

Enquiry Report into File No. 845/WBHRC/COM/2015-16

Sub: Complaint of Joydeb Das regarding refusal to give blood against Card at Haldia Blood Bank/Functioning of Blood Bank, Haldia.

Hon'ble Commission (Order Dt. 24.08.16) desired to know about the basic functioning of the Haldia Blood-Bank.

Accordingly, we have examined the complainant and the O.P. first to check the veracity of the complaint and then visited Halida Blood Bank on 04.10.16 along with Dy. S.P., WBHRC and Constable M. Sikdar to examine the functioning of Haldia Blood Bank.

I examined (Annexure P-30 to 33) Sushanta Maity S/o Lt. Ranjit Maity of Vill-Kaurchandi, P.O.- Amalhandra, PS- Kolaghat, Dist- Purba Medinipur who also works at Haldia Blood Bank as Medical Technologist (Lab) on contractual basis- Non-Government Staff.

The three allegations mentioned in the petition (Annexure P- 2) written by Sri Joydeb Das are:-

1. On 15.08.15, the staff of Haldia Blood Bank misbehaved with him, when he went to collect 03(three) units of blood for his wife Banashree Das who was admitted in Nursing Home.
2. On the same date, the staff of Haldia Blood Bank demanded Rs. 1600/- for 02 units of blood without giving a receipt.
3. The staff of Haldia Blood Bank refused giving blood against Donor Card but gave the blood on payment of Rs. 2100/- against receipt.

The above said Sushanta Maity is the O.P. with whom the complainant had the altercation (transpired from the report of Dy. Director of Health Service (Admin), Govt. of West Bengal (Annexure P-10).

Sushanta Maity in his statement denied all the allegations and stated that on 15.08.15 at around 14.30 hrs., one Lalmohan Das bought a filled up (Form No. 24) in favour of Banashree Das admitted at Mediland Nursing Home, Haldia and asked for 03 units of B+ve blood against Donor Card. He further said that he wants the blood in advance for emergency and the donor card is being brought by his relative which will be submitted later. Sushanta Maity refused to give blood without virtual donor card. Then Lalmohan Das behaved harshly with him and finally took 02 units of blood on Government receipt by paying Rs. 2100/- (i.e. Rs. 1050/- each unit blood as per Government Rules). He also signed on the receipt/form No. 24 (Annexure P-28A). Sushanta Maity has registered the same in the supply Register of the blood bank. He also deposited the same money in the account of Haldia S.D. Hospital and produced the relevant copies duly certified by M.O.I.C., Haldia Blood Bank (Annexure P-26 & 27).

The said Sushanta Maity also denied allegations of demanding Rs. 1600/- for supplying blood to Lalmohan Das without any receipt.

Again, he denied allegations that he did not want to give blood against donor card but added that as the card was not produced before him, he could not give blood against “virtual” donor card but supplied the blood against Government receipt as the patient was admitted in Nursing Home.

Finally, Sushanta Maity denied allegations of misbehaving with Lalmohan Das but said that the complainant only misbehaved with him when he did not get any blood against “virtual” donor card.

The petitioner Joydeb Das @ Lalmohan Das s/o Sudarshan Das of Vill-Baisnabchak, PO-Debhog, PS-Haldia, Dist.-Purba Medinipur was examined (Annexure P-47) who said that he could not remember the name of the staff with whom he had an altercation at Haldia Blood Bank on 15.08.15. He also could not identify Sushanta Maity when shown in photographs from different angles (recorded at WBHRC office) whether he was the O.P. or not.

However, he said that due to anger, he had given a false accusation that Rs. 1600/- was demanded without receipt by the staff of Haldia Blood Bank for supplying blood on 15.08.15 to him. He transpired his name as Lalmohan Das. He is also known as Joydeb Das. He further stated that staff of Haldia Blood Bank misbehaved with him when he wanted blood against virtual donor card. He said that he wanted blood in advance as his relative was bringing donor card later.

He further wanted the money back which was receipted earlier after production of donor card later. Sushanta Maity refused to do so. Over that issue, an altercation took place, but misbehaviour could not be proved as there was no other witness.

