

NHSBT Board Performance Report

April 2021

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QUALITY: Director Report – April 2021

Key risks, issues and actions for attention:

- EU In-Vitro Device Regulations (IVDR) implementation - project status currently rated as 'amber' due to late completion of some tasks.
- Plasma for Medicines (PFM) - risk remains that without the appointment of a fractionator, we are collecting PFM at risk. We are mitigating this by engaging with fractionators (in line with direction from NHSEI/DHSC) and engaging the services of a contract Qualified Person (QP).
- Overdue QMS events remain at high levels. Events are managed to ensure no increased safety risk, but there is an increased risk of a regulatory finding being raised at inspection.

External Inspection Performance:

No external MHRA or HTA inspections performed in April

Upcoming Inspections:

MHRA will visit Barnsley week commencing 7/6/2021 for the first full on-site inspection since going live. Compliance will be assessed against the Blood Safety & Quality Regulations (BSQR)

External Majors
(Target = 0)

Nil ↔

Y-T-D raised = 0

Externally Reported Events:

(Serious Adverse Blood Reaction & Event / Serious Adverse Event & Reaction)

SABRE: Y-T-D = 2

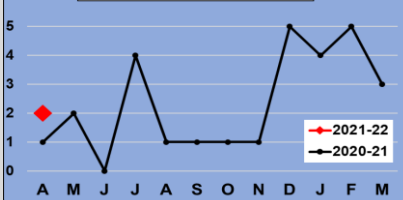
2 events in April

- 1 delayed recall
- 1 wrong product sent

SABRE events
(Target <= 5)

2 ↓

SABRE reports to MHRA



Events being managed, no area of concern

SAEAR: Y-T-D = 8

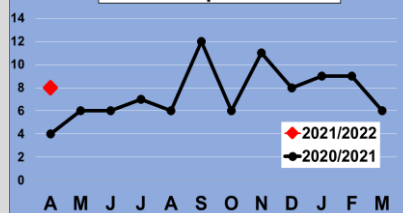
8 events in April

- 4 bacteriology positive
- 2 primary graft failure
- 1 patient adverse event
- 1 death before engraftment

SAEARs events
(Target TBA)

8 ↑

SAEAR reports to HTA

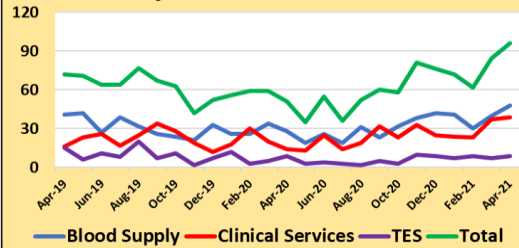


Events being managed, no area of concern

Major Adverse Events:

- There was an increase in Major adverse events (Quality Incidents and/or Complaints) raised this month in both Blood Supply and Clinical Services. Events were higher in BD-M&L (5 Majors linked to labelling errors) and CS – patient facing medical (no trend observed).

Major Adverse Event Trends



Regulatory Radar:

- **EU In-Vitro Device Regulations (IVDR)** - The project to ensure IVDs manufactured for the EU/NI market by NHSBT are compliant with the EU IVDR by the May 2022 deadline has had some delay to timelines due to the impact of Covid-19 and the complexity of the regulatory changes across different markets with overlapping implementation timelines. The project team are working to get the project back on track. **Currently rated** Amber

Licence Update:

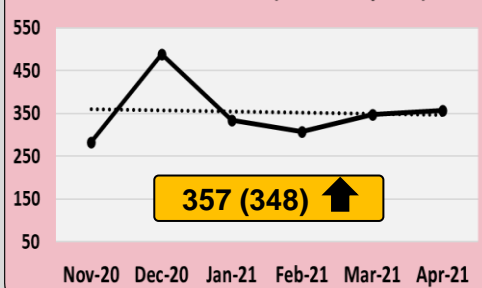
Wholesale Distribution Authorisation (WDA) - Leeds and Sheffield sites removed.

Overdue Quality Management System (QMS) Event Performance:

- Overdue QMS events **rose** very slightly in April for the 2nd consecutive month.
- There was an increase in audit findings, change controls and QIs overdue in several functions.

No individual department of concern but total numbers continue to remain at elevated levels.

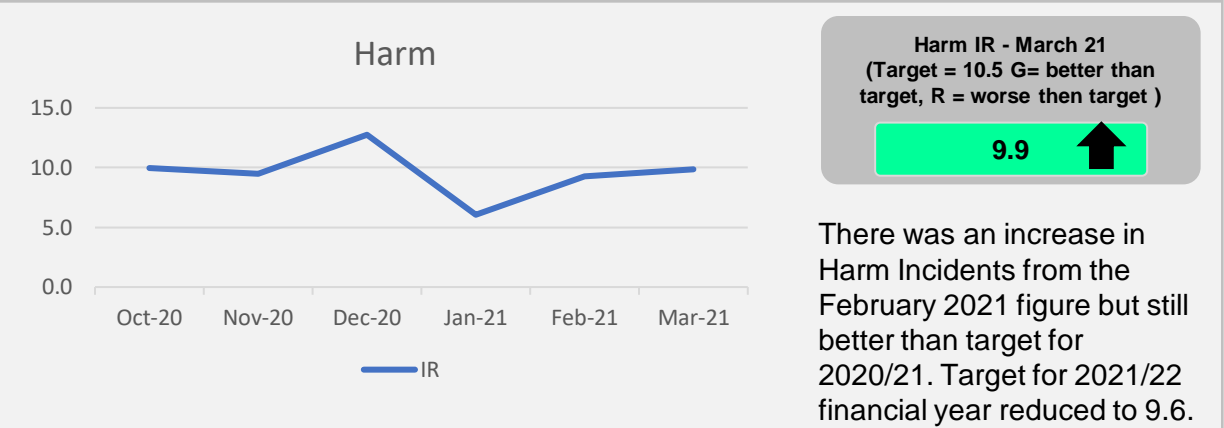
Overdue Event Trend (Nov 20-Apr 21)



