

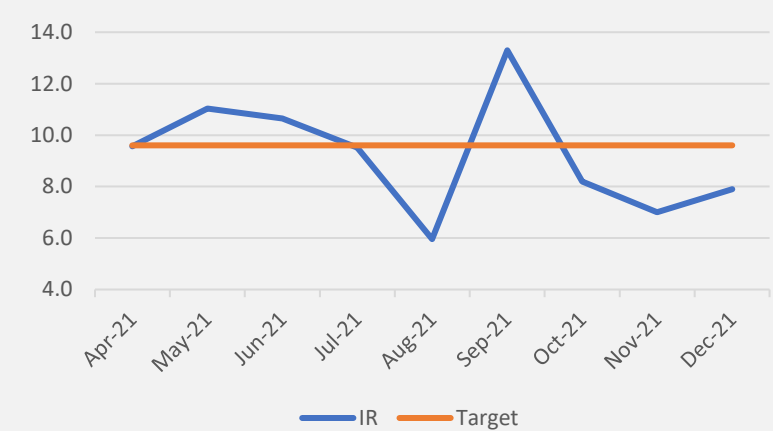
# NHSBT Board Performance Report

## December 2021

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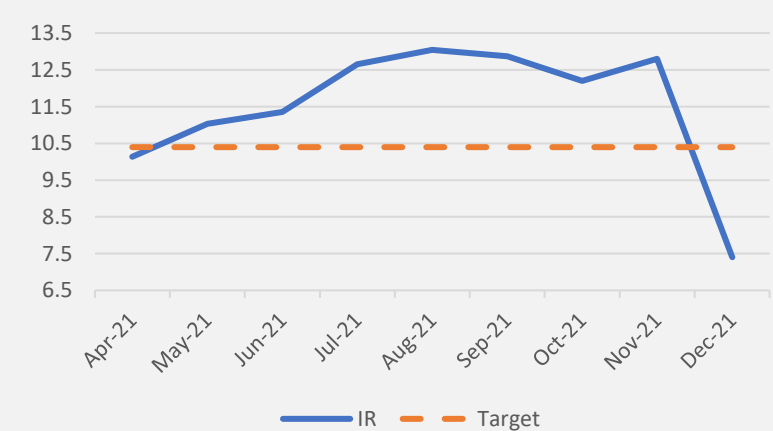
# HEALTH, SAFETY & WELL-BEING: Director Report – December 2021

## Harm Accident Incidence Rate



Harm is an unplanned event which resulted in injury 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 Incidence Rate



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

N.B. Figures may change due to late reporting

Harm IR – Dec 21  
(Target = 9.6 G= better than target, R = worse then target )



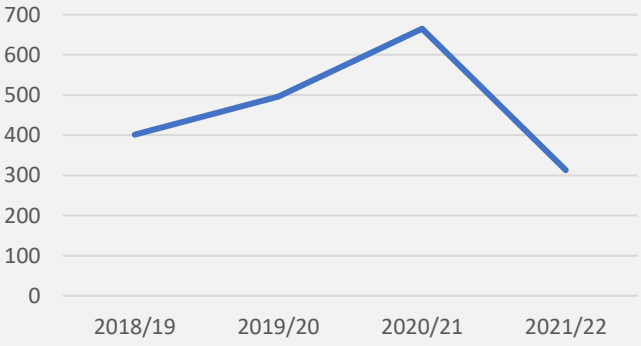
The Harm incidence rate has decreased in the last 3 months and better than target. Good performance in Blood Supply. TES levels have achieved target for November and December after management intervention in October.

Near Miss IR Dec 21  
(Target = 10.4 G= on or better than target, R= under target )



Reviewing the reason for the large drop off on near miss reporting this month, with possible affect of holiday season..

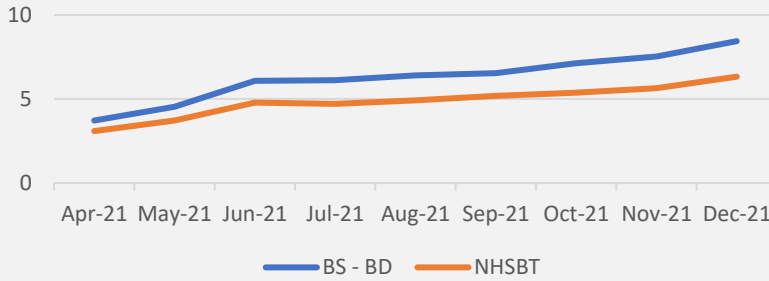
## Incidence Rate – over 3 day absence per 100.000 colleagues



The lost time incidence rate has decreased for the 12 months to December 2021 with 20 against 42 for 2020/21

## Sickness Absence

NHBSST Absence Target 4% G= <4, A = 4 – 4.5, R= >4.5%



NHBSST sickness absence % - 31/12/21



BD Sickness Absence % 31/12/21  
(Target = 5% G=5, A= 5-5.5, R = > 5.5%)



BD Covid - Sickness Absence and self-isolating % 31/12/21



NHBSST Covid - sickness absence and self-isolating % - 31/12/21



**Blood Supply** - Overall absence in Blood Supply is closely monitored on a weekly basis and there are early signs that the upward spiralling for absence seen over the festive period, appears to be stabilising. Further in depth analysis of Sickness Absence using Quad 4 takes place at to maximise our on-going interventions

**Clinical Services** - Absence is being monitored at operational SMTs and any hot spots are being investigated to determine if intervention is required

**OTDT** - All organ donation teams have experienced staff shortages however through cross cover the rotas have been maintained. NORS teams have been impacted due to COVID related absence and again through cross cover activity has been maintained. In TES the NRC and Retrieval teams have been impacted which led to some donors not proceeding. The OD PDS team is supporting the NRC.

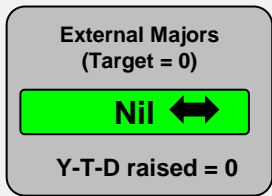
# QUALITY DIRECTORATE: Director Report – December 2021

## Key risks, issues and actions for attention:

- December saw a drop in the overall number of Major adverse events. However, the number of SABRE reports submitted to the MHRA exceeded the target for the first time this year. One of the incidents related to incomplete donor records, which was also the subject of a SABRE report submitted in November. All of the SABRE reports are being reviewed to look for possible trends in causes.
- Another Serious Incident was raised this month and reported as a SAEAR.

**External Inspection Performance:** Awaiting reports from JACIE and EFI.  
**MHRA:** Southampton & Poole – 3 Others; Filton – 11 Others & 3 Comments.  
**HTA:** Southampton, Birmingham & Oxford – 5 Others & 6 Comments.

