

# Saving and Improving Lives

## Strategic Plan 2015-20

June 2015



# Saving and improving lives

NHS Blood and Transplant (NHSBT) is a Special Health Authority. Our purpose is to save and improve lives.

We collect donations from voluntary donors, process them for use, dispatch them to hospitals and match them to patients who desperately need them.

We depend entirely on these donations to provide a safe and reliable supply of blood components, diagnostic and stem cell services to hospitals in England and North Wales and tissues and solid organs to hospitals across the UK. As well as diagnostic services outside the UK.

Our ambition is to be the best organisation of our type in the world.

Our role is to:

- Encourage people to donate organs, blood, stem cells and tissues
- Optimise the safety and supply of blood, organs, stem cells and tissues and matching them to patients
- Help to raise the quality, effectiveness and clinical outcomes of blood and transplant services
- Provide expert advice to other NHS organisations, and to the health departments of the four UK countries
- Commission and conduct research and development to improve outcomes for patients
- Implement relevant EU statutory frameworks and guidance.

We take great pride in supporting the incredible altruism and generosity of our donors by providing the services which allow them to save and improve the lives of NHS patients.

Cover image centre: Phoebe suffered from the rare and potentially fatal blood disease hemophagocytic lymphohistiocytosis, but after receiving two stem cell transplants and numerous blood and platelet transfusions over a five year period she has been given the all clear.

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# Celebrating 10 Years

This year we celebrate our tenth anniversary as NHSBT.

Our legacy organisations, however, have a much longer history. What we currently call Blood Supply has been operating under various names and structures for nearly sixty years. While an organisation to match and distribute organs was first formed over forty years ago.

By combining these two organisations, which both depend on altruistic donations for their very existence, we have been able to achieve a step change in performance. We delivered the 50% increase in deceased organ donation set out by the Organ Donor Taskforce and have continued to improve productivity and efficiency in the blood supply chain which is currently delivering savings of around £70m per year to the NHS. We have delivered these benefits while maintaining public confidence in our work, encouraging more people than ever to become donors and delivering excellent customer service to our NHS hospital customers.

While we celebrate these past successes, we are very firmly focused on the future. We believe that we now have the confidence and capability as an organisation to accelerate our rate of progress and make an even more significant contribution to the UK Health network.

This strategy is about looking forward and building on the work of the past. It builds on our already launched strategies for Blood Supply and Organ Donation and Transplantation and will be further complemented by our soon to be published Stem Cell strategy and Research and Development strategy. In each area, we have established specific and measurable goals to direct and measure our progress.

I am incredibly proud to be Chairman of this very special organisation. Every day our people care for altruistic donors, and use their expertise to develop and deliver quality products and services for the treatment of NHS patients.

All of us in NHSBT look forward to working closely with our partners and stakeholders to continue to save and improve more lives.

**John Pattullo**  
Chairman



## In 10 years of NHSBT:

**19 million** units of blood have been donated

More than **10 million** people have joined the organ donor register

We have seen nearly **10,000** deceased organ donors, resulting in almost **27,000 life saving or life enhancing transplants**

More than **9,000** living organ donor transplants

**1,763** units have been issued by our British Bone Marrow Registry

More than **500** units have been issued by our Cord Blood Bank

More than **28,000** therapeutic apheresis treatments have been given to patients

# 1 | An introduction from the Chief Executive



I joined NHSBT as Chief Executive a little under a year ago and have been impressed with the pride and passion my team display in saving and improving lives within the NHS. Every day my teams work with altruistic donors and their families to collect and process millions of units of blood, perform hundreds of thousands of life saving tests and facilitate thousands of organ and tissue transplants. This plan sets out our key targets, outlining how we will deliver more services for less cost.

We have clear strategies for key areas of our work. This document brings them together and highlights our values: Caring, Expert and Quality. These values are the things that bind us together, that sit behind everything we do, say and stand for as an organisation.

With an eye on the future our aim is to use our skills, knowledge and unique experience to have a positive impact on even more patients. We want to save and improve more lives. We aim to lower the costs of what we do so that NHS hospitals have more money to invest in saving more lives. We are proud to be in a position to reduce the cost of blood to hospitals – a saving of some £3m to the NHS this year – which equates roughly to 100 newly qualified nurses or the cost of 258 hip replacements. This latest saving builds on the £70m a year we have already delivered to hospitals.

As an NHS body with a UK wide presence, visiting most hospitals every day, either delivering blood or through our specialist nurses I am convinced we have an important part to play in helping the NHS become more efficient. Operating within the NHS system we understand the real challenges being faced in today's healthcare environment and can therefore contribute real world solutions.

