

# NHSBT Board Performance Report

## February 2022

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# PERFORMANCE SUMMARY: FEBRUARY 2022

## Summary:

- Issues to note include under collection of blood w/c 7<sup>th</sup> March onwards rapidly impacting blood stock levels and availability issues in Critical National Infrastructure and Key Public Systems (slide 11).
- Of the ongoing issues, regulatory compliance and clinical services activity continue to demonstrate improved performance as a result of effective management and improvements in NHS demand for NHSBT products and services.
- OTDT continues to face challenges as organ and tissue activity has been slower than expected in returning to pre-pandemic levels.
- Whilst sickness levels have improved slightly, staff turnover and recruitment volumes continue to present operational challenges across NHSBT and within the recruitment team.

## Issues to Note:

- Whilst stock levels remained at or above target levels through February reaching 6.4 days-of-stock for total red cells and 6.3 days-of-stock for O neg, under-collection w/c 7<sup>th</sup> March onwards has caused a rapid decrease to 5.5 days of stock (24<sup>th</sup> March) with O- and B- stocks forecast to turn amber/red late March onwards without intervention.
- A number of instances of unavailability in Critical National Infrastructure and Key Public systems were reported in February. Root cause analysis suggests no thematic reasons for this beyond the amount of change/upgrade activity currently taking place within NHSBT systems.

## Performance Reporting:

- A revised format of the Performance report is under development for April 2022 reporting onwards.

## Ongoing:

### • Sickness Absence, Staff Turnover & Recruitment Requests

- Sickness absence easing slightly to 5.9% in February from 6.6%
- Collection sickness absence 8.1% in February from 8.7%
- Staff turnover continues to rise to 16.6% from 16.3%
- Recruitment lead time 14.6 weeks from 14.7 weeks.

### • Quality Assurance

- Overdue majors down to 2 in February.
- 6 Serious Incidents reported YTD with 0 in 2022.
- 33 SABREs reported YTD with 6 in January
- 0 external majors reported YTD

### • Blood

- Whilst Blood Collection productivity continues below target due to higher than planned staffing levels (slide 6), social distancing measures in donation environments are under review to potentially recover some of the capacity lost from social distancing at many locations.

### • OTDT

- Activity remains slow to recover to pre pandemic levels with falls in the numbers of proceeding donors and subsequent transplant activity through February.
- A similar trend is evident in TES activity with the expected Q4 recovery in elective orthopaedic activity yet to materialise.

### • Donor Experience

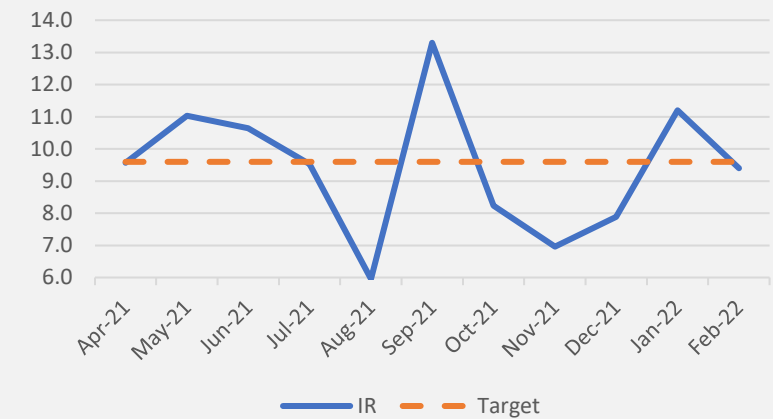
- Delivering the volume and mix of donors (slide 5) remains a challenge with Ro, O-, BBMR and Plasma donor bases continuing at red status.

### • Clinical Services

- Activity is forecast broadly in-line with pre-pandemic levels for most service lines.