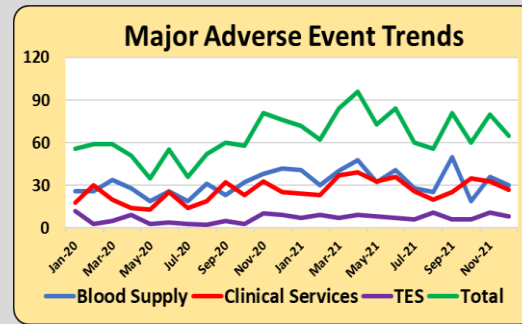
**Upcoming Inspections:**  
**MHRA** BEA inspection of Liverpool – 28 Feb-3 Mar.



**Serious Incidents (SIs): Y-T-D = 6**  
**One raised in December** – Relates to a cornea which was used for teaching surgeons without appropriate consent.

### Major Adverse Events:

- There was an **overall decrease** in Major adverse events (Quality Incidents and Complaints) this month with all three operational directorates showing a decrease.



### Regulatory Radar:

- EU Medical Devices regulations** – Multiple project activities are progressing well. The Project plan is being re-baselined and is due to be finalised by end January.
- GXP Data Integrity Guide** – 21 CoreStream DI assessments reported as underway in Clinical Services. Meetings scheduled for roll out of the DI Assessment tool in Blood Supply.
- Specials Guidance** – Review ongoing of QA batch release staff qualification requirements.

**Licence Update:** Licence variations submitted to the MHRA to update the MIA-IMP, BEA and WDA licences. Application to register Barnsley plasma collection site with the CQC has been withdrawn.

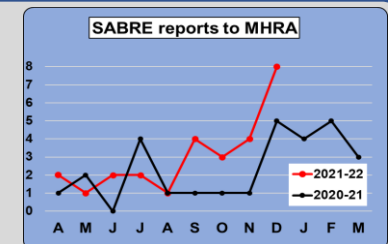
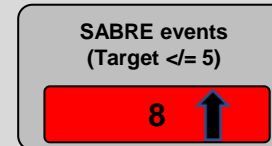
## Externally Reported Events: (Serious Adverse Blood Reaction & Event / Serious Adverse Event & Reaction)

### SABRE: Y-T-D = 27

8 events in December

- 3 donor screening & testing (blood)
- 2 late recalls
- 3 unsuitable products (blood)

Events being managed appropriately

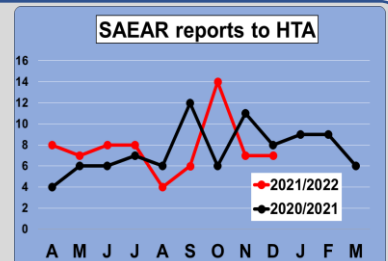
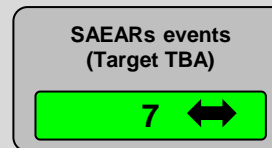


### SAEAR: Y-T-D = 69

7 events in December

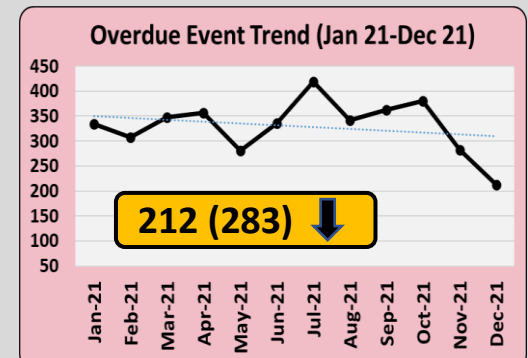
- 1 consent (cornea)
- 2 stock management
- 2 patient/ donor health
- 2 bacteriology/ contamination

Events being managed appropriately



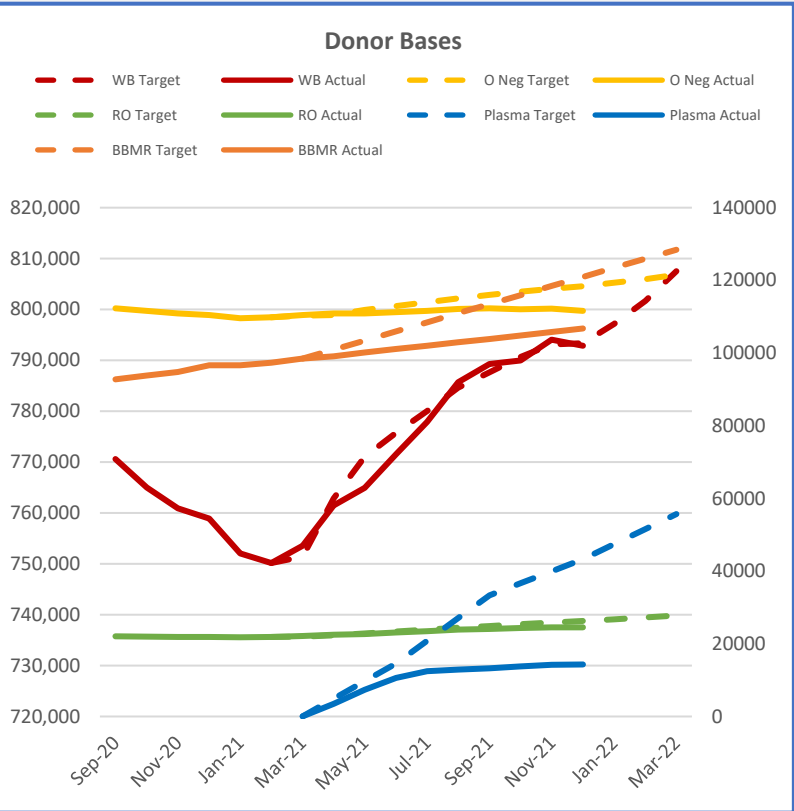
## Overdue Quality Management System Event Performance:

- 25% decrease** in overdue events (including document reviews) in Dec.
- Overdue Majors reduced by 69% from 13 to 4.**
- 2 of the 3 KPIs were met. The KPI which was not met was to have zero overdue Majors.
- All CI work is continuing and QMS champions are in place.



Key Headlines, risks and mitigations

- The Whole Blood (WB) Donorbase dropped for the first time this FY (shrunk by 0.15%) and is now below YTD target in December at 99.94%. Month-on-month, a similar amount of donors reactivated in December compared to November while slightly higher numbers became inactive (circa 2k). The O-negative Donorbase dropped down for the 2<sup>nd</sup> time in 3 months, to 111.5k, achieving 94% of YTD target. The Ro Donorbase has grown very slightly and is now 93% YTD. Unfortunately, NDD has declined to the lowest point this FY (7.7k) and is 80% YTD target. The lower NDD and higher inactivation has caused the Donorbase to decline and stocks to drop. O-negative and B-negative stocks are currently at some of their lowest levels ever. Enhanced donor outreach via the NCC, messaging to encourage late booking, and spare PFM capacity are being utilised for WB collection to continue to build stock to help turn stocks around. In early December, it was announced that five PFM centres (Bolton, Chelmsford, Croydon, Manchester, and Stockton) are to close before the end of 2021: targets presented here do not yet reflect this announcement.
- Volumes of Opting in to the ODR decreased 1.7% against November, down to 63k (but remaining above target). Opt outs saw a big increase month-on-month, up 47% to 25.3k and slightly above where it was in July this year. Activity levels on the NHS App increased by 81% compared to November, similar numbers to those seen in July. The NHS app accounted for 72% of all opt outs.