## In 2014/15 our donors:

Donated nearly 2 million units of blood and platelets

Provided 4,450 organs for transplant

Made 5,900 tissue donations (incl. corneas)

Added 2,300 units to the NHS Cord Blood Bank

A good example of this is our work supporting the 100,000 Genome project. Launched in December 2014, run by Genomics England, the 3-year initiative involves collecting samples and decoding 100,000 genomes, to revolutionise patient treatment for rare disease, cancer and infectious disease.

NHSBT is providing logistics support to transfer samples from up to 12 designated genomics sites to a central Bio depository at Milton Keynes. All of Genomics England laboratories are based at hospitals which already use our services and are supported with routine blood deliveries. Taking advantage of our existing infrastructure, hospital relationships and expert knowledge of the regulatory landscape we have quickly provided a cost effective supply chain solution. It is this type of intervention, operating as part of 'Team NHS' that I hope to see more of in future.

I hope you enjoy reading about our exciting plans.

**Ian Trenholm**  
Chief Executive

## 2 | Our five year strategy

Our overall strategy for NHSBT combines and summarises the long term strategies of each of our operational units which are now aligned to 2020.

Our key operational strategies are available to read at [nhsbt.nhs.uk](https://nhsbt.nhs.uk)

### **Our collective 2020 vision will deliver:**

- Enhanced digital connections with blood donors
- Improved productivity within the blood supply chain
- Higher quality service for hospital customers
- More organs available for transplantation
- Enhancements to the Organ Donor Register and our public website
- Increased income from our diagnostic and therapeutic services
- Expert support for the next generation of cellular and molecular therapies
- Broadening of our offering to the NHS
- Investment in a reliable IT infrastructure

# 3 | Blood Supply

## Our Strategic Objective:

To ensure for all patients, including patients with complex needs, that the right blood components are available at the right time, and are supplied via an integrated, cost efficient and best in class supply chain and service.

The Blood 2020 strategy outlines our ambition to provide extended services to the NHS, and to integrate our services with hospitals. It supports the following stakeholder expectations:

**Donors:** A safe donation experience, and a modern, attractive and easy to use service with high levels of customer service.

**Hospitals:** A safe, sustainable, timely and cost-effective blood supply, with a high level of availability for routine and specialist components. Leadership in transfusion medicine with a high level of technical, clinical and patient blood management support.

**Patients:** Blood products that are safe and timely, with effective matching of blood (including rare blood groups).

**Stakeholders:** A safe and sustainable supply of blood with financial efficiency in line with broader NHS goals.

The strategy is underpinned by four pillars/themes, and is available to read at: [www.nhsbt.nhs.uk/who-we-are/strategy](http://www.nhsbt.nhs.uk/who-we-are/strategy)



## Our strategy in summary

### Blood Collection

We will ensure a sustainable donor base. It will be underpinned by flexible collection and invitation processes; modern service, excellent session experience and high levels of productivity.

There will be a segmented and sustainable donor base matched to patient need and demand, supported by a modern and more productive collection model with increased levels of donor satisfaction.

### Manufacturing

Our manufacturing activity will be hospital focused with high levels of safety, productivity, regulatory compliance and order fulfilment.

We will offer high quality, productive manufacturing with improved responsiveness to volume changes and new products, and will maintain appropriate stock levels.

### Customer Service

We will provide excellent customer service with a tailored, cost-effective offering and a modern interface with hospitals.

We are aiming to meet all NHS hospital need for red cells and platelets, supported by flexible and tailored customer services with high levels of satisfaction. We will have a modern interface with hospitals and single portal entry, integrated stock and continued investment in patient blood management.

### Integration with NHS hospitals

We will integrate with key hospitals and related networks to drive improved patient outcomes and reduce system costs. We will integrate supply and demand planning from donor to patient. This will be supported by an optimised RCI service, a national database of genotyped multi-transfused patients, and integration with key hospitals / networks.

### Hira Sapkota



Hira from Nottingham became a blood donor after his wife needed a transfusion during the birth of their son Dipesh. He said *"I thought: someone has given blood and saved my wife's life. So I can give blood and maybe next time save someone else's life."*

### Archie Ramshaw



Archie has an extremely rare form of anaemia called Congenital Sideroblastic Anaemia. It means his bone marrow is unable to produce healthy blood cells.

He may be only 11 years old, but to help him live a normal life he has already had more blood transfusions than most people will need in their lifetime.

### Reduction in red cell demand and financial pressures on the NHS

The ongoing reduced demand for red cells puts pressure on our costs to provide our services. The reduction, due in part to our better patient blood management programme with hospitals, is a positive clinical outcome for NHS patients. However, our challenge is to reduce costs at the same rate as the decline in demand so that we can deliver lower prices to hospitals.

Less need for blood means being careful about when and where we call in donors making best use of their valuable donation as well as helping to keep our costs down. Blood donors will see changes to our services, there will be fewer, larger sessions with less frequent mobile sessions in some areas and greater use of fixed donation sites.