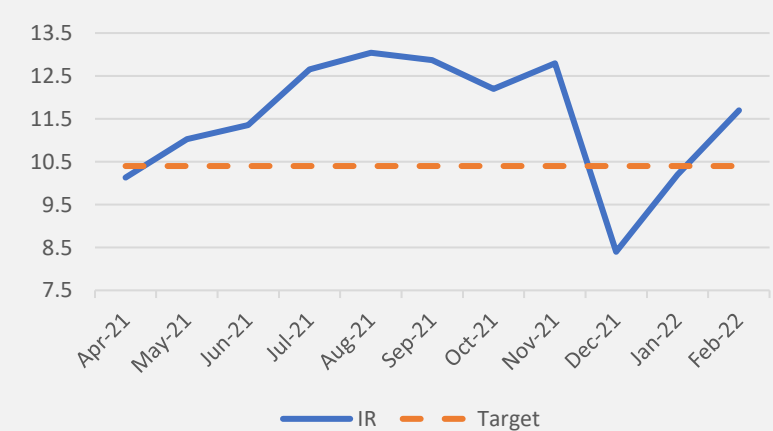
# PEOPLE SERVICES: Director Report – February 2022

## Harm Accident Incidence Rate



Harm is an unplanned event which resulted in injury. 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 – Feb 22  
(Target = 9.6 G= better than target, R = worse then target )

9.4

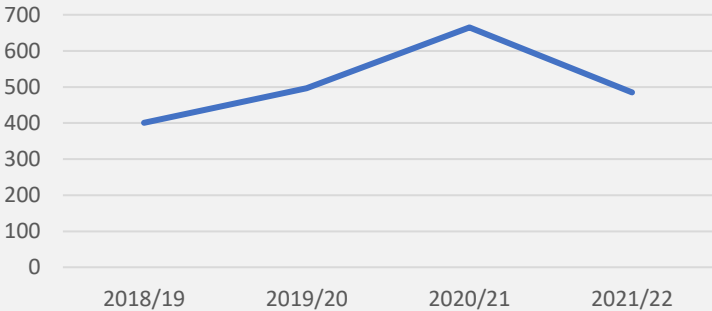
Reduction in Harm incidents back to target, all directorates at target except Blood Supply. A review of reporting is underway to identify best practice with BAE Systems participating.

Near Miss IR Feb 22  
(Target = 10.4 G= on or better than target, R= under target )

11.7

Near miss reporting has met target.

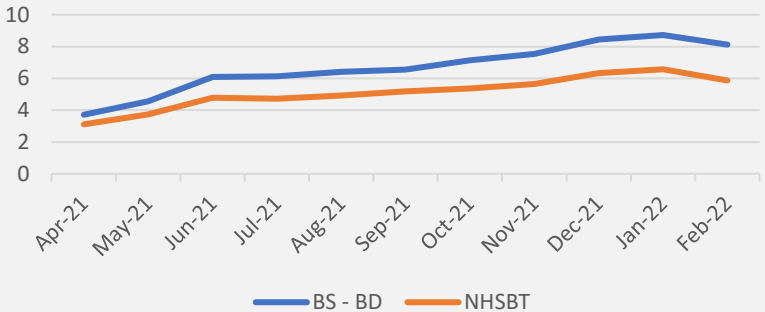
## Incidence Rate – over 3 day absence per 100.000 colleague



The lost time incidence rate has decreased for the 12 months to February 22 with 31 against 42 for 2020/21

## Sickness Absence

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



NHBSST sickness absence %

NHBSST 5.86%

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

BD 8.13%

BD Covid - Sickness Absence and self-isolating %

BD 2.28%

NHBSST Covid - sickness absence and self-isolating % - 28/02/22

NHBSST 1.68%

- OTDT – Sickness absence continues to reduce down to 7.7% in February. All rotas maintained. Deep dive into mental health absence being undertaken, reporting in April.
- Blood Donation – The sickness absence rate is 8.13%. Short term absence remains a focus and the subject of ongoing analysis across the directorate. Currently auditing Birmingham Donor Centre and WEDC where there are peaks

# QUALITY DIRECTORATE: Director Report – February 2022

## Key risks, issues and actions for attention:

- The number of SABRE reports in February has increased by +6 when compared to last month and missed the target of <5. Each report has been investigated and none were found to have caused harm to patients or donors. There is a trend nationally of donor screening checks (DSC's) not being fully completed. Blood Supply have a national QI open to address the immediate issue around DSC's not being fully completed on team sessions and are considering continuous improvement events to address this.