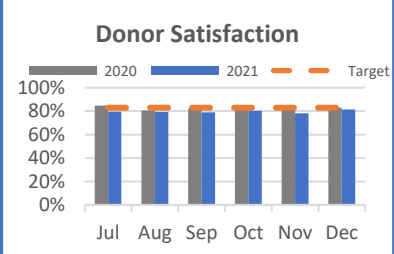
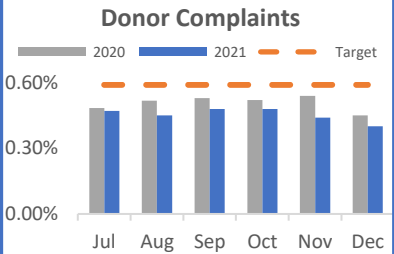
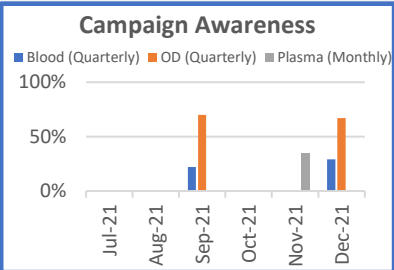
**WB 12M Donor Base**  
(FY22 Plan = 807k  
Dec 21 BP = 793K)  
**792k**

**O neg Donor Base**  
(FY22 BP = 122k  
Dec 21 BP = 118k)  
**112k**

**Ro Donor Base**  
(FY22 BP = 27.7k  
Dec BP = 26k)  
**24.5k**

**Plasma Donor Base**  
(FY 22 BP = 56k TBC  
Dec 21 BP = 43k)  
**14.2k**

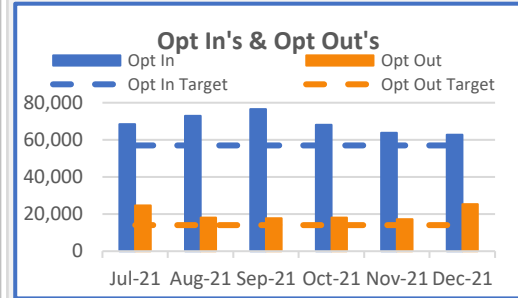
**BBMR Donors**  
(FY22 BP: = 128k  
Dec 21 BP = 120k)  
**107K**



**% Plasma Awareness**  
(FY22 BP TBC)  
**-**  
No number for Dec

**% Donor Complaints**  
(FY22 BP 0.59%)  
**0.40%**

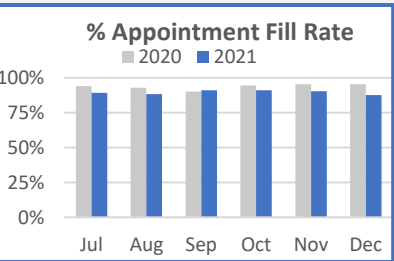
**Donor Satisfaction**  
(FY22 BP 83%)  
**82%**



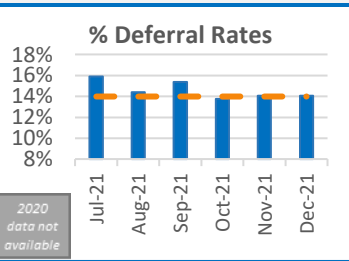
**Organ Donation Opt In's**  
(Monthly BP 57k)  
**62.7k**

**Organ Donation Opt Out's**  
(Monthly BP 14k)  
**25.3k**

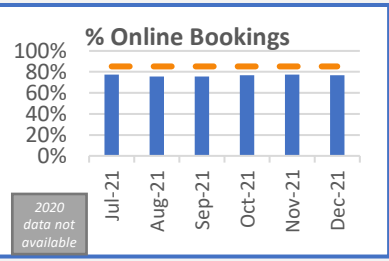
- Delivering the Volume of Donor**
- The Whole Blood (WB) Donorbase dropped for the first time this FY (shrunk by 0.15%) and is now below YTD target in December at 99.94%. Monthly donors lost increased to 27k, but still surpassed targets (at 88.5% YTD). Numbers of donors returning decreased by 0.32% against November. NDD has declined to the lowest point this FY (7.7k). Registrations dropped slightly to 25k and is currently 65%
- Delivering the Mix of Donors**
- The O-negative Donorbase dropped down for the 2<sup>nd</sup> time in 3 months, to 111.5k, achieving 94% of YTD target. Numbers of O-neg donors returning dropped by 9.4% against November and inactivation increased by 7%. O-neg NDD decreased against November by 30% to 619 (the lowest for this FY).
  - Ro NDD fell against November (-25%) but, despite this, the Ro donorbase expanded for a 10th consecutive month to 93.5% of YTD target.
- Improving our donors' experience**
- Donor satisfaction increased four percentage points to 82% in December (where target is 83%). Volume of complaints fell again this month, its lowest value since June, remaining well within targets. WB online booking rate remained stable at 77% but remains below the 85% target.
- Building a plasma base for the future**
- The plasma for medicine donorbase added 124 new donors in December; the plasma donorbase is currently at 33% behind the original YTD target.



**% Fill Rates**  
FY22 BP 97%  
Dec 21 BP 96%  
**88%**



**% On-Session Deferral**  
(FY22 BP 14%)  
**14%**



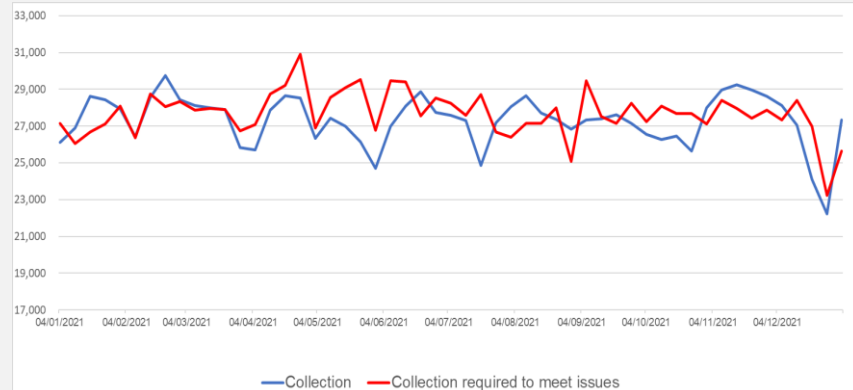
**% Online WB Bookings**  
(FY22 BP 85%)  
**77%**