## Strategic Targets

Strategic Targets - Blood Supply	15/16 Plan	16/17 Plan	17/18 Plan	18/19 Plan	19/20 Plan
% of donors scoring >= 9/10 in overall satisfaction	70%	71%	72%	>73%	>75%
No. of complaints per million donation; (c30% reduction in five years <sup>1</sup> )	4,900	4,600	4,300	4,050	3,750
Days when stock level is below 3 days for any blood group	0	0	0	0	0
Number of occasions where opening stock of platelets (for any blood group) is below average daily demand	0	0	0	0	0
Number of critical and major non compliances at external inspection	0	0	0	0	0
% On Time In Full delivery	96%	97%	98%	98.5%	99%
Hospitals rating satisfaction at >=9/10	70%	72%	73%	74%	75%
Satisfaction with RCI at >=9/10	70%	72%	73%	74%	75%
Red cell price (£.unit)	£120	£120	£120	£120	£120
Number of donors donating over the last 12 months <sup>2</sup> (000)	882	867	849	841	837
Frequency of donation (overall)	1.90	1.90	1.90	1.90	1.90
Number of O neg donors donating over last 12 months <sup>3</sup> (000)	105	103	102	102	102
Frequency of donation of O neg donors	1.98	1.98	1.98	1.98	1.98
% whole blood donations in donor centres	13.5%	15%	17%	>18%	>20%
% of 9 bed sessions	49%	51%	55%	60%	65%
Blood donation productivity: (units/FTE/year)	1,370	1,450	1,490	1,600	1,700
Manufacturing productivity (units/FTE/year)	9,850	10,500	11,000	11,500	12,000
Testing productivity (units/FTE/year)	24,000	26,500	27,000	27,500	28,000
Hospitals served via Vendor Managed Inventory	20	40	65	80	110
Hospital networks with extended / integrated services	1	2	4	5	7

<sup>1</sup> Excluding complaints from team closures or session consolidation

<sup>2</sup> Based on long term demand forecast (September 2014)

<sup>3</sup> Based on demand forecast by blood group (September 2014)

# 4 | Organ Donation and Transplantation

## Our Strategic Objective:

To match world class performance in organ donation and transplantation.

The 'Taking Organ Transplantation to 2020' strategy was published in June 2013. It aims to achieve the following outcomes for organ donation and transplantation:

The strategy is available to read at:

[www.nhsbt.nhs.uk/who-we-are/strategy](http://www.nhsbt.nhs.uk/who-we-are/strategy)

### Our strategy in summary:

**1. Action by society and individuals will mean that the UK's organ donation record is amongst the best in the world and people can donate when and if they can.**

We will support the UK to:

- Develop national strategies to promote a shift in behaviour and increase consent.
- Ensure that it is easy to pledge support for organ donation and once a pledge has been given, to honour the individual's wish.
- Increase Black, Asian and Minority Ethnic Community awareness of the need for donation, to benefit their own communities and provide better support for people in these communities to donate.
- Learn from the experience of legislative change in Wales.

**2. Action by NHS hospitals and staff will mean that the NHS routinely provides excellent care in support of organ donation and every effort is made to ensure that each donor can give as many organs as possible.**

We will support the UK to:

- Increase adherence to national standards and guidance.
- Increase the number of people who are able to donate following circulatory death and learn from the Scottish pilot on donation after failed resuscitation.
- Provide hospital staff with the support, training, resources and information they need to provide an excellent organ donation service.
- Ensure every donor's care, prior to retrieval, optimises organ quality.

### 3. Action by hospitals and staff means that more organs are usable and surgeons are better supported to transplant organs safely into the most appropriate recipient.

We will support the UK to:

- Increase the number of organs that are retrieved from all donors, exploiting new technologies where effective.
- Increase the number of organs that are able to be transplanted safely, providing surgeons with the information and guidance to make decisions about organ suitability.
- Improve transplant recipient survival by improving understanding of donor organ/recipient compatibility.

#### Joyce Herdson



Joyce had a double lung transplant at Christmas in 2013.

*"I am now able to breathe again freely without giving it any thought. I will never take this for granted and will forever be grateful to the donor and their family who allowed me to be here with my family today"*

### 4. Action by NHSBT and Commissioners means that better support systems and processes will be in place to enable more donations and transplant operations to happen.

We will support the UK to:

- Support Regional Collaboratives to lead local improvement in organ donation, retrieval and transplant practice and promote organ donation.
- Review and improve the workforce, IT, systems and processes which operate throughout the donation and transplant pathway.
- Build a sustainable training and development programme which can be tailored to meet local needs, in order to support organ donation and retrieval.