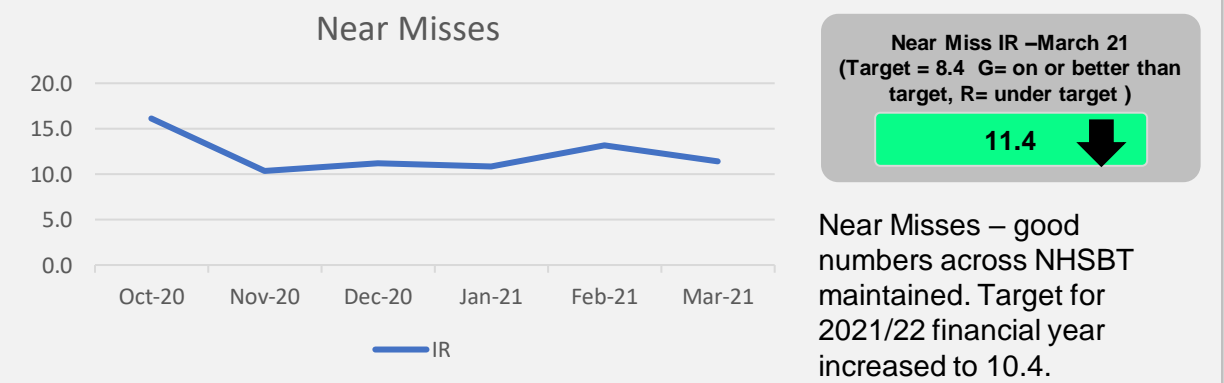
PEOPLE SERVICES: Health Safety & Wellbeing Director Report – April 2021

Key risks, issues and actions for attention:

- Following feedback received the metrics in the report are being reviewed – updates/changes will be incorporated into future reports
- Consultation on the first phase of the new People Operating Model launched on 5 May 2021. Consultation is expected to last in to June 2021.
- The health and wellbeing survey was launched and the results are awaited.

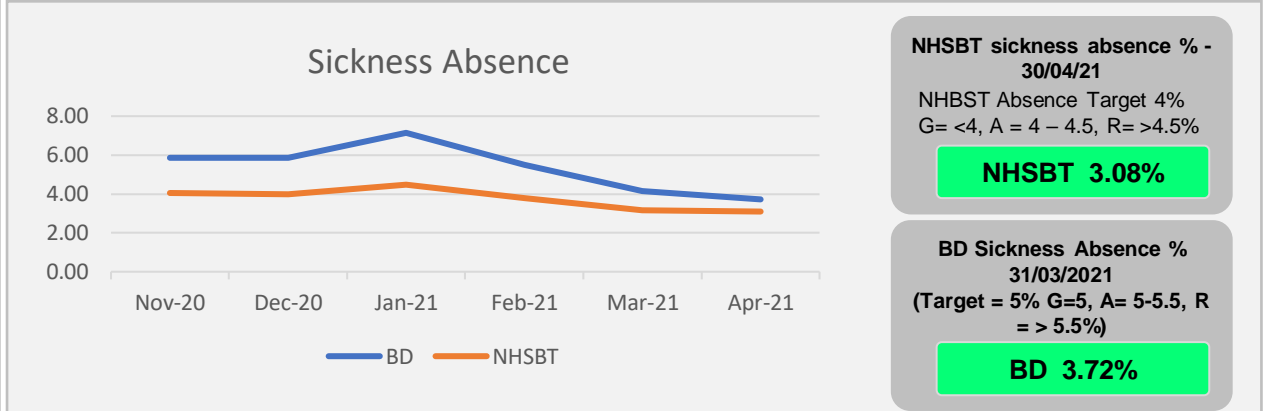


Harm is an unplanned event which resulted in injury or ill health to a person and/or property damage. Incidence rate for accidents and near misses is monthly number divided by total number of staff x by 1000

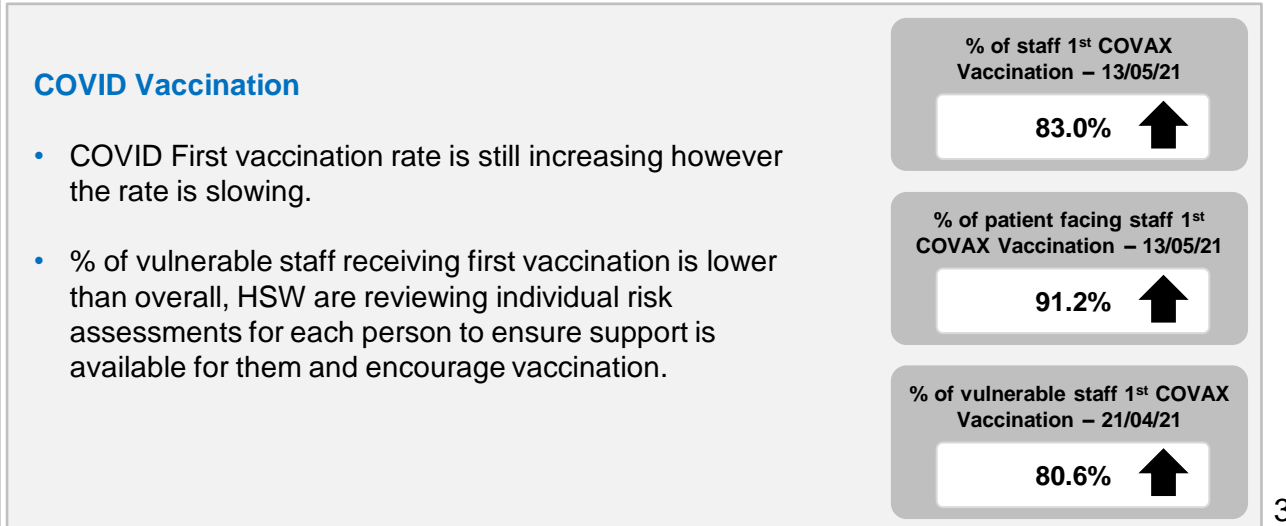


Near miss is an unplanned event which could have resulted in injury or ill health to a person and/or property damage, but was avoided by good luck.