**External Inspection Performance:** None completed in February  
**Upcoming Inspections:**  
**MHRA BEA:** Liverpool – 28 Feb-3 Mar (awaiting report). Plymouth – 30 Mar-1 Apr  
**MHRA IMP:** CBC Filton – expected in Q1 (awaiting confirmation of dates)  
**UKAS:** 6 RCI sites – 7-29 Mar  
**HTA:** Colindale – 16-18 Mar

External Majors  
(Target = 0)

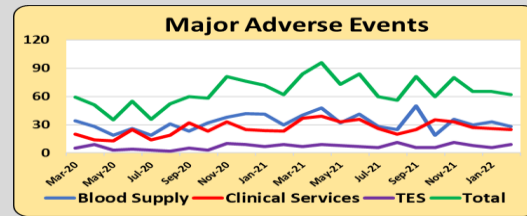
Nil ↔

Y-T-D raised = 0

**Serious Incidents (SIs):** Y-T-D = 6  
None raised in February

### Major Adverse Events:

- The overall number of Major adverse events (Quality Incidents and Hospital Complaints) raised in February stayed **about the same** as for January.



### Regulatory Radar:

- Specials Guidance Revision** – A number of actions are overdue however all have been identified as low risk. Several mitigations have been identified including:
  - Robust procedures regarding the presence of objectionable organisms
  - The manufacture of serum eyedrops is not a complex process, which means the release process is not complex and staff have been trained and deemed competent
  - Operator aseptic re-qualifications include worst case scenario replication



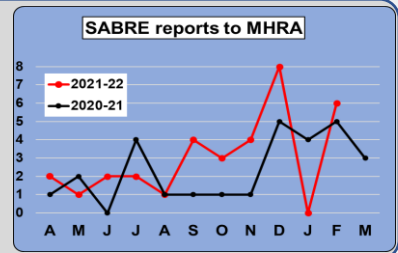
**Licence Update:** WDA(H) licence updated with additional activities at Oxford and Southampton. Helen Gillan now Responsible Person at all sites on the licence. DI on HTA licences, and licence holder contact for ODT activity have been changed to Helen Gillan. BEA licence variation submitted Feb 2022, pending MHRA approval.

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

**SABRE: Y-T-D = 33**  
6 events in February  
• 5 donor screening (3 blood, 2 plasma)  
• 1 reconciliation/ records

SABRE events  
(Target <= 5)

6 ↑

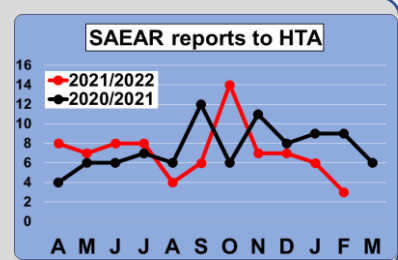


Events being managed appropriately

**SAEAR: Y-T-D = 78**  
3 events in February:  
• 2 patient reactions (corneas)  
• 1 reconciliation (tissue)

SAEARs events  
(Target TBA)

3 ↓



Events being managed appropriately

## Overdue Quality Management System Event Performance:

- The number of overdue events (excluding document reviews) was reduced by 20% during February, from 177 to 141.
- Despite not achieving the Majors KPI, overdue Majors fell from 8 to 2.
- The number of items which were more than 30 days past their target date was reduced, and neither of the Majors were overdue by more than 30 days.

KPIs:

0.6% ↔

<1% documents overdue review

2 ↓

0 overdue majors

141 ↓

<220 overdue events (Exc. documents)

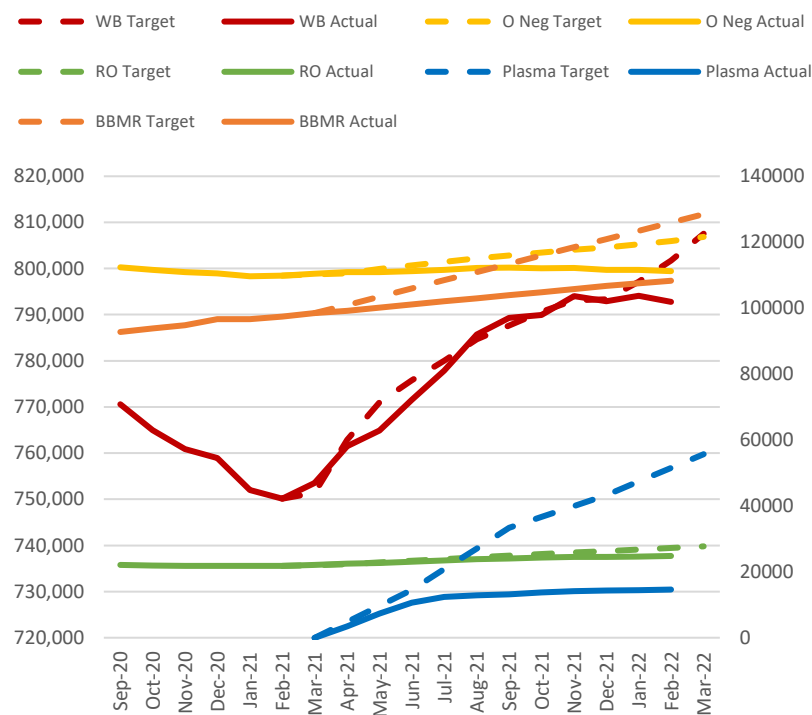
# DONOR EXPERIENCE: Director Report – February 2022

