

## **Update on Operating Model** review

November 2019

### **Purpose of today**



- Recap our 5-part approach to reviewing our operating model (originally discussed at May Board)
- Summarise progress since May
- Share next steps

# We have adopted a 5-part approach to reviewing our operating model



### Limit short term change portfolio

- Reduce risk
- Meet regulatory requirements

#### Develop vision and design principles

Articulate ambition & direction of travel

### Optimise operating model

- TOM
- Gap analysis
- Roadmap

### Explore strategic questions

- Risks
- Opportunities
- Choices

- Ensure effective use of resources
- Save and improve more lives

Leadership and Culture

- Build high performing team(s)
- Make NHSBT an even greater place<sub>3</sub>
   to work

# We first reduced our short term change portfolio to free up time and capacity



#### **Critical infrastructure**

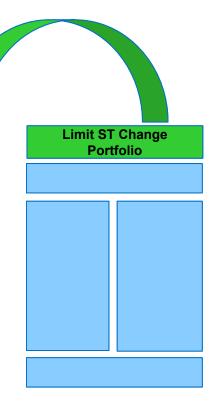
- Hematos Upgrade
- Partner Portal
- Site Servers
- Key Machines
- Telephony
- Workspace Capacity
- Data Centre
- Pre-PULSE Heritage Database

#### WIP / closing soon

- ODT Hub Phase1
- Filton LAN
- NACS Upgrade
- E- Rostering

### End of life procurement

- Aphaeresis platelets
- NAT testing
- Bacterial Risk
- Blood Grouping



#### Strategic and already highly committed

- LRP
- Barnsley
- CBC Filton
- TES Donor Path

- Potential Donor Audit
- Session Solution
- Arm Cleansing
- Organisational Design

#### Regulatory/Safety

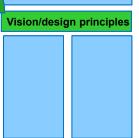
- Microbiology LIMS
- Opt-out
- Medical Devices
- GDPR

# We then engaged staff and stakeholders to help articulate our ambition for the future



Our stakes in the ground: the things we want to keep

- Operational excellence
- Trusted for safety and quality
  - Patient focused



## How we might be described today

- Supplier of components and services
- Reactive
- Bureaucratic/slow
- Limited diversity
- Stand alone ALB
- NHSBT Who?

#### Our ambitions for the future

- Strategic partner
- Proactive
- Modern and agile
- Inclusive
  - 'System' player on the national stage
  - Destination of choice for top talent

### ... and agreed six design principles to inform

Blood and Transplant

our decision making going forward

Improve clinical outcomes, by gearing people, processes and systems around patient needs

Vision/design principles

Reduce duplication to reduce the cost of complexity and to maximise synergies and valuable resources

Enhance agility by clarifying accountabilities and delegating decision making

Improve the experience of donors, colleagues and customers through user-centred design and a focus on diversity and inclusion

Embrace innovation through horizon scanning, investment in R&D, digital and new technology, and a culture of curiosity and learning

Optimise the transfusion and transplantation systems through data insight and working proactively with our NHS colleagues

In parallel, we initiated some 'no regrets'

activity to address key risks and issues (1/2)

	Urgent / ' no regrets' activity	Milestones
Org Structure	<ul> <li>Clarify accountabilities between Marketing and operational units (BD and ODT)</li> </ul>	operating
	<ul> <li>Merge responsibility for Risk and BCP under R. Rackham, reporting to I. Batemar</li> </ul>	■ Complete
Governance and Risk	<ul><li>Undertake governance review</li></ul>	■ Q3 2019-20
	<ul> <li>Introduce strategic risk management</li> </ul>	■ Q4 2019-20
	<ul> <li>Recruit permanent Company Secretary</li> </ul>	<b>Q</b> 4 2019-20
Performance and reporting	<ul> <li>Introduce Quarterly Performance Reviews</li> </ul>	■ Complete
	<ul> <li>Simplify and streamline ODT reporting</li> </ul>	<ul> <li>External review – Complete</li> <li>Alignment of reporting with new strategy – Q1 20-21</li> </ul>
	<ul><li>Strengthen Project and Programme Management (PPM)</li></ul>	<ul> <li>Experienced PD brought in for Session Solution &amp; Data Centre</li> </ul>

In parallel, we initiated some 'no regrets' activity to address key risks and issues (2/2)

### NHS Blood and Transplant

### Urgent /'no regrets' activity

#### Where we are

Optimise operating model

### Donor Engagement

 Review of end to end donor engagement model

- Business case approved by Board and DH
- Planning to start in January

### Technology and Data

- Workspace remediation& data centreupgrades/move
- Workspace processing and storage – Complete Sept'19
  - Data Centres PULSE hardware business case – Nov'19
- Blood Tech Strategy
- Complete Sept'19
- Roadmaps Nov'19

Cyber security improvements

- Capability Build (InfoSec): complete
- Capability Build (Serv. Ops): Dec'19
- Patching & DLP Q3 2019
- Cyber Intelligence & User
   Visualisation: out to tender Q4 2019