During the visit, contacted Dr. Sutapa Sarkar, M.O.I.C., Haldia Blood Bank who said that Sushanta Maity was asked for clarification, but the report sent by C.M.O.H., Purba Medinipur to WBHRC (Annexure P-10) shows that the allegations of misbehaviour, etc. against Sushanta Maity did not substantiate.

During visit, found no CCTV installation in the said blood bank. Also contacted Amit Kr. Moira, Medical Technologist & Lab Technician, Haldia Blood Bank who also nullified allegations against Sushanta Maity. Moreover, the petitioner in his statement (Annexure P-47) stated that he does not want to proceed further on his petition.

Conclusion

It appears from the enquiry that all the allegations set up by the complainant Joydeb Das @ Lalmohan Das against the staff of Haldia Blood Bank (Sushanta Maity, Medical Technologist) are not substantiated.

Visit to Haldia Blood Bank on 04.10.16

Before the visit, we sent a comprehensive Check-List (Annexure P-54) to Superintendent, S.D. Hospital, Haldia, and M.O.I.C., Haldia Blood Bank containing 25 questions regarding the functioning of the blood bank.

On 04.10.16, I along with Sri T.C. Pal, Dy.S.P., WBHRC and Constable M. Sikdar went to Haldia Blood Bank and took photographs of the blood bank from different corners. Blood Bank is situated inside the premises of Haldia S.D. Hospital.

Contacted Dr. Sutapa Sarkar, M.O.I.C. (Haldia Blood Bank) and Dr. Sumana Das Gupta (Superintendent, Haldia S.D. Hospital) who jointly produced their report (Annexure P-71 & 72).

The report reveals that Haldia Blood Bank has an area of about 587.5 Sq. Metres (Plan outlay-Annexure P-70). Only 09 staff of different ranks is presently attached to Haldia Blood Bank. Five of them are Government Staff, and the rest are contractual employees (i.e. mainly the rank of Counsellor and Medical Lab Technician). The qualifications and work profile of Counsellors and Lab Technicians are given in Annexure P-62 to 65.

Daily Functioning of Blood Bank is 09 AM to 04 PM (Monday to Saturday) and 04 PM to 09 AM (service provided on call basis). Sunday and Holidays (Service provided on call basis).

Dr. Sutapa Sarkar (M.O.I.C.) put forward samples of authentic labels of blood bottles/Packs of different groups (Annexure P-66).

She stated that patient party (either admitted in Govt. Hospital or Private Hospital/Nursing Home) submits a requisition filled up Form No. 24 (Annexure P-59) along with properly-labelled blood sample (collected from donors). Then blood grouping and cross-matching are done in the Lab of Haldia Blood Bank and finally, the blood pack is issued / supplied to the patient party.

She further stated that blood is collected mainly by:

- VBD (Voluntary Blood Donation) Camp, organised by various organisations (both public and private sector), clubs, etc.
- Blood donation camp organised by Haldia S.D. Hospital premises by Hospital/ Blood Bank Authority in different occasion (WBDD/NVBDD/Doctor's Day Celebration).
- In all cases, blood-donation is voluntary and without remuneration / payment.

Dr. Sarkar also added that according to the Drug Control Guideline, HIV I & II, Hbs Ag, HCV, VDRL and MP tests are done before distribution of blood and kept in blood bank refrigerator (Tem -4°C - 6°C + 2°). The above tests are done either by Elisa Method or by Rapid Test depending on the availability of kits and reagent.

On our query about complete immunisation, Dr. Sumana Dasgupta, Superintendent, S.D. Hospital, Haldia stated that except the window period of HIV, the blood is completely immuned. Dr. Dasgupta again stated that there is no CCTV installation in and around the blood bank

premises. Dr. Sarkar stated that there was no single incident of law and order problem since her joining, but one incident of altercation took place between a patient party and Sushanta Maity on 15.08.15, but the allegations against Mr. Maity was found baseless.

She enumerated in her report that average blood distribution per working day is 30 packs and an average number of blood collection per working day is 22. The average blood supply in one month is 954 Packs.

She submitted the stock-position of blood in the blood bank (certified copy) as on 04.10.16 (Annexure P-60 & 61). She stated that there is generator facility in the blood bank.