Reminder: H&S Reported in arrears



- Sickness Absence continues to be monitored at a directorate level. No significant impact on operational delivery from sickness absence.
- Sickness Absence targets were set at 5% for Blood Donation (Pre pandemic)
- Definition sickness absence is % of absence related to sickness of total of number of employees



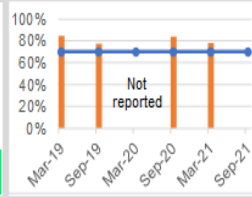
CLINICAL SERVICES: Voice of the Customer: Director Report – April 2021

Voice of the Customer: Hospital Customer Satisfaction Survey

- The survey reflects the views of hospital transfusion laboratory managers at 126 (50%) directly supplied hospitals in England for the period October 2020 to March 2021
- Results are reported as percentage of customers scoring a “Top Box” score of 9 or 10 out of 10 and the average scores from all responses
- Satisfaction with NHSBT Overall is high at 83%; the average score of 9.2 continues the upward trend
- Barnsley hospitals very engaged with 78% responding to the survey and overall satisfied / very satisfied; reassuring given initial customer concerns over the relocation

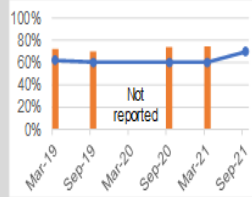
Blood Hospital Services Satisfaction

78%



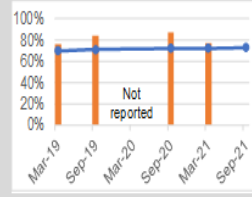
RCI Hospital Satisfaction

75%



H&I Hospital Satisfaction

77%



Blood Supply

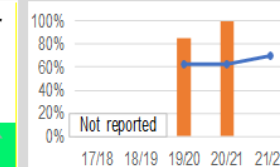
- The relationship between Hospital Services and our hospital customers is working well with positive comments relating to courtesy and helpfulness; **Hospital Services** scored 78% above target of 70%
- Three from four fulfilment Top Box scores reduced, however, strong average scores (9.2 to 9.4) have been maintained, indicating continued high levels of satisfaction
- The online blood ordering system continues to be well regarded with suggestions to enhance it further
- Our overall score for **routine delivery** improved to 74% from 58% since 2019, attributed to the successful routine delivery utilisation project
- Customers continue to show preference for NHSBT drivers (88%) over couriers (48%); this may be due to familiarity with our drivers

Clinical Services

- RCI** customers scored 75% for overall satisfaction; above target 60%; target increased to 70% in 21/22
- There is a notable appetite for electronic requesting / reporting direct to LIMS
- H&I** customers scored 77% for overall satisfaction; above target 72%
- Hospital Customer Services Team** scored 89%; a continued upward trend; team recognised for being helpful, knowledgeable, supportive
- Clinical Support Team** hit a new high of 87%; also a continued positive trend
- In addition, **TAS** conduct their own satisfaction surveys for customers and patients
- The latest survey outcomes reported for 2020/21 include patient experience at 97% (up from 92% last year) and customer satisfaction at 89% (up from 83% in 19/20)
- In **CMT** the 20/21 survey scored 100% for customers scoring $\geq 9/10$ for satisfaction, albeit from a low number of customer returns (8)

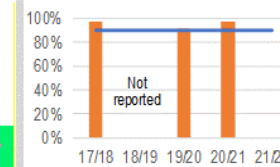
CMT Customer Satisfaction

100%



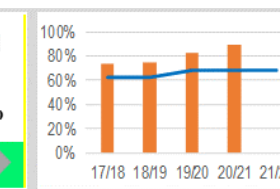
TAS Patient Experience

97%



TAS Hospital Satisfaction

89%

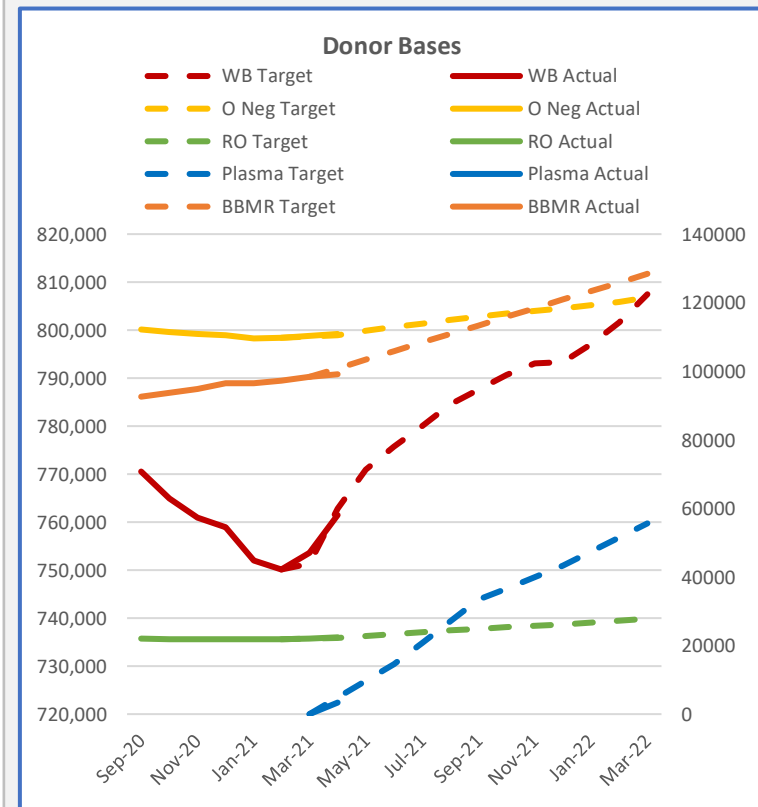


DONOR EXPERIENCE: Director Report – April 2021

Key: — Current performance - - - - - FY22 target

Key Headlines, risks and mitigations

- All WB Blood donorbases have started to grow following the falls of 2020 caused by the pandemic, the increase in April was driven by an increase in retention. The recruitment of new donors dropped in April due to a drop in paid media spend. There was also a drop in donors returning after lapsing. Once marketing budgets are agreed with Cabinet Office and media spend increases it is likely that higher levels of new donors will help maintain the current trend of growth on the donorbase.
- The levels of people Opting In on the ODR has increased in April, as a large part of this is driven by partners like DVLA it is less impacted by any delays in marketing budgets being agreed. Opt outs have remained flat in April
- There was an increase in Donor Satisfaction and a decrease in Complaints from Blood Donors in April



