

**NHSBT Board**  
May 25 2016

**Chief Executive's Board Report**

**1. Status – Public**

**2. Executive Summary**

This paper summarises key communications activity and highlights other issues of performance and risk.

**3. Action Requested**

**The Board is asked to:**

Note the report.

**4. Strategic Communications Activity Since Last Board Meeting**

We launched our Strategic Plan on 10<sup>th</sup> May on [www.nhsbt.nhs.uk](http://www.nhsbt.nhs.uk). The document sets out progress against our strategies and priorities for the year ahead. The plan will be supported by our annual programme of Director Roadshows to engage as many of our people with our priorities and provide an opportunity to answer questions.

International Nurses Day was celebrated around the world on 12<sup>th</sup> May. We recognised the vital contribution our nurses make through a letter to all our nurses from our senior nurses and celebrated it on social media through #NHSBTNurses and #InternationalNursesDay.

Since the last Board we held our annual senior leadership summit to focus our senior leaders on priorities for the year ahead. There was particular emphasis on raising awareness and gaining organisational commitment to transformational change projects, notably Core Systems Modernisation, Organ Donation and Transplantation Hub and our ongoing digital transformation.

**5. Promoting Donation**

**5.1. Toolkit for MPs**

On 11 May I hosted an event in Parliament, sponsored by Stephen Timms MP, to launch a toolkit to help MPs with large black and South Asian communities within their constituencies to encourage their constituents to register as blood and organ donors. Thirteen MPs and Peers attended the event as well as our charity stakeholders ACLT, Sickle Cell Society, UK Thalassaemia Society and Kidney Research UK.

A further 150 MPs were contacted after the event with details of the toolkit and how to use it.

The toolkit ([www.bit.do/MPToolkit](http://www.bit.do/MPToolkit)) contains local statistics, template press releases, example blog posts, social media posts, and ideas for next steps and how to progress this local promotion.

## 5.2. **Blood donation**

### **Virtual blood donation**

We launched a new advertising campaign between 18-22 May to highlight the life-saving power of blood donation and encourage people who have never given blood before to register and donate. The campaign, ran on large interactive billboard screens in Birmingham and London, used innovative augmented reality technology to enable members of the public to give a virtual blood donation via their mobile.

Members of the public could see the impact of blood donation on a patient as they saw a blood bag fill up on screen and the patient get visibly better as a virtual needle into their arm saw blood flow into a bag on the giant advertising screen.

### **Rolling out text messages to donors**

A recent pilot involving text messages to blood donors is now being introduced nationally. We send text messages to donors to tell them which hospital has used their blood. The pilot has received overwhelmingly positive anecdotal feedback to date and the full roll out should be complete in the next month.

### **Digital**

The number of visits to [blood.co.uk](http://blood.co.uk) in April rose by 20.23% year on year. The number of new donor registrations remained strong, seeing a 37.45% year on year increase. The number of visitors completing appointment bookings rose by 38.50% year on year.

## 5.3. **Organ donation**

### **Unveiling of the National Memorial**

We worked with the Donor Family Network to promote the unveiling of the National Memorial. The unveiling received extensive media coverage and carried the message that donation can provide comfort to the family after death.

## **HIV organ donation and transplants**

We worked with the Daily Mirror, Guy's Hospital, The Terrence Higgins Trust and National AIDS Trust on a story about the fact that a small number of organs from deceased donors with HIV have donated their organs to patients with HIV. This resulted in a front page article and double page spread in the paper and triggered media coverage in other national and regional media. These articles made clear this is an exciting area, that transplants in patients with HIV using organs from donors with HIV are now possible and that we are keen that everyone, regardless of their health status, joins the NHS Organ Donor Register.

## **Digital**

Visits to [organdonation.nhs.uk](http://organdonation.nhs.uk) are up nearly 19% year on year, with the site continuing to see an increase in conversion rate of 38% year on year.

### **5.4. Media activity**

In March and April we handled 102 media enquiries about blood, organ and stem cell donation and our work.

## **6. Performance and Management**

### **6.1. Operations**

Overall blood stock levels remain good, but concerns remain about the overuse of universal components. A range of operational measures are in place and we are preparing plans to discuss with the National Commissioning Group the need for dissuasion pricing and other hospital based measures. The detail would be worked up over the latter half of this calendar year with potential implementation in 2016/17.

The pattern of sales in DTS is similar to Q4 of 2015/16 with slightly lower sales in some areas being offset by cost reductions.

ODT finished the year with the highest number of donors ever and April appears to be a much better month than this time last year.

Work on the major transformation projects continues, details of progress for CSM and ODT Hub are elsewhere in the agenda.

The leadership structures are now in place for the combination of the marketing functions for blood and organs and work is continuing to resolve the remaining parts of the structures.

## 6.2. Desktop

We had intended to bring the desktop business case to the board this month but due to a change in approach we need to delay formal submission until July. Reviewing our initial thinking we believe we should take a multi-source approach to the procurement as other options will not give us the length of contract, or speed of delivery we need.

We will not be bringing forward options around buying into an existing contract, or procuring our own managed service (now). Buying into an existing DH contract is technically difficult and the contract will only run for around a year after we go live. Procuring our own managed service contract from scratch would require significant pre-work to define service boundaries and service level agreements. We have informally tested this approach with the market and feedback has been that without a comprehensive specification bidders would introduce a significant risk premium.

We will therefore be bringing a business case based on a 'multi-sourced' approach to deliver a desktop this financial year, to ensure that we are able to run the early releases of the ODT Hub and CSM. The procurement will contain three packages: Hardware; design and security of thin client; technology services and licencing.

We believe this will offer a rapid, cost effective approach to building the desktop. We will then go out to market for a managed service provider to manage the desktop and others services, such as managed print during 2017.

## 7. Activity in the next period

- We will celebrate World Blood Donor Day on 14<sup>th</sup> June
- Our Annual Stakeholder Event takes place on 28<sup>th</sup> June at the King's Fund with the theme 'Saving and Improving Lives Together - Engaging with Black and Asian Communities'
- Continue with procurement of platforms and partners to support CSM and ODT Hub.
- Secure new sites for Bradford and Leicester Donor Centres.