# BLOOD SUPPLY: Director Report – December 2021

## Key risks, issues and actions for attention:

- The interventions made during November to improve winter resilience of red cell stocks were initially successful and we recovered to 6 days of stock (DOS) during December, with improvements across most blood groups. However, the impact of Omicron on our blood collection levels since mid-December has been significant and rapid.
- Omicron has resulted in lower appointment fill rates (c85% of appointments filled vs c90-92% previously), higher non-attend rates (c21% of booked donors did not attend vs c16-17%) and higher levels of NHSBT-led donor cancellations (c4% of booked donors cancelled vs c2%). January total red cell stocks are currently at c5 DOS, while O neg is less than 3 DOS.
- A national emergency team continues to meet weekly to oversee activity, with executive oversight provided by the Blood Operations Leadership Team (BOLT). We are maintaining high levels of direct marketing and campaign activities for early 2022. We also informed hospitals of challenges with low O neg stocks on 13 January 2022.

Actual weekly whole blood collection vs. required to meet demand

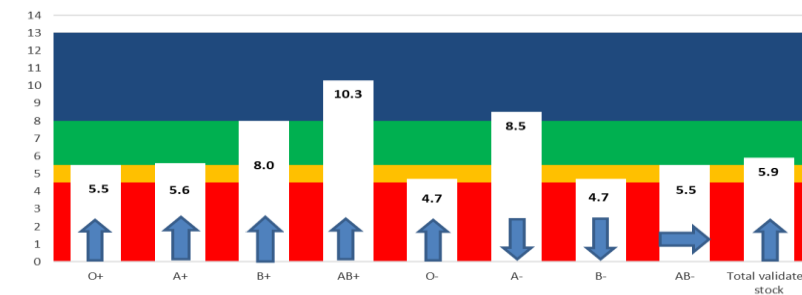


## Collection Performance and Stock

Over December, collection levels deteriorated due to the impact of rising Omicron cases.

Demand during December remained at forecast levels, despite the impact of Omicron in the wider-NHS.

Average Red Cells Days of Stock (DOS) – December 2021

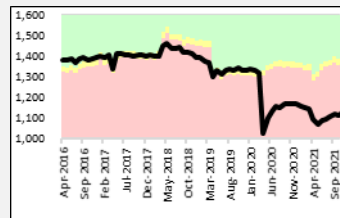


Overall average stock during December 2021 was 5.9 DOS. Daily stocks of O neg and B neg averaged below target levels. More activity is being taken in Donor Experience to bring through donors with these groups.

## Productivity

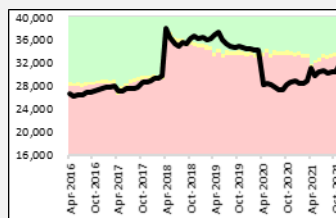
Collection Productivity  
YTD Target = 1,388

1,134 ↑



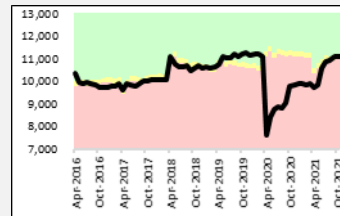
Testing Productivity  
YTD Target = 33,839

31,713 ↑



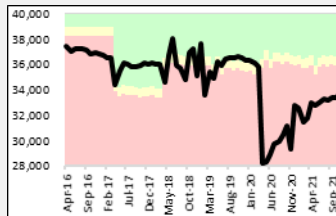
Processing Productivity  
YTD Target = 11,262

11,176 ↑



Hospital Services Productivity  
YTD Target = 36,639

33,406 ↓



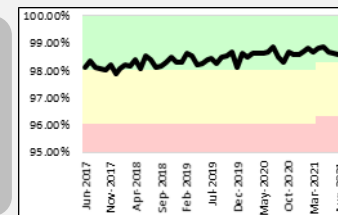
Collection and Hospital Service productivity are c20% and c9% below target respectively, due to extra COVID-19 operating costs.

In the short-term, several activities to recover collection productivity have started, including work to recover capacity lost through social distancing. Longer-term activities include reviewing our collection and distribution footprints and staffing models.

## Service

OTIF Excl. Ro Fails  
YTD Target = 98.3%

98.7% ↔



Record levels of OTIF performance sustained throughout the pandemic.



# CLINICAL SERVICES: Director Report – December 2021

## Key risks, issues and actions for attention:

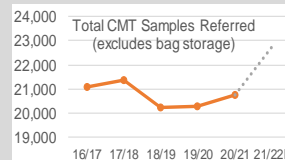
- Demand for Clinical Services products/services has improved during the year to date across most operational areas
- Activity is forecast broadly in-line with pre-pandemic levels for most of our service lines; the position continues to be monitored given the developing picture around the pandemic

## Cellular, Apheresis and Gene Therapies

- **Cellular and Molecular Therapies** routine service activity 13% above plan in the year to date (YTD)
- Number of stem cell transplants supported at 1,354 YTD versus target of 1,321
- Clinical Biotechnology Centre income £0.4m below plan both YTD and forecast, due to a change in the timing of grant payments
- In **Stem Cell Donation and Transplantation** cord blood issues are 3 units below plan YTD
- International issues 5 below plan, UK 2 ahead
- 37 units issued YTD is 2 above the same point last year; forecast issues = 49 versus plan 54
- British Bone Marrow Registry (BBMR) donor to patient matches 47 units above target
- International matches 38 and UK 9 above plan
- 132 units issued YTD compares to 88 at this point in 2020; forecast = 179 versus plan 130
- Donors recruited to the BBMR 'Fit panel' behind plan YTD and will miss the 30k year-end target; ca 14k donors added YTD
- **Therapeutic Apheresis Services** overall activity above plan by ca 6% YTD, driven by increased Plasma Exchange activity