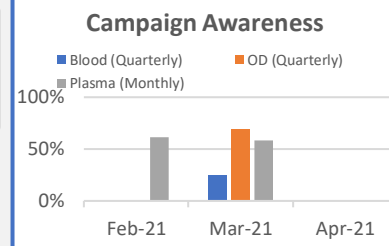
WB 12M Donor Base
(FY22 Target = 807k
April 21 Target = 763k)
761k

O neg Donor Base
(FY22 Target = 121k
April 21 Target = 110k)
110k

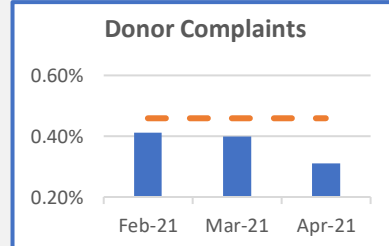
Ro Donor Base
(FY22 Target = 28k
April Target = 22k)
22k

Plasma Donor Base
(FY 22 Target = 55k TBC
Jun 21 Target = 15k)
3.4k

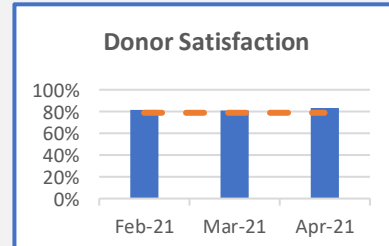
BBMR Donors
(FY22 Target: = 130,000 tbc
April 21 Target = 101k)
99k



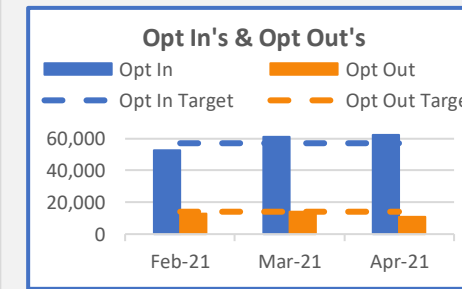
% Plasma Awareness (FY22 Target TBC)
58%



% Donor Complaints (FY22 Target 0.46%)
0.31%



Donor Satisfaction (FY22 Target 79%)
84%



Organ Donation Opt In's (Target 57k)
62k

Organ Donation Opt Out's (Target 17k)
10k

Delivering the Volume of Donor

- The donorbase has stabilised and started to rise following the falls of 2020. Currently the donorbase is just below the monthly target mainly due to lower levels of New donors following planned reductions in collection and removal of over 9,000 bookable slots to reduce stock levels. Additionally, Marketing budgets have not yet been finalised with cabinet office

Delivering the Mix of Donors

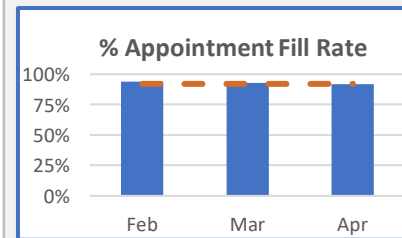
- The O negative and RO donorbases have continued to grow steadily and are currently on track for the YTD targets

Improving our donors' experience

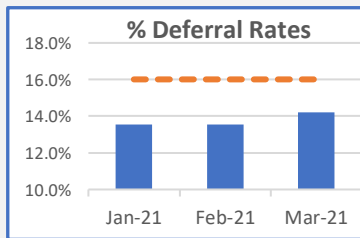
- Donor Satisfaction is above target for April and has increased from March to 84%. Complaints also fell in April
- WB online booking rate remains consistent at 76%
- Deferral Rates have increased slightly in April but still below the 16% target

Building a plasma base for the future

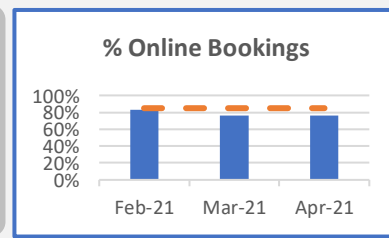
- The plasma for medicine donorbase is currently very small but is expected to grow as the programme develops
- Plasma awareness tracking is due to go live in May subject to budget agreement for Cabinet Office



% Fill Rates (FY22 Target= 95% Apr 21= Target 92%)
92%



% On-Session Deferral (FY22 Target 16%)
14%



% Online WB Bookings (FY22 Target 85%)
76%

RAG: Above Target, Within 2% of Target, More than 2% Below Target

BLOOD SUPPLY: Director Report – April 2021

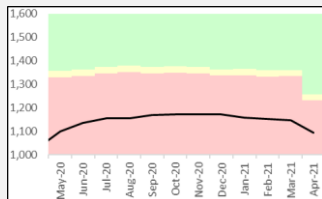
Key risks, issues and actions for attention:

- Demand for blood components has recently increased and may continue to be more variable than usual as hospitals restore services and catch-up on postponed activity. Stocks are currently healthy and the collection forecast is strong, which will mitigate against any significant changes in hospital ordering.

