

Technical Assistance for Prioritisation and Upgrade of High-Volume Blood Service Sites, and Blood Drive Mobilisation

VISTA Resources Integrated Consultancy (VISTA), is pleased to invite your organization to submit a proposal for technical assistance for the prioritisation and upgrade of high-volume blood service sites, and blood drive mobilisation, across Akwa-Ibom, Benue, Ekiti, Enugu, Kebbi, Ondo, Taraba, and Zamfara.

1. Background and Rationale

Postpartum haemorrhage, antepartum haemorrhage, and severe anaemia in pregnancy remain among the leading, and most preventable, causes of maternal death in Nigeria, and in each case, timely access to safe blood is often the decisive factor between survival and death. Despite this, the availability of reliable, facility-level blood banking capacity remains inconsistent across the country, and particularly across the eight priority states of Akwa-Ibom, Benue, Ekiti, Enugu, Kebbi, Ondo, Taraba, and Zamfara, where many Comprehensive Emergency Obstetric and Newborn Care (CEmONC) facilities either lack functional blood banking capability altogether or operate with capacity far below the level required to meet actual demand during obstetric emergencies.

This gap is compounded by broader, systemic challenges within Nigeria's blood service ecosystem, including a heavy reliance on family replacement and paid donation rather than a stable pipeline of voluntary non-remunerated blood donors (VNRBD), persistent myths and misconceptions about blood donation that suppress voluntary donation rates, and limited coordination between community-level blood mobilisation efforts and the specific facilities where obstetric blood demand is highest. The National Blood Service Commission (NBSC) and State Blood Transfusion Services play the central institutional role in addressing these gaps, but their impact depends heavily on the extent to which investment is targeted to the facilities and communities where it will have the greatest impact in preventable maternal deaths.

Rather than pursuing a uniform approach across all CEmONC facilities in the focal states this assignment seeks a structured assessment of blood utilisation volume and maternal emergency caseload, the specific CEmONC facilities across the eight states where strengthened blood service capacity will have the greatest impact, and concentrating technical assistance on strengthening systems, quality assurance, and staff capacity at those sites. Equally critical to sustainable blood availability is the demand side of the equation: even well-equipped blood banking sites cannot function without a reliable, renewable supply of safe blood. This requires active, sustained community engagement to grow the pool of voluntary non-remunerated blood donors, through structured blood donation drives at community, institutional, and facility levels, paired with culturally appropriate campaigns and sensitisation activities that directly address the myths, fears, and misconceptions that currently suppress voluntary donation.

This assignment therefore combines facility-level prioritisation and technical strengthening with community-level blood drive mobilisation, campaigns, and

sensitisation, on the understanding that durable improvements in blood availability for SRH emergencies require simultaneous investment in both the supply chain infrastructure at priority facilities and the community donor base that feeds it.

2. Objectives of the Assignment

- Identify and prioritise the CEmONC facilities across the eight priority states with the greatest blood need, based on utilisation volume and maternal emergency caseload.
- Procure and install blood banks and solar power systems at prioritised high volume sites, and strengthen blood storage, handling, and quality systems.
- Increase the supply of safe, voluntary, non remunerated blood donations (VNRBD) through structured blood drives, campaigns, and community sensitisation.
- Reduce maternal deaths attributable to haemorrhage at prioritised sites, tracked through defined indicators including the proportion of obstetric transfusion requests met, blood stock out days, and the haemorrhage case fatality rate.

3. Scope of Work

- Conduct an assessment of all CEmONC facilities across the eight priority states to identify a prioritised list of high volume sites, including those prioritised for strengthening of blood storage and banking systems.
 - Collect and analyse facility level data on blood utilisation and maternal emergency caseload.
 - Assess current cold chain, storage, and quality assurance practices at each facility under review.
 - Rank facilities and develop a justified prioritisation list in consultation with NBSC and state teams.
- Procure and install blood banks and solar power systems at the priority sites.
 - Identify, cost, and procure the equipment and infrastructure required at each prioritised site, including blood bank refrigerators, cold boxes, solar power systems for backup and off grid power, testing reagents, and consumables.
 - Install and commission the blood banks and solar power systems at each prioritised site.

- Build the capacity of facility staff in safe blood handling and banking practices, and in blood demand forecasting and stock management, including establishment of routine stock monitoring practices.
- Conduct blood donation drives at community, institutional, and facility levels within the priority states.
 - Identify and engage high potential institutional partners, including universities, corporate organisations, faith based institutions, and market associations.
 - Design and deliver culturally appropriate campaigns and sensitisation activities that address the myths, fears, and misconceptions suppressing voluntary donation.
 - Align community sensitisation activities with the CSO led demand generation component, coordinated through the SWAp Coordinating Office.

4. Key Deliverables

- Facility prioritisation report of high volume CEmONC sites and supporting rationale.
- Blood bank and solar power system procurement and installation report for prioritised sites.
- Blood drive implementation plan and rolling calendar across the eight states.
- Quarterly blood drive and campaign reports detailing donors mobilised and units collected.
- Final report with recommendations for sustaining the VNRBD pipeline.

5. Duration and Reporting

The assignment is expected to run for twelve (12) months. The successful bidder will report to the SWAp Coordinating Office, in coordination with the National Blood Service Commission (NBSC) and State Blood Transfusion Services.

6. Proposal Submission Requirements

Interested firms are required to submit:

- Technical Proposal: Approach, workplan, tools/technologies to be used
- Financial Proposal: Detailed cost breakdown

Submission Guidelines

Interested firms are required to submit their proposal to vistaprourementad@gmail.com not later than five (5) days from the date of this publication. All enquiries should be directed to the same email address.

Note: Kindly submit all hardcopy proposals to Vista Resources Integrated Consultancy Limited, No. 13 Lingu Street, Wuse 2, FCT Abuja.

We look forward to receiving your proposal and appreciate your interest in supporting this critical initiative.