



# Blood and Transplant

**NHSBT Board**  
29 March 2018

## **Marketing and Communications Functional Review**

- 1. Status – Public**
- 2. Executive Summary**

To receive a presentation on the role of the Marketing and Communications Directorate and consider the recommendations in the NED review of the impact of the media programme (appendix 1).

- 3. Action Requested**

The Board is asked to:

- Comment on the role of the function, progress against objectives and future priorities and challenges
- Consider and accept the response to the recommendations in the NED review (appendix 2).

- 4. Background**

The purpose of the functional reviews is to update the Board on the work of the Group Services Directorates, in this case the role of the Marketing and Communications Directorate in enabling NHSBT to deliver on its core objectives. The last review of the Directorate was in January 2016. This review includes the response to the recommendations from the NED review carried out in the second half of 2017.

**Author**

Léonie Austin  
Director of Marketing and Communications  
07711 447418

To: Millie Banerjee  
From: Jonathan Oates & Charles St John  
cc: Leonie Austin  
Ian Trenholm  
Date: 25 January 2018  
Re: Marketing and Communications

---

### **Background**

As part of the annual NED objective setting process, we were tasked with working with the Marketing & Communications team to review the impact of our media programme; to consider how NHSBT can quantitatively assess the impact of its campaigns, and, to assess when the impact is better understood, whether the current strategy is effective?’

We met with Leonie and her team in late July to get a better understanding of the work of the MarComms team, the strategy for delivering on their NHSBT targets and the tools that are available for evaluating the effectiveness of specific campaigns.

This meeting was followed up with a subsequent meeting in December to take a further look at evaluation tools and the cost of acquisition of blood donors over recent years.

The issues highlighted in this note are informed by the July and December presentations and discussions and documents provided by Leonie and her team.

Please note that our ‘perceptions’ and ‘suggestions’ have been based on a brief immersion so they are just those!

### **Summary**

The Marketing & Communications Directorate defines its purpose as: **‘We make donation matter to people.’** The role that it plays in recruiting blood and organ donors is critical to the ability of NHSBT to deliver on its core objectives.

The Marketing and Communications Directorate consists of 73 FTEs with a budget of £7.3m (£3.5m pay and £3.7m non-pay expenditure) representing 1.7% of NHSBT’s overall budget. In addition, a further £1.4m non-pay communications expenditure is held in the ODT Budget.

The rigour and sophistication that has been applied in planning the marketing and communication strategy for NHSBT - with effective use of data, rigorous A&B testing of messages and measurement of results wherever possible – is impressive. The quality of the team is clearly high and their approach is positive and innovative.

There are areas of activity, however – for example, involvement in development of academic theory regarding logic models - which are hard to justify for a publicly funded body.

The marcomms task is increasing in complexity and cost given the reduction in demand for blood, combined with the need to focus on recruiting blood donors from specific blood groups. Targeting of BAME communities and regional recruitment to specific centres is more costly than generic national recruitment campaigns.

The focus of ODT marketing spend is on 'having the conversation'. We noted in this context the particular difficulty of evaluating the impact of marketing activity on the percentage of deceased ODR members who become actual donors, given the significant time lags between registration and donation.

A comprehensive Econometrics assessment is run every two years to measure the effectiveness of NHSBT's marcomms activity. The next results will be available at the end of January 2018.

### Issues for Consideration

Currently there is no clear way of evaluating the full costs of specific marcomms activity because there is no current means of allocating staff time against specific initiatives, (this appears, at least in part, to arise from IT limitations). The current cost of recruiting a blood donor is calculated as £11.70 and the cost per donor over the baseline at £33.90. However, these figures only account for third party costs; they do not reflect total cost including staff time.

The CRM programme delay is constraining the team's ability to improve understanding of the effectiveness of activities, as currently data has to be pulled off MS access databases and analysed manually.

The conversion rate from blood donor registrations to actual donors is falling, leading to a re-focus of activity on conversions which offers significant opportunity. However, in 2018 there will be a need to maintain 'dual running' of registration and conversion spend until impact on conversion feeds through. This will be resource intensive.

The focus on BAME recruitment to address the shortage of RO supplies has not resulted in recruitment of target numbers while overall donor recruitment has fallen.

Government Communication Service (GCS) reporting requirements represent a significant burden on staff time and consequently organizational costs.

Digital channels such as Facebook and Twitter have been very important to recruitment but there is evidence that they may have reached effective capacity with diminishing returns for every £ spent.

Messaging to recruit donors has always been 'positively focused' as research has suggested that the public does not appreciate more demanding approaches.