On asking about the deteriorating condition of blood-bank building, Superintendent Haldia S.D. stated that though the blood bank is situated over the basement, it has no chance of an accident as it is within the framework of Haldia S.D. Hospital. She further mentioned that Haldia Blood Bank would be under renovation and up-gradation by PWD vide Memo No. 309/W-2 dt. 07.09.16. She produced the proposed plan outlay and copy of PWD letter in support of her claim (Annexure P- 67,68,69). Dr. Sarkar also stated that Master Register and Cross Match and Supply Register, Stock Register and Cross Match Slip are maintained in the Blood Bank, out of which Master Register consists overall transaction of blood collection, distribution, etc.

She again stated that they supply blood to the patient party depending upon the information as written in requisition Form No. 24, but no verification process is in place. There is no extensive computer set-up in the blood bank. There is no computer operator. No biometric system is commissioned to maintain authentic identification marks of blood receivers (patient party).

The procedure of issuing blood by blood bank is as follows:-

In the case of a patient admitted in Govt. Hospital and Private Hospital/ Nursing Home:

- Blood sample (properly labelled with Requisition Form No. 24 duly filled up) are sent to blood bank lab as deposited by the patient party.
 - Technicians of Blood Bank collect the blood sample.
 - Check the blood group of recipient's blood sample.
 - Cross matching is done between donors' and recipient's blood.
 - After satisfactory matching, blood is supplied to the patient party (unit wise) under the proper label (Annexure P-66).
- a) Patients admitted in Govt. Hospital:
- No donor's credit card/charge is required in this case.
- b) Patients admitted in private hospital/ nursing home:
- Only one credit card is needed per unit of blood (issued). If the patient party is unable to submit the credit card then Rs. 1050/- is charged per unit of blood.

- For credit card issued by State Government Hospital, no charge is taken for patients admitted in Nursing Home/Corporate Hospital.

Superintendent, S.D. Hospital, Haldia produced a copy of G.O. vide Memo No. HF/ O/ MS/ 1121/ W-63/ 2014 dt. 08.12.14 in support of charges imposed on the distribution of blood (Annexure P-48,49,50).

Exception: Patients admitted in State Govt. Medical Colleges and Teaching Hospitals processing charges imposed for blood distribution are Rs. 50/- for General Bed, Rs. 100/- for paying bed and Rs. 140/- for the cabin.

It is also mandatory for all blood banks (DAC supported, and Non-DAC supported) to provide blood/blood components free of cost to the following patients, who requires repeated blood transfusions as a life-saving measure:

- i) Thalassaemia patients.
- ii) Haemophilia patients.
- iii) Sickle Cell anaemia patients
- iv) Any other blood dyscrasia is requiring repeated blood transfusions.

Steps taken by M.O.I.C., Haldia Blood Bank to develop the functioning of the blood-bank are:-

- 1) Contacts & interaction with voluntary organisations are increased during the dry season to improve blood collection.
- 2) Improvement on documentation and maintenance of register.
- 3) Pursuance is done for up-gradation of building infrastructure.

Dr. Sarkar mentioned that there is acute shortage of manpower in the blood bank, considering the blood demand, lab testing processes and maintenance of records, etc. She stated that there was no instance of mismatched blood transfusion earlier.

It also emerged from M.O.I.C., Haldia Blood Bank that blood remains active/valid for 35 days from the date of collection.

Examining Sushanta Maity (Medical Technologist, Haldia Blood Bank) the following points came out regarding the functioning of the blood bank.

- a) There is no CCTV installation in and around blood bank.
- b) There is no security guard/staff in the said blood bank to maintain a queue of blood recipients / law and order problem during day and night.
- c) 30-35 units/day are supplied to recipients during May, June, July and 15-20 units/day are supplied during rest of the year.
- d) Due to a shortage of manpower, every day from 04 PM to 9 AM and Sunday/Holidays blood is distributed to all recipients (on-call basis) only.
- e) Also, existing 04 Medical Lab Technician and one pharmacist is inadequate to cope up with the work load of blood bank on 24 X 7 basis.

- f) Another blood storage refrigerator is needed for blood bank storage, though there are only one storage refrigerator and incubator in the blood bank at present.
- g) Computerization is needed to maintain records of the blood bank.
- h) A 6-8-seated vehicle is highly needed with separate space for keeping blood materials/Kits/gadgets etc. in the said vehicle for facilitating blood collection from camps.
- i) More and more camps are needed in Govt. premises so that blood could be supplied without any charges.
- j) No middleman or tout is there in the blood bank premises.