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

## Key Headlines, risks and mitigations

- The Donorbase was relatively stable in February following some declines towards the back end of 2021 with the figure currently standing at 793k, a slight decline on January's figure. The target for this month was 802k meaning we reached 92% of our target for the month. The O Negative base was also in line with January however we are still behind the total target for this time of year at the same rate of 92%. Registrations for February reached just under 23k however this time last year registrations were just under 55k. While this gap is over 32k the gap in new recruits attending is only 1.6k so while we are not seeing as many people signing the number of NDD's is staying more consistent. RO rates continued to grow now reaching a full 12 months of consecutive growth however still at only 91% of the target at this time
- Volumes Opting in to the ODR fell by over 16k this month and reached a total figure of below the 57k monthly target for the first time since February 2021. Due to our strong performance here throughout the year we have already exceeded our Annual target. Opt Outs however did also fall below monthly target to 11k, the first time we have been under are target since April 2021

### Donor Bases



**WB 12M Donor Base**  
( FY22 Plan = 807k  
Feb 22 BP = 802K )

**793k**

**O neg Donor Base**  
( FY22 BP = 122k  
Feb 22 BP = 120k )

**111k**

**Ro Donor Base**  
( FY22 BP = 27.7k  
Feb 22 BP = 27k )

**24.7k**

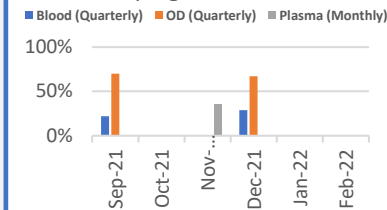
**Plasma Donor Base**  
( FY 22 BP = 56k TBC  
Feb 22 BP = 51k )

**14.6k**

**BBMR Donors**  
( FY22 BP: = 128k  
Feb 22 BP = 126k )

**108K**

### Campaign Awareness

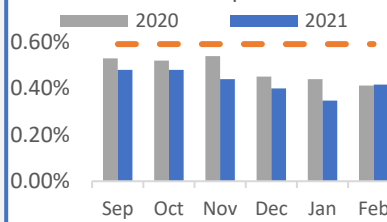


**% Plasma Awareness**  
( FY22 BP TBC )

**-**

No number for Feb

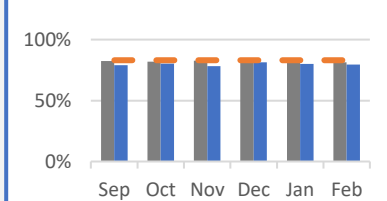
### Donor Complaints



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

**0.42%**

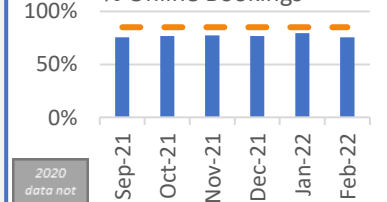
### Donor Satisfaction



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

**80%**

### % Online Bookings



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

**76%**

### Opt In's & Opt Out's



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

**52.7k**

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

**11.1k**

### Delivering the Volume of Donor

- The Whole-blood Donorbase was stable throughout February but reaching 793k donors, just behind the 794k seen in January. Despite this stability the total Donorbase remains behind the YTD target for this time of 802k. Registrations fell compared to last monthly figures although the new recruits actually attending a session rose by almost 300 donors

### Delivering the Mix of Donors

- The O Neg donorbase remained relatively stable but slightly behind it's January figure meaning we have reached 92% of our YTD figure. Reactivated Donors reached 15,583 donors this month, behind the 17,183 we saw in January
- The RO donorbase continued it's climb for an 12<sup>th</sup> Consecutive month but is still behind the YTD target at 91%