### CMT Service Activity YTD Target

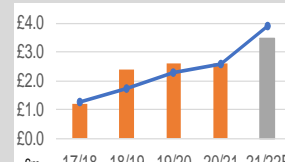
17,059 ↔



### CBC Sales YTD Target

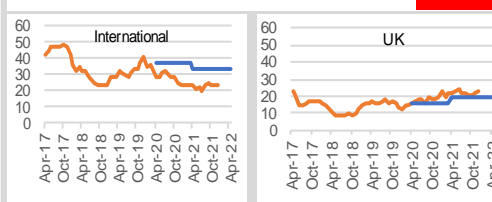
£2.56m

£2.12m ↓



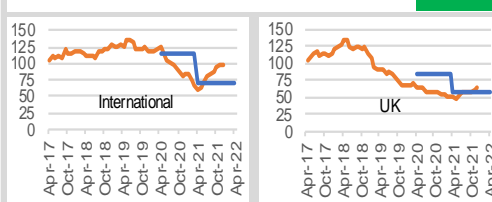
### Cord Blood Issues YTD Plan = 40

37 ↔



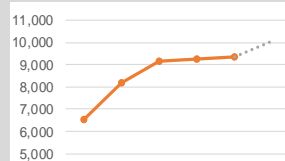
### BBMR Matches YTD Plan = 85

132 ↔



### TAS Activity Volume YTD Target

7,555 ↔

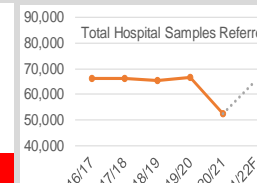


## Pathology Services

- **Histocompatibility and Immunogenetics (H&I)** total service activity ca 2.5% below plan YTD
- Reduced levels of typing demand for stem cell and solid organ transplants the main drivers
- Platelet and Granulocyte Immunology work is above target, driven by referrals for VITT (but now reducing)
- Sample turnaround times are better than target
- **Red Cell Immunohaematology (RCI)** activity just below plan YTD
- Sample referrals just below the comparative period in 19/20 (-0.5%), but well above 20/21 (13%)
- Sample turnaround times remain better than plan
- **International Blood Group Reference Laboratory (IBGRL)** sample turnaround times above target
- Fetal RHD screening activity is below plan YTD
- The phased roll out of this service to more customers has been delayed by hospitals

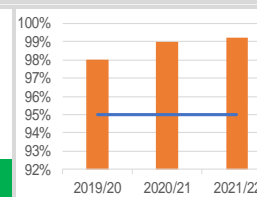
### H&I Service Activity YTD Plan 50,059

48,821 ↔



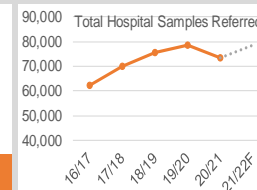
### H&I Turnaround Time YTD Plan 95%

99% ↔



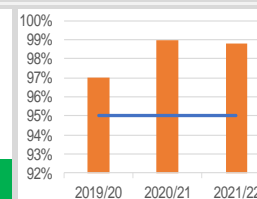
### RCI Service Activity YTD Plan 57,994

57,305 ↔



### RCI Turnaround Time YTD Plan 95%

99% ↔



### IBGRL Fetal RhD Turnaround Time YTD Plan 98%

100% ↔

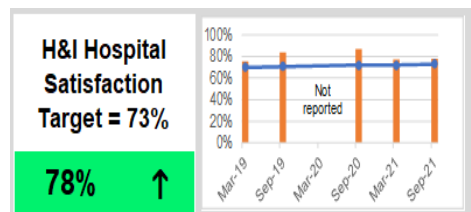
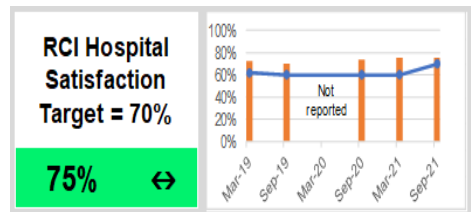
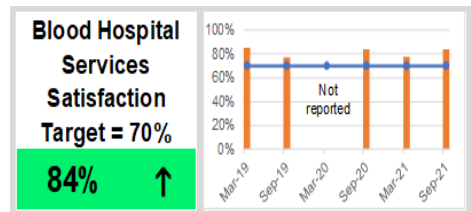
### IBGRL Patient Genotype Turnaround Time YTD Plan 85%

90% ↔

# CLINICAL SERVICES: Director Report – December 2021

## Voice of the Customer: Hospital Customer Satisfaction Survey - April to September 2021/22

- The survey reflects the views of 170 (66%) hospital transfusion laboratory managers in England directly supplied by NHSBT (up from 50% in the last survey)
- The results for each question are reported as a percentage of customers scoring a Top Box score (9 or 10 out of 10) and the average score
- Although scores reduced from the last survey outcomes (83% and 9.2), overall satisfaction remains high at 77%, with an average score of 9.1
- The survey shows NHSBT continues to be a respected and valued service provider
- Feedback indicates the importance of continued investment in customer-facing systems, understanding hospital needs and engaging customers in change



### Blood Supply

- All hospitals were satisfied or very satisfied with the service provided by **Hospital Services** scoring 84%, above target 70% and better than the last survey score of 78%
- Three of the four Top Box / average scores on fulfilment were maintained (ranging 9.1-9.4) indicating continued high levels of satisfaction with blood supply
- ‘Availability’ satisfaction reduced slightly; feedback referred to Ro red cells and specialist components
- Overall score for **routine delivery** declined from 74% to 63%, despite the ongoing routine delivery utilisation project
- Dis-satisfaction was reported in seven localities, although this was not all due to deliveries; a few customers have long-standing desire for change to their delivery schedule
- Customers continue to show a marked preference for NHSBT drivers (90%) over couriers (50%), although our courier provider achieves over 99% compliance with the agreed service level; further customer communication is planned

### Clinical Services

- **RCI** customers scored 75% again for overall satisfaction (target 70%); feedback included a desire to speed up work on e-requesting/e-reporting and a view that our working hours don’t reflect modern NHS practice
- **H&I** provision of matched platelets scored 78% for overall satisfaction; above target 73%; many comments refer to a “great service” and acknowledge the responsiveness of our staff in providing for specific patients
- Satisfaction with **IBGRL’s** Molecular Diagnostics service was captured for the first time, scoring 77% Top Box and 9.0 average score; issues referred to include sample rejection and report turnaround time
- **Hospital Customer Services Team** scores fell from 89% to 79%, although the average score remained high at 9.3; many comments acknowledge the support provided by the team
- **Clinical Support Team** scores reduced from a high of 87% to 73% with little comment to explain this
- Customer satisfaction surveys for our stem cell and therapeutic apheresis services are reported annually; updated scores will be reported to May 2022 Board

**76**  
Net Promoter Score for Overall Satisfaction

**100%**  
Satisfied / very satisfied with the service provided by Hospital Services

**90%**  
Highest national Top Box score for the service provided by NHSBT drivers

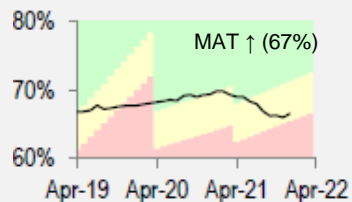
# OTDT: Director Report – December 2021

## Key risks, issues and actions for attention:

- Our deceased organ donation pathway indicators continued to hold during December and activity (131) rose to its second highest since March 2020, despite Omicron challenges. This was driven by an overall consent / authorisation rate of 72% in December, sustaining the upward trend of recent months though still slightly short of our targets. Challenges were more apparent in transplantation where activity (309) was impacted.
- Our NHS networks indicate that clinicians are facing sustained challenges and pathway constraints including outpatient, diagnostic and theatre access. These reflect widespread NHS pressures and are being reported internationally.
- Sales income was impacted by lower sales of tendons, femoral heads and corneas – though the YTD position is still positive by 9.2% (£968k). Early insights are that Omicron-related pressures mean that elective sports injury surgery may not recover in January as predicted. Sustaining capacity levels within the National Referral Centre (NRC) is a key focus to improve the rates of proceeding eye donation.

