

# NHSBT Cover Note Convalescent Plasma (CP)

24th September 2020

**Status: Official**

## 1. Objectives

NHSBT has been asked to put in place a sustainable operating model whilst scaling up collection capacity of CP during a potential 2nd wave, the aim in Phase 2 is to build in additional capacity to collect up to ~7.5k CP units per week in total with a flexible collection footprint to respond to localised outbreaks.

The Phase 1 requirement was to supply ~4000 units for two clinical trials: Recovery and Remap-Cap, and to scale up collection.

## 2. Progress To-Date

Over 30,000 units of convalescent plasma have been collected, of which circa. 8000 are high titre and 13000 low and medium titre.

Sufficient CP has been collected to support both trials to completion and 560 patients have been randomised to the Recovery and Remap-Cap trials.

NHSBT has built a capacity to collect and supply CP:

- 27 donor centres “live” collecting CP covering all major urban areas in England, including 3 completely new donor centres in London
- 300 donor carers and nurses recruited and trained to collect CP
- 21 people recruited and trained to manufacture, test and dispatch CP
- 100 new call centre staff, with capacity to contact 40k potential donors per week
- In-house testing capacity for antibodies of up 6000 tests/week
- Additional freezer capacity to store CP stock

We have gained valuable insights about the cohort of potential donors who recovered from COVID19, and their level of antibodies. We have changed the collection model to a sample first approach which has reduced collection of units which are negative from 23% to 9% of all units collected. Efficiency has improved by 35%, which will be an important in a second wave.

## 3. Phase 2

Planning has progressed to deliver phase 2 of the CP programme to build a capacity to collect up to 7500 units a week. Management consultancy support has been secured following a competitive tender process and Bain are supporting on programme design and structure.

The key deliverables on the critical path are:

- **Machines**, 100 Sinomed machines have been ordered. The machines have landed in the UK and the first delivery of harnesses is on schedule for delivery before the end of October. Machine validation is progressing to schedule.
- **Venues**, 8 of the targeted 14 venues have been identified. The plan is on schedule to secure and access the venues by the end October.
- **People**, there is a requirement to recruit and train circa 400 additional staff (117 already recruited), largely to staff the new 14 collection clinics. There is also a requirement to recruit for core blood activity. This presents the greatest challenge.

Recruitment is underway utilising a new streamlined recruitment process with Reed. The approach to training is being reviewed and plans are being developed.

#### 4. Donor Experience and Marketing

The Donor Experience team is responsible for filling donation slots with the highest proportion of high and medium titre donors through attracting, converting and retaining our active donor base. The three key areas of focus are:

- **Acquisition:** Primary focus is on acquiring direct contact details of patients who have been tested and hospitalised (140K total leads) but this is not enough to fill slots so we are boosting our recruitment efforts through: hyper targeted PR and paid activity in hot spots and around donor centres; major partnership strategy with NHS, Local Authorities, employers and commercial brands; engagement with blood and organs donors through NHSBT channels, resulting in 170K self-generated leads.
- **Conversion:** We have booked in 17K unique donors (~8% of leads generated); 35-40% of leads do not pass health checks so we are selectively focusing our efforts on converting high and medium titre donors (both active and lapsed) through a significant comms effort dedicated to lapsed donors, improving call centres scripts, and SMS reminders to keep no-show rates down as well as prep phone calls ahead of appointments from last week.
- **Retention:** We are bolstering our retention capabilities, ensuring we get more donors to come back and come back quicker, currently 65% of HT donors re-book for a second appointment with a median delay of 20 days<sup>1</sup>; activities include launching loyalty programmes, encouraging onsite rebooking and extending slot availability.

For the short term (next ~4 weeks), there will be very few new donors coming through our doors due to low levels of infection; this has resulted in a lower number of donation appointments in recent weeks and has allowed us to lend some capacity to whole blood collection without impacting our ability to collect from our active donor base.

We are using this time to prepare for a possible second wave: build a robust retention engine, book media campaigns and build partnerships, ensuring that in a second wave scenario we are filling available slot capacity with the highest quality donors.

Gerry Gogarty

Programme Director

Convalescent Plasma