### Living Donor Kidney Transplantation to 2020

Although we do not manage the living kidney transplantation service, we have co-ordinated a strategy across all four countries that will enable the UK to match world class performance in living donor kidney transplantation (LDKT) by 2020. The strategy in summary is:

1. NHSBT, commissioners and all UK health departments will work together to ensure that there are no financial disincentives to support a fully integrated UK-wide LDKT programme.
2. NHSBT, commissioners and clinicians will ensure that appropriate infrastructure, systems and processes are in place to maximise the number of transplants achieved from all suitable living kidney donors.
3. NHSBT, clinicians, commissioners and other authorities will ensure that outcomes of LDKT are monitored and that information is accurately interpreted and utilised to support state of the art donor and recipient care.
4. NHSBT and clinicians will ensure that all suitable recipients have an opportunity to consider the option of LDKT before dialysis or to minimise waiting time if dialysis is unavoidable, regardless of where they live in the UK.

### Sustainable Funding for Organ Donation and Transplantation

To help us increase the number of suitable organs available for transplant additional funding from the four UK health departments has been confirmed for 2015/16. There is no certainty this will be available in future years and, if this were to happen, it will put at risk delivery of the planned activity levels and initiatives set out in the *Taking Organ Donation to 2020* strategy.

Discussions will continue on establishing an appropriate funding model and we will clarify our plans beyond 2015/16 once this is agreed.

## Strategic Targets

Strategic Targets – Organ Donation and Transplantation	2015/16 Budget	2016/17 Plan	2017/18 Plan	2018/19 Plan	2019/20 Plan
Increase % Consent/Authorisation rate (Overall)	62%	67%	72%	77%	80%
Deceased Donors per million of population	21	23	25	26	27
Deceased Transplants per million of population	58	63	67	72	74
Transplant 5% more of the organs offered from consented, actual donors	1%	tbc	tbc	tbc	5%
Number of Deceased Organ Donors	1,365	1,493	1,620	1,729	1,783
Number of Living Organ Donors (reported one month in arrears)	1,174	1,205	1,298	1,422	1,608
Number of Organ Transplants (deceased and living donor transplants)	4,868	5,265	5,646	5,980	6,170
Number of Deceased Donor Transplants	3,694	4,060	4,412	4,715	4,874
Organ Donor Register – number of new registrations	1.0m	tbc	tbc	tbc	tbc
NHSBT Cost per Transplant	£18.3k	£17.0k	£15.6k	£15.2k	£15.0k
% Consent/Authorisation rate (patient expressed a wish to donate on ODR)	92%	94%	97%	98%	100%
% Consent/Authorisation rate (patient not expressed a wish to donate or ODR status not known)	50%	55%	62%	67%	70%

These strategic targets assume that funding will be provided. They would need to be adjusted downwards if additional funding is unavailable.

# 5 | Diagnostic and Therapeutic Services

Diagnostic and Therapeutic Services (DTS) is composed of individual business units that supply biological products and services to support blood transfusion and organ/stem cell transplantation. They also provide therapeutic apheresis services.

A strategic plan has been developed for each unit, with a common theme of leveraging our unique footprint and capabilities to consolidate services across the NHS.

## 5.1 | Tissue Services

### Our Strategic Objective:

To be recognised by the NHS as the preferred provider of high quality, ethically sourced and cost effective tissue allografts in England, Wales and Northern Ireland.

We are the sole supplier of certain critical tissues (particularly skin) to the NHS. Our strategy has four goals:

#### **1. To provide high quality care for donor families**

We will ensure a consistent and ethically led approach to consent from donor families so that we are a credible and, trusted brand built on compassion for donor families and supply from within the NHS.

#### **2. To reinforce NHSBT Tissue Services as the preferred provider for tissue allografts in England, Wales and Northern Ireland**

We will supply allografts including femoral heads, skin, bone grafts, tendons, heart valves, amnion and autologous serum eye drops. We will consolidate supply across the NHS and leverage the capacity and capability of the Speke tissue bank to deliver cost benefits through scale.

#### **3. To implement new systems in support of the core business processes**

We will implement core business processes to support greater sales and marketing capability, and move to being a proactive supplier to the NHS. This will be supported by improvements to customer and product coding processes and the provision of real time management information.

#### **4. To pursue a focused, high potential and strategically relevant product development strategy**

We will collaborate with innovative SMEs in the UK that are developing new products and therapies. In return for providing access to their R&D and innovation capability we will provide them with supporting infrastructure and a route to the clinic for novel products.

## Private Karl Hinett



Karl was only 19 when he almost lost his life serving with the British Army in Iraq during 2005. His Warrior tank came under attack and he suffered 37% burns.