Productivity

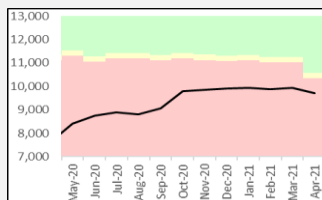
Collection Productivity
YTD Target = 1,256

1,094 ↓



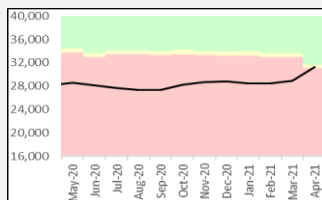
Processing Productivity
YTD Target = 10,564

9,707 ↓



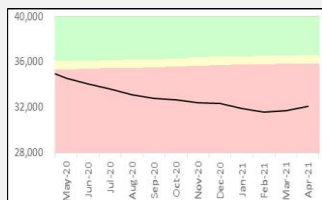
Testing Productivity
YTD Target = 31,692

31,212 ↑



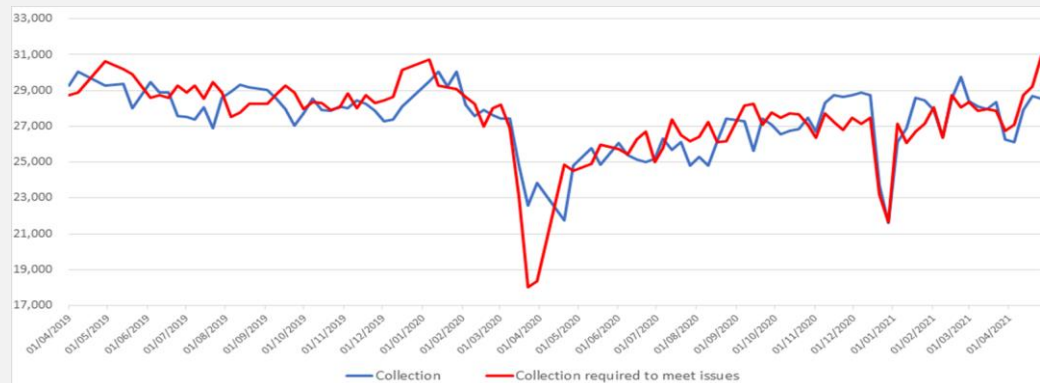
Hospital Services Productivity
YTD Target = 36,703

32,952 ↑



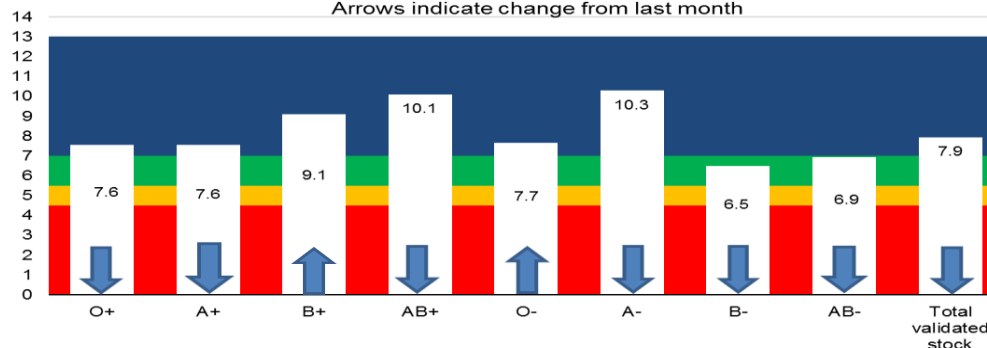
Productivity remains below target, primarily due to the impact of COVID-19 (less activity and more staff to cover absence and impact of social distancing). Activity is forecast to increase as hospitals further restore services and catch-up on postponed activity. Fixed term contracts can also be reviewed in year, as required.

Collection Performance and Stock



Average Days of Red Cell Stock - April 2021

Arrows indicate change from last month



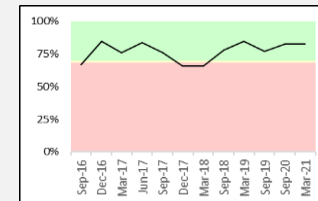
Red cell demand increased during April 2021, as hospitals have restored services and re-planned postponed activity. Collections have broadly kept pace with these higher levels of demand.

We planned to enter May with stocks above target levels, anticipating that stocks will return to target levels during May due to a combination of higher demand and temporarily lower levels of collections to enable training for blood collection teams ahead of changes to the donor selection criteria following 'For the Assessment of Individualised Risk' (FAIR) recommendations.

Service

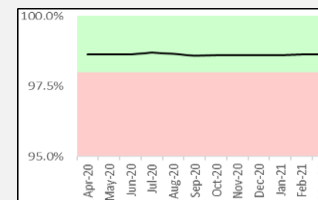
Overall Hospital Satisfaction
YTD Target = 70%

83% ↑



OTIF Excl. Ro Fails
YTD Target = 98%

98.8% ↑



Record levels of OTIF performance sustained throughout the pandemic.

CLINICAL SERVICES: Director Report – April 2021

Key risks, issues and actions for attention:

- Demand for Clinical Services products/services has improved during April across most operational areas as we continue to emerge from the second wave of the pandemic
- Ongoing issues relating to consumables supply, driven by suppliers supporting the pandemic vaccine roll out, continue to be managed on a week-by-week basis

Stem Cells and Therapeutics

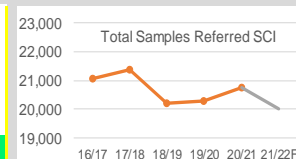
- **Cellular and Molecular Therapies (CMT)** routine service income 3% above plan due to cryopreserving allografts activity
- The number of stem cell transplants supported was just above target in April (145 v 142)
- Clinical Biotechnology Centre income forecast to plan
- CBC consumable supply issues ongoing with key items used for Covid vaccine production
- **Stem Cell Donation and Transplantation (SCDT)** cord blood issues were one unit above plan this month
- British Bone Marrow Registry (BBMR) donor to patient matches below target by two units
- Driven by lower transplant activity due to the pandemic
- BBMR exports impacted by US policy
- US considering domestic matches first to avoid logistical challenges and reduce risk to patients

Therapeutic Apheresis Services (TAS)

- TAS overall activity above plan by ca 20% in April driven by increased Plasma Exchange activity across multiple units
- Nursing workforce issues in London are now resolving with a number of new starters coming into post

