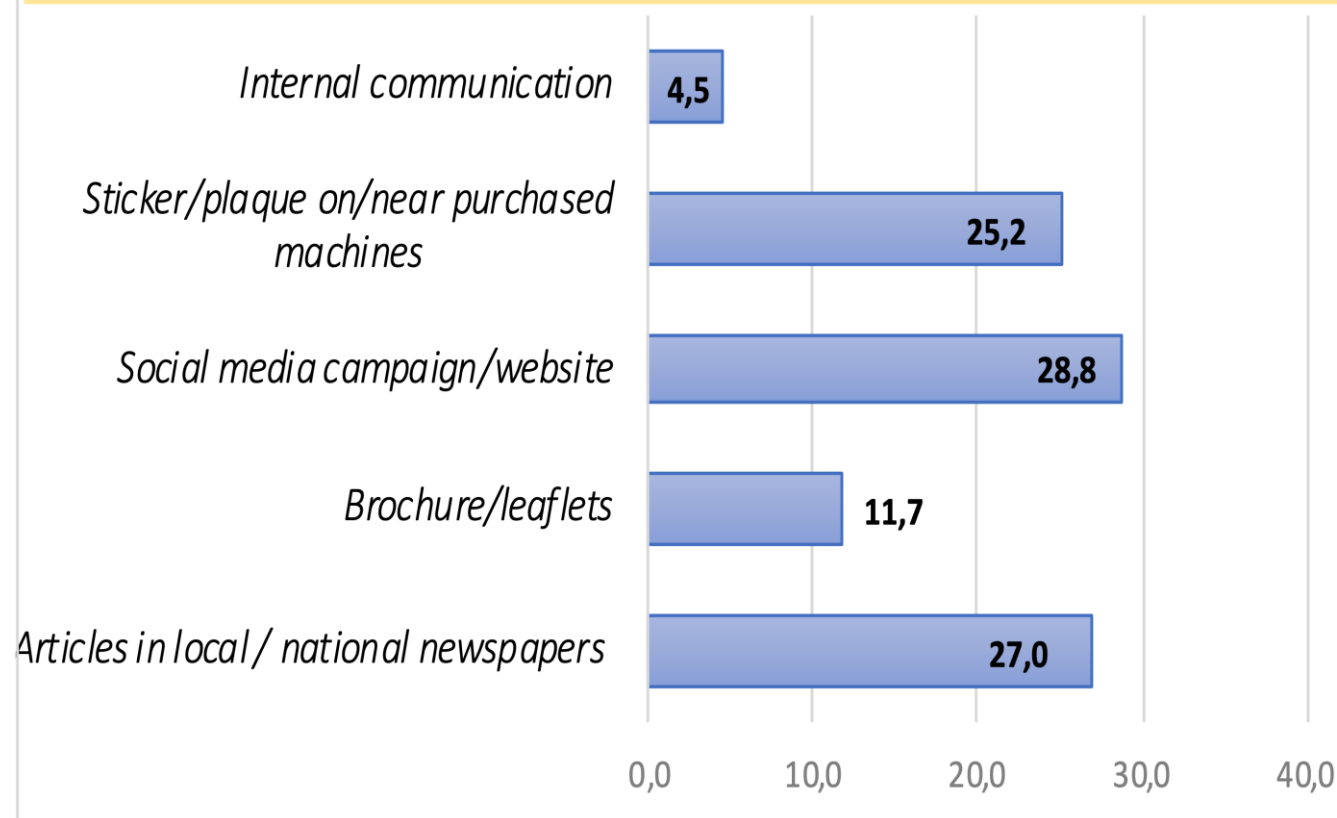
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EU funds visibility

- EU funding was given a high level of visibility, as shown by the evidence sent through the Surveys;
- stickers or plaques on the equipment purchased, articles in local or national newspaper/professional literature and social media campaign/institutional website are the most frequently methods used.

The Figure shows the frequency of ways to give visibility, expressed as the % of each method used compared to the total answers received.



Results: Final Report Review

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- 7 BEs, from 7 Countries, opened **34 new collection centres**, 33 are fixed centres and 1 a mobile centre;
- **34** Bes **expanded their storage capacity** buying 145 storage equipment.

BEs who expanded their collection capacity	Number	%
WITH Plasmapheresis machines purchased/rent	30	49.2
WITHOUT Plasmapheresis machines purchased/rent	31	50.8
Total	61	

The figures from Final Report review are preliminary and still under evaluation

Results: Final Report Review

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The most bought items

The most bought item, among BEs who expanded their collection and/or storage capacity, was defined as the highest number of equipment purchased among plasmapheresis machines, collection sets, furniture (donor beds/bedside tables), freezer.

BEs who expanded their collection capacity	N. purchased/rent	N. B who purchased them
Collection sets	72,296	42
Plasmapheresis machines	299	30
Furniture	201	20
Freezer	145	34

The figures from Final Report review are preliminary and still under evaluation

Results: Final Report Review



CCP units collected

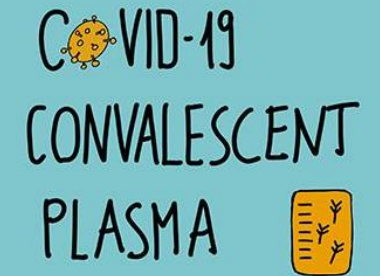
- Before the EU ESI grants were distributed¹: **29,361**
- At the end of the EU ESI grants ²: **165,681** (min/Country 140 - max/Country 97,140)

¹ Survey data analysis

² Final Reports review

The figures from Final Report review² are preliminary and still under evaluation

Results: Final Report Review

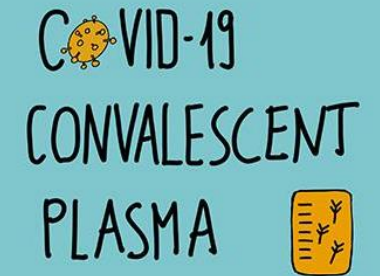


Positive impacts and future applications of the projects results

- The recruitment campaign, particularly when modern call and promotion centres were used, frequently obtained an **impressive response of citizens**;
- **Increased new donor recruitment**, potential regular donors of blood as well as plasma;
- participation to an EU project was **motivating for the staff**;
- **incentive to publish scientific results** on the project;
- **Improvement of contingency plans**;
- The pathogen inactivation procedure introduced as a new process in some blood establishments for CCP will also **increase the safety of other plasma transfused** to patients.

Results: Final Report Review

Major problems



- Lack of standardization of CCP, mainly at the beginning of the pandemic;
- no plasma fractionators interested in CCP pathogen inactivated as starting product;
- insufficient evidence of therapy effectiveness;
- low participation of clinicians;
- complex procurement process;
- long time required for a contractual arrangement;
- problems to maintain a cohort of eligible donors:
 - declining levels of antibodies over time,
 - privacy concerns for recruitment of recovered patients as donors.

Take home messages

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- The EU CCP ESI grants experience **has increased the capacity to collect CCP in 61 BEs;**
- Funding from EC directly to BEs was **sometimes challenging**, especially when many entities were involved, **but gave good results;**
- In addition to increased CCP collection capacity, **other added values** was seen, such as:
 - an increased public perception of health services
 - increased new donor recruitment
 - the opening of new collection centres (fixed and mobile)
 - increase in plasma collection and efficiency of storage capacity with a future view to supply for pharmaceutical production of PDMP
 - general improvement in transfusion process management in emergency situations.



Thank you for your attention



<https://whc.unesco.org/en/list/1390/>

Vineyard Landscape of Piedmont: Langhe-Roero and Monferrato

21/05/2022

