

Board Performance Report

Performance Report

For the period ended 30th April 2018

	Status	Trend	Comments
Blood Components	Red	Red	Stocks increased during April to around 26k, although the increase has now stalled and O negative and B negative remain vulnerable to demand fluctuation and are predicted to fall below 3 days in the next week.
DTS	Green	Green	DTS income was c4% above plan and resulted in an income and expenditure surplus of £0.6m. There have now been 17 adult donor BBMR provisions versus 20 planned for the month (with international issues 2 below plan). Cornea stocks increased to 308 units by the end of April.
ODT	Green	Green	There were 144 deceased donors in April, 6% better than target and 27% better than last year. The number of deceased transplants was 4% lower than target in the month, although 33% higher than last year. Living Donors (reported one month in arrears) were 25.5% lower than target for 2017/18.
Corporate	Green	Green	Sickness absence improved this month to 3.3%. The trend in health and safety incidents (reported 1 month in arrears) improved.
Finance	Green	Yellow	NHSBT reported a surplus in April of £1.5m, £0.2m better than plan. The 5-year projection for Blood continues to be very fluid as a result of CSM changes, the NHS pay award and demand trends.
Change Programme	Red	Yellow	The overall Transformation Programme status remains as red, with the CSM Programme at red status as well as the Networks & Telephony Programme and the NTMRL Database project.

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NHSBT REVENUE STATEMENT - FOR THE PERIOD ENDED 30 APRIL 2018

Income	Actual Plan WTE WTE at (Ave YTD) period end		Year to date			Full year		
			Budget	Actual	Variance	2017-18 Actual	Budget	Forecast
			£k	£k	£k	£k	£k	£k
Revenue Cash Limit - Organ Donation & Transplantation			5,161	5,161	0	61,927	61,927	61,927
Revenue Cash Limit- Diagnostic and Therapeutic Services			348	348	0	4,173	4,173	4,174
Blood & Components Income			21,387	21,058	(329)	256,910	257,220	257,860
Diagnostic and Therapeutic Services Income			5,333	5,555	221	71,011	72,516	72,516
Research & Development			81	113	32	1,686	971	971
Organ Donation & Transplantation Other Income			980	988	8	12,011	11,762	11,762
All Other Income			534	613	80	7,230	6,634	6,975
Total Income			33,823	33,835	11	414,949	415,203	416,185
Expenditure								
Cost of Sales - Blood Component Stock Movement			1,184	739	(445)	(1,288)	0	0
Cost of Sales - Tissues Stock Movement			0	7	7	(85)	0	0
Organ Donation & Transplantation: Operational Expenditure	416	397	(5,019)	(4,817)	202	(60,097)	(60,607)	(60,607)
Organ Donation & Transplantation: Change Programme	7	16	(347)	(347)	0	(4,829)	(5,179)	(5,179)
Blood Supply: Manufacturing, Testing & Issue	711	739	(5,537)	(5,428)	109	(68,140)	(66,172)	(66,618)
Blood Supply: Blood Donation	1,379	1,378	(5,756)	(5,677)	79	(72,103)	(70,841)	(70,621)
Blood Supply: Logistics	336	340	(1,657)	(1,717)	(60)	(21,010)	(20,139)	(20,118)
Diagnostic and Therapeutic Services: Operational Expenditure	850	822	(5,473)	(5,064)	409	(62,224)	(65,436)	(65,436)
Diagnostic and Therapeutic Services: Change Programme	0	0	0	0	0	0	282	282
Quality	83	85	(407)	(406)	2	(5,006)	(4,951)	(4,977)
Chief Executive and Board	3	5	(52)	(37)	15	(627)	(625)	(565)
Communications	69	71	(703)	(688)	15	(7,409)	(6,982)	(7,050)
Estates & Facilities	76	75	(3,095)	(2,949)	146	(39,592)	(38,970)	(38,940)
Finance	88	94	(444)	(439)	5	(5,581)	(5,330)	(5,532)
Business Transformation Services	25	23	(132)	(117)	15	(1,391)	(1,585)	(1,485)
People	114	117	(611)	(581)	31	(7,204)	(7,331)	(7,127)
Information Communication Technology	176	170	(2,025)	(1,916)	109	(23,714)	(24,660)	(25,120)
Clinical Directorate	171	158	(1,176)	(1,150)	26	(13,779)	(13,965)	(14,065)
Research & Development	35	40	(358)	(367)	(9)	(5,127)	(4,281)	(4,281)
Change Programme (Blood & Corporate)	8	39	(735)	(1,157)	(423)	(24,196)	(20,255)	(19,431)
Miscellaneous and Capital Charges			(212)	(210)	2	(1,745)	(2,546)	(2,618)
Total Expenditure	4,546	4,569	(32,554)	(32,320)	234	(425,145)	(419,571)	(419,488)
Surplus/(Deficit)			1,269	1,515	246	(10,197)	(4,367)	(3,303)

Statutory Accounts Presentation

NHSBT Surplus/(Deficit) as above	1,269	1,515	246	(10,197)	(4,367)	(3,303)
Add back Notional Cost of Capital	591	591	0	7,422	7,176	7,176
Remove Revenue Cash Limit	(5,508)	(5,508)	0	(66,100)	(66,100)	(66,101)
Deduct Capital Charges Cash Payment	(1,458)	(1,458)	0	(17,544)	(17,441)	(17,441)
Net Expenditure	(5,106)	(4,860)	246	(86,419)	(80,732)	(79,669)

A surplus of £1.5m was reported in April, £0.2m better than plan.

Lower Blood Component income (red cells / platelets) was offset by a combination of improved sales within DTS (TES & IBGRL) and also non-clinical income/plasma. Lower stocks of red cells generated an adverse cost of sales movement (£0.4m). Transformation Fund spend was higher than budget, although this was more than offset by underspends across the divisions - ODT - £0.2m / Blood £0.2m / DTS £0.4m.

Balance sheet - current assets were £50.1m at the end of April 2018 (including capital charges payable of £1.5m and £5.5m owed for programme funding not yet drawn down), with a cash balance of £27.3 (vs £23.5m last month).

Debtor days were at 26 in April, worse than last month (25 days) and above target (22 days). An overdue reduction target and plan (focused on DTS 90 day overdues) is now included within the cashflow.

NHSBT CASH FLOW - FORECAST 2018/19

	Actual Apr-18 £k	Forecast May-18 £k	Forecast Jun-18 £k	Forecast Jul-18 £k	Forecast Aug-18 £k	Forecast Sep-18 £k	Forecast Oct-18 £k	Forecast Nov-18 £k	Forecast Dec-18 £k	Forecast Jan-19 £k	Forecast Feb-19 £k	Forecast Mar-19 £k	Total £k
Opening bank balance	23,479	27,317	47,012	42,317	47,650	54,482	63,069	55,244	61,617	59,666	62,951	67,124	23,479
Receipts													
Debtors & Other Receipts	24,817	34,962	24,126	32,941	29,004	36,720	27,527	27,695	28,614	23,711	26,861	35,258	352,236
Revenue Cash Limit	0	16,525	0	5,508	5,508	5,509	5,508	5,508	5,508	5,508	5,508	5,509	66,099
Capital Cash Limit	0	0	0	2,500	0	0	0	2,500	0	2,500	0	6,300	13,800
Total income	24,817	51,487	24,126	40,949	34,512	42,229	33,035	35,703	34,122	31,719	32,369	47,067	432,135
Payments													
Staff Expenses	9,928	16,873	16,891	17,601	16,911	17,072	16,943	16,945	16,939	16,905	16,938	23,923	203,868
Other Revenue Payments	10,734	14,719	11,830	17,915	10,569	15,571	14,196	11,385	18,135	10,029	9,758	57,852	202,693
Capital Charges	0	0	0	0	0	0	8,720	0	0	0	0	8,721	17,441
Capital Payments	317	200	100	100	200	1,000	1,000	1,000	1,000	1,500	1,500	5,883	13,800
Total costs	20,979	31,792	28,821	35,616	27,680	33,643	40,859	29,330	36,074	28,434	28,196	96,379	437,802
Closing bank balance	27,317	47,012	42,317	47,650	54,482	63,069	55,244	61,617	59,666	62,951	67,124	17,812	17,812

Debtor Days (Target is 22 days)	26
YTD BPPC By Value % (Target is 95%)	95.6%
YTD BPPC By Number % (Target is 95%)	92.0%

Top 5 & Other Overdue Debtors NBS/ODT £000's	Total Overdue £000's	1-30 Days overdue £000's	31-60 Days overdue £000's	61-90 Days overdue £000's	>90 Days overdue £000's	Comments
Buckinghamshire Healthcare NHS Trust	733	(6)	188	(4)	555	£479k received 04/05 - remainder invoices not authorised
King's College Healthcare NHS Trust	439	(65)	10	98	396	Invoices not authorised for payment
City Hospitals Sunderland NHS Foundation Trust	437	38	36	156	207	Invoices not authorised for payment
Guy's and St Thomas NHS Foundation Trust	434	48	85	5	296	£407k received 09/05 - remainder invoices not authorised
Imperial College Healthcare NHS Trust	385	32	272	3	78	Invoices not authorised for payment
Total 5 Overdue Debtors	2,428	47	591	258	1,532	
Other Debtors	5,789	2,182	1,719	(13)	1,901	
Total Overdue Debtors	8,217	2,229	2,310	245	3,433	

Target £0.95m for over 90 days by 31/03/2019	Profile by Month											
	Apr-18 £000s	May-18 £000s	Jun-18 £000s	Jul-18 £000s	Aug-18 £000s	Sep-18 £000s	Oct-18 £000s	Nov-18 £000s	Dec-18 £000s	Jan-19 £000s	Feb-19 £000s	Mar-19 £000s
	3,433	3,208	2,983	2,757	2,531	2,305	2,079	1,853	1,627	1,401	1,175	950

NHSBT HIGH LEVEL ABC CONTRIBUTION ANALYSIS FOR THE PERIOD ENDED 30 APRIL 2018

Year to date Actual £m	Blood & Components inc. R&D	Diagnostics				Tissues	Stem Cells				TAS	ODT	TOTAL
		RCI	H&I	Reagents	IBGRL		CMT	CBC	BBMR	CBB			
Income													
Prices	21.4	1.2	1.1	0.1	0.2	1.1	0.7	-	0.3	0.0	0.7	-	26.7
Central Funding from DHAs	-	-	-	-	-	-	-	-	-	-	-	1.0	1.0
Grant in Aid	-	-	-	-	-	-	-	-	0.2	0.2	-	5.2	5.5
Other	0.4	0.0	0.0	-	-	-	0.0	-	0.0	0.1	0.1	0.0	0.6
Total Income	21.8	1.2	1.1	0.1	0.2	1.1	0.7	-	0.5	0.3	0.8	6.1	33.8
Expenditure													
<u>Variable Costs</u>													
Consumables	(3.4)	(0.1)	(0.2)	(0.0)	(0.0)	(0.1)	(0.2)	(0.0)	(0.0)	(0.0)	(0.3)	(0.3)	(4.8)
Other	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Variable Costs	(3.4)	(0.1)	(0.2)	(0.0)	(0.0)	(0.1)	(0.2)	(0.0)	(0.0)	(0.0)	(0.3)	(0.3)	(4.8)
Variable Contribution	18.4	1.1	0.9	0.1	0.2	1.0	0.5	(0.0)	0.4	0.2	0.5	5.8	29.1
<u>Direct Costs</u>													
Pay	(7.0)	(0.6)	(0.5)	(0.1)	(0.1)	(0.6)	(0.3)	(0.1)	(0.1)	(0.2)	(0.2)	(2.2)	(12.0)
Non Pay	(1.4)	(0.0)	(0.1)	(0.0)	(0.0)	(0.2)	(0.1)	(0.0)	(0.1)	(0.0)	(0.0)	(2.4)	(4.4)
Total Direct Costs	(8.4)	(0.7)	(0.6)	(0.1)	(0.1)	(0.8)	(0.4)	(0.1)	(0.2)	(0.2)	(0.3)	(4.6)	(16.5)
Direct Contribution	10.0	0.4	0.3	0.0	0.0	0.2	0.1	(0.1)	0.2	0.0	0.3	1.3	12.6
<u>Direct Support</u>													
Operational Directorate costs	(0.6)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.2)	(0.8)
Logistics	(1.7)	(0.0)	(0.0)	(0.0)	-	(0.0)	(0.0)	-	(0.0)	(0.0)	(0.0)	(0.0)	(1.7)
Clinical	(0.7)	(0.0)	-	-	-	(0.0)	(0.0)	-	(0.0)	(0.0)	(0.0)	(0.1)	(0.9)
Attributable Estates costs	(1.7)	(0.1)	(0.1)	(0.0)	(0.0)	(0.1)	(0.1)	(0.0)	(0.0)	(0.0)	(0.0)	(0.1)	(2.2)
Attributable IT costs	(0.4)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	-	(0.0)	(0.0)	(0.0)	(0.2)	(0.6)
Depreciation / Cost of Capital	(0.2)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.4)
Total Direct Support	(5.1)	(0.2)	(0.1)	(0.0)	(0.1)	(0.2)	(0.2)	(0.0)	(0.0)	(0.1)	(0.1)	(0.6)	(6.6)
Notional Internal Income Uplift	(0.2)	(0.0)	0.2	0.0	0.0	0.0	0.0	(0.0)	(0.0)	0.0	0.0	(0.0)	(0.0)
Cost of Sales	0.7	-	-	-	-	0.0	-	-	-	-	-	-	0.7
Contribution to Unallocated Costs	5.4	0.3	0.3	0.0	0.0	0.0	(0.1)	(0.2)	0.1	(0.0)	0.2	0.7	6.7
Total Allocated Costs	(16.4)	(1.0)	(0.8)	(0.1)	(0.2)	(1.1)	(0.8)	(0.2)	(0.3)	(0.3)	(0.6)	(5.4)	(27.1)
<u>Unallocated Costs Apportioned</u>													
Directorate costs	(1.7)	(0.1)	(0.1)	(0.0)	(0.0)	(0.1)	(0.1)	(0.0)	(0.0)	(0.0)	(0.1)	(0.6)	(2.8)
Estates costs	(0.5)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.1)	(0.7)
Depreciation / Cost of Capital	(0.1)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.0)	(0.1)
Total Unallocated Costs	(2.3)	(0.1)	(0.1)	(0.0)	(0.0)	(0.1)	(0.1)	(0.0)	(0.0)	(0.0)	(0.1)	(0.8)	(3.7)
Operating Net Surplus / (Deficit)	3.1	0.1	0.2	0.0	(0.0)	(0.1)	(0.2)	(0.2)	0.1	(0.1)	0.1	(0.0)	3.0
Transformation Costs	(1.2)	-	-	-	-	-	-	-	-	-	-	(0.3)	(1.5)
Total Allocated Costs Inc Transformation	(17.6)	(1.0)	(0.8)	(0.1)	(0.2)	(1.1)	(0.8)	(0.2)	(0.3)	(0.3)	(0.6)	(5.8)	(28.6)
Net Surplus / (Deficit) Inc Transformation	1.9	0.1	0.2	0.0	(0.0)	(0.1)	(0.2)	(0.2)	0.1	(0.1)	0.1	(0.4)	1.5
RAG Calculation - YTD BUD	2.7	(0.0)	0.1	0.0	(0.1)	(0.3)	(0.2)	(0.2)	0.1	(0.0)	(0.0)	(0.7)	1.3
RAG STATUS (Actuals V Plan)	R	G	G	G	G	G	G	G	G	G	G	G	G
R&D PROGRAMME COSTS	(0.3)	(0.1)	(0.0)	-	-	(0.0)	(0.0)	-	-	-	-	(0.0)	(0.5)

DIVISION	PILLAR	BLOOD 2020 – STRATEGIC TARGETS	YTD RAG	RAG CHANGE	PERFORMANCE
BLOOD	Blood Donation and the Donor Experience	78% of blood donors scoring => 9/10 for satisfaction.	A	-	74.5% vs plan of 78% – Chart 11.
		No. of complaints per million donations	R	-	0.68% vs plan of 0.49% – Chart 12
		% of whole blood donations in donor centres – 2018/19 target of 23%	G	-	Month at 21.8% (vs 19.9%)
		Blood Donation Productivity: units/FTE/year	A	-	1.451 vs plan of 1,518 – charts 23/24.
		Number of Donors Donating over the last 12 months (000's) – 2018/19 target of 870k	R	-	826k in April (vs requirement of 870k) – Chart 13.
		Frequency of Donation (overall) – target of 1.71	R	--	1.85 (vs target of 1.17) - (Chart 13).
		Number of O- neg Donors donating last 12 months (000's) 2018/19 target of 106.7k	R	-	104k in April (vs requirement of 106.7k) – Chart 14.
		Frequency of Donation (O neg donors) – 2018/19 target of 1.90.	R	-	1.94 (vs target of 1.90) – Chart 14.
		R ₀ donors donating over the last 12 months.	–		19.8k in April (target TBC)
		A neg CD donors donating over the last 12 months.	-		To be reported from next month – target TBC
	Supply- Chain Operations	Red Cell Blood Stocks – Alert Levels	R	-	1 occasion in April 2018 (vs zero target for the year)
		Platelet Demand vs. Stock levels	R	-	Stocks below target on 2 occasions in the month.
		Number of 'critical' and "major" regulatory non-compliances	G	-	None reported in the month.
		98% of Products Issued on Time (excluding R ₀ 'in full' fails)	G	-	Better than target at 98.4% – chart 3.
		Manufacturing Productivity (units/FTE/year)	G	-	April at 11.1k and equal with plan – Chart 21.
		Testing Productivity (units/FTE/year)	G	-	38.1k vs plan of 36.7k – Chart 22.