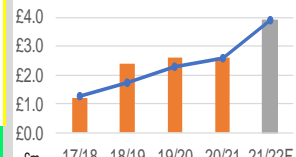
SCI Service Income YTD
Target =
£0.87m

£0.90m ↔

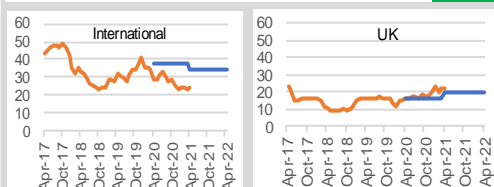


CBC Sales Income YTD
Target **£0.01m**

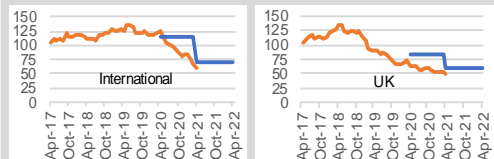
£0.01m ↔



SCDT Cord Blood Issues YTD Plan = 4 5 ↑

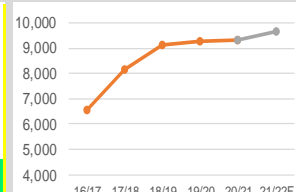


SCDT BBMR Matches YTD Plan = 7 5 ↔



TAS Total Procedures YTD Target
679

813 ↔

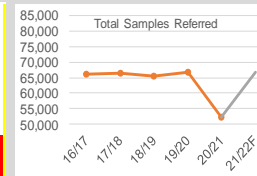


Pathology Services

- **Histocompatibility and Immunogenetics (H&I)** income 5% down on plan in April
- Income 140% above April 2020, with activity closer to pre-pandemic levels
- Sample turnaround times remain better than plan
- Supplier issues continue to be managed affecting test kits and plasticware
- **Red Cell Immunohaematology (RCI)** activity above plan in-month
- Pre-transfusion patient sample referrals up 63% on last years pandemic hit April
- Sample turnaround times remain better than plan
- **International Blood Group Reference Laboratory (IBGRL)** sample turnaround times above target for all services
- Ongoing consumable supplier issues being managed

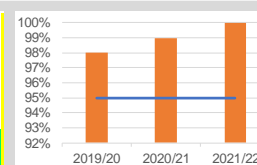
H&I Income YTD Target =
£1.10m

£1.04m ↔



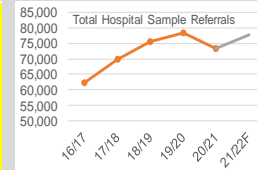
H&I Sample Turnaround Time Target =
95%

100% ↔



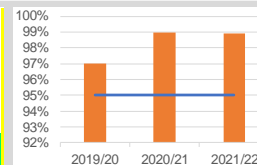
RCI Income YTD Target =
£1.51m

£1.56m ↔



RCI Sample Turnaround Time Target =
95%

99% ↔



IBGRL Fetal RhD Sample Turnaround Target 98%

100% ↔

IBGRL Patient Genotype Sample Turnaround Target 85%

98% ↔

Note: blue lines on the charts = target; orange bars / lines = Annual Total / MAT; grey bars / lines = forecast

OTDT: Director Report – April 2021

Key risks, issues and actions for attention:

- In support of the NHS system's recovery, we have set the challenge of exceeding our best-ever performance during 2021/22. Organ donation and transplantation targets are phased this year to better track our progress out of the pandemic. Based on April data, we remain cautiously optimistic about the recovery at this early stage.
- We are seeing increased demand for key tissue and eye products, but also a growing organ transplant list. Consent / authorisation rates, deceased donors and deceased donor transplants were short of our ambitious targets for April – but are trending upwards on a "Moving Annual Total" basis. Living donation is being gradually re-established by NHS partners.
- We are continuing to focus operational teams on the core drivers of more transplants, including deceased donation consent /authorisation rates and identifying more eye donors.

Serious Incidents
(Target 0)

1



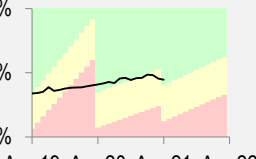
Apr-19 Apr-20 Apr-21 Apr-22

Serious Incidents (SIs) related to OTDT

- 1 SI: Corneal Retrieval and Coronial Consent
- We continue to closely monitor and learn from reported incidents.

Consent/Authorisation
(Target 74%)

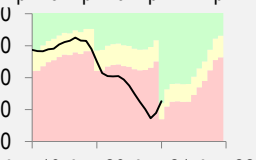
67%



Apr-19 Apr-20 Apr-21 Apr-22

Deceased Donors
(Target 127)

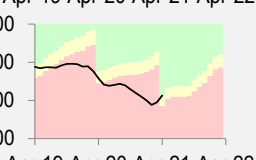
113



Apr-19 Apr-20 Apr-21 Apr-22

Deceased Transplants
(Target 321)

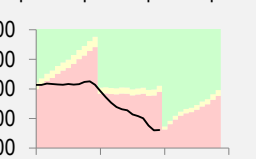
279



Apr-19 Apr-20 Apr-21 Apr-22

Living Transplants
month in arrears

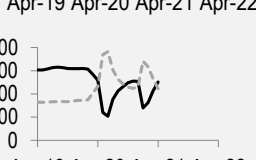
45



Apr-19 Apr-20 Apr-21 Apr-22

Active Transplant List

5,031



Apr-19 Apr-20 Apr-21 Apr-22

— Active --- Suspended

Organs Donation

Key measures trended down in-month (Amber & Red) while trending up on a *Moving Annual Total* basis:

- Referral and SN-OD presence strong, with family refusals in complex cases being the driver of a lower consent rate in-month.
- MAT consent / authorisation rate of 69% remains on-target.
- Ongoing and new COVID-19 protocols still impeding some possible donations / transplants.
- 1,252 deceased donors MAT (Green).

Transplants

Due to above, key Transplant measures trended down in-month (Red), though trending up MAT:

- 3,128 deceased donor transplants MAT (Green).
- 444 living donor transplants MAT (Red).

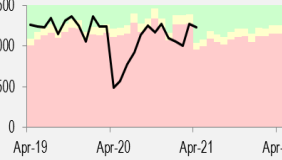
Trending up in-month (March) and up MAT.