### Consent/Authorisation (Target 74% YTD)

66% YTD



## Organs

### Donation

Deceased donors trended up in-month (131, Amber). The MAT also trended up, to 1,352 donors, but remains at the Red threshold. YTD we remain Red (1,065) against a YTD target of 1,246.

- NHS indicators - referral and SN-OD presence - remain strong (93% YTD).
- The consent / authorisation rate increased in-month to 72% (Amber), resulting in increases in MAT (67%, Amber) and YTD (66%, Red).

### Transplants

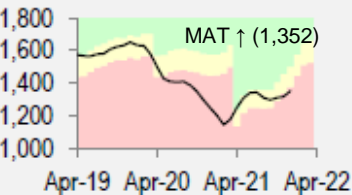
- Deceased donor transplants trended up in-month (309, Red). The MAT also trended up, to 3,284 transplants, but remains Red. YTD we remain Red (2,592) against a YTD target of 3,154.
- Q3-4 targets reflect higher seasonal expectations, but this had not anticipated Omicron. We are working hard to increase donors and transplants, but we may fall short on these seasonal activity measures again next month.
- Living donor transplants trended up in-month (64) but the MAT remains relatively flat (733). Ongoing late reporting for living donor transplants may mean activity is revised upwards.

### Transplant List

- The combined active and suspended transplant list increased to 10,149 at the end of December (4,112 suspended and 6,037 active patients). We believe that further reactivations are planned by transplant centres and that pathway constraints means this is an under-representation of demand.

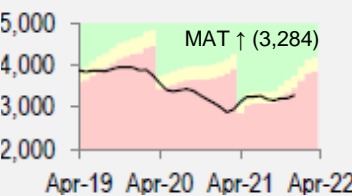
### Deceased Donors (Target 1,246 YTD)

1,065 YTD



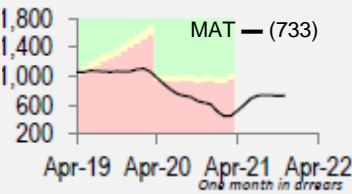
### Deceased Transplants (Target 3,154 YTD)

2,592 YTD



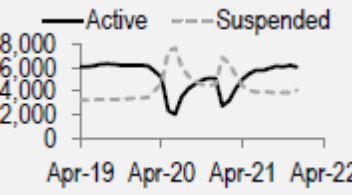
### Living Transplants month in arrears

587 YTD



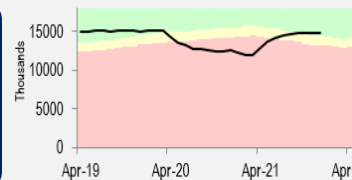
### Active Transplant List last day of month

6,037



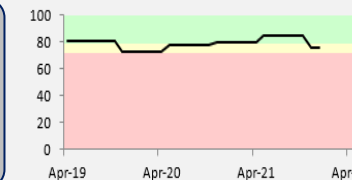
### TES – Income (Target £10,530 YTD)

£11,500k YTD



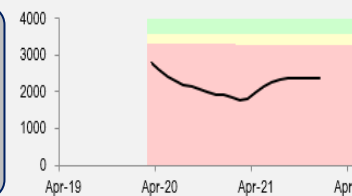
### Customer Satisfaction (Target 80% YTD)

82% YTD



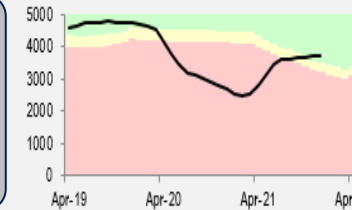
### Cornea Donors (Target = 2,750 YTD)

1,826 YTD



### Cornea Issues for Transplant (Target = 3,918 YTD)

2,872 YTD



## Tissues and Eyes

### Donation

- Ocular donation continued to be lower than expected in December, impacted by high staff absence rates.
- A new IT system (TissuePath) went live in December providing a link for all Organ referrals to be notified to the NRC.
- Plans for ocular donation improvement initiatives have been completed.

### Issues / Income

- December income was lower than plan by 6% (£70.5k), but the YTD position remains positive by 9.2% (£968k).
- The current demand for ocular tissue is high, with strong orders through to August 2022.
- Sales in December fell below target by 28.3% (£113k) but the YTD position is a strong 16.5% (£552k) above target.
- Serum Eyedrops sales remained above target in December by 15.4% (£54k) and YTD positive by 4% (£119k)
- All bone products continue to have a positive income position.
- Pre-Omicron, hospital insights suggested that the recovery in tendon demand would start in Q4 linked to elective theatre capacity.

## Key notes

**Metric boxes:** YTD targets. RAG for YTD position. Arrow indicates month-on-month trend and in-mth RAG status.

**Charts:** ODT & TES- Activity against Moving Annual Total (MAT) targets. (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 – December 2021

## Key risks, issues and actions for attention:

- Recruitment Time to fill rates increased by 1 week – this reflects the pressure the team were under in the autumn. The backlog previously reported is now down to 1 week although the impact of the previous backlog will be felt for the next month or two as those posts work their way through the system.
- Anna Butterfield has joined the People SMT this month as AD for Leadership, Performance and Culture. Ruth Saunders has joined from Sainsburys in the role of AD Talent Acquisition and Recruitment. Interviews for the 2 remaining posts will be conducted before the end of January. That will complete the new and realigned People SMT.

### Recruitment

- The average time taken to recruit, has increased from 12.71 to 13.70 weeks.
- We are also continuing to see an increase in annual turnover which now stands at 16.05% up from 15.50% in November.
- In December there were 80 new starters with 20 colleagues being from an ethnic minority background. With 103 leavers of which 18 were from an ethnic minority, this represents a net increase of 2 ethnic minority colleagues. In Band 8 there were 3 leavers with 0 colleague(s) from an ethnic minority leaving. 4 new Band 8 starters commenced with 0 starter from an ethnic minority – a **zero Net change**

Monthly Net increase in EM staff +/- for all staff (Band 8a plus in brackets)

+ 2 (0)

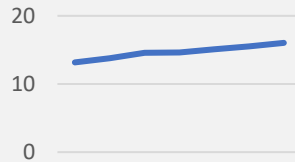
% new starters who are EM (and Number Band 8A & above in bracket)

25% (0%)

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

13.71

#### Turnover



### Leadership and Learning

- MT (target is 95%), rose by 1% from last month to 91%
- PDPR (target is 95%). Activity rose by 2% this month
- Note we intend to include the January Engagement score in next months report

No. commencing leadership programmes

47

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

80%

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 decreased by 2 from Dec.
- 15 out of 26 live cases are on track within the SLA timescale 11 cases are over-running the SLA. 6 in Blood Supply, 4 in Group and 1 in Donor Experience,.
- Overall, 11 of the 26 live cases involve BAME colleagues (42%). 4 of these cases relate to the protected characteristic in terms of the issues or concerns raised.
- 7 new cases in December 2021 = 3 Disciplinary, 1 Dignity at Work, 2 Grievance & 1 Capability.
- 2 new BAME cases in December.
- 4 BAME cases closed.
- 8 cases closed overall in December with an average case time-line of 104 calendar days. 5 of the cases were closed within the 90-day SLA.