DIVISION	PILLAR	BLOOD 2020 – STRATEGIC TARGETS	YTD RAG	RAG CHANGE	PERFORMANCE
BLOOD	Supply Chain Operations	70 % hospitals scoring => 9/10 for satisfaction (chart 4).	-	-	March at 66%. Next survey June 2018 (report July 2018)

- Red Cell issues in April were 1.8% higher than last year but 1.0% lower than plan.
- **Collections** were only 0.1% lower than plan driven by strong collection performance during early April. Given the lower demand stock levels recovered to around 28k by month end (over 5.5 days). At a group level, O neg also improved although it remained at between 3-4 days and vulnerable to any demand spiking. Stocks of B neg also improved to around 4 days.
- Collection performance, however, has deteriorated over the last 4 weeks with the stock recovery now stalling. Based on projected appointments, stock levels are forecast to fall back to around 4 days on 25 May with O negative and B negative falling below 2 days. This reflects the consequence post a strong push on stocks (a subsequent drop in attendance) and the number of new donors that are being brought to session (and hence increased deferral rates).
- Underlying this the number of active donors is below the numbers required to meet demand, both at total level and for O negative (both at red status -charts 13 and 14). The decline in O negative donor numbers has now been halted and is reporting a small increase. The number of active donors at 104k is, however, 2.5% lower than the current target, albeit the target will be re-stated to 108k next month.
- The financial plan for 2018/19 includes a minimum of £3m for additional marketing to underpin a significant increase in new donor registrations (in addition to the £1m spent in 2017/18) and the impact can start to be seen in the increase in new donors registering (chart 13). The impact of converting these to new donor attends is / will have an adverse impact on collection teams (e.g. increased deferrals) and hence the targets and action plans are under constant review. The plan is being adjusted to reflect a greater focus on contacting lapsed (O negative) donors versus new registrations, and some of the £3m may be diverted to resourcing collection teams to manage the spike in activity that the new donor attends will generate.
- Although demand is falling, mobile collection capacity is being retained as a result of the donor shortfall. Underlying capacity utilisation is therefore declining, and the increases in productivity anticipated by the Blood 2020 strategy targets (to close the gap to EBA top quartile benchmarks) will not be delivered in the short term. During the earlier stock push, capacity utilisation of the fixed donor centres saw a substantial increase, from around 70-75% to 85%, but has since dropped back to around 75%.
- Donor satisfaction recovered in the month to 74.5% although below target 78%. Donor complaints (excluding those related to consolidation / team closures and cancellation of sessions) increased sharply to 6.9k (versus plan of 4.9k). The primary drivers for complaints are “cancellation of session”, “slot availability”, “not seen at appointment time” and also “turned away”. This reflects the pressure that is being put on collection as a result of the sharp increase in new donor attends.
- The proportion of O negative issues to total issues was higher this month at 13.5%, above the 2017/18 full year position (13.4%) and 13.1% in 2016/17. **Demand**, however, is declining, with supply pressure continuing to reflect the need to substitute R₀ units with O negative units (as noted in the OTIF comment below).

- OTIF in April, excluding R_o 'in full' fails, was 98.4% which is above the target of 98%. Good work maximising R_o availability in hospital services continued to see a near 100% issue of all validated units (in effect issuing all we have) but the gap to demand continues to grow (chart 8). In order to meet the increasing R_o demand £1m was set aside from transformation funds in 2017/18 to support the recruitment of black donors with limited success. At the end of March the number of active black blood donors continued to be lower than target (11,740 vs 20,981) with a much lower conversion rate for new recruits being seen and higher attrition. The marketing approach has been shifted to focus more on overall recruitment, as part of the £3m set aside in 2018/19 described above. As a result the level of new black donors donating has fallen back to previous levels.
- Red cell losses lower in April at 4.38%, higher than plan (4.00%), but lower than the previous year (4.64%). Red cell expiries in April were very low at 0.70%, below target of 1.8%. 71% of the expiries were A negative.
- The platelet stock position is better than that seen for red cells but remains under pressure with 1 day below the alert level during the month. Platelet wastage continues to improve although expiries were higher than target.
- Plasma stock levels will continue to be vulnerable to any demand spike as we switch over to a new supplier of imported plasma. Contractual issues have seen a delay in the start of the new supply but the previous supplier is extending to cover the gap.
- The number of faints in the month was high again this month at 184 (vs 178 in March 2018) versus target of 160. The number of rebleeds, however, was lower this month at 20 and below target of 30.
- Hospital satisfaction overall for NHSBT was at 66%, significantly lower than in the previous year (81% 2016/17).
- Sickness absence in logistics was better this month at 3.9% as was M&L at 3.3%. Blood Donation also improved again to 4.5%.
- There were no SABRE events reported this month and no regulatory inspections.
- The demand forecast for red cells in 2018/19 remains at 1.398m units with a slight softening in the reduction profile, for future years.

Year	2017-18 outturn	2018-19 forecast	2019-20 forecast	2020-21 forecast	2021-22 forecast	2022-23 Forecast
Red cell issues (million)	1.445	1.398	1.359	1.315	1.265	1.224
% change vs 2017/18		-3.3%	-6.0%	-9%	-12.5%	-15.3%

- Platelet demand is being revised down for both the current and future years.

Year	2017-18 outturn	2018-19 forecast	2019-20 forecast	2020-21 forecast	2021-22 forecast	2022-23 Forecast
Platelet issues (million)	0.259	0.253	0.249	0.244	0.240	0.236
% change vs 2017/18		-2.4%	-3.9%	-5.6%	-7.2%	-8.9%

- The 5-year financial projection has now been updated for the revised approach to CSM and the impact of the NHS 3 year pay award. This has a significant impact on the cash projections and will be presented for review and discussion at the May Board meeting.

Blood Supply - Status of Strategic Projects per TPB reporting:

Project title	Status	This RAG	Last RAG	Approved Cost (£m's)	F/Cast Cost (£m's)	F/cast Benefit (£m's)	Planned to complete	F/Cast to complete
Core Systems Modernisation	Delivery	R	R	3.8	8.8	N/A	Jan 20	Dec 19
Euro Blood Pack 2	Delivery	G	G	0.4	0.2	0.6	Aug 18	Aug 18
Leicester Mobile Team Base & Donor Centre Relocation	Delivery	G	G	1.2	1.2	0.1	May 18	Nov 18
HEV Universal Screening	Delivery	G	G	N/A ⁽ⁱ⁾	N/A	N/A	Jul 18	Jul 18
SotF – Continuous Care	Delivery	G	G	0.8	0.8	1.5	Apr 19	Apr 19
SotF – Unconstrained Supply Plan	Delivery	G	G	0.5	0.5	N/A	Nov 18	Nov 18
E-Rostering	Delivery	A	G	0.2	0.2	N/A	Apr 18	Nov 18 ⁽ⁱⁱⁱ⁾
NTMRL Database Upgrade ^(v)	Delivery	R	A	0.1	0.1	N/A ⁽ⁱⁱⁱ⁾	Jan 18	Sept 18 ^(iv)
West End Donor Centre Expansion	Start-Up	A	G	0.8	0.8	0.4	Jan 19	Jan 19
Logistic Review Programme	Start-Up	G	G	6.0	6.0	4.7	N/A	Oct 21
Frozen Plasma Import	Start-Up	A	N/A	N/A	N/A	N/A	N/A	Feb 19
Apheresis Procurement Contract	Start-Up	G	N/A	N/A	N/A	N/A	N/A	Dec 19

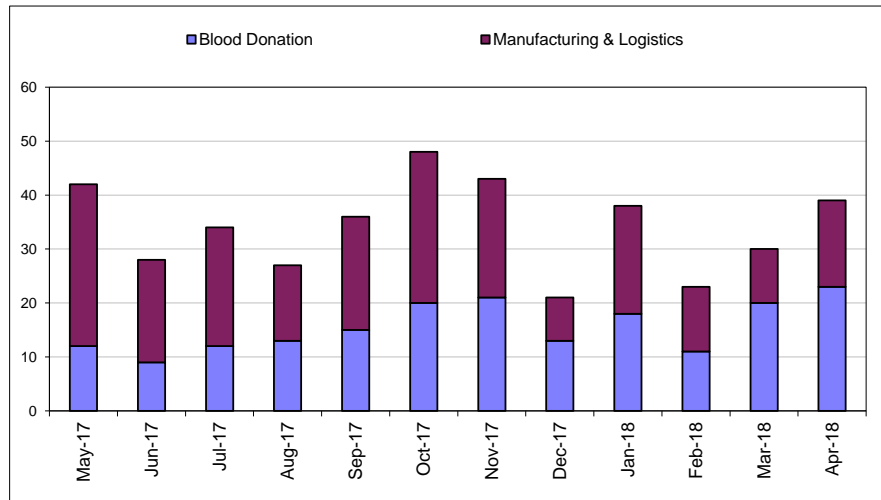
Notes:

- No project budget required – contract related costs are not part of project budget.
- End date due to change pending confirmation of time-line received by supplier. Once confirmed a change request will be submitted.
- Forecast Benefit will be updated next month.
- End date due to change to Sept 2018 pending change request approval, which won't be submitted until further meets are held to discuss official plan
- NTMRL Database project status at red as due to additional planning meetings being required and, until held, and timeframes and ICT resources verified, the completion date for the project cannot be predicted .

Monthly Performance Report - As at the end of April 2018

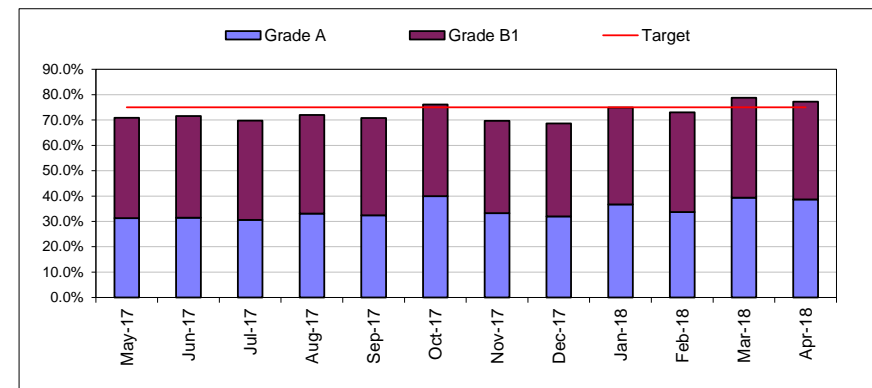
Blood Components - Safety and Compliance

1. Major QIs raised per month - Blood Supply Directorate



2. % of Patients Receiving Grade A or B1 HLA Matched Platelets

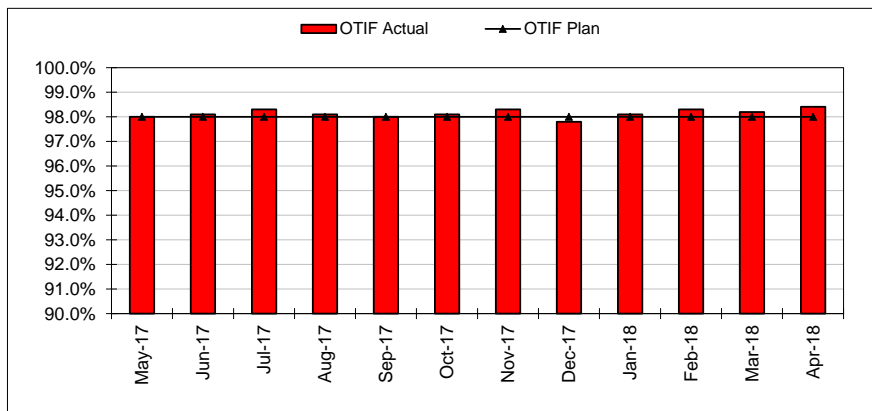
YTD Performance	Annual Target	YTD Target	YTD Actual	RAG	YTD RAG Trend
% of patients receiving A or B1 platelets	75.0%	75.0%	77.2%	G	Better



Blood Components - Customer Service

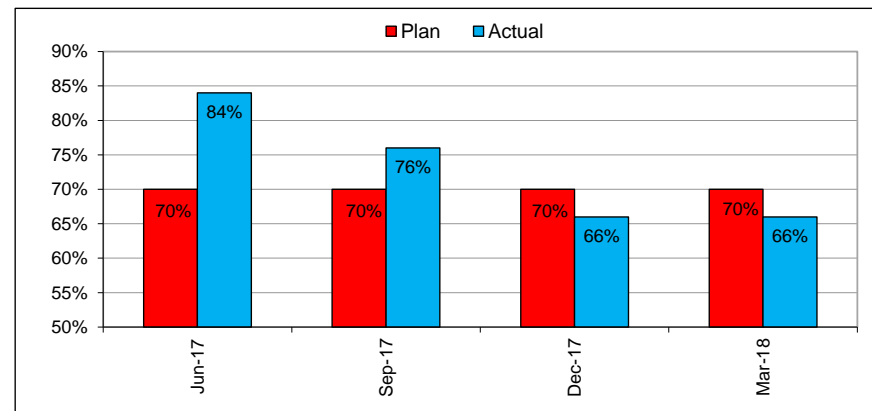
3. Percentage of Products Issued OTIF (excluding Ro 'in full' fails)

YTD Performance	Annual Target	YTD Target	YTD Actual	YTD RAG	YTD RAG Trend
% On Time In Full delivery	98.00%	98.00%	98.41%	G	-



4. Hospital Satisfaction

YTD Performance	Annual Target	YTD Target	YTD Actual	YTD RAG	YTD RAG Trend
Hospitals rating satisfaction at >=9/10	70%	70%	66%	A	-



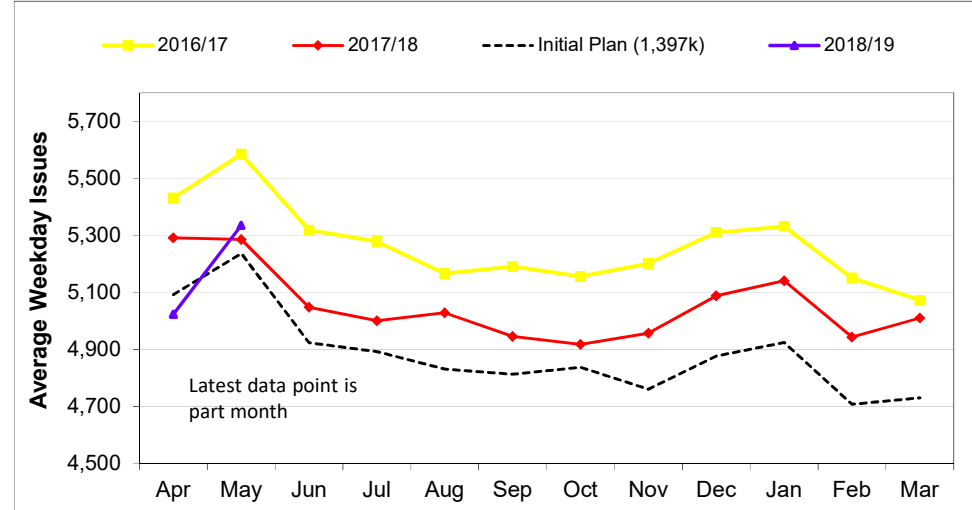
Monthly Performance Report - As at the end of April 2018