Transplant List

- Further increase in active Transplant List, with an expectation that re-activations will continue.
- There are now more patients on the active Transplant List than those suspended – for the first time since summer 2020. Driven by the end of shielding and Transplant Centres re-opening.

TES - Income
(Target = 1,063k)

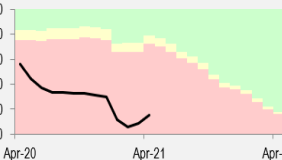
£1,292k



Apr-19 Apr-20 Apr-21 Apr-22

TES - Contribution
(Target = 4,017k)

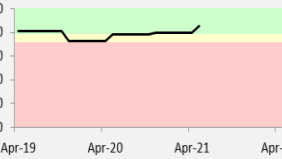
TBC



Apr-20 Apr-21 Apr-22

Customer Satisfaction
(Target = 80%)

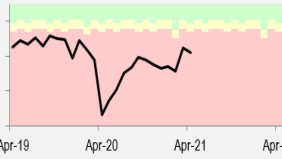
85%



Apr-19 Apr-20 Apr-21 Apr-22

Cornea Donors
(Target = 300)

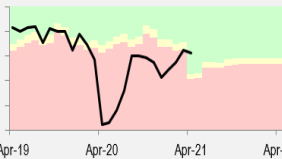
210



Apr-19 Apr-20 Apr-21 Apr-22

Cornea Issues for Transplant
(Target = 231)

312



Apr-19 Apr-20 Apr-21 Apr-22

Tissues and Eyes Donation

- Ocular donations in April 2021 were down slightly from March.
- Because issues for transplant increased above target, we are monitoring stock closely.
- We are also continuing to focus on increasing ocular donations further through Level 1 Organ-Donating Hospitals.
- Data capture for audit of ocular consent from organ donors has been completed by operational leads. Quality assurance will be complete by the end of May.

Sales

- TES income for April 2021 is £165k ahead of target (subject to confirmation).
- Elective surgery restarted in March, with a large backlog to address.
- Hospitals reported that their elective capacity was c.70% in April; increase to 100% anticipated towards mid Q2.

Key notes

Metric boxes: YTD targets. RAG for YTD position. Arrow indicates month-on-month trend.

Charts: ODT- Activity against MAT targets. TES- YTD Actuals against target. (ODT&TES G≥98%, A<98%, R<90%)

Transplant List: Does not accurately reflect the need for an organ transplant due to the pandemic. Different practices established across the UK and organ groups with regards to list management.

PEOPLE SERVICES: Director Report – April 2021

Recruitment

- Time taken to recruit has improved this
- Month from 12.36 weeks to 9.99 weeks.
- Successful vacancies filled remained stable at 93% over this month.
- Turnover remains at 11.5%. This is now the 10th month that this figure has remained stable at close to 11.5%.
- In April there were 62 new starters with 19 colleagues being from an ethnic minority background. With 56 leavers, of which 10 were from an ethnic minority, this represents a Net Increase of 9 new ethnic minority colleagues. In Band 8 there were 7 leavers with 1 colleague from an ethnic minority leaving. 2 new Band 8 starters commenced with no new starters from an ethnic minority– a Net decrease of 1.

Ethnic Minority staff +/- net for all staff (Band 8a plus in brackets)

+9 (-1)

Ethnic Minority as % of new starters (8A & Above in bracket)

30% (0%)

Time to Recruit –Req to Start (G= <14, A= >14, <15, R= >15)

9.99

No of vacancies filled (G= >90, A = <90, >75, R= <75%)

93.43

Turnover G= <12, A = 13-20, R = >20%

11.57%

Leadership and Learning

- PDPR target performance has increased from 83% to 85%.
- Mandatory Training target has remained stationary at 91%
- 59 attended leadership programmes, 23 in Inclusive Leadership, 22 in ELM and 14 in the ALM

Course	Ethnic Minority	%	White	%	Not Stated	%	Total
Advanced Line Manager	3	21%	11	79%	0	0%	14
Effective Line Manager:	3	14%	18	82%	1	5%	22
The Inclusive Leader	5	22%	15	65%	3	13%	23
Total Delegates (March)	1	19%	44	75%	4	7%	59

No. accessing leadership programmes

50

PDPR Compliance (G= >95, A= >80, <95, R= <80)

85%

MT Compliance (G = >95, A=>80, <90 R= <80%)

91%

NHSBT Engagement Score (n out of 10)

7.8

Case Resolution

- Live cases at month end is 25 cases.
- 20 out of 25 cases are on track within the 90-day SLA
- 5 cases are over-running against the SLA. 1 in Donor Exp, 1 in Group and 3 in Blood Supply - Blood Donation.
- 3 of the over-running cases are Dignity at Work cases registered with 2 external consultants, all of which are associated with the same BD team and 1 DAW in Donor Experience which is registered with external consultant complex case unit support.
- 9 new cases in April 2021 = 5 Disciplinary, 3 Grievance, 0 Dignity at Work, 0 Capability, 1 Probation.
- 3 Ethnic Minority, 0 Disability and 0 LGBT+ protected characteristic considerations are registered for new April cases.
- 7 cases closed in April with an average case time-line of 69 calendar days.