### Improving our donors' experience

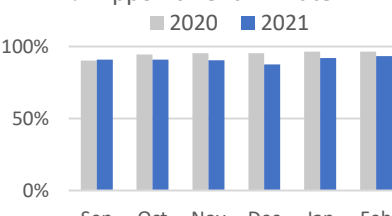
- The rate of Donor Satisfaction remained stable at 80% compared to it's target of 83% this year. The total complaints figure saw a slight uplift from January to 566 but has not reached the levels of over 500 that we saw between June and November last year. Online booking was less popular this month with 76% of donors using the service, the lowest rate since September 21

### Building a plasma base for the future

- An additional 160 donors joined the Plasma for Medicine Donor base this year but this is only 28% of the YTD target

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

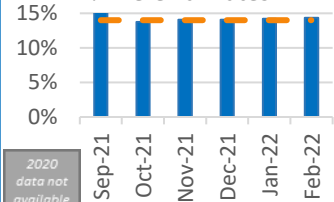
### % Appointment Fill Rate



**% Fill Rates**  
( FY22 BP = 97%  
Feb 22 = BP 97% )

**93%**

### % Deferral Rates

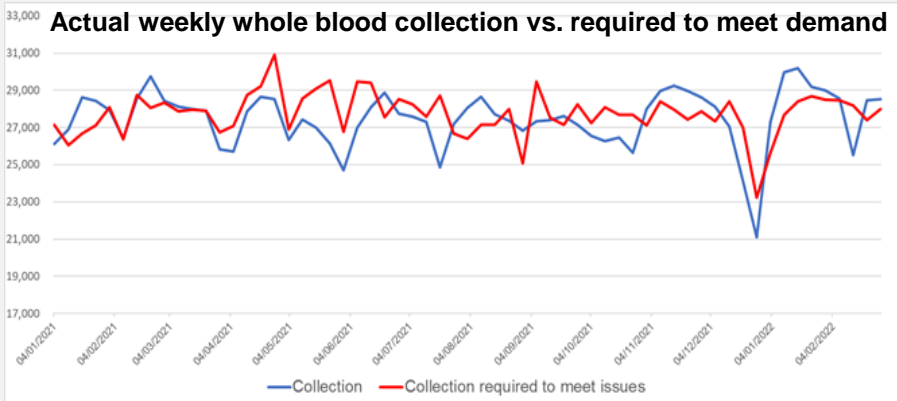


**% On-Session Deferral**  
( FY22 BP 14% )

**14%**

Key risks, issues and actions for attention:

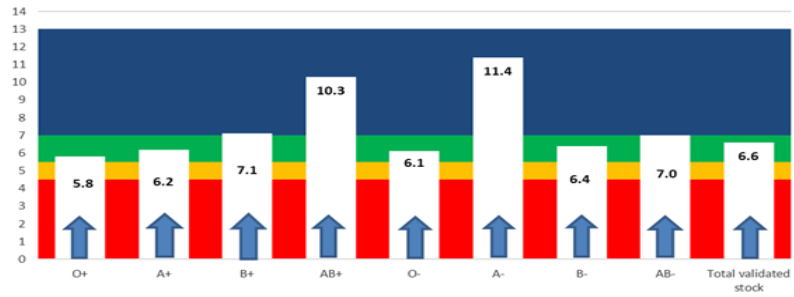
- Overall Red Cell stocks remained at or above target levels over February, maintaining an average of 6.6 DOS overall despite the impact of Storm Eunice on our operations. The storm resulted in around 50% less collection than planned on 17 February 2022.
- Over recent weeks, we have been using Co2 monitors to measure the air quality at our number of our community session locations. This has enabled an evidence base to review social distancing measures on our blood donation environments. As a result of this work, we expect to recover some of the capacity lost from social distancing at many locations. The detail of potential changes by location are currently being reviewed.



Collection Performance and Stock

Collection was consistently above the levels required to meet demand over February, except for one week due to the impact of Storm Eunice on blood operations.

Average Red Cells Days of Stock (DOS) – February 2022

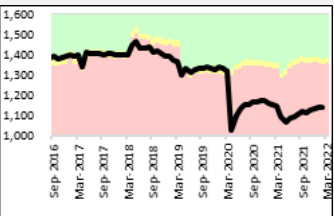


Higher levels of collection has recovered stock to target levels. A negative stocks remain high, as we are collecting above red cell demand to meet platelet production requirements. Actions to increase the A group platelet base are being taken.