*"Thanks to the skin products I received and the fantastic work of the Tissue Services team I have been given the chance to live my life the way I want to."*

*Since receiving his treatments Karl has raised more than £50,000 for the Queen Elizabeth Hospital Birmingham Charity, by running 140 marathons in eight years.*

## Strategic Targets

Strategic Targets	2015/16 Budget	2016/17 Plan	2017/18 Plan	2018/19 Plan	2019/20 Plan
Income	£8.6m	£9.4m	£10.2m	£11.1m	£12.1m
Pricing Target (average)	+0.1%	0%	0%	0%	0%
% of hospitals rating $\geq$ 9/10 for satisfaction	80%	Review baseline	Review baseline	Review baseline	Review baseline
Number of "critical" and "major" regulatory non compliances	0	0	0	0	0
On Time In Full delivery (OTIF)	98%	98%	98%	98%	98%



## 5.2 | Stem Cells

### Our Strategic Objective:

To work in partnership with third sector organisations and the UK Health Services in the provision of an efficient and effective source of donor haemopoietic stem cells for the treatment of UK patients and to establish NHSBT as a prime partner for NHS, academic and commercial organisations seeking to take next generation stem cell therapies to the clinic.

We support around 50% of all stem cell transplants in the NHS through collection, processing and cryopreservation of donated stem cells.

We have developed a unique national footprint and capability, and have the capabilities to support the development of the next generation of stem cell therapies, that are using stem cells and bioactive molecules to regenerate tissues ('regenerative medicine') and to selectively destroy cancerous cells ('cancer vaccines') and viruses.

To support this we can provide the donor stem cells and bring specialist manufacturing, regulatory expertise, distribution and research and development in support of this developing industry.

Three themes underpin our stem cell strategy:

#### 1. Improve the availability of unrelated donor stem cells

We will contribute to the UK target of saving an additional 200 lives each year (identified by the UK Stem Cell Strategic Forum) by:

- Continuing our collaboration with Anthony Nolan in order to establish them as the single point of access for UK transplant centres searching for stem cell donors and cord blood donations.
- Banking an additional 2,300 cord blood donations each year by leveraging our extended collection activities and embedding 24/7 operations.
- High resolution (including NIMA and HLA-C) typing of adult, ethnically diverse donors to reduce the time taken to provide stem cells for transplantation and improve patient outcomes.
- Seeking further opportunities to improve IT interoperability with other bone marrow registries.

#### 2. Enhance established Stem Cell Immunotherapy services

We will maintain our position as a primary supplier of first generation stem cell transplantation services through matching customer requirements for stem cell collection, processing and storage at the existing key NHS regional customers that are co-located with NHSBT's seven stem cell processing and cryogenic storage centres.

#### 3. Manufacture innovative cell therapies

We will leverage our capabilities to provide supporting services to organisations that are taking the next generation of cellular and molecular therapies to the clinic. We will focus on supporting the therapeutic delivery of next generation, and highly personalised (autologous or tissue matched) cell therapies and will differentiate its service through the infrastructure we can provide, from access to donors, through collection, storage and selection of stem cells through to delivery to bedside and patient monitoring.

In becoming a preferred partner to NHS, academic and commercial organisations that are taking the next generation of cellular therapies to the clinic, we are:

- Investing in business development, commercial/contracting, project management and management of intellectual property
- Obtaining the necessary biologics manufacturing licences
- Aligning R&D to support the development of new manufacturing and process capabilities
- Collaborating with UK government initiatives in regenerative medicine (and especially the activities of the Cell Therapy Catapult).

## Sarah Potter



Sarah joined the Anthony Nolan register and was identified as a match for a patient in 2013.

*"I thought if I have the opportunity to help someone then I simply had to do it. I would definitely do it again ...knowing that I was giving hope to someone and their family made it all worthwhile."*

## Strategic Targets

DTS	SCDT/CMT* – Strategic Targets	2015/16 Budget	2016/17 Plan	2017/18 Plan	2018/19 Plan	2019/20 Plan
SCDT/CMT	Number of "critical" and "major" regulatory non compliances	0	0	0	0	0
	Income SCDT/CMT	£20.4m	£21.1m	£22.8m	£22.8m	£24.2m
	Contribution to overheads SCDT/CMT	£3.4m	£2.8m	£3.3m	£3.9m	£4.8m
CMT	% of customers rating ≥ 9/10 for satisfaction	Establish baseline	tbc	tbc	tbc	tbc
SCDT	% of confirmatory typing within 14 days	80%	85%	85%	90%	90%
	Banked Donations (Cumulative) TNC > 140	2300	2300	2300	1400	500
	Number of Cord Units Issued	60	71	85	103	126
	Adult donor provisions	304	358	423	483	533
	Donors recruited to fit panel	8,000	10,000	12,000	14,000	16,000

\*Stem Cell Donation and Transplantation/Cellular and Molecular Therapies

## 5.3 | Red Cell Immunohaematology

### Our Strategic Objective:

To be an innovative, integrated, technologically-enabled service saving patients' lives by ensuring they have access to precisely matched blood when needed.