No. of new cases last period (last month in bracket)

9 (13)

No. of closed cases last period (G = 80%+, A = 70-80%, R= less than 70%)

7 (86%)

No. of live cases month end

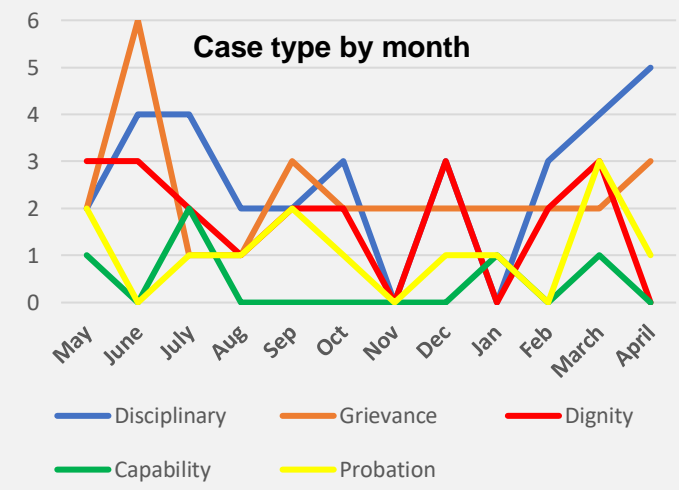
20

Current live cases within SLA (G= 80% plus, A = 70-80%, R= less than 70%)

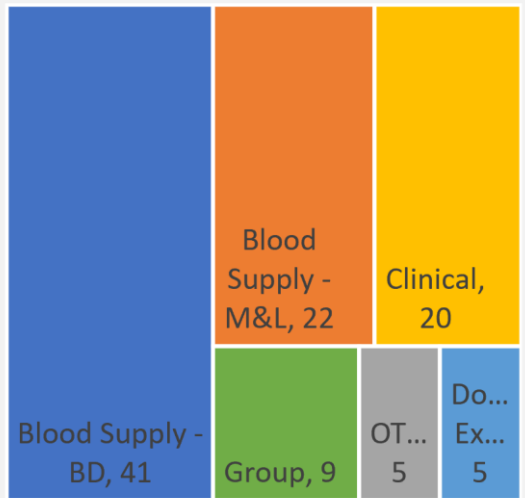
25 (80%)

Protected Characteristics Live Cases month end

Ethnic Minority 7 (28%) **Disability 1 (11%)** **LGBT+ 0 (0%)**



Case distribution April 20- April 21



DIGITAL, DATA AND TECHNOLOGY SERVICES: Director Report – April 2021

Key DDTS Updates and Risks

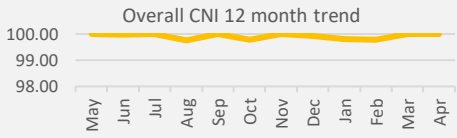
- System availability for April was on target across Critical National Infrastructure and Key Hospital Systems but we did experience an issue on our corporate websites
- The Session Solution pilot has been extended across more sites as we work to fix a small technical issue, feedback from staff has been very positive and we are confident the issue will be resolved enabling full deployment.
- Releases this month include improvements to the Organ Donation Registration journey to improve data integrity and the capture of protected characteristics, extending access to Sp-ICE to the Welsh Blood Service to enable them to access patient reports at the point of care and improvements to the Session Solution application following pilot feedback and testing.
- The ABO CIO Working Group have produced an overview of the digital landscape across our services and agreed to collaborate further on cyber and decision support automation and personalisation through better use of data.

Key Systems Availability

Critical National Infrastructure (CNI)

Overall CNI Availability

100%



Pulse
(Target = 99.95%)

100%

Hematos
(Target = 99.95%)

100%

National Transplant
Database (NTxD)
(Target = 99.95%)

100%

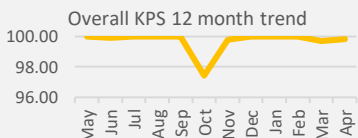
Organ Donor Register
(ODR)
(Target = 99.95%)

100%

Key Public Systems (KPS)

Overall KPS Availability

99.84%



Donor Portal
(Target = 99.90%)

100%

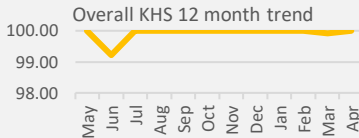
Corporate Websites
(Target = 99.00)

99.67%

Key Hospital Systems (KHS)

Overall KHS Availability

100%



Transport Mgt
(Target = 99.70%)

100%

Online Blood Ordering
System (OBOS)
(Target = 99.90%)

100%

SO99
(Target = 99.90%)

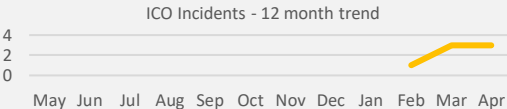
100%

- **Critical National Infrastructure** and **Key Hospital Systems** all met service targets in reporting period
- **Key Public Systems** - Donor Portal met service targets but we did experience a loss of access to Blood.co.uk for a period of 142 minutes. The root cause of the problem has been identified and resolved with further work ongoing to avoid a recurrence of the problem.

Cyber and Information Governance

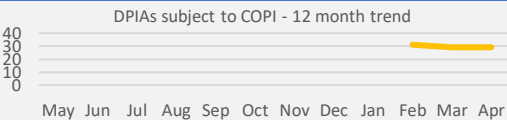
ICO Incidents (Target =<5)

3



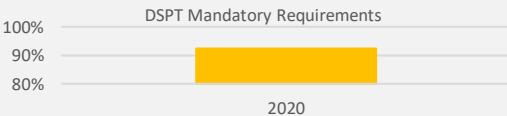
DPIAs subject to COPI

29



DSPT Mandatory Requirements (G = 100%; A = >90%; R = <90%)

92.45%



- **ICO Incidents:** Reportable Information Commissioner's Office (ICO) incidents from May 2020 until April 2021: there have been three reportable incidents; one had been closed with the ICO but the requestor has subsequently asked for it to be re-opened. This is being actively managed by the Information Governance team in conjunction with the relevant affected Directorate. The other two are on-going but being managed within expected SLAs. This metric is amber due to the long-running nature of one of the ICO incidents.
- **DPIA's subject to COPI:** The Data Protection Impact Assessments (DPIA) subject to Control of Patient Information (COPI): 29 data flows that are reliant upon the COPI notice. A master DPIA for the NHS Digital set (that underpins a majority of the COPI notices data flows) has been drafted and is going through sign-off. This will expedite the completion of the remaining COPI orientated DPIAs
- **DSPT Mandatory Requirements:** Data Security and Protection Toolkit Performance 2020 is 92.45%. Work on collating the 2021 DSPT submission is currently underway. Preliminary analysis indicates an improved position from the 2020 submission.