### ...and initiated work at all levels to build our Blood and Transplant leadership and strengthen our culture



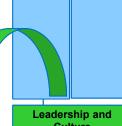
### **Executive Team**

#### **Initial interventions**

- New cadence and style of meetings
- Regular offsites
- 360s and PDPs

#### Additional activity

- Permanent CDIO appointed
- Recruiting the Strategy and Donor Experience Director roles (Q4 2019-20)



Culture

### Wider Leadership Team

- Weekly 'stand ups'
- Regular leadership conferences
- Talent discussions

- Four masterclass booked: first one on systems leadership
- Op model design workshops
- Three ADs on cross-NHS leadership course
- Four middle managers conferences

#### All Staff

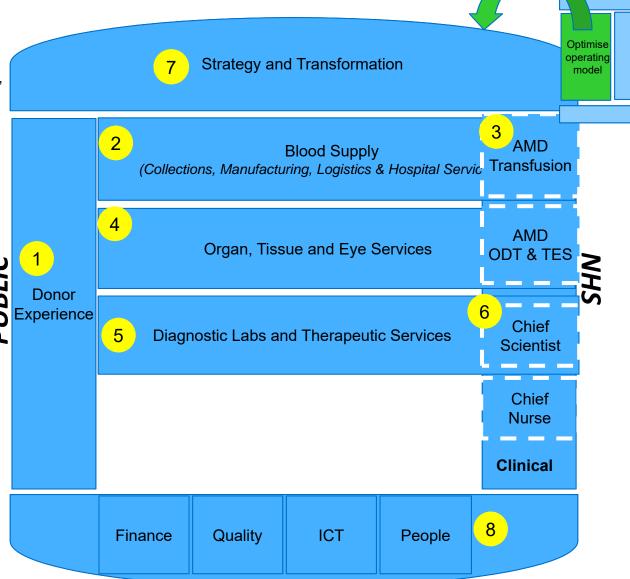
- Let's Talk events
- Yammer conversations
- Freedom to Speak Up Guardian

- Colindale BAME taskforce
- Organisational diagnosis
- 'Proud of our past' campaign

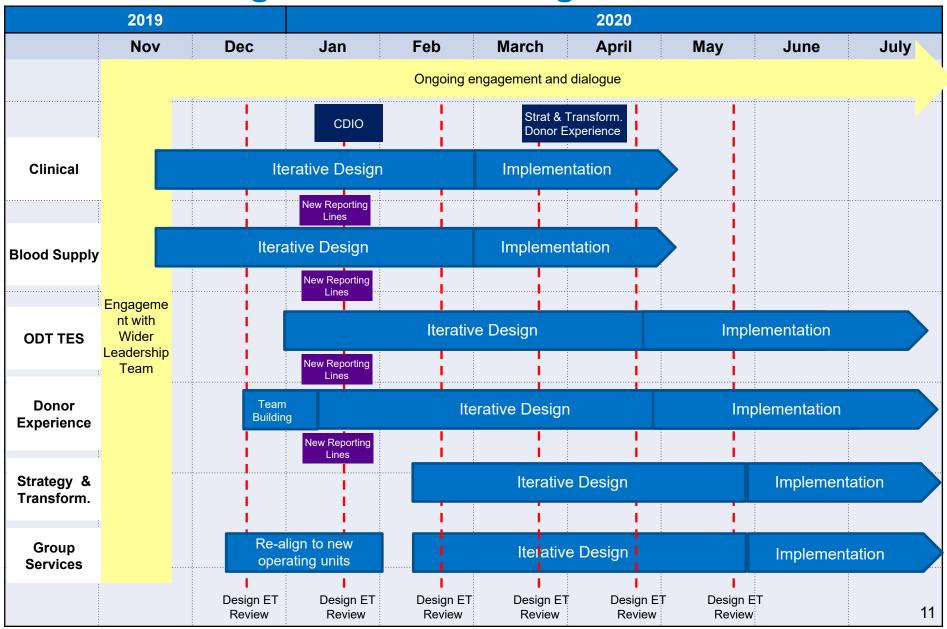
# Our design principles informed our new, high level organisational model

Blood and Transplant

- Single accountability for acquisition, retention and donors' experience
- Clear accountability for the end-toend blood supply chain
- Single clinical lead for transfusion (replicating ODT model)
- Bring together operating units working with deceased donors
- Bring together all diagnostics labs
- 6 Scientific and professional leadership
- 7 Strategic direction and coordination
- 6 Group services to align with new Operating Units



# We have started work with the AD community On the next stage of iterative design



## We will continue to develop & manage this work as an integrated transformation programme



- Careful planning and sequencing of activity, to capture and manage dependencies, risks and issues across workstreams
- Multi-disciplinary change team, including PPM, HR, organisational development and communications
- Ongoing workshops for staff to shape and influence the next phases of design
- Formal consultation with trade unions
- Close alignment with ongoing business and financial planning
- Continued investment in leadership and cultural change