Productivity

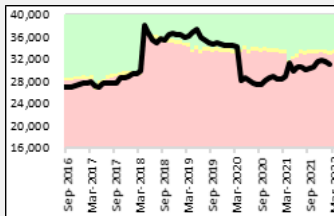
Collection Productivity  
YTD Target = 1,388

1,142



Testing Productivity  
YTD Target = 33,839

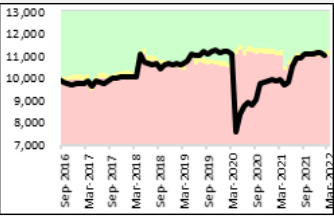
31,044



There was a slight decline on all productivity measures versus previous month. While activity is now consistent with pre-pandemic levels, higher staffing costs are currently maintained to bring resilience through COVID-19. Multiple activities are underway to reduce excess costs, which have informed next year's budget planning..

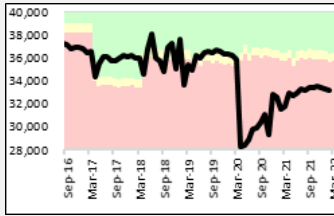
Processing Productivity  
YTD Target = 11,262

11,049



Hospital Services Productivity  
YTD Target = 36,639

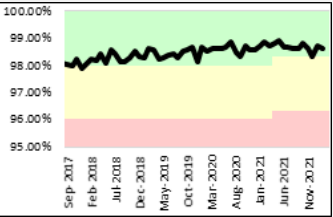
33,226



Service

OTIF Excl. Ro Fails  
YTD Target = 98.3%

98.6%



OTIF (excluding Ro) has been maintained above target levels.

NB: From next financial year, the OTIF measure will be changed to include Ro fails.

# CLINICAL SERVICES: Director Report – February 2022

## Key risks, issues and actions for attention:

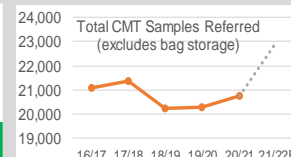
- Demand for Clinical Services products/services has improved during the year to date across most operational areas
- Activity is forecast broadly in-line with pre-pandemic levels for most of our service lines

## Cellular, Apheresis and Gene Therapies

- **Cellular and Molecular Therapies** service activity 15% above plan year to date (YTD)
- The number of stem cell transplants supported at 1,648 YTD versus target of 1,599
- Clinical Biotechnology Centre income forecast £0.8m below budget, but remains above Business Case target; strong pipeline of clients in place for 2022/23
- In **Stem Cell Donation and Transplantation** cord blood issues are 2 units below plan YTD
- International issues 5 below plan, UK 3 ahead
- 48 units issued YTD is 5 above the same point last year; forecast issues = 52 versus plan 54
- British Bone Marrow Registry (BBMR) donor to patient matches 45 units above target
- International matches 40 and UK 5 above plan
- 160 units issued YTD compares to 96 at this point in 2020/21; forecast = 178 versus plan 130
- Donors recruited to the BBMR 'Fit panel' behind plan YTD and will miss the 30k year-end stretch target; ca 18k donors added to the searchable registry YTD
- **Therapeutic Apheresis Services** overall activity above plan by ca 4% YTD, driven by increased Plasma Exchange activity