Blood Components - Red Cell Issues & Demand

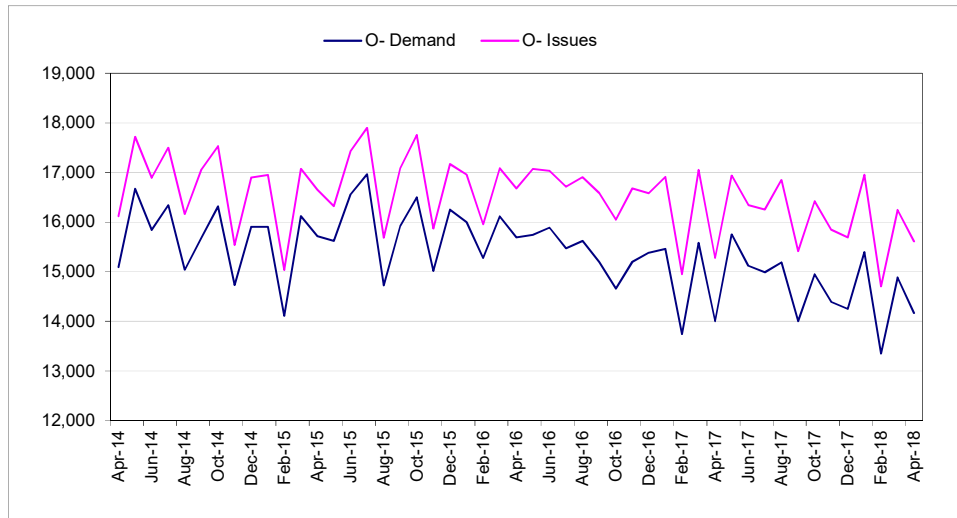
5. Red Cell Supply - Year to Date by Blood Group

Blood Group	2018/19 - YTD Apr 2018	2017/18 - YTD Apr 2017	Change
O Pos	41,705	40,777	2.3%
A Pos	34,119	33,702	1.2%
O Neg	15,679	15,263	2.7%
A Neg	8,920	9,203	-3.1%
B Pos	9,135	8,743	4.5%
B Neg	2,967	2,713	9.4%
AB Pos	2,545	2,576	-1.2%
AB Neg	909	939	-3.2%
Total	115,978	113,915	1.8%

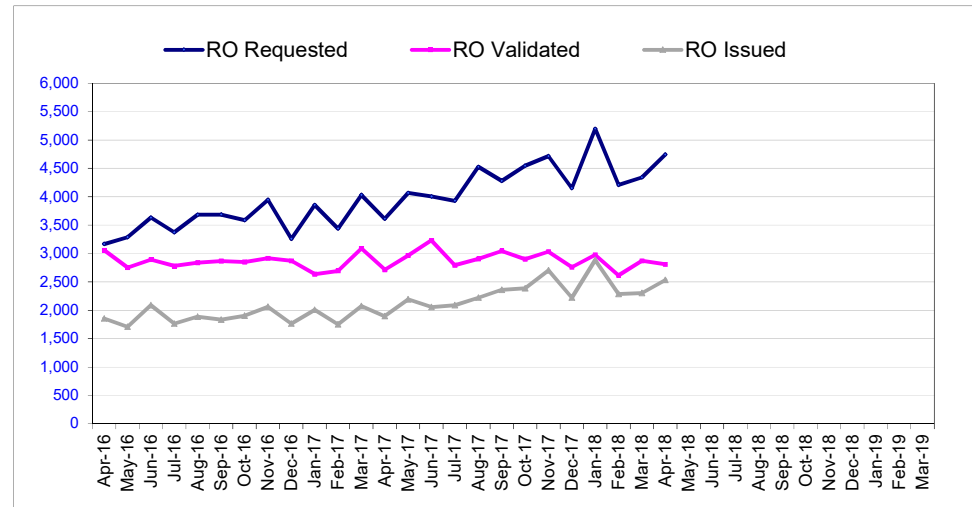
6. Average Weekday Red Cell Issues By Month - from April 2016



7. O neg RC Demand and Issues



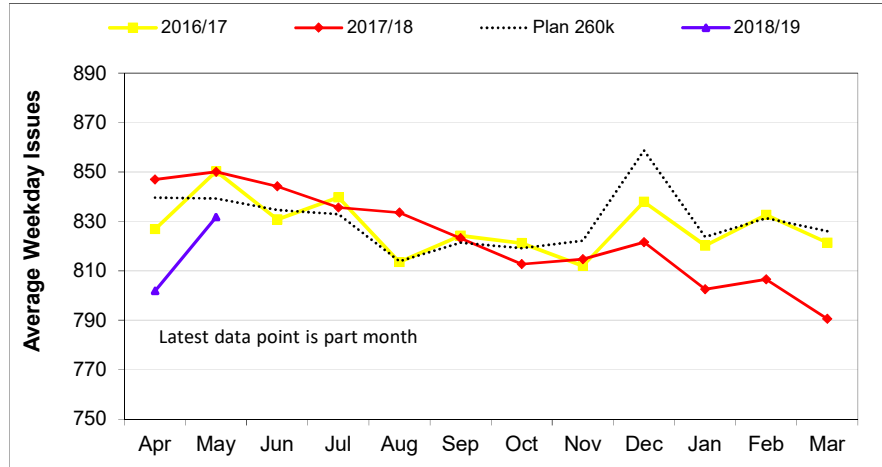
8. RO Red Cells Demand, Validated and Issued



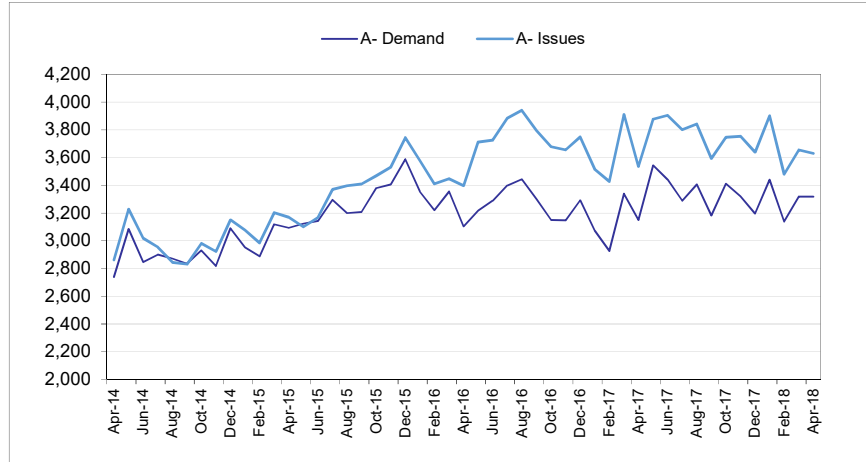
Monthly Performance Report - As at the end of April 2018

Blood Components - Donor Base

9. Average Weekday Platelet Issues By Month - from April 2016



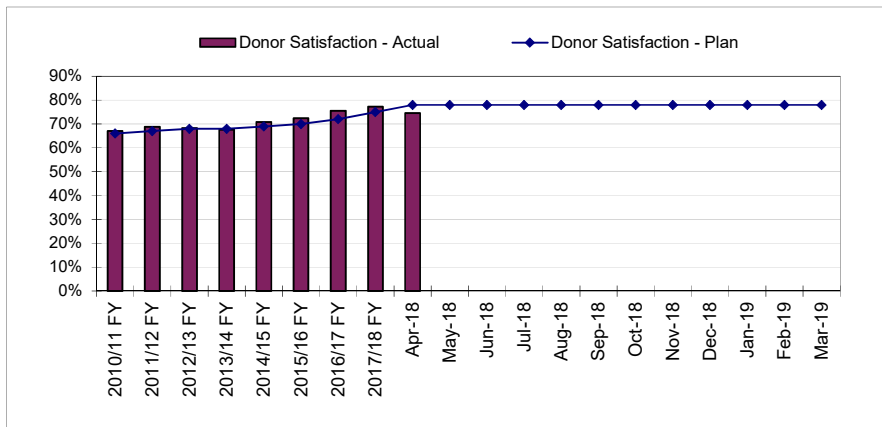
10. A neg Platelet Demand and Issues



Blood Components - Donor Service

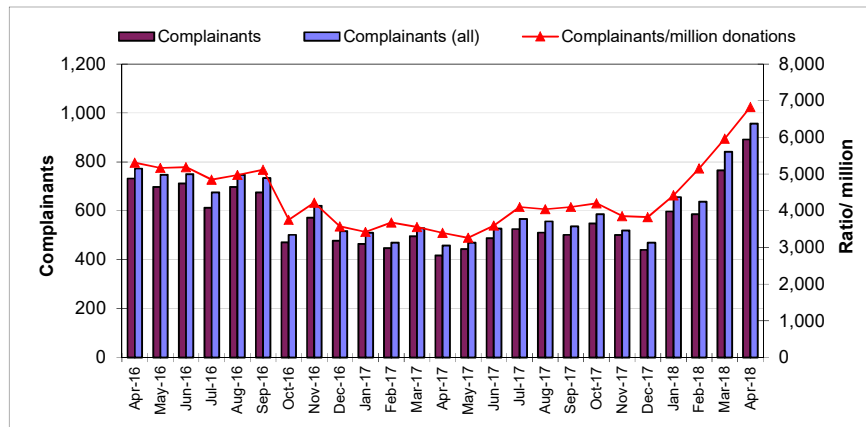
11. Donor Satisfaction

YTD Performance	Annual Target	YTD Target	YTD Actual	YTD RAG	YTD RAG Trend
% of donors scoring 9/10 for satisfaction	78.0%	78.0%	74.5%	A	-



12. Donor Complaints

YTD Performance	Annual Target	YTD Target	YTD Actual	YTD RAG	YTD RAG Trend
Number of complaints per million donations (includes team consolidation related session cancellation complaints)	4,900	4,900	6,832	R	-

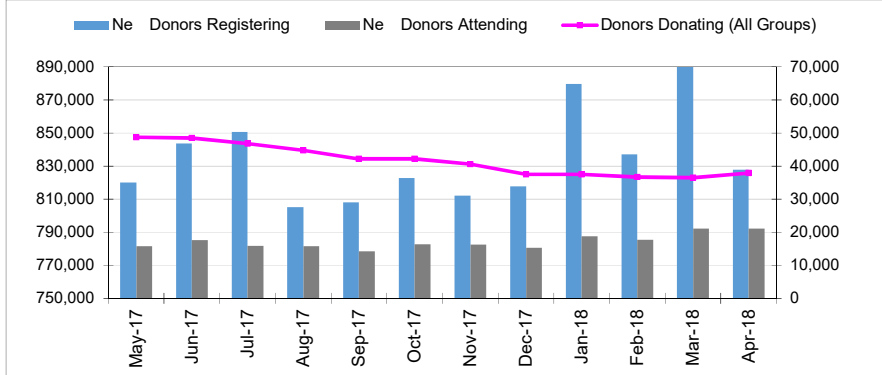


Monthly Performance Report - As at the end of April 2018

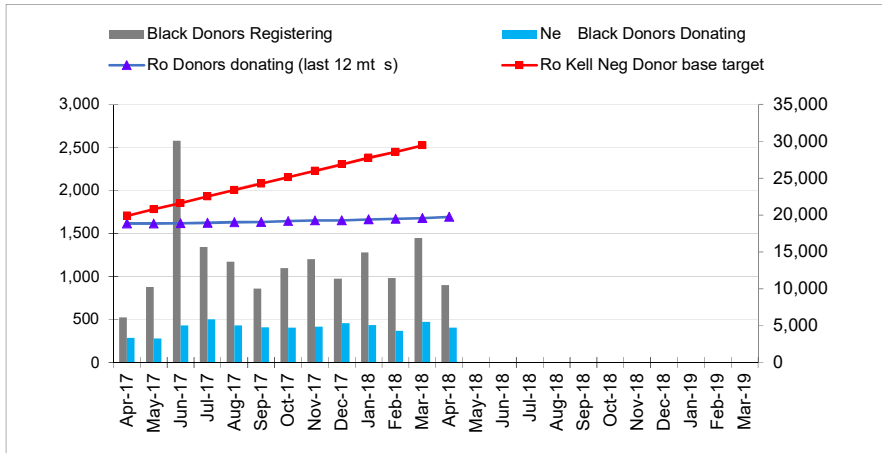
Blood Components - Donor Base

13. Donor Base and Frequency of Donation

YTD Performance	Annual Target	YTD Target	YTD Actual	YTD RAG	YTD RAG Trend
Number of donors donating in the last 12 months	870,525	825,450	825,764	R	-
Frequency of donation (overall)	1.712	1.849	1.847	R	-

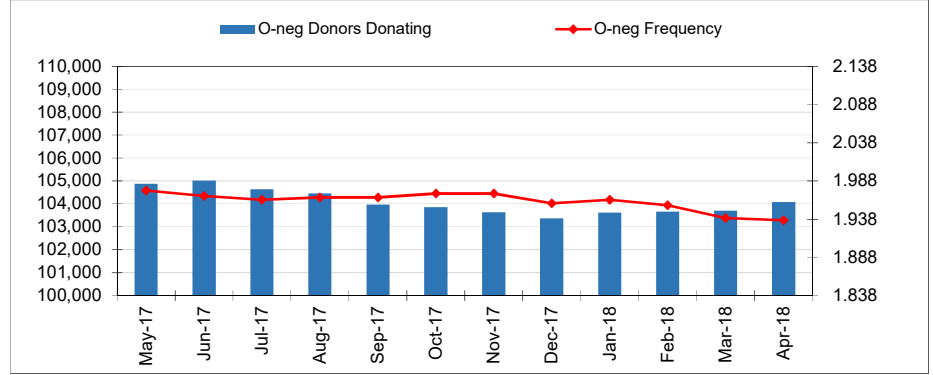


15. Ro Donor Base and Black Donor Recruitment



14. O neg Donorbase and Frequency of Donation

YTD Performance	Annual Target	YTD Target	YTD Actual	YTD RAG	YTD RAG Trend
Number of active O neg donors donating over the last 12 months	106,705	103,887	104,090	R	-
Frequency of donation (O neg donors)	1.897	1.949	1.936	R	-



16. CD platelet Donor Base Total and A eg

The table below reports that the Component Donation donor base is substantially lower than target. A flaw has been identified in the counting methodology, and this is the first month where the actual counts have been restated (downwards). It is not possible to restate historical counts.

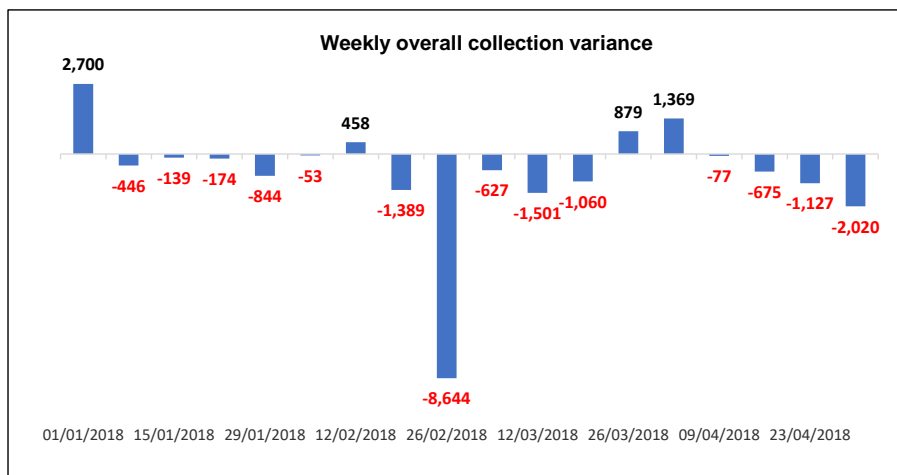
Targets are based on the old counting methodology and will be restated. The correct donor base and restated targets will be reported when available (it is history from September 2017 onwards).