Red Cell Immunohaematology (RCI) ensures the safety and clinical efficacy of red cell transfusion therapy by providing expert diagnostic and donation selection activities which are beyond the capability of hospital transfusion laboratories.

We want to move from being a provider of low volume, specialty services to a high volume commodity services provider. We will do this by:

#### Optimising RCI

We will build the competencies required to meet changing customer needs and the challenges of future integration.

#### Extending – through integrating patient care pathways

We will prospectively genotype patients (e.g. multi-transfused patients) with the aim of optimising transfusion therapy.

#### Integrating red cell diagnostics

We will work with hospitals to extend services and form transfusion networks to drive higher standards at lower cost.

## Strategic Targets

Strategic Targets	2015/16 Budget	2016/17 Plan	2017/18 Plan	2018/19 Plan	2019/20 Plan
Income	£13.3m	£14.2m	£15.0m	£15.9m	£16.8m
Pricing Target (average)	3.7%	0%	0%	0%	0%
% of hospitals scoring $\geq$ 9/10 for satisfaction with RCI	65%	70%	70%	70%	70%
Number of "critical" and "major" regulatory non compliances	0	0	0	0	0
Turnaround Time vs SLA	95%	95%	95%	95%	95%

## 5.5 | Histocompatibility and Immunogenetics

### Our Strategic Objective:

To maintain our position as the UK's largest provider of H&I services through delivering an innovative, integrated and technologically enabled service which will save more patients' lives by ensuring they have access to precisely matched blood, stem cells and organs when needed.

Histocompatibility and Immunogenetics (H&I) services are concerned with the genetic testing and matching of solid organ donors, stem cell donors, and platelet donors with the requirements of individual patients (ie HLA or tissue-typing).

Rapid advances in genetic testing are likely to change the way that H&I services are delivered and we intend to be an early adopter of 'next generation sequencing' technology for high throughput, high quality, low cost donor and patient typing.

In support of this three strategic themes have been identified:

#### Grow services

We will offer additional services to existing customers, improving productivity and developing new business.

#### Improve patient outcomes

We will better match blood components and transplants to the needs of patients.

#### Increase the repertoire of testing services

We will leverage our core capabilities in HLA-related testing and diagnostics to undertake a wider range of pharmacogenetic tests.

## Strategic Targets

Strategic Targets	2015/16 Budget	2016/17 Plan	2017/18 Plan	2018/19 Plan	2019/20 Plan
Income	£13.3m	£14.0m	£14.7m	£15.4m	£16.2m
Pricing Target (average)	0%	0%	0%	0%	0%
% of hospitals scoring $\geq$ 9/10 for satisfaction with H&I	$\geq$ 60%	$\geq$ 60%	$\geq$ 60%	$\geq$ 60%	$\geq$ 60%
Number of "critical" and "major" regulatory non compliances	0	0	0	0	0
% of patients receiving A or B1 platelets	$\geq$ 77%	$\geq$ 77%	$\geq$ 77%	$\geq$ 77%	$\geq$ 77%
Time to type DCD Organ Donors	$\geq$ 80%	$\geq$ 80%	$\geq$ 80%	$\geq$ 80%	$\geq$ 80%
Turnaround Time vs SLA	98%	98%	98%	98%	98%

## 5.6 | Therapeutic Apheresis Services

### Our Strategic Objective:

To be the preferred provider of high quality, cost effective therapeutic apheresis services.

Therapeutic Apheresis Services (TAS) provide treatment to more than 1,000 patients each year. We have a portfolio of therapies across a range of clinical specialties, using technology to exchange, remove, or collect certain components from the blood. TAS is the only area where we provide treatment directly to NHS patients.

The strategy for TAS is underpinned by the following three themes:

#### 1. Become the preferred provider of therapeutic apheresis services

We will deliver 6,000 patient treatments per annum (40% market share), and meet unmet patient demand for specialised therapies.

#### 2. Deliver high quality acute services from six NHS Trusts

We will provide a regional service for adults and children integrated with Trust clinical teams, and meet the highest standards of safety and regulatory compliance.

#### 3. Ensure leadership in therapeutic technology

We will have the largest number of machine platforms in the NHS, offering a wide portfolio of therapies covering a broad range of clinical specialties and we will lead on the introduction of new therapies e.g. immunoabsorption.

#### Jan-Maree Marsh



Jan-Maree suffers from an autoimmune condition called Sjögren's Syndrome. It causes her white blood cells to attack her saliva and tear glands.

To overcome the symptoms and complications caused Jan has a weekly plasma exchange. Her blood is removed and plasma is filtered out, her blood is then returned to her with a plasma substitute.