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

7 (6)

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

8 (63%)

No. of live cases month end

26

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

15 (58%)

Protected Characteristics Live Cases month end

11 BAME (42%)

1 Disability (1%)

0 LGBT+ (0%)

15 Female (58%)

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

6 (8)

No. of cases closed in month

3

Av days open in Q1

12

No of Live cases

13

### Freedom to Speak Up

- Wide range of issues raised; recruitment process, lack of Halal meals, SOP not followed, hybrid working arrangements, Occ. Health recommendations not being followed
- Good level of engagement and support provided by managers/leaders in resolving concerns

Course	BME	%	Not Stated	%	White	%	Total
Advanced Line Manager	0	0%	0	0%	1	100%	1
Effective Line Manager	1	17%	1	17%	4	66%	6
The Inclusive Leader	2	5%	0	0%	38	96%	40
Total Delegates	3	6%	1	2%	43	91%	47

# PEOPLE SERVICES: Case Incidence Rates – December 2021

Cases Live at month end

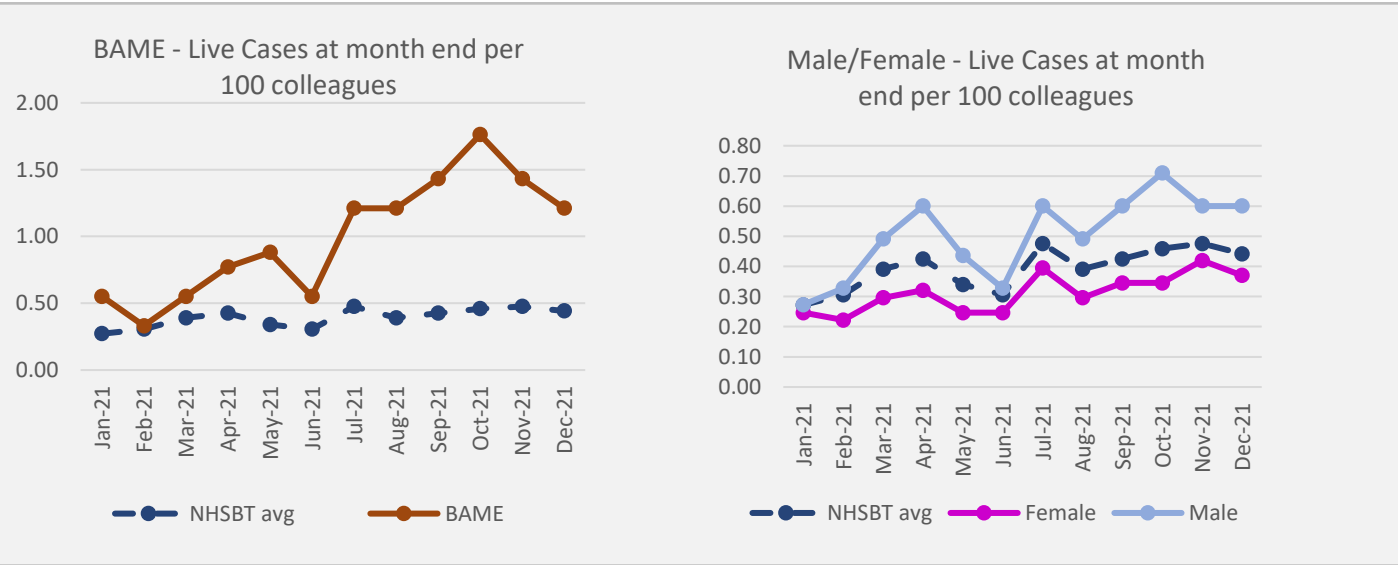
Headcount		Jul	Aug	Sep	Oct	Nov	Dec
2,051	BS - BD	8	5	6	7 (3)	7 (1)	7 (3)
1,212	BS - M&L	9	9	8	11 (4)	9 (1)	8 (2)
671	OTDT	1	1	1	0	3 (3)	2
1,016	CLINICAL	1	1	1	2 (1)	2 (1)	4 (2)
188	Donor Exp	1	1	2	1	1	1
749	Group	8	6	7	6	6	4
5,887	NHSBT	28	23	25	27	28	26
908	BAME	11	11	13	16	13	11
4,055	Female	16	12	14	14	17	15
1,832	Male	11	9	11	13	11	11
385	Disability	1	1	1	1	1	1
210	LGBT+	1	0	0	0	0	0

Incidence Rates

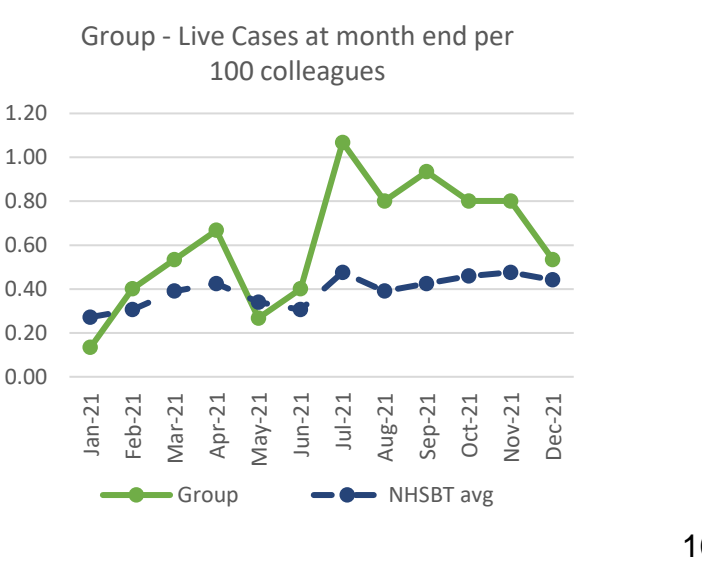
Headcount		Cases live at month end	Incidence rate per 100 colleagues	1 Case per X number of colleagues
2,051	BS - BD	7	0.34	293
1,212	BS - M&L	8	0.66	151
671	OTDT	2	0.3	335
1,016	CLINICAL	4	0.39	254
188	Donor Exp	1	0.53	188
749	Group	4	0.53	187
5,887	NHSBT	26	0.44	226
908	BAME	11	1.21	83
4,055	Female	15	0.37	270
1,832	Male	11	0.6	167
385	Disability	1	0.26	385
210	LGBT+	0	0.34	0

Data includes conflict resolution casework (disciplinary, grievance, dignity at work, capability, probation). Excludes other forms of casework undertaken by the HR function.