Sep-2017	A-	A	AB-	AB	B-	B	O-	O	Total
Target	2,365	3,982	156	331	242	777	820	2,824	11,497
Revised report	2,159	3,598	165	300	219	695	760	2,611	10,507
Variance vs target	-206	-384	9	-31	-23	-82	-60	-213	-990

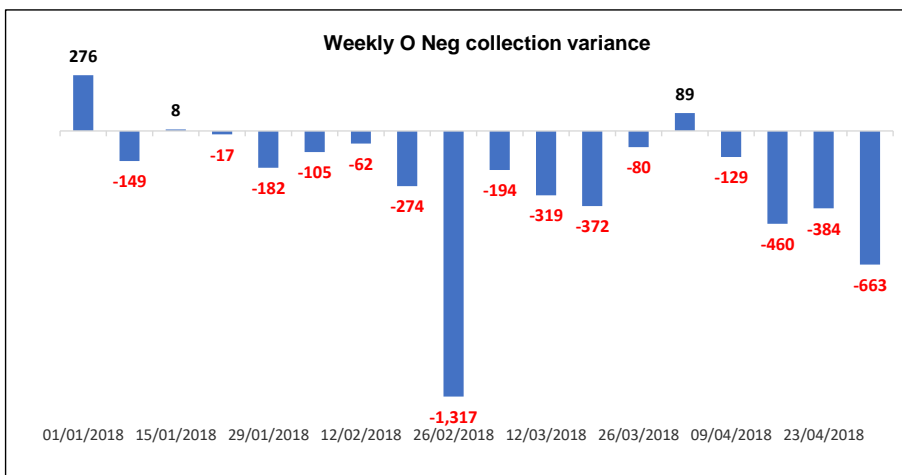
Monthly Performance Report - As at the end of April 2018

Blood Components - Blood Collection Adherence to plan

17. Weekly Collection Variance to plan

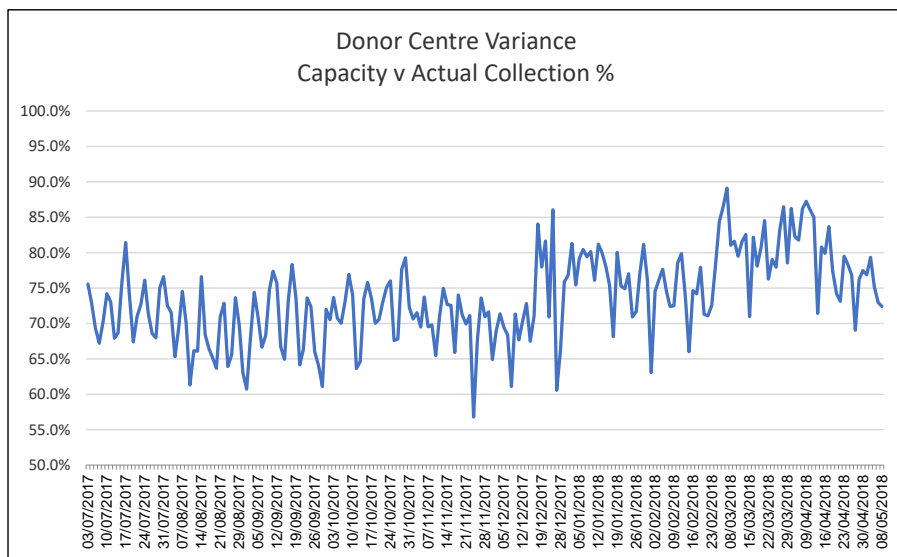


18. Weekly Collection Variance to plan - O Neg

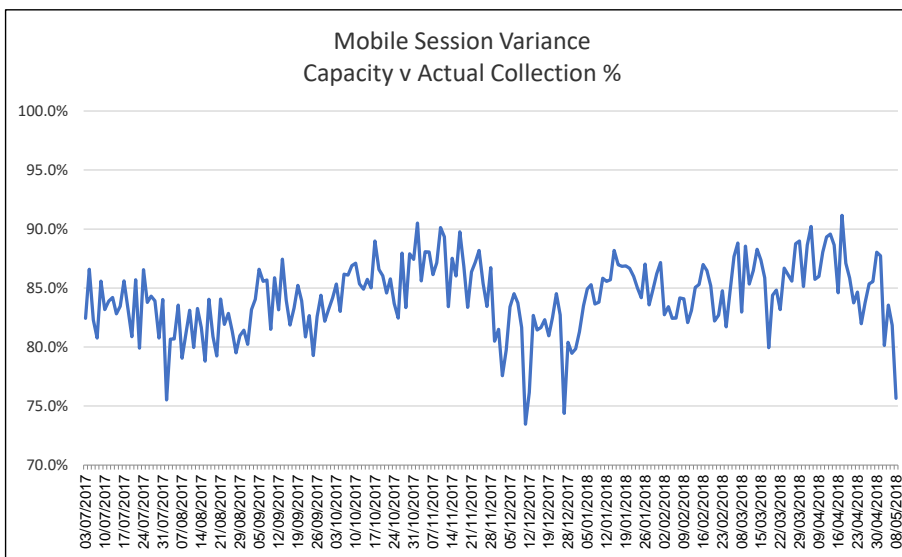


Blood Components - Collection Capacity Utilisation

19. Capacity v Actual Collection % - Donor Centres



20. Capacity v Actual Collection % - Mobile Teams

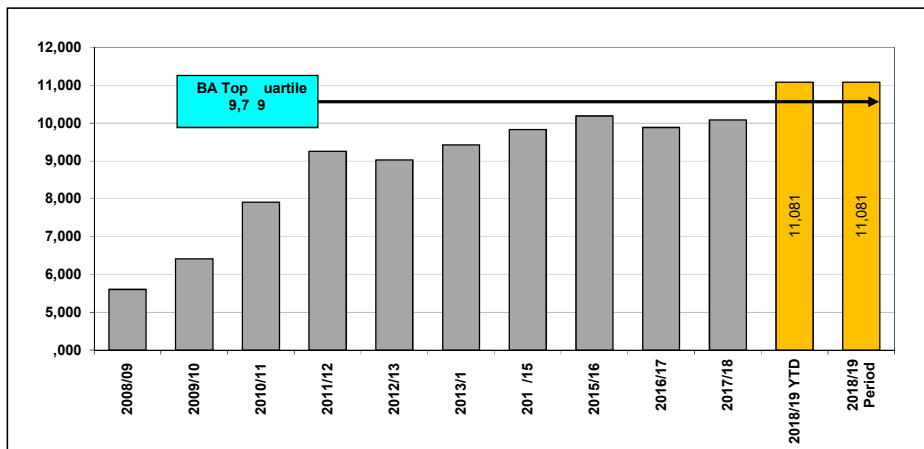


Monthly Performance Report - As at the end of April 2018

Blood Components - Productivity

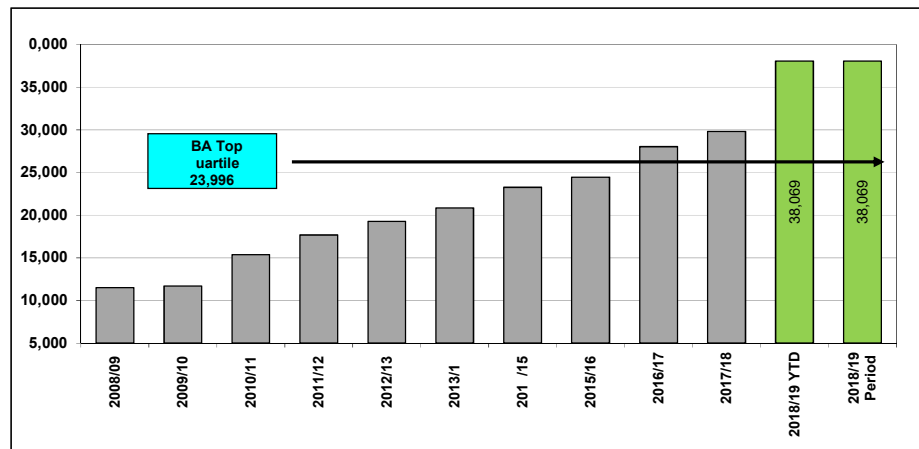
21. Processing Productivity YTD and Current Month

YTD Performance	Annual Target	YTD Target	YTD Actual	RAG	YTD RAG Trend
Manufacturing productivity (units/FT /year)	10,610	11,137	11,081	A	-



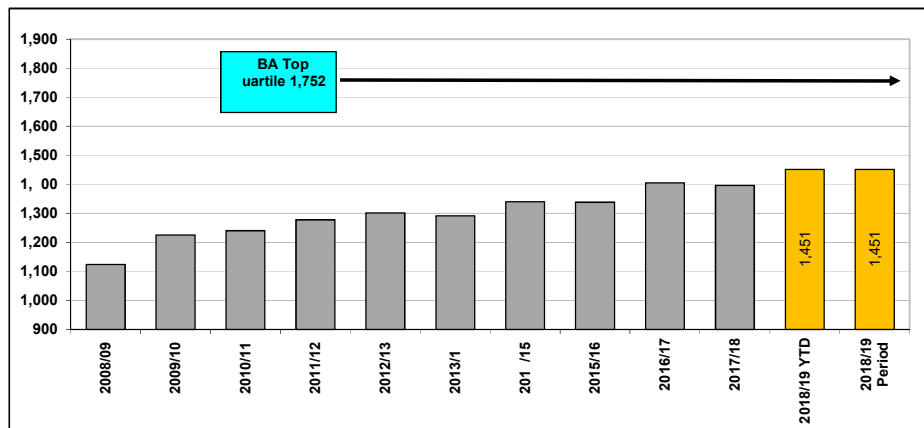
22. Testing Productivity YTD and Current Month

YTD Performance	Annual Target	YTD Target	YTD Actual	RAG	YTD RAG Trend
Testing productivity (units/FT /year)	34,950	36,712	38,069	G	-

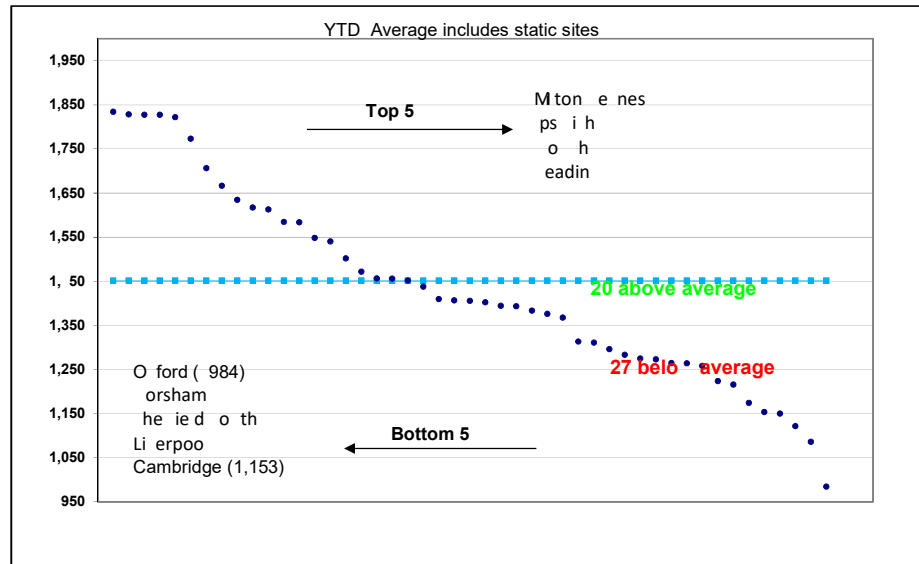


23. Blood Donation Productivity YTD and Current Month

YTD Performance	Annual Target	YTD Target	YTD Actual	RAG	YTD RAG Trend
Blood Donation Productivity (units/FT /Year)	1,470	1,518	1,451	A	-



24. Blood Donation Productivity - Distribution Mobile Teams

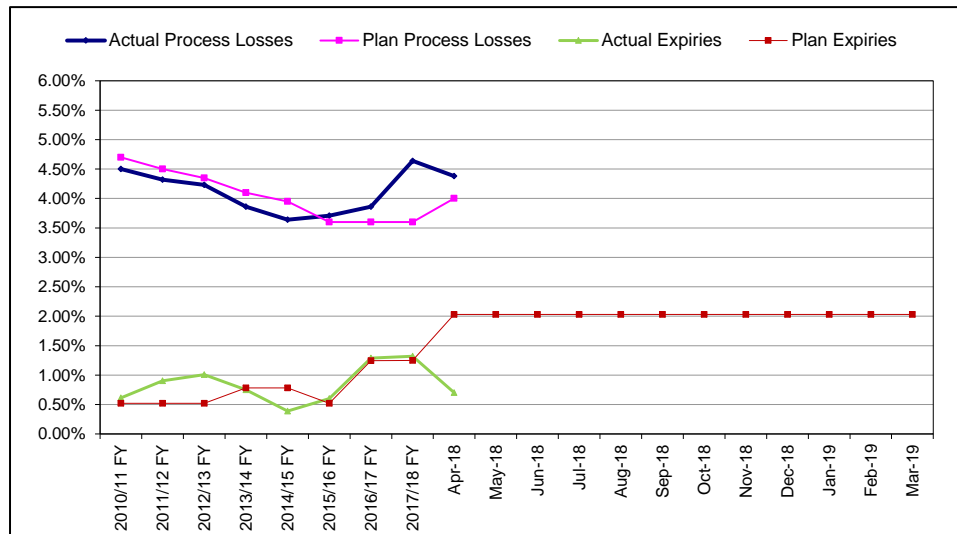


Monthly Performance Report - As at the end of April 2018

Blood Components - Wastage

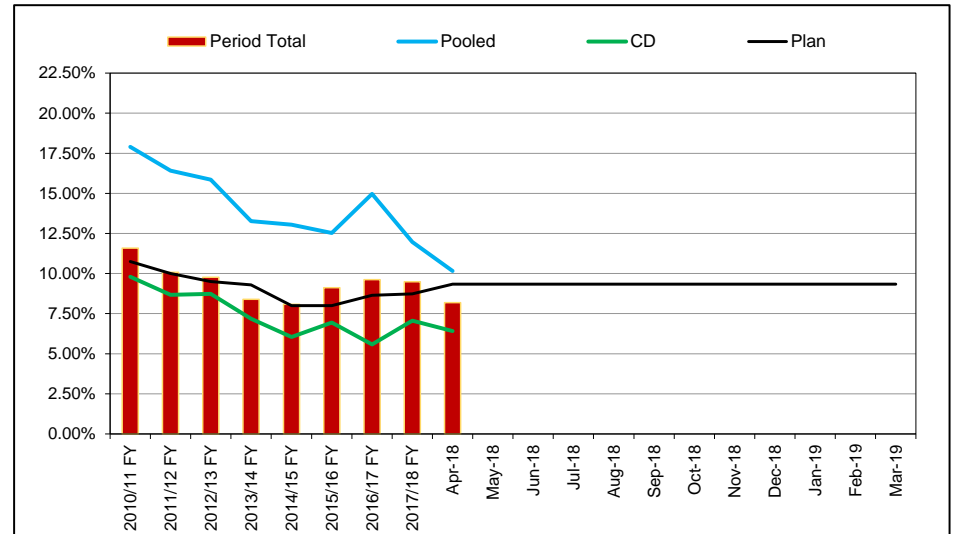
25. Percentage of Donations NOT Converted to Validated Red Cells and Expiries

YTD Performance	Annual Target	YTD Target	YTD Actual	RAG	YTD RAG Trend
Red Cell Process losses as % of Whole Blood Donations	4.00%	4.00%	4.38%	R	-
Red Cell Expiries as % of Issuable Red Cells	2.03%	2.03%	0.70%	G	-



26. Percentage of Platelets Produced NOT Issued

YTD Performance	Annual Target	YTD Target	YTD Actual	RAG	YTD RAG Trend
Total Platelets Produced but not Validated	3.40%	3.40%	2.59%	G	-
Platelet Expiries	5.94%	5.94%	6.28%	R	-



DIVISION	THEME	STRATEGIC TARGET	YTD RAG	RAG CHANGE	PERFORMANCE
DTS	Group Targets	Sales Income (£76.7m)	G	-	£5.9m (vs plan of £5.7m).
		Number of Serious Incidents (SI's)	G	-	None reported this month
		Zero 'critical' regulatory non-compliances	G	-	None reported in the month.
		Number of 'major' regulatory non-compliances	G	-	None reported in the month
	Tissue & Eye Services	Sales income achieved - £13.9m (chart 27)	G	-	Better than plan at £1.1m (vs £1.0m).
		70% percent of customers scoring \geq 9/10 for satisfaction with Tissues	-	-	March 2017 (reported in April 2017) at 75%.
		98.0% of Product issued on time	G	-	100.00% vs plan of 98.0%
		Number of Corneas in stock (month end) – target 250	G		308 in stock at the end of April.
	H&I	Sales Income achieved - £13.5m (chart 28)	G	-	£1.1m vs plan of £1.1m.
		% of patients receiving A or B1 platelets	G	-	77% vs plan of 75% - Chart 2.
		Time to type deceased organ donors	G	-	Reporting monthly in arrears - at 84% vs target of 80%.
		Turnaround time vs SLA (chart 32)	G	-	Better than plan at 97.1% (vs 95% target).
	RCI	£15.2m Sales income achieved (chart 28)	G	-	£1.34m vs plan of £1.30m.
		Sample turnaround time vs SLA (chart 31)	G	-	95.4% vs plan of 95%.