## Strategic Targets

Strategic Targets	2015/16 Budget	2016/17 Plan	2017/18 Plan	2018/19 Plan	2019/20 Plan
Income	£7.0m	£7.6m	£8.2m	£8.8m	£8.8m
Pricing Target (average)	0%	0%	0%	0%	0%
Number of "critical" and "major" regulatory non compliances	0	0	0	0	0
% of Patients rating patient experience $\geq$ 9/10 with the service from TAS	95%	95%	95%	95%	95%
% of hospitals scoring $\geq$ 9/10 for satisfaction with TAS	$\geq$ 60%	$\geq$ 60%	$\geq$ 60%	$\geq$ 60%	$\geq$ 60%

## 6 | Our research

We require a world leading research and development (R&D) programme to underpin our strategic objectives in transfusion, transplantation and regenerative medicine, and to benefit healthcare in the UK and beyond.

We run an innovative national and international research programme that is critical to maintain our aspiration of being the best organisation of our type in the world.

The aims of our Research and Development programme are to:

- Generate evidence to inform national safety policies, as well as clinical practice in transfusion and transplantation
- Develop new/improved products and diagnostic services

Our Research and Development programme is unique. Within the public, private and academic sectors there are no other organisations capable of delivering a programme that spans all our products and services. This is due to the combination of our partnerships with top class universities which ensures scientific quality, and our expertise in translation into new products, services and clinical guidelines.

We will publish our Research and Development strategy for 2015-20 this summer. It will be available at [www.nhsbt.hs.uk](http://www.nhsbt.hs.uk)

More than  
**50,000 blood donors** took part in our **INTERVAL study** – the largest research study of its kind.

Funding awarded by the **National Institute for Health Research** to establish Blood and Transplant Research Units in partnership with leading universities.



# 7 | Supporting our ambition

How our people feel about working at NHSBT is very important to us. We believe that the care our people give our donors and patients and the service our customers receive is driven by their personal engagement and well being at work. We measure how our people feel through our *Your Voice* survey and follow it up with clearly communicated action plans.

We have also invested in improving our HR 'first point of contact' so that our people get the information and advice they need quickly and simply. To ensure that we have a pipeline of future talent we have invested in leadership programmes and made sure we take succession planning seriously.

Clear actions are also being taken in respect of the Francis Report and 'Speak Up Report' to ensure our people feel confident to raise concerns or queries if necessary.

In this regard, NHSBT has a Whistleblowing policy, which provides clear guidance on what an employee must do to raise concerns of possible danger, professional misconduct, unlawful conduct, or financial malpractice that might affect patients, donors, colleagues or NHSBT.

## Technology and Systems

Crucial to the delivery of safe products and services for patients is effective technology. We have to replace an ageing IT infrastructure, migrate to cloud based services and replace the critical operational applications underpinning our activities. Our ambition is to revolutionise the way we interact with blood donors to take full advantage of the opportunities afforded by digital technologies.

We will:

- Deliver the action plans created to address results from the *Your Voice* employee survey
- Deliver the plans set out in our Single Equality Scheme
- Launch a new five year sustainability plan
- Commence delivery of our applications renewal strategy and confirm the road map for the adoption of new technology services
- Invest in key sites as part of our long term estates strategy.

## In 2014/15:

Our people raised more than **£13,000** for our charity partner, The Cystic Fibrosis Trust.

More than **3,500** of our staff completed the *Your Voice* employee survey

Our staff submitted more than **300 *Bright ideas*** to help improve our services

# 8 | Promoting donation

We rely on voluntary donations for much of our work. To be successful, and to save and improve lives, we need to encourage ever more people to become donors.

These are just some of the ways we do this, and how you can support us in our purpose to save and improve lives.

We work closely with partners and stakeholders in the public and private sector to share our donation message as widely as possible.

## In partnership

We develop strategic and proactive partnerships with organisations that are well placed to help us recruit more donors. We prioritise organisations that can help us reach our key audiences, with some partners playing key roles in our flagship public awareness campaigns.

Last year we secured 59 new partners who supported us across a wide range of channels and helped us reach over 4.5m people through social media alone.

In 2015/16 we will develop more long term strategic partnerships, with communities and organisations that have a wide digital reach and visibility, engaging content and complementary non-digital activity.

Find out more about partnering with us at [www.nhsbt.nhs.uk](http://www.nhsbt.nhs.uk)

## We have partnerships with:

- DVLA
- Boots
- Transport for London
- Local Councils
- FleshandBlood
- Government websites on gov.uk domain
- Megabus
- The Body Shop
- Women's Institute

## Sharing our message

We run a number of public awareness campaigns every year as well as targeted campaigns focused on specific audiences. We also work closely with newspapers, documentary makers and TV dramas to share some of the inspiring stories around donation – both factual and fictional – as a way of normalising donation and highlighting the importance of donation.