During our visit, Amit Kr. Moira, Medical Technologist & Lab Technician, Haldia Blood Bank showed us different rooms of Blood collection, Refrigeration, Incubation, Sterilisation, Blood disinfecting machine rooms, Crossmatch processing rooms, Blood distribution room, etc. There was no separate counter for distribution of blood, but it is given from office room of the staff.

Suggestions to improve the functioning of Haldia Blood Bank.

1. A separate & secure counter with solid iron bars should be built up to prevent any kind of physical clash between staff and patient party during the distribution of blood.
2. CCTV coverage should be arranged in and around the counter and every strategic corner of blood bank with round-the-clock real-time monitoring system.
3. Staff strength is nine (9) only. More manpower including additional Medical Officer, Medical Technologists, Pharmacists, Lab Technicians and Gr. D staff are to be engaged.
4. Round-the-clock appropriate working of blood bank should be ensured considering the blood supply figure on a monthly basis.
5. Security Guard should be introduced in shifts (Day and Night) for maintenance of law and order in the blood bank and ensuring safety and security of blood bank.
6. There is no computer operator. Computerisation is needed for the blood bank to maintain records of the blood bank and also maintaining record and photographs of the patient party who collects blood on behalf of patients. Computer operators should be employed.
7. Biometric system of registration of blood recipient party for each patient can prevent undue facilities exploited by fictitious people.
8. Renovation work in a consolidated form should be done speedily in the face of dilapidated semi-hollow basement lying below the blood bank. PWD officials should take this existing fault into account at the time of construction.
9. More and more camps in Govt. Premises and outside should be organised during the dry season, so as to collect blood in surplus for coping up with the demand. AB+ve blood and negative group blood crisis were seen from stock charts. Donors of such blood groups should be identified from the mass, Govt. Offices and Corporate House and voluntary blood collection

should be processed frequently. A Name-Bank for the prospective donors can be prepared beforehand.

10. Familiarisation camps should be organised for awareness of prospective donors. Persistent campaigning can help collection of required quantity of blood even during dry time. It appeared from the Report of MO of the said blood-bank that average daily collection of blood is 22 whereas daily distribution is 30 Packs. This shows a prognosis of an alarming shortfall situation at times. This cannot be allowed to continue.
11. There is no real-time electronic stock chart for display for the benefit of patient party giving exact figure of the remaining stock. This may be installed to dispel doubts of the patient party. Trust-deficit can be eliminated by this measure.
12. Number of Blood-storage Refrigerators should be increased to meet up growing need of blood storage capacity.
13. A 6-8-seated vehicle is very much needed with separate space for keeping blood-collecting materials / Kits / gadgets, etc. in the said vehicle for facilitating blood collection from camps. The driver should also be engaged by the Blood-bank authority.
14. Blood kits, reagents and gadgets should be supplied adequately to the blood bank to work without periodic spasms.
15. Pervasive monitoring should be done to stave off all possible middlemen/ pimp / tout.
16. Familiarisation training should be given to blood bank staff so that they behave properly with the patient party.
17. Separate registers should be maintained meticulously to enter the name, address, phone numbers and signature of the patient party collecting the blood. Photographs should be taken in computers along with the biometric system (fingerprint etc.). Instant counselling should be done to convince the patient party obtaining blood with or without donors' card. Display board should be fixed at a conspicuous place showing copies of Govt. rules / regulations / guidelines with regard to distribution of blood with or without donors' credit card. Copy of Voter Identity Card/PAN Card/ Aadhar Card copy of patient party should be collected preferentially.
18. Sterilisation of the incubation, cross-matching places and lab is needed stringently (During the visit free access of people with soiled slippers was seen).
19. The validity of each blood pack is up to 35 days from the day of collection. In view of this, periodical review may be facilitated so that there is no long shortage of precious blood.
20. Periodic Inspection of the Blood-Bank by senior Health Officials will help ameliorating the functioning of this vital body.

Submitted
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(S. SANTRA) 18/2/16
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