### CMT Service Activity YTD Target

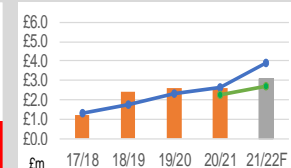
20,879 ↔



### CBC Sales YTD Target

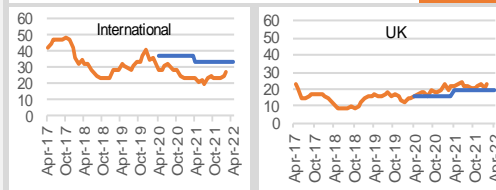
£2.58m

£2.16m ↔



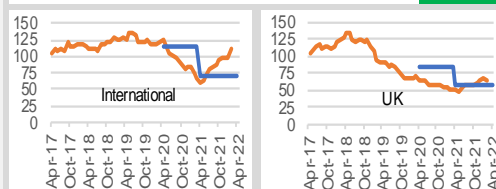
### Cord Blood Issues YTD Plan = 50

48 ↑



### BBMR Matches YTD Plan = 115

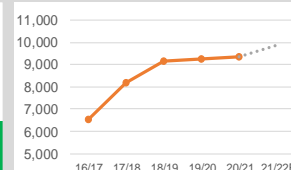
160 ↔



### TAS Activity Volume YTD Target

8,711

9,064 ↔

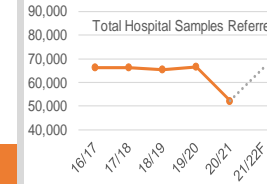


## Pathology Services

- **Histocompatibility and Immunogenetics (H&I)** service activity just below plan YTD
- Driven by lower than planned typing volumes for stem cell and solid organ transplants
- Platelet and Granulocyte Immunology work is above target, driven by referrals for VITT (but now reducing)
- Sample turnaround times better than target
- **Red Cell Immunohaematology (RCI)** activity 2% below plan YTD; the mix of activity is skewed towards more complex test requests, so income is ahead of plan
- Sample referrals just above the comparative period in 19/20 (0.7%), and well above 20/21 (14%)
- Sample turnaround times remain better than plan
- **International Blood Group Reference Laboratory (IBGRL)** sample turnaround times above target
- Fetal RHD screening activity is 3.5% below plan YTD
- The phased roll out of this service to more customers has been delayed by hospitals

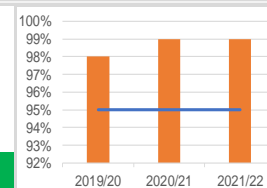
### H&I Service Activity YTD Plan 60,603

60,332 ↑



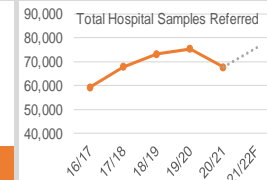
### H&I Turnaround Time YTD Plan 95%

99% ↔



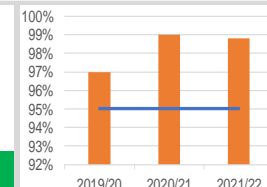
### RCI Service Activity YTD Plan 71,012

69,559 ↔



### RCI Turnaround Time YTD Plan 95%

99% ↔



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

100% ↔

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

95% ↔

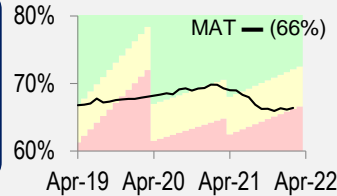
Note: blue lines on the charts = target; orange bars / lines = Annual Total / MAT; grey bars / lines = forecast

# OTDT: Director Report – February 2022

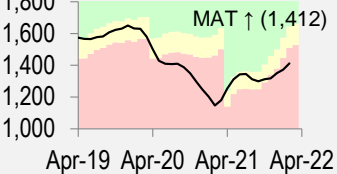
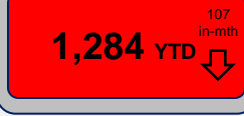
## Key risks, issues and actions for attention:

- Deceased organ donation pathway indicators continued to hold during February, but activity decreased to 107 proceeding donors. A high DCD consent/authorisation rate of 72% is encouraging given that is how we plan to increase donation activity next year. However, this was somewhat offset by a low 66% DBD rate, equating to a 70% consent/authorisation rate overall. Consequently, we saw an atypical ratio of 47% DBD to 53% DCD, which in turn affected transplant numbers (2.42 transplants per deceased donor). We are working hard to increase all donors and transplants, but we recognise that despite good progress in 2021/22 we will finish below our targets.
- Ocular donation continued to be low in February, despite focused activity and initiatives to improve this situation. A 7-point plan will be deployed during March – this includes increased SMT-level reporting, using international research evidence to re-assess retrieval timing criteria and expediting new hospice referral pathways.