DIVISION	THEME	STRATEGIC TARGET	YTD RAG	RAG CHANGE	PERFORMANCE
DTS	CMT	£12.2m sales income achieved (chart 29)	G	-	£0.68m vs plan of £0.67m.
		CBC sales (£m's) – target £1.7m	-		To be reported from next month.
		% of hospitals scoring \geq 9/10 for satisfaction – target 62%	-		Date of next survey to be confirmed
		On time in full – target 100%	G		Continues to remain at target.
	SCDT	£9.7m sales income achieved (chart 29)	R	-	£0.7m vs plan of £0.8m.
		1,404 increase to Banked Cords TNC > 140	R	-	112 vs plan of 139.
		40% BAME Cord Blood units add to the bank	G	-	47% at year end (> 40).
		Issue 63 Cord Blood units	R	-	3 units issued at year end (vs plan of 5).
		Adult Donor Provisions (240)	R	-	17 vs plan of 20
		Donors recruited to fit panel – 10k	G	-	1287 vs plan of 833
	Therapeutic Apheresis Services	£10.0m sales income achieved (chart 30)	G	-	£0.8m vs plan of £0.76.
		68% of hospitals scoring \geq 9/10 for satisfaction	-	-	70.2% vs 62% at February 2017.
		90% of Patients rating patient experience \geq 9/10	-	-	December 2017 at 97% (vs 95%)

- DTS is reporting an I&E surplus of £0.6m in April, with all business units are reporting an I&E contribution at, or better than, plan for the year to date.
- Sickness absence in DTS was again marginally better this month at 2.4% (March 2018 2.6%) and remains much better than the NHSBT target of 4%.

DTS Income by SBU – YTD April 2018	2018/19 Budget	2018/19 Income	2018/19 Variance	2017/18 Actual	Growth
Tissue & Eye Services	1.0	1.1	0.1	0.9	18%
TAS	0.8	0.8	0.0	0.6	25%
H&I	1.1	1.1	0.0	1.1	0%
RCI	1.3	1.3	0.0	1.2	10%
IBGRL & DD	0.1	0.2	0.1	0.1	108%
CMT	0.7	0.7	0.0	0.7	-7%
SCDT	0.8	0.7	-0.1	1.0	-30%
Customer Services	0.0	0.0	0.0	0.0	-75%
Total (£m's)	5.7	5.9	0.2	5.8	3%

- **Tissue and Eye Services** - income was 9.5% better than plan in the month and 17.9% higher than the previous year. Strong sales in ASE/AlloSE, Cardiovascular, Femoral heads and Processed bone, were only partially offset by underperformance in corneas, pre-cut corneas and DBM. There was also a small favorable position on expenditure resulting in a net surplus contribution in the month of £0.2m. Eye bank stocks were higher in April at 308.
- **RCI** income was broadly on plan at the month end, with all service areas close to plan. There was a small favourable position on expenditure resulting in a surplus contribution by month end of £0.1. Sample turnaround times improved but Hospital Satisfaction was lower at 55% for the year end (vs 64% in 2016/17).
- **H&I** income was 1% ahead of plan in the month, level with last year. Activity in solid organ investigations was 7% higher than plan, although broadly offset by a number of smaller variances. Turnaround times continue to be better than plan. The provision of A and B1 matched platelets has continued to improve and was at 77% (vs 75% targeted). Hospital satisfaction fell to 71% for the year end (vs 80% 2016/17).
- **Stem Cell Donation & Transplantation** income is reporting a £0.1m adverse variance for the month of April. There have been 3 cord issues in the month, with International and UK issues, both 1 below plan. BBMR donors are also behind plan for the month with the UK 2 behind plan and International 1.
- The introduction of NICE guidelines on delayed cord clamping in March 2017 is now being implemented in hospitals and has impacted our clinical conversion rate, with the number of cord units banked again running behind plan this year (19% lower in the month). BAME cord donations banked are ahead of target year end reporting at 47% versus 40% planned.
- In May a consultation was commenced with staff in the Cord Blood Bank (CBB). The proposal is designed to support the transition of the CBB collection programme from a growth phase to a maintenance phase and gradually improve the stock of high dose cord units. The bank holds cord blood units banked from mothers who have generously donated cord blood taken from the placenta and umbilical cord after the birth of a baby. Many of these are suitable for clinical transplantation for patients with haematological diseases, while the remainder are available for research into new cell therapies. The national strategy is to deliver a cord blood bank of 30,000 cord blood units (20,000 with NHSBT and 10,000 with our charity partner Anthony Nolan), which has been determined as the optimal number of units for UK. As we expect to achieve 20,000 units by August 2019, we need to transition the bank from a growth phase to a maintenance phase, matching collections more closely to the number of cords issued. The bank's operating model and associated staffing structure is currently established to collect, process and store 2,300 clinical cord units per year and operates 24/7. The proposal is to restructure to a model that collects, processes and stores around 300 clinical cord units per year using a 12/5 operating model. The consultation proposes a model with 20 WTE posts instead of the current 42 WTE, with collection

stopping at one of the current six hospital sites (Northwick Park Hospital). If agreed, the proposals are planned to take effect on 1st October 2018 with every effort being made to redeploy impacted staff wherever possible. Following the changes, the NHSBT CBB would continue to collect high dose clinical cords at a slower rate from five sites in London and the South East, offering a broad diversity of cords in terms of HLA and ethnicity.

- **Cellular and Molecular Therapies** - service income for April is level with budget, with all service areas close to plan. CMT is reporting a broadly balanced income and expenditure position for the month.
- **Therapeutic Apheresis Services** income was 5.3% ahead of target in the month, and 24.6% higher than the previous year, primarily due to strong performance on ECP. This is driven by a policy change at NHSE to centrally fund acute ECP, plus TAS winning the contract for paediatric ECP provision in London. The income surplus is driving a favourable contribution surplus of £0.1m.
- There were no inspections conducted in the month. The MHRA have now accepted our revised response and the shorter timeframes for implementation of the CAPA plan for Birmingham. All agreed documentation changes were completed as required by the end of April. There is, however, a requirement for a GMP compliance certificate from the MHRA, before clinical manufacture can commence. This will be assessed by internal QA in mid-May with a view to sign-off before 1st June.

DTS – Status of Strategic Projects per TPB reporting:

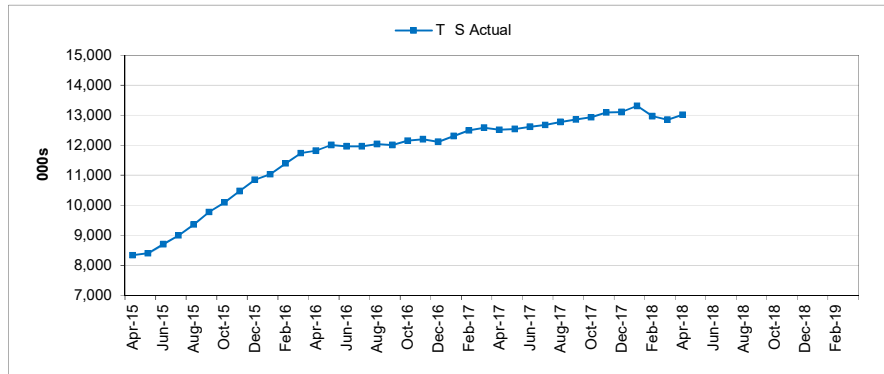
Project title	Status	This RAG	Last RAG	Approved Cost (£m's)	F/Cast Cost (£m's)	F/cast Benefit (£m's)	Planned to complete	F/Cast to complete
Filton Extension	Delivery	A	A	0.3	0.3	N/A	Jan 21	Oct 21
Automated Software Testing	Delivery	G	G	0.2	0.2	N/A	Nov 18	Jan 19

Monthly Performance Report - As at the end of April 2018

Diagnostic and Therapeutic Services - Income

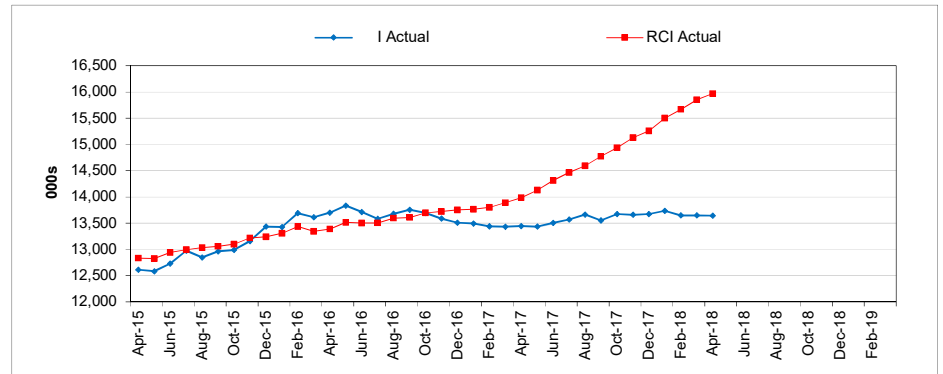
27. Tissue and ye Services Income MAT

YTD Performance	Annual Target	YTD Target	YTD Actual	RAG	YTD RAG Trend
Income (m s) - T S	13.699	0.989	1.084	G	Better



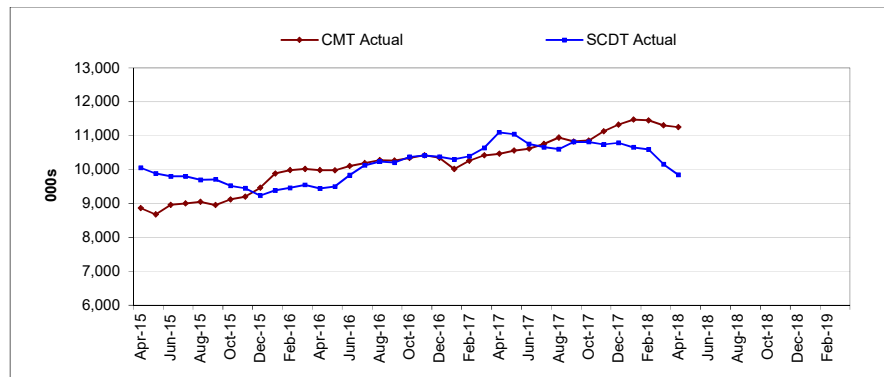
28. Diagnostic Service Income MAT

YTD Performance	Annual Target	YTD Target	YTD Actual	RAG	YTD RAG Trend
Income (m s) - RCI	15.903	1.301	1.340	G	-
Income (m s) - I	13.513	1.068	1.083	G	Better



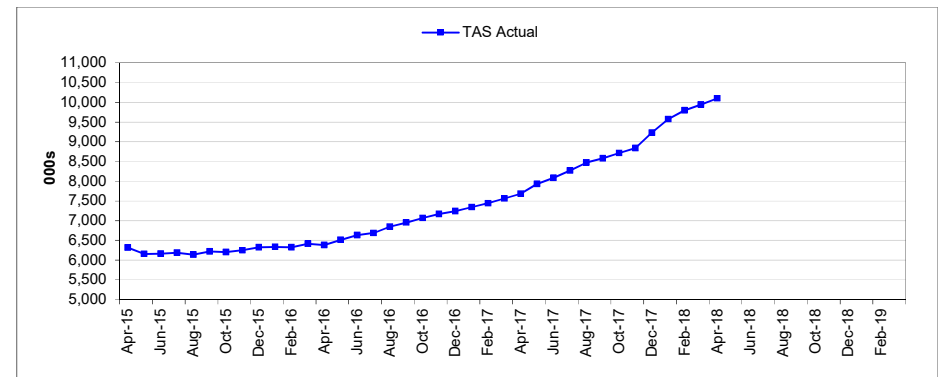
29. Stem Cells - SCDT/CMT Income MAT

YTD Performance	Annual Target	YTD Target	YTD Actual	RAG	YTD RAG Trend
Income (m s) - CMT	12.235	0.670	0.683	G	-
Income (m s) - SCDT	9.696	0.787	0.729	R	orse



30. Therapeutic Apheresis Services Income MAT

YTD Performance	Annual Target	YTD Target	YTD Actual	RAG	YTD RAG Trend
Income (m s) - TAS	10.011	0.753	0.799	G	-

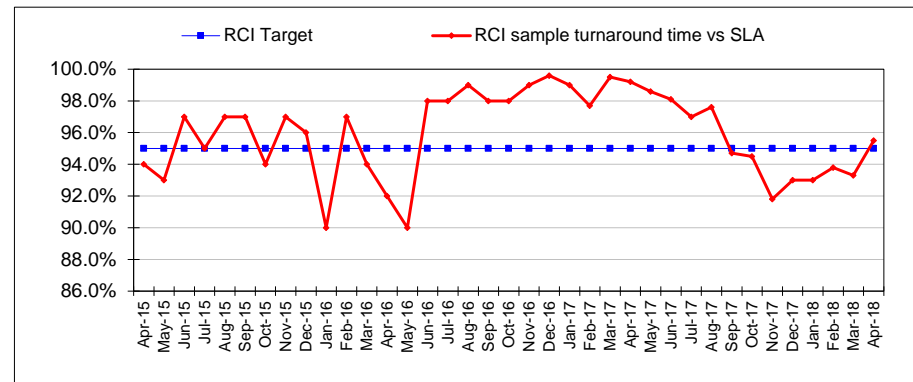


Monthly Performance Report - As at the end of April 2018

Diagnostic and Therapeutic Services - Customer service and safety

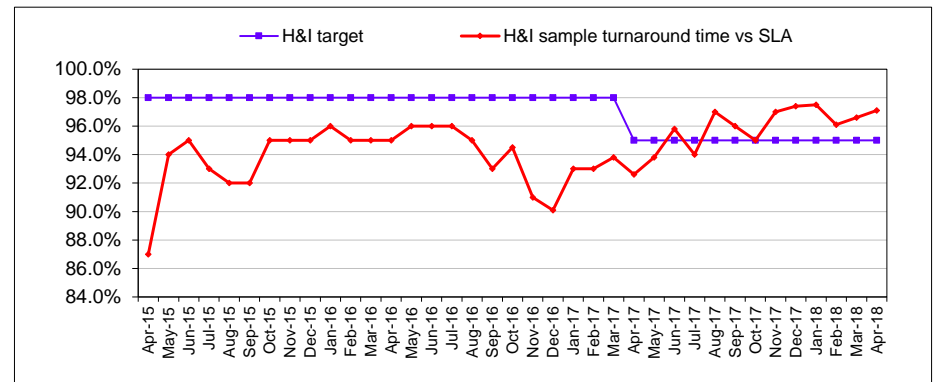
31. Turnaround Time vs SLA (RCI)

YTD Performance	Annual Target	YTD Target	YTD Actual	RAG	YTD RAG Trend
Turnaround Time vs SLA - RCI	95.0%	95.0%	95.5%	G	-



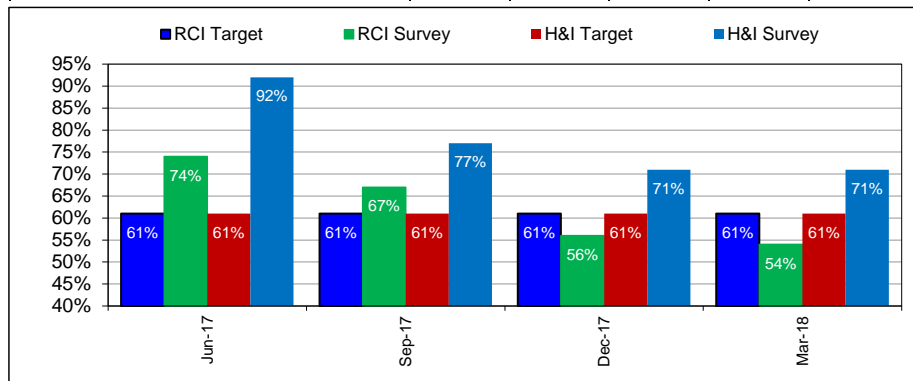
32. Turnaround Time vs SLA (H&I)