## Conclusions

- The Executive Team should review the level at which the marcomms team needs to operate in order to achieve the results NHSBT requires. The marketing and communication function is a highly impressive operation made up of 73 FTEs with a total budget of £7.3m (£3.5m pay and £3.7m non-pay expenditure) representing 1.7% of NHSBT's overall budget. In addition, a further £1.4m non pay communications expenditure is held in the ODT Budget. The Directorate is notable for its commitment to thoroughness and accuracy in all areas of operation – approach, actions, measurement and reporting. This is commendable but we question whether the level at which the team operates will be sustainable as NHSBT faces increasing financial constraints. We believe that now is the time to consider whether an 80:20 approach will deliver the donor mix the organisation requires.
- In coordination with appropriate ALBs, NHSBT should seek GCS agreement to reduce the burden of reporting and evaluation requirements. A significant amount of staff time is spent reporting marcomms activity (in particular to GCS). We question how useful this expensive use of staff time is to GCS or ministers.
- NHSBT should establish more effective (but without undue levels of time & cost being incurred) means of assessing the total cost of marketing and communications activities. Current assessments usually relate to third party costs and do not include internal staff costs.
- NHSBT should continue with its recent focus on marketing and communication efforts to increasing the percentage of new donor recruits who are converted to actual doors rather than spending an increasing amount on new donor recruitment at increasing marginal cost.
- NHSBT should consider trialling more demanding messaging in its marketing. While research indicates that the public do not like messaging that makes them feel guilty (for example, research on messaging about sickle cell to attract RO donors, suggested that messaging was seen to be hectoring), this does not necessarily mean that it is not effective.
- As the return on paid for online content diminishes, the team should consider how resources could be refocused on developing innovative creative content which is most likely to be shared online.
- The Executive Team should maintain and increase its focus on developing a more diverse staff team, particularly at senior level in marketing and communications. The need to recruit more donors from diverse backgrounds, underlines the need to ensure greater diversity in NHSBT's marcomms workforce.
- The Marketing and Communications Directorate should consider redefining its 'purpose' from 'We make donation matter to people' to a specific focus on recruitment and retention of donors.

## **NHSBT response**

The Executive Team should review the level at which the marcomms team needs to operate in order to achieve the results NHSBT requires.

Reviewed during the 2018/19 business planning round. Agreed to protect donor recruitment (blood and organs), significantly reduce stakeholder engagement and rely on existing corporate collateral. Improved procurement of agency support has delivered £200k savings against rate card. As a result the budget has decreased by £572k, 8.07%, and the WTE by 4.4 recurring and delivered savings of £644k. There will be a deliberate move towards doing enough to deliver against the targets without investing significant time in perfecting what we do, the 'good enough' approach.

In coordination with appropriate ALBs, NHSBT should seek GCS agreement to reduce the burden of reporting and evaluation requirements.

Meeting with the No10/Cabinet Office lead on 29 January and agreed a more streamlined annual report based on the current one page traffic light report.

NHSBT should establish more effective (but without undue levels of time & cost being incurred) means of assessing the total cost of marketing and communications activities.

Time recording suspended in July 2017 as the spreadsheet approach was very time consuming and the data was easily corrupted due to multiple users on different systems. Now exploring if Click Time, a tool used by BTS and ICT, would be appropriate or if other inexpensive, off the shelf products would be suitable.

NHSBT should continue with its recent focus on marketing and communication efforts to increasing the percentage of new donor recruits who are converted to actual doors rather than spending an increasing amount on new donor recruitment at increasing marginal cost.

The donor base health initiative for blood donors was presented to the Board in January 2018 setting out the plans for recruitment, conversion and retention. As retention and conversion improve it will then be possible to reduce the level of investment in recruitment.

NHSBT should consider trialling more demanding messaging in its marketing.

We test marketing messages on an ongoing basis. Research in March 2015 identified the issue was lack of awareness of the need for more blood donors, specifically more BAME blood donors. Initial reasons not to donate included fear of needles and the practical challenges of where and when to donate. Further exploration revealed more specific barriers, none insurmountable. The insight showed that reminders of guilt were not particularly effective at changing behaviour and could potentially reinforce inaction. This fed into the development of last year's black recruitment campaign messaging. It was more inclusive in

nature rather than blame, eg 'I'm there' rather than 'only X% donate'. In 2017/18 we have seen an almost 50% increase in black donor registrations. We will continue to review and test messaging and consider trialling more demanding messaging to understand its effectiveness in terms of donor recruitment and action.

As the return on paid for online content diminishes, the team should consider how resources could be refocused on developing innovative creative content which is most likely to be shared online.

Agree, our work is increasingly content driven. We have set up a weekly editorial meeting which identifies content for the next two weeks supporting blood and organ donor recruitment and best in class. We identify and manage a database of case studies essential to promoting the need for donation, generating free media coverage and stimulating people to act.

The majority of our organ donation campaigning is content driven with small amounts of paid media. The need to increase the blood donor base means we will be investing a significant proportion of the budget on paid media. We will continue to complement this with good content such as the Date to Donate film series.

The Executive Team should maintain and increase its focus on developing a more diverse staff team, particularly at senior level in marketing and communications.

There are 14 employees ranging from band 5 to 8a in the Marketing and Communications Directorate who are recorded as from a black, Asian or minority ethnic background. Most have benefited from the targeted development on offer from NHSBT: Reach Higher, BAME Masterclass, Shine Accelerate. One band 7 was given an opportunity to deputise for his Head of Department and sat on the senior management team in their absence on extended leave in 2017. We will continue to explore opportunities to develop and bring on employees from diverse backgrounds.

We also participate in the Government Communication Service internship programme which provides opportunities for those from a disadvantaged or ethnic background to gain work experience in a marketing/communications team.

The Marketing and Communications Directorate should consider redefining its 'purpose' from 'We make donation matter to people' to a specific focus on recruitment and retention of donors.

'Making donation matter to people' is a deliberately inclusive statement that reflects the core activity of the Directorate to recruit donors and maintain our reputation. Underpinning this are specific targets for recruitment. It is similar to NHSBT's purpose being to save and improve lives with clear objectives and targets for each operational area.