Protected characteristic definitions based on categories recorded in the NHS Electronic Staff Record (ESR) system. Reporting is limited to the category definitions available. Data is shown as live cases as month end and a live case may take more than one month to be closed.



**NB** – Directorate graphs showing the live cases at month end per 100 colleagues are available but not included due to space considerations – an example for Group Services is shown here – these can be provided if required

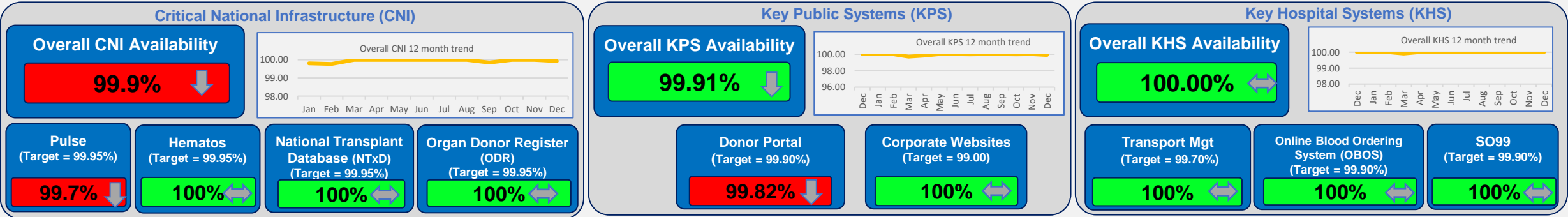


# DIGITAL, DATA AND TECHNOLOGY SERVICES: Director Report – December 2021

## Key DDTS Updates & Risks

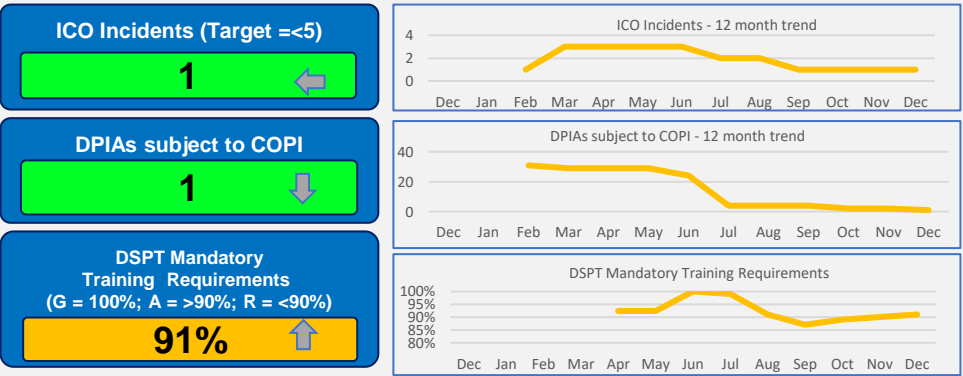
- Critical National Infrastructure did not meet the availability service target in month
- Our latest update to the NHS Give Blood app was released in app stores in December and includes a new feature that saves donors last searched location making it easier to find an appointment in their favourite locations. This is the third successful release of the App in 6 months and donor feedback remains positive about the changes.
- In December, the Shared Server and Storage project completed the final migration of data onto the new platform, this involved migrating workloads from around 700 servers, which has all been completed successfully.

## Key Systems Availability



- Analysis is underway to identify the cause of two failures of the National File Server that went into a hung state on 06/12/22 (8-minute outage) and 15/12/22 (135-minute outage). This impacted any new connections/access requests to the PULSE application for the duration of the service issue.
- A permanent fix is under development for Donor Portal following an Incident on 10/12/21 that affected service for 80 minutes due to a backend process transaction issues. Blood.co.uk was unaffected.
- Mobile Session teams were unable to complete a Session Solution Gennaro download on 15/12/21 that prevented the Session jobs from completing. A Problem Record is progressing a permanent resolution

## Cyber and Information Governance



- **ICO Incidents:** Reportable Information Commissioner's Office (ICO) incidents as at Dec 2021: One actively being managed. NHSBT has provided all information as requested as at Dec 2021. It is anticipated that the next phase of correspondence with the ICO will provide a finalised resolution. The IG Team are also managing a ICO complaint re. a ODR Freedom of Information Request (due Feb'22), which has also been escalated to the ODT complaints team.
- **DPIA's subject to COPI:** The Data Protection Impact Assessments (DPIA) subject to Control of Patient Information (COPI): 31 data flows were undertaken to support the pandemic, four of which are reliant on the COPI regulation. The COPI deadline has been extended to the 31<sup>st</sup> Mar 2022 – following conversion of a DPIA in Dec'21, there is one DPIA left to convert.
- **DSPT Mandatory Training Requirements:** Whilst training compliance has reduced since the DSPT submission in June (99.2%), this is as a result of the normal training cadence as staff are required to submit training on an annual basis, therefore compliance is variable throughout the year. Regular reminders are sent via yammer as part of the Security Awareness For Everyone Campaign and CARE committees to staff understand the importance of and how to undertake their mandatory training.

# CORPORATE RISK UPDATE: 6<sup>th</sup> January 2022

## Key risks, issues and actions for attention:

As of 6<sup>th</sup> January 2022, there are no Priority 1 Red strategic level risks recorded in the risk management system.

**Emerging issues subject to review include:** (1) Omicron variant: NHSBT are experiencing staff shortages due to Omicron and business continuity plans are being used to mitigate staff shortages to the best of the teams' abilities. A National Emergency Team has been set up and is reporting on a regular basis to the ET. The mandatory covax vaccination project has identified the number of vaccination decliners and individuals with missing information to the directorates. Risk leads have been provided an analysis of the numbers of donor/patient facing colleagues that this affects to risk assess; (2) Blood Supply stock levels: As we enter 2022, red cell stock levels have fallen below 5 days-of-stock (vs target of 5.5 to 6 days) caused by the impact of Omicron affecting donor attendance and staff absences, thus a critical incident remains open. Actions focus on increasing donor appointments, media marketing campaigns and monitoring ongoing business continuity arrangements with other UK blood services in the event of further UK-wide blood shortages; (3) Pressure remains on our recruitment process: The backlog of activity has now been reduced to 1 week and will continue to be further reduced; (4) Ongoing monitoring of supply chains, extreme weather, winter pressures, and unpredictable demand for blood products.