YTD Performance	Annual Target	YTD Target	YTD Actual	RAG	YTD RAG Trend
Turnaround Time vs SLA - H&I	95.0%	95.0%	97.1%	G	-

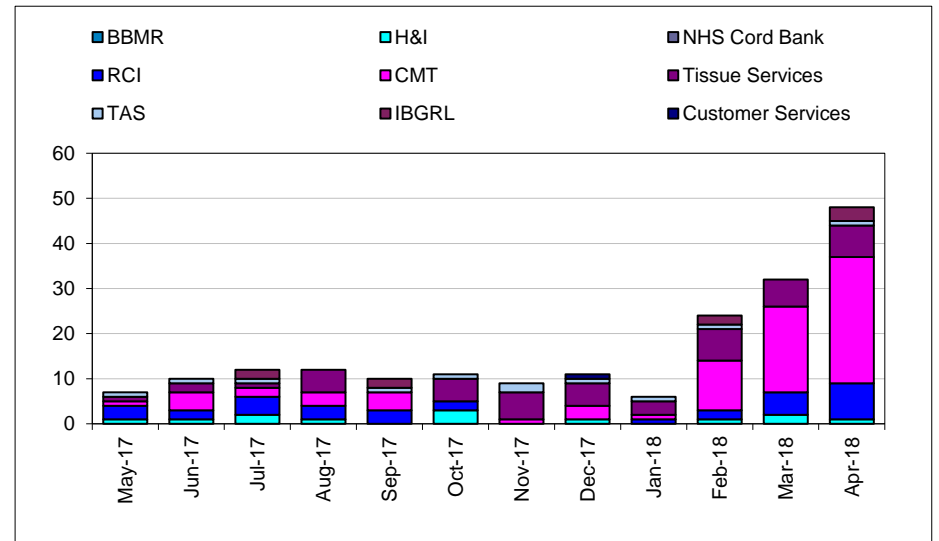


33. Hospital Satisfaction

YTD Performance	Annual Target	YTD Target	YTD Actual	RAG	YTD RAG Trend
Percentage of hospitals scoring $\geq 9/10$ for satisfaction with RCI - RCI	61%	61%	54%	A	-
Percent of hospitals scoring $\geq 9/10$ for satisfaction with H&I - RCI	61%	61%	71%	G	-



34. Major QI's raised per month - DTS

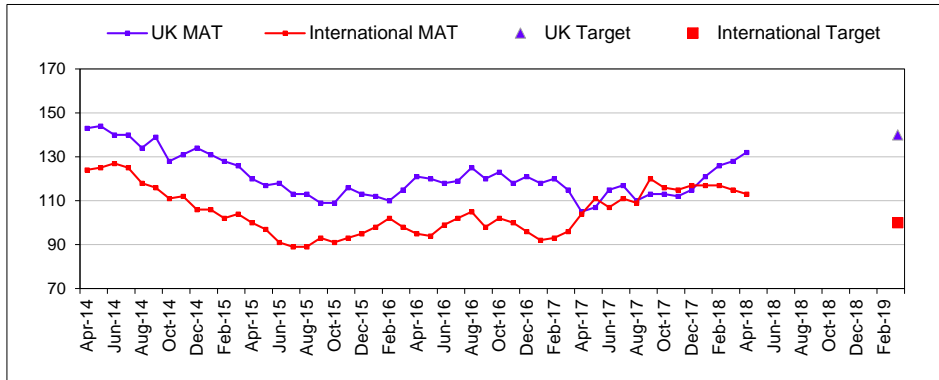


Monthly Performance Report - As at the end of April 2018

Stem Cell Donation and Transplantation, and Tissue and Eye Services : Corneas - Strategic Targets

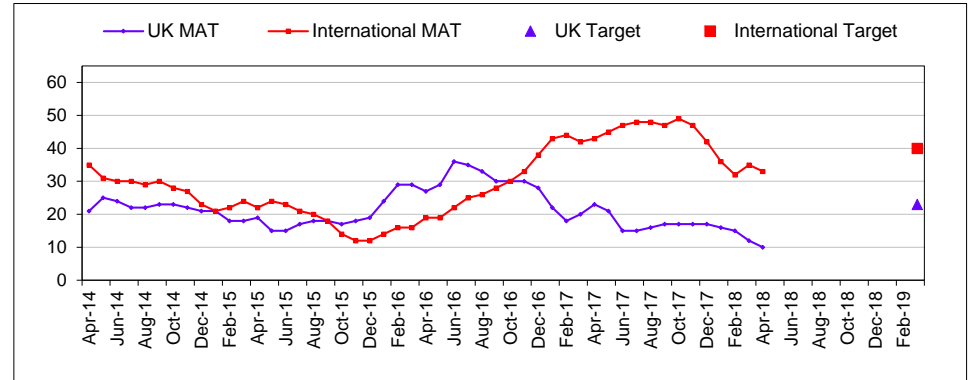
35. Adult donor provisions : UK and International - MATs

YTD Performance	Annual Target	YTD Target	YTD Actual	RAG	YTD RAG Trend
Adult donor provisions (total)	240	20	17	R	Worse

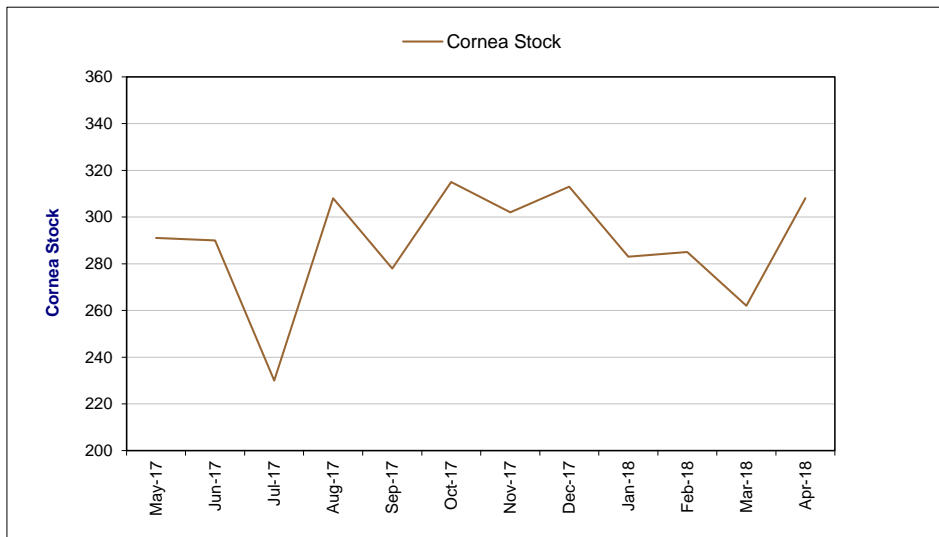


36. Issue of cord blood units : UK and International - MATs

YTD Performance	Annual Target	YTD Target	YTD Actual	RAG	YTD RAG Trend
Number of Cord Units Issued (total)	63	5	3	R	-

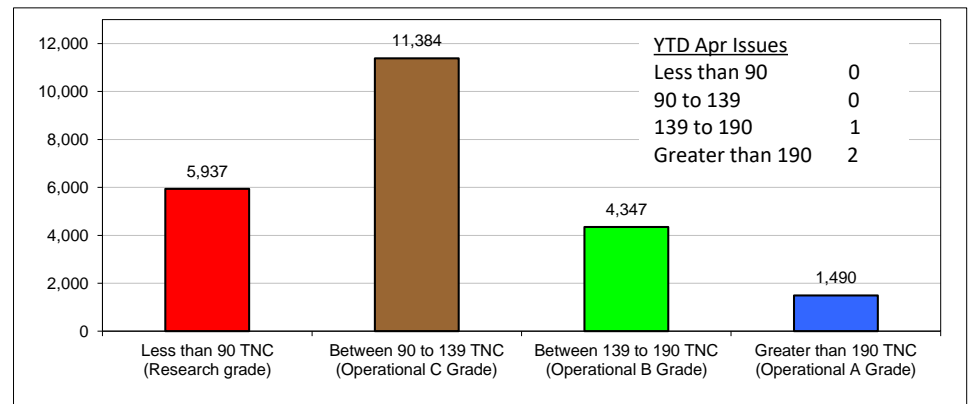


37. Suitable Cornea Donations - MAT, and Cornea stocks



38. NHSBT CBB stock (active units - cell dose post process TNC)

YTD Performance	Annual Target	YTD Target	YTD Actual	RAG	YTD RAG Trend
Clinical Bank Size (A, B and C)	19,307	17,325	17,209	A	-



DIVISION	THEME	STRATEGIC TARGET	YTD RAG	RAG CHANGE	PERFORMANCE
ODT	TOT 2020 Key Outcome Measures	Increase % Consent/Authorisation rate (Overall)	G	-	70.6% in April vs plan of 69% - chart 41.
		Increase % Consent/Authorisation rate (Overall) – DBD	G	-	80.0% in April and equal to plan
		Increase % Consent/Authorisation rate (Overall) - DCD	G	-	61.5% and ahead of plan (vs 60%)
		Deceased donors - 2018/19 target – 1618	G	-	April at 144 vs target of 136 – chart 39.
		Deceased Organ Donors per million population – 2018/19 target – 24.3	-	-	Q4 - 24.1m vs plan 23.1m. Next report Q1 2018/19
		Number of Living donors 2017/18 (1,392) – reported one month in arrears	R	-	1,037 at the year end vs plan of 1,392 – chart 42.
		Living Donors per million population – 21.0 per/m	R	-	March 2018 - 15.9m vs plan 21.0m (next update in July).
		Organ Transplants – Deceased (4,423)	A	-	365 in April vs plan of 379 – chart 40.
		Deceased Organ Transplants per million population - 2018/19 target – 66.5	-	-	Q4 at 61.7m vs plan 62.4m. Next report Q1 2018/19
		Proportion of population who have had a conversation about their donation decision (target 49%)	G	-	At target - February 2018
		NHSBT Cost per Transplant - £15.4k (2018/19 target)	-	-	March at £16.8k. Next update June 2018.

- There were 144 deceased donors (98 DBD and 46 DCD) in April with April 2018 being the third highest month ever for deceased donors. 365 patients received a solid organ transplant from a deceased donor in April versus plan of 379.
- There were 198 fewer patients on the transplant list at the end of April compared with the end of March (143 fewer active and 55 fewer suspended patients). In total there were 9250 patients on the transplant list at the end of April (5902 active and 3348 suspended).
- There were 33 patients who met the referral criteria but were not referred in April (compared with 75 in April last year). The DBD referral rate in April was 99% (equivalent with the 99% achieved in Q4 2017/18). The DCD referral rate in April was 92% (2 percentage points higher than the 90% achieved in Q4 2017/18)

- There were 27 occasions where a SNOD was not present for the formal organ donation discussion in April (compared with 33 in April last year). Consent was ascertained on only 6 of the 27 occasions (22% consent rate) when a SNOD was not present. In comparison, of the 238 occasions in April where a SNOD was present, the consent rate was 76%. The DBD SNOD presence rate in April was 96% (2 percentage points higher than the 94% achieved in Q4 2017/18). The DCD SNOD presence rate in April was 84% (3 percentage points lower than the 87% achieved in Q4 2017/18).
- The overall consent rate in April was 71% (4 percentage points higher than the 67% achieved in Q4 2017/18). The DBD consent rate in April was an outstanding 80% (9 percentage points higher than the 71% achieved in Q4 2017/18). 9 out of 12 ODSs were green in April. The DCD consent rate was 61% (3 percentage points lower than the 64% achieved in Q4 2017/18 and 8 percentage points lower than the 69% achieved in March in particular).
- There were 85k new ODR opt-in registrations in April (vs a target of 92k) and 65k new ODR opt-out registrations. A 15% decrease was achieved in the number of ODR registrations with an unknown NHS/CHI number in April, compared with March. This is the first time this number has dropped below 4 million since this metric started being monitored.
- 85% of the budgeted SNOD establishment were independent on the rota on the last full week of April. This is the first time since we have monitored this metric that the proportion is above 85%
- Living donor data is reported a month in arrears; there were 1,037 living donors in 2017/18, two fewer than 2016/17. The number of living donors pmp is currently 15.9 pmp. It is disappointing that overall living donor activity remains below target and the number of donors has plateaued for both directed and non-directed donation. We continue to collaborate closely with commissioners and Departments of Health, clinical colleagues and donor-recipient representatives to prioritise actions to address the overall shortfall.
- Sickness absence was 3.1% in April, marginally higher than last month, although below targeted levels.
- Overall turnover was higher at 13.95%, with voluntary turnover for the Directorate within target at 12.2%.

ODT – Status of Strategic Projects per TPB reporting:

Project title	Status	This RAG	Last RAG	Approved Cost (£m's)	F/Cast Cost (£m's)	F/cast Benefit (£m's)	Planned to complete	F/Cast to complete
ODT Hub	Define	G	G	2.7 ⁽ⁱ⁾ (0.6)	N/A ⁽ⁱⁱ⁾	N/A	Mar 20	Mar 20

Notes:

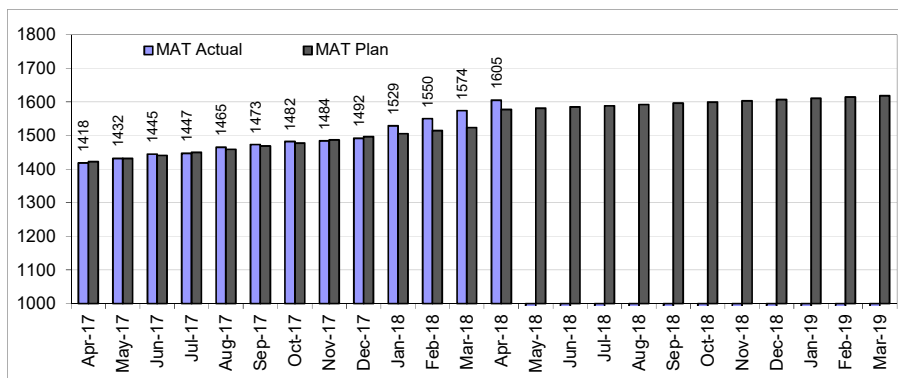
- i) This is the non-recurring figure for 2018/19. Recurring figure in brackets.
- ii) Now an under spend of £513k.