*Celebrities and supporters helped 'Spell out' the need for donors in National Transplant Week, with over 16,500 people responding to the campaign in the first two weeks of July.*



*The 'Greatest Team in the World' theme for 2014's National Blood Week helped to recruit new blood donors.*

## Human Tissue Squad



*A two part BBC documentary about our Tissue Services teams was watched by more than 870,000 people.*

## Going Social

Over recent years we have invested a lot of time and energy in using social media to share our messages. We have one of the largest social media followings of any similar blood or organ donation organisations.

### Teddy's Story



Teddy Houlston is the UK's youngest organ donor. When his family shared his story it prompted an increase in online registrations to the NHS Organ Donor Register of more than 350%.

We use this forum to share stories, answer questions and help our supporters to share their own personal stories and motivations for becoming a donor.

We have over 650,000 followers or supporters active on social media. This has become a powerful way of engaging our advocates to spread further the need for, and benefits of, donation.

Find out more:

[www.blood.co.uk](http://www.blood.co.uk)

[www.organdonation.nhs.uk](http://www.organdonation.nhs.uk)

# 9 | Our values

We live by our values of Caring, Expert and Quality. They are supported by a comprehensive behaviour framework that we use to recruit and develop our people.

## Our values

### Caring

Caring about our donors, their families, our staff and the patients we serve.

### Expert

Being expert in meeting the needs of our customers and partners.

### Quality

Providing quality products, services, and experiences for donors, staff and patients

Caring  
Expert  
Quality

## Our behaviours

Through communicating, collaborating, leading, being customer focused, performing and improving, we consistently deliver our **values**.



## Our Purpose

Demonstrating our **values** every step of the way, to save and improve more lives than ever.



## Our Ambition

Living our **values** every day, to be the best organisation of our type in the world.



Our innovative approach to recruitment, based on our values, has been promoted by NHS Employers and the Health Service Journal as best practice.

Caring | Expert | Quality

# 10 | Finance

The majority of our income is generated from the products and services we provide to hospitals. We receive programme funding from the Department of Health and funding from the Welsh Government, Northern Irish Government and Scottish Government to fund our organ donation activity. We also receive funding from the Department of Health Stem Cell Strategic Forum to aid our work in that area.

Since 2008/09 we have exceeded NHS efficiency requirements and can demonstrate that our prices are some of the lowest in the world against comparable developed economies. In real terms our red cell prices in 2015/16 continue to be significantly lower than 2005/06 despite lower volumes, the impact of inflation and the introduction of new safety measures.

Our headline price for basic red cell units will be reduced from £121.85 in 2014/15 to £120 per unit in 2015/16. This price will be achieved by delivering efficiency savings of 6.1% on our cost base for 2014/15 and includes a mix of productivity improvements, cash releasing consolidations, operational efficiencies and procurement savings.

Our Specialist Services strategies have a common theme of utilising our significant network and capabilities to become established as the preferred national supplier of these services to the NHS. This provides us with the opportunity to generate year on year reductions in unit cost over the medium term, with lower prices to hospitals, whilst improving the overall quality and reliability of the service. In 2015/16 our prices will remain broadly flat, with the exception of RCI, where Reagents will increase by 1.81% and Reference by 3.59%.

ODT funding from the UK Health Departments for 2015/16 is based on the provision of a further £4.2m of non-recurrent funding. This will be used to support the expected increases to activity (£1.7m), with the remainder being used to support prioritised change programme development work to improve processes and systems.

## NHSBT Revenue Statement

NHSBT	2014/15 Budget	2014/15 Actual	2015/16 Plan	2016/17 Plan	2017/18 Plan	2018/19 Plan	2019/20 Plan
	£m	£m	£m	£m	£m	£m	£m
Income – Blood/DTS/Other	352.6	355.3	345.3	345.5	345.5	346.9	350.5
Programme Funding – DH	61.9	61.9	61.9	61.9	61.9	61.9	61.9
Additional subsidy for ODT	4.2	1.7	4.2	–	–	–	–
Income from UK Health Departments (ODT)	10.3	10.3	11.6	11.4	11.4	11.4	11.4
<b>Total Income</b>	<b>428.9</b>	<b>429.2</b>	<b>423.0</b>	<b>418.8</b>	<b>418.8</b>	<b>420.2</b>	<b>423.8</b>

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### **NHS Blood and Transplant**

NHS Blood and Transplant (NHSBT) saves and improves lives by providing a safe, reliable and efficient supply of blood and associated services to the NHS in England and North Wales. We are the organ donor organisation for the UK and are responsible for matching and allocating donated organs. We rely on thousands of members of the public who voluntarily donate their blood, organs, tissues and stem cells.

#### **For more information**

**Visit** [nhsbt.nhs.uk](https://nhsbt.nhs.uk)

**Email** [enquiries@nhsbt.nhs.uk](mailto:enquiries@nhsbt.nhs.uk)

**Call** **0300 123 23 23**

 **NHSbloodandtransplant**  **@NHSBT**