Monthly Performance Report - As at the end of April 2018

Organ Donation and Transplant - Outcomes

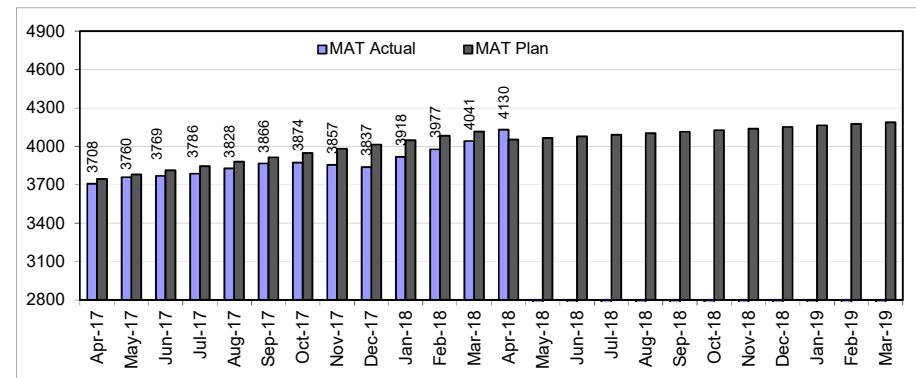
39. MAT number of Deceased Organ Donors

YTD Performance	Annual Target	YTD Target	YTD Actual	YTD RAG	YTD RAG Trend
Number of Deceased Organ Donors	1,618	135	144	G	-



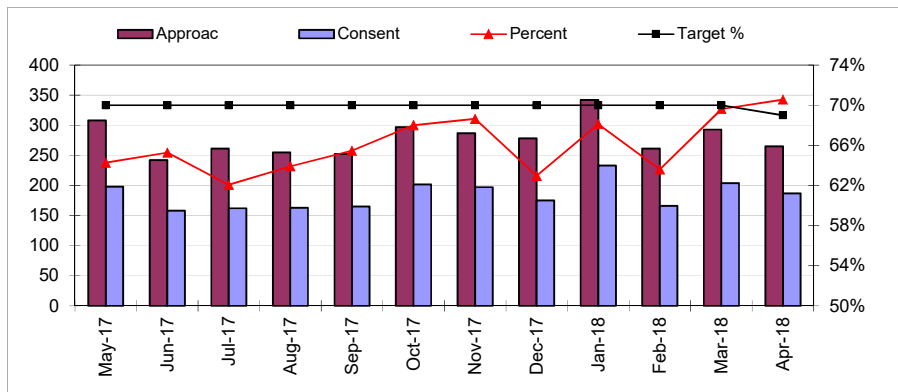
0. MAT number of Deceased Donor Organ Transplants

YTD Performance	Annual Target	YTD Target	YTD Actual	RAG	YTD RAG Trend
Number of Deceased Donor Transplants	4,423	379	365	G	-



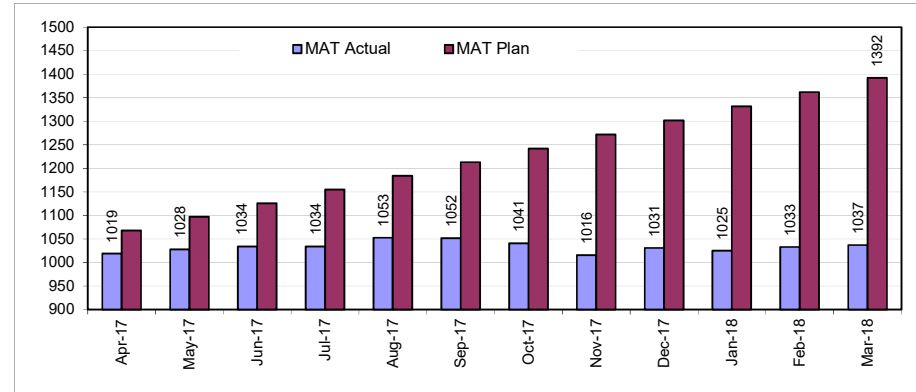
1. Consent / Authorisation rate DBD & DCD

YTD Performance	Annual Target	YTD Target	YTD Actual	YTD RAG	YTD RAG Trend
Consent/Aut orisation rate (%)	69.0%	69.0%	70.6%	G	Better



2. MAT number of Live Organ Donors reported one month in arrears

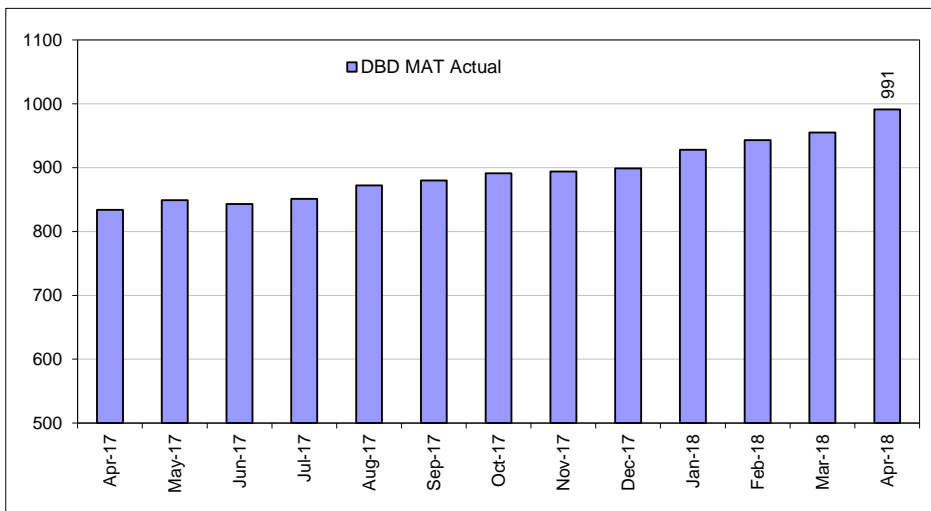
YTD Performance	Annual Target	YTD Target	YTD Actual	YTD RAG	YTD RAG Trend
Number of Living Organ Donors (reported one month in arrears)	1,392	1,392	1,037	R	-



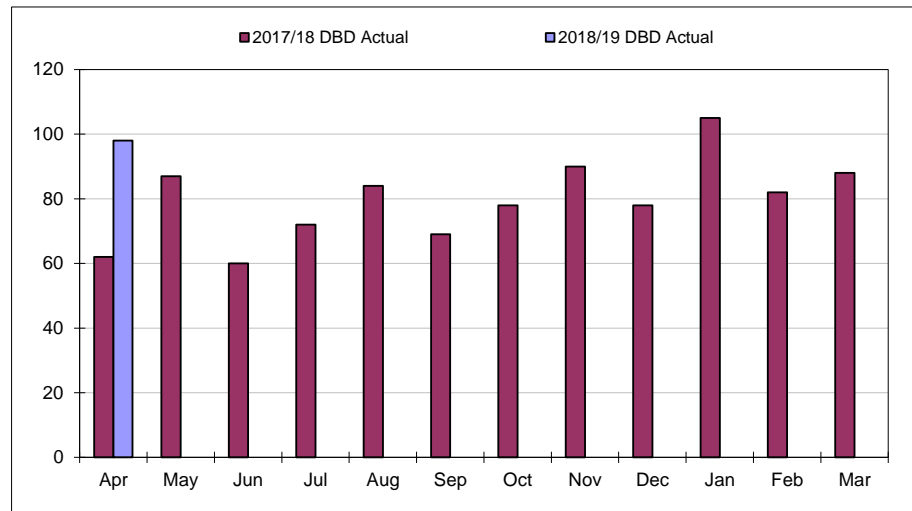
Monthly Performance Report - As at the end of April 2018

Organ Donation and Transplant - DBD Activity

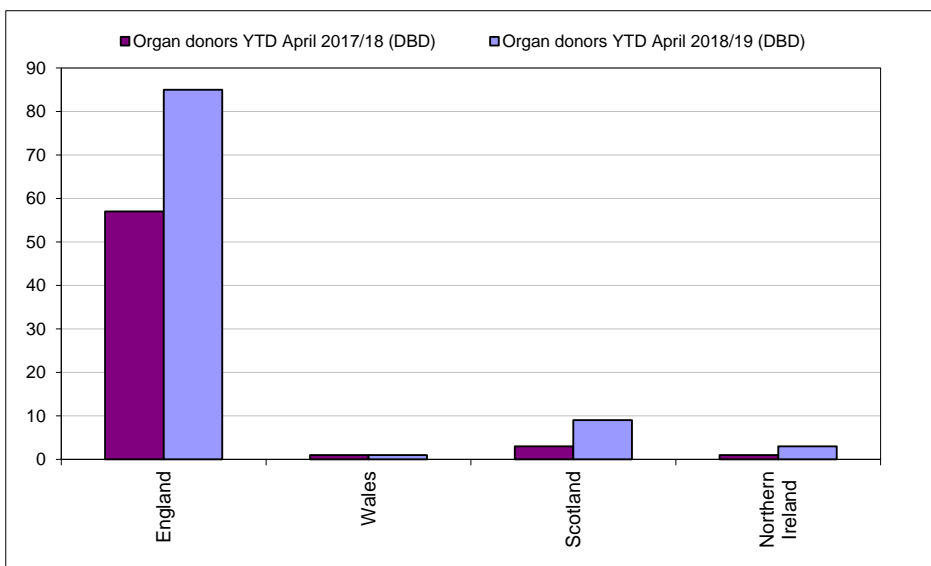
43. MAT number of Deceased Organ Donors (DBD)



44. Deceased Organ Donors - Monthly (DBD)

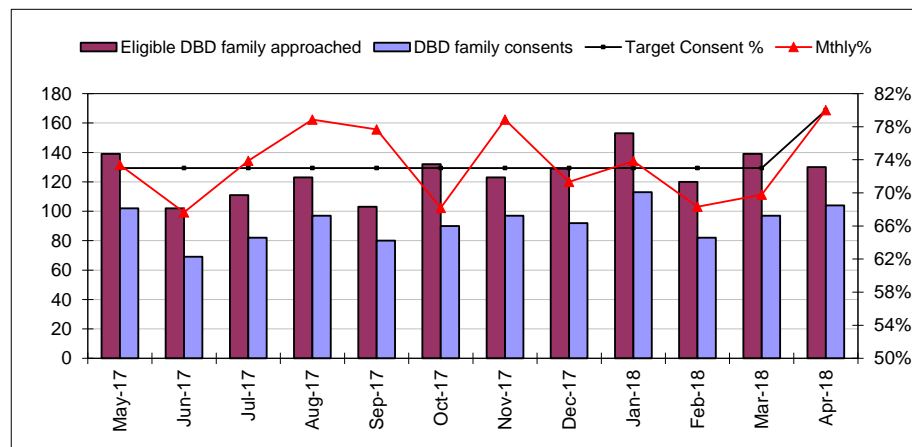


45. Deceased Organ Donors - By Nation (DBD)



46. Consent/Authorisation rate (DBD) per month

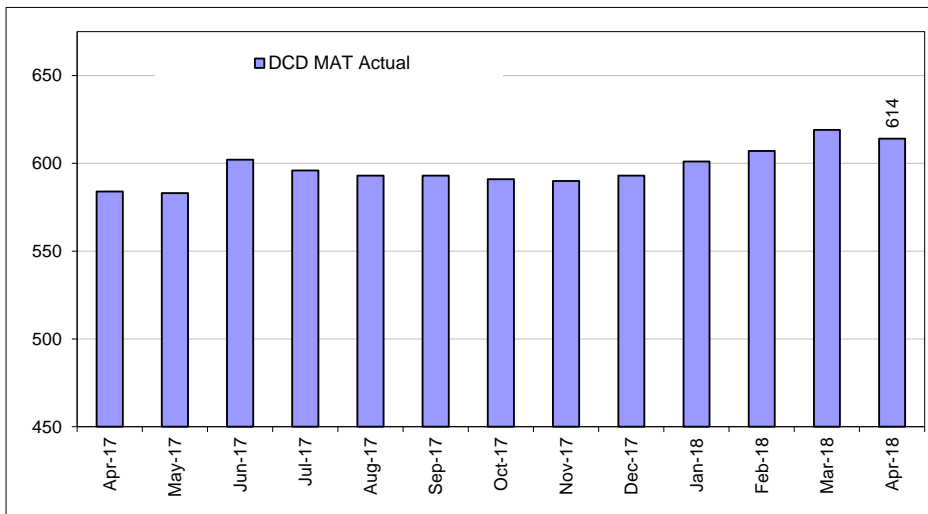
YTD Performance	Annual Target	YTD Target	YTD Actual	YTD RAG	YTD RAG Trend
DBD Consent/Authorisation rate (%)	80.0%	80.0%	80.0%	G	-



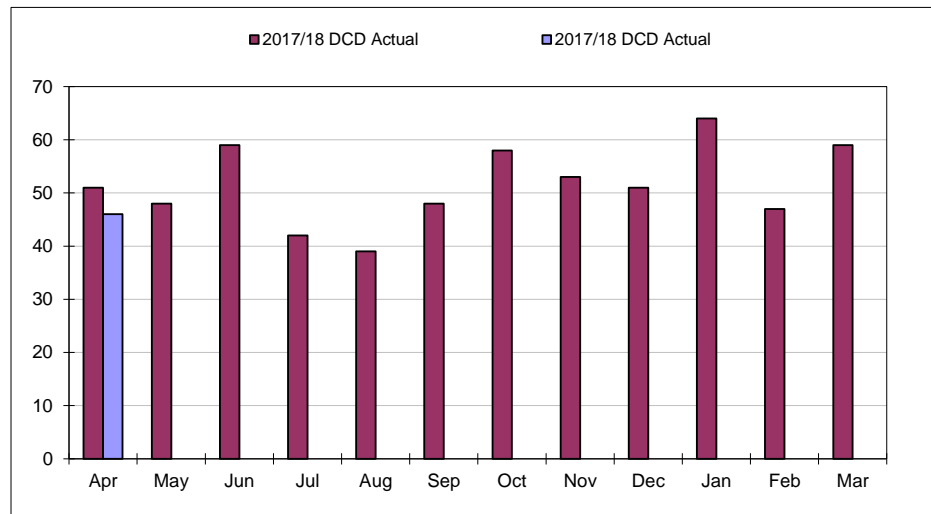
Monthly Performance Report - As at the end of April 2018

Organ Donation and Transplant - DCD Activity

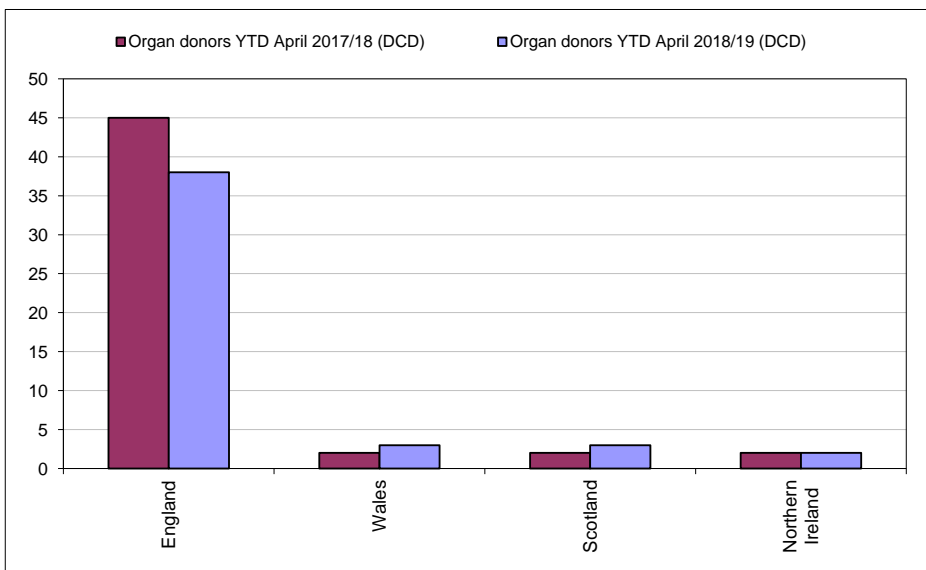
47. MAT number of Deceased Organ Donors (DCD)



48. Deceased Organ Donors - Monthly (DCD)

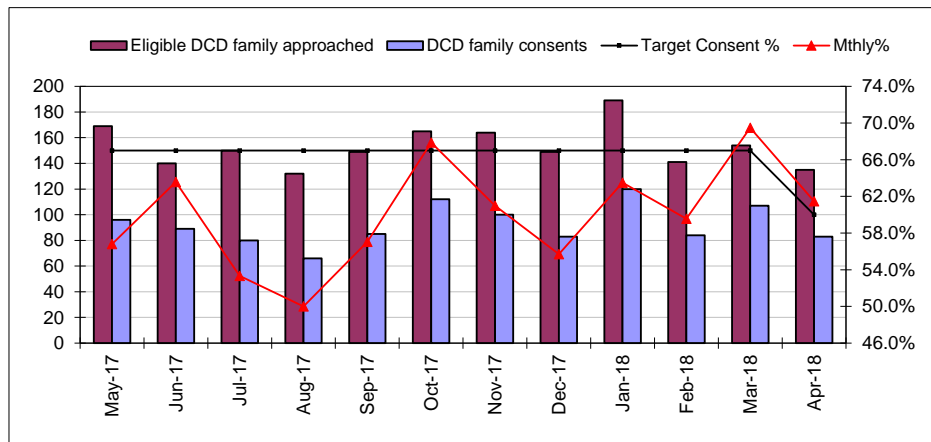


49. Deceased Organ Donors - By Nation (DCD)



50. Consent/Authorisation rate (DCD) per month

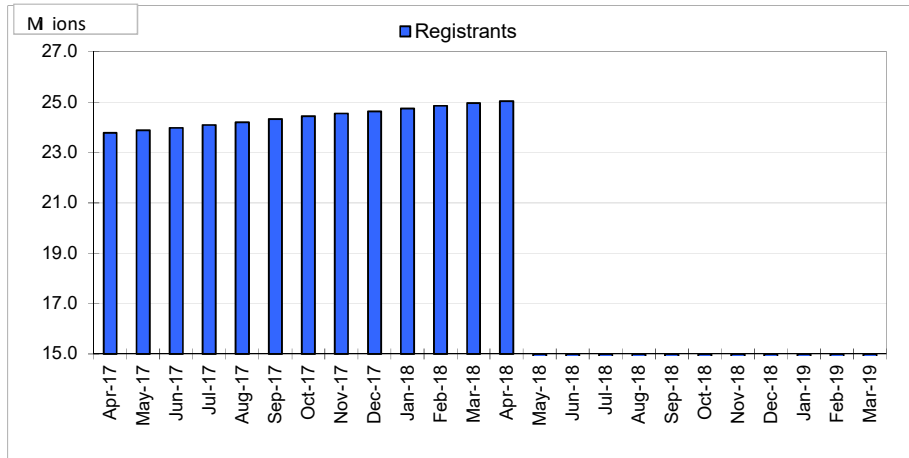
YTD Performance	Annual Target	YTD Target	YTD Actual	YTD RAG	YTD RAG Trend
Opt-in registrants on the ODR (millions)	60.0%	60.0%	61.5%	G	Better



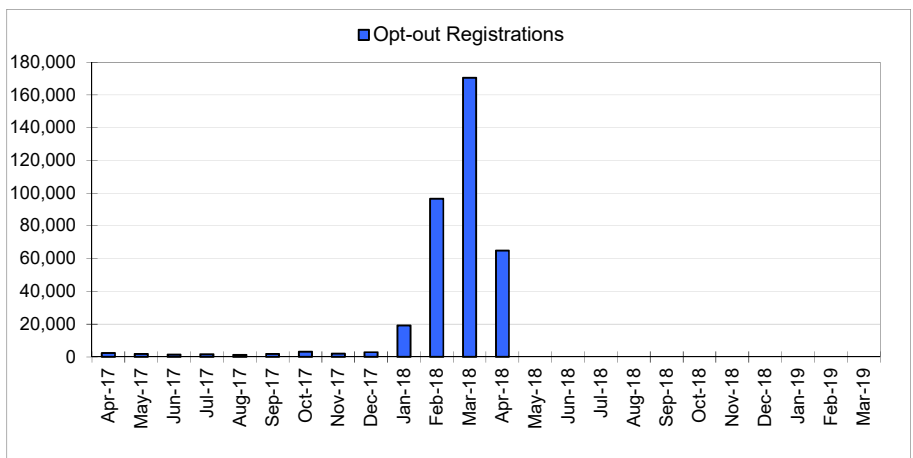
Monthly Performance Report - As at the end of April 2018

Organ Donation and Transplant - Consent / ODR

51. Number of people registered on the ODR opt-ins

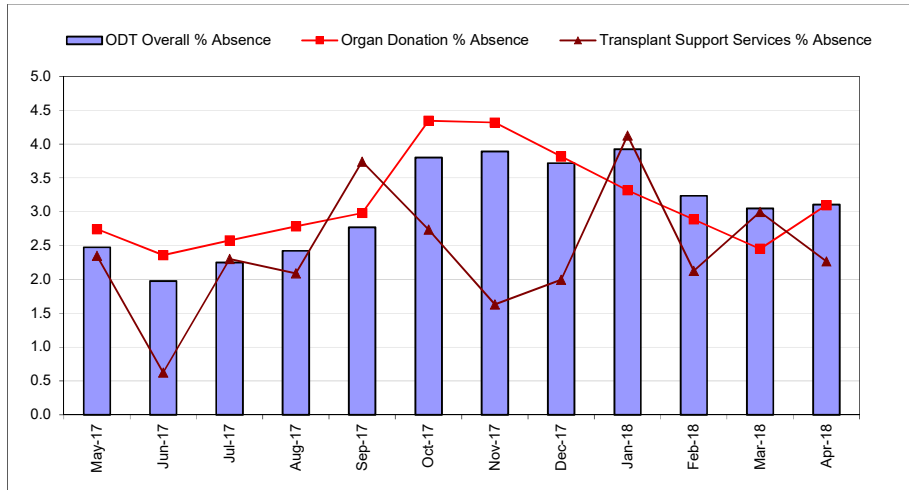


52. Opt-out Registrations by month

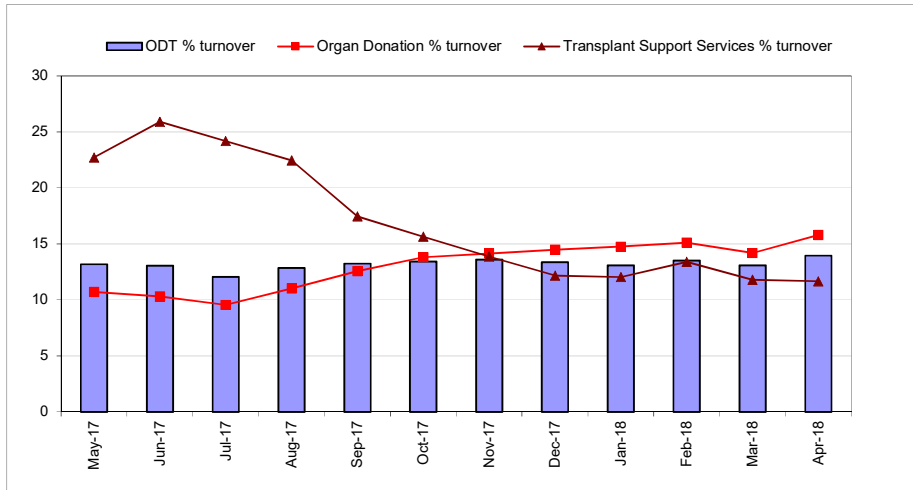


Organ Donation and Transplant - Absence/Turnover

53. ODT Absence rate %



54. Annual Turnover rate %



SECTOR	NOTES/UPDATE REPORT
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NHSBT Corporate	<p>Sickness absence was better this month at 3.3%.</p> <p>Health and Safety – the LTI Incidence rate (12 months to March 2018) for all work related lost time is 1.4 (versus 1.5 last month).</p>
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Corporate - Status of Strategic Projects per TPB reporting:

Project title	Status	This RAG	Last RAG	Approved Cost (£m's)	F/Cast Cost (£m's)	F/cast Benefit (£m's)	Planned to complete	F/Cast to complete
Networks & Telephony Contract	Delivery	R	A	1.6	1.4	N/A	May 18	May 18
Barnsley Project (Leeds Sheffield)	Delivery	G	G	16.5	16.5	1.1	Jan 21	Jan 21
Desktop Modernisation – Infrastructure Improvement	Delivery	A	A	3.5	2.2	N/A	Apr 18	May 18
Exchange On-Line Migration	Delivery	G	G	0.6	N/A	N/A	Jul 18	Jul 18
Pulse GUI/Middleware Server Upgrade	Delivery	G	A	0.6	N/A	N/A	Jul 18	Jul 18
General Data Protection Regulations	Start-Up	A	A	N/A	N/A	N/A	N/A	Jun 18

Notes:

i) Figure not reported in TPB report this month.

The Networks and Telephony is at red status as change request for the selected Telephony option has yet to be submitted and there is still no agreed scope, cost or delivery plan for the Telephony work stream. The project is still in discussions with Vodafone to agree commercials.

User experience of the new desktop is currently being impacted by Mail migration and is expected to have a negative impact on the user feedback.

Monthly Performance Report - As at the end of April 2018

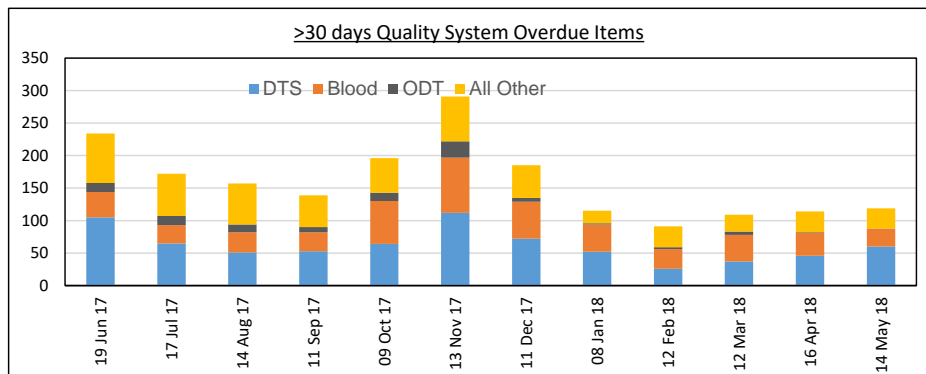
NHSBT Corporate - ICT / Workforce

55. IT system performance

System availability	Period Target	Period Actual	Period RAG	RAG Trend
Donor Portal	99.95%	100.00%	G	-
Pulse	99.95%	100.00%	G	-
OBOS	99.95%	100.00%	G	-
Hematos	99.95%	100.00%	G	-
EOS	99.95%	100.00%	G	-
NtXD	99.95%	100.00%	G	-
TMS	99.95%	99.71%	A	-

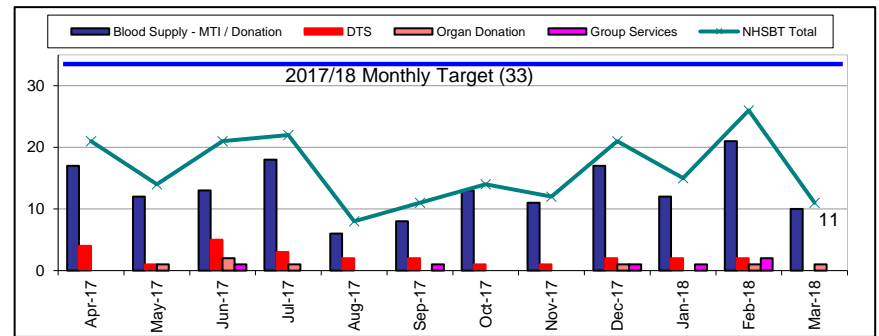
57. Quality System >30 days Overdue Items

Directorate (as at 14 May)	Documents	Quality Incidents	Adverse Events	Change Control	Audit Findings	TOTAL
DTS	11	27	2	15	5	60
ICT	12	8		7		27
M&L	8	10		6	1	25
BD		2			1	3
All Other		1	1		2	4
Total	31	48	3	28	9	119

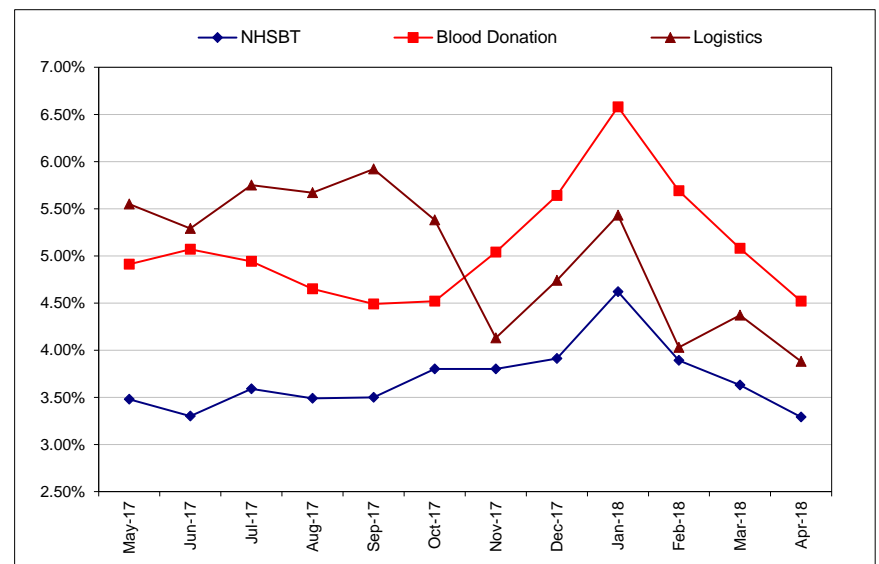


56. Health and Safety - Accident Reporting

H&S Incident Levels (x 1 mth in arrears)	Level 1&2 MAT Target	Level 1&2 MAT Total	Level 1-3 Mthly Target	Level 1-3 Period Actual
Blood Donation	<=17	13	<=24	7
M&L	<=6	4	<=4.5	3
DTS/SpS	<=1	1	<=2	0
Organ Donation	0	0	<=1	1
Group Services	0	1	<=1	0
NHSBT	<=24	19	<=32.5	11



58. Sickness Absence



RISK MANAGEMENT

Risk register summary (net risk) and summary by themes

Corporate Risk Register Summary	Red	Amber	Green
90	7	78	5

The dependency and reliance on the ageing hardware and software, and the SME, that supports the Pulse blood management system.

The ability to supply in case of the loss of a key facility (e.g. Filton, Speke) or the loss of critical IT systems (Pulse, Hematos, networks etc). The risk of critical system loss is increasing on the back of the significant changes that are planned (e.g. new desktop, CSM etc.) and the significant complexity and inter-dependency between them.

Inability to supply as a result of planning / supply challenges through:

- (at the macro level) limited visibility with regard to longer term blood demand trends and especially when current demand decline will be offset by the anticipated impact of demographic trends
- significant differential short term demand trends at group / component level (eg O neg red cells, A neg platelets)
- poor execution of plans to recruit donors and get them to session.

The scale of the transformation programme across NHSBT will create a significant challenge on the capacity and capability of NHSBT to safely execute the change (both ICT and business resources) and a potential distraction to delivering business as usual and, in particular, the need to rebuild stocks and active donors in the Blood Supply Chain.

The ability to maintain blood prices remains highly dependent on our ability to manage the combined impact of :

- the need to fund the significant investment in CSM (and uncertainty regarding the phasing of the spend and timescale)
- the organisational focus required to safely implement CSM and a slow-down in the delivery of underlying BAU efficiency improvements
- ongoing reduction in red cell (and potentially platelet) demand and the loss of related income and contribution
- being able to generate significant productivity improvements in Blood Donation especially (given the inherent productivity gap and high contribution to overall costs) and the significant impact on service configuration required.

Ongoing reduction in demand will require significant changes to the configuration of blood collection services in order to maintain productivity and deliver the increased Blood 2020 targets. This would involve fewer / larger mobile sessions, greater use of fixed donor venues and much less collection activity in certain parts of the country. This could result in adverse donor reaction (and potentially attendance) if not managed and communicated well and an impact on supply if, for example, sufficient numbers of O neg donors cannot be retained. It may also exacerbate the current challenges being seen around unfilled appointments, cancellations and donor attrition.

The high prevalence of manual, paper based and verbal processes throughout NHSBT's operations, especially within reference testing and in the duty office within organ donation and transplant. Although these are mitigated by appropriate manual control checks, and new systems are removing transcription in some areas, there is a residual risk that these are ineffective and cause transcription errors that could lead to the death or harm of NHS patients.

RISK MANAGEMENT

Risk register summary (net risk) and summary by themes (cont.)

Risk to delivery of TOT 2020 strategic targets driven by:

- adverse trends in the organ donor pool
- inability to change consent levels
- lack of funding required for supporting business cases in respect of consent strategy and new technologies
- lack of transplant capacity.

Changing clinical/commissioning intentions in Stem Cells (ie Cord Blood / BBMR) as a recommended treatment, impacting on the outcomes and therefore the future viability of these services. In particular, in Cord Blood where a significant downturn in issues being seen (international issues especially).

There are no new high/extreme risk's this month:

There is though a risk that significant numbers of donors may need to be deferred as a result of the impact of the Interval/Compare trials has not yet been formally raised on the risk register. If this risk were to materialise it would represent a threat to supply. Mitigation would require a significant increase in active donor numbers (exacerbating existing challenges with donor numbers and a resulting increase in marketing costs) and introduction of more accurate iron testing (also at increased cost).

The overall number of risks has decreased this month to 90 (vs 126 in March), there is therefore a net reduction of 36 (40 risks removed and 4 new additions). The number of risks with a high residual risk score (≥ 15) has reduced to 7 (11 previously reported). The reduction in risks this month, reflects ongoing work on the register to review and re-organise risks to ensure that they are business led, by division. The high level risk changes are summarised as follows:

ICT – 45: there is a risk that the replacement of Pulse by a number of interconnected different platforms causes disruption to current services (previously scored at 15, now removed from the register).

ICT-51: there is a risk that critical (business facing) Technology Services will be impacted as a result of major IT incident(s) resulting in the business invoking its business continuity plans (previously scored at 15, now removed from the register)

ICT-63: there is a risk that NTxD will be unsupported (previously scored at 15, now removed from the register).

Clin-13: there is a risk of legal non-compliance with GDPR legislation, caused by a lack of IG resources, resulting in reputational and regulatory non- compliance (risk score has been reduced from 16 to 12 this month).