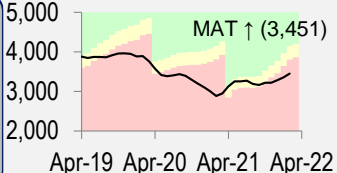
### Consent/Authorisation (Target 74% YTD)



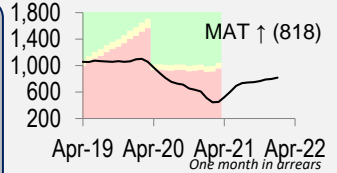
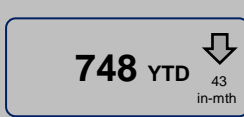
### Deceased Donors (Target 1,550 YTD)



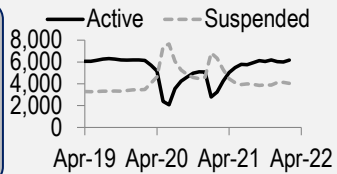
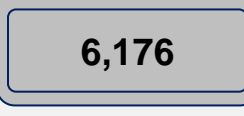
### Deceased Transplants (Target 3,923 YTD)



### Living Transplants month in arrears



### Active Transplant List last day of month



## Organs

### Donation

Deceased donors trended down in-month, with an atypical ratio of 47% DBD to 53% DCD (107, Red). The MAT trended up (to 1,412 donors) and returns to Summer 2020 MAT levels. However, this remains Red, as does the YTD metric (1,284) against a YTD target of 1,550.

- NHS indicators - referral and SN-OD presence - remain strong (93% YTD).
- The consent / authorisation rate increased in-month to 70% (amber). The DCD rate was high at 72% but offset somewhat by a low DBD rate of 66%. The MAT and YTD rates remain flat at 66%.

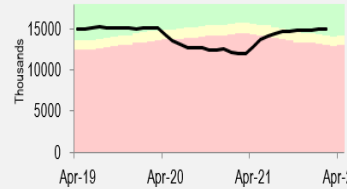
### Transplants

- Deceased donor transplants trended down in-month (259, Red). The MAT trended up, to 3,451 transplants, but remains Red. YTD we remain Red (3,140) against a YTD target of 3,923.
- We are working hard to increase donors and transplants, but we now know that we will finish 2021/22 Red for both. We would need more than 400 donors in March to reach the 1697 donor target, which is not possible.
- Living donor transplants trended down in-month (43) but we have seen a steady slight upward trend in the MAT (currently at 818) throughout the year. Ongoing late reporting for living donor transplants may mean activity continues to be revised upwards.

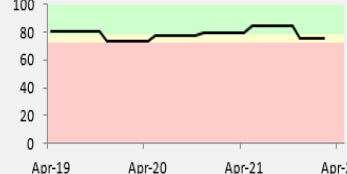
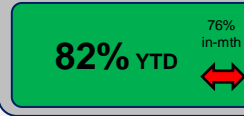
### Transplant List

- The combined active and suspended transplant list remains above 10 thousand (4,038 suspended and 6,176 active patients). We believe that further reactivations are planned by transplant centres and that pathway constraints means this is an under-representation of demand.

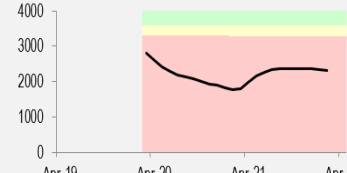
### TES – Income (Target £13,020 YTD)



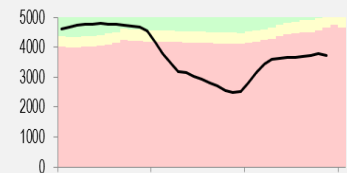
### Customer Satisfaction (Target 80% YTD)



### Cornea Donors (Target = 3,340 YTD)



### Cornea Issues for Transplant (Target = 4,816 YTD)



## Tissues and Eyes

### Donation

- Ocular donation continues to be very low throughout February and into early March.
- OTDT have produced a 7-step recovery plan for the ocular pathway that will be deployed during March.

### Issues / Income

- February income was lower than plan by -13.8% (-£170k), but the YTD position remains positive by 5.6% (£731k).
- Ocular Sales in February were behind target by -27.3% (-£109k), due to supply issues, however the YTD position is strong at 11.7% (£484k) above target.
- Serum Eyedrops sales remained above target in February by 24.4% (£85k) and YTD positive by 6.7% (£252k).
- Hospital insights suggested that the recovery in the orthopaedic / sports injury sectors would start in Q4 - linked to elective theatre capacity. Current sales suggests this has not yet fully materialized, with the income from key products being adverse (Tendons -£56k), however positive signs can be seen with processed bone (+£23k) and DBM (+£5k) sales favourable in month.

## 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 – February 2022

## Key risks, issues and actions for attention:

- Recruitment Activity has remained as predicted last month – we are looking to provide temporary resource in the team to help manage the increase in requests. It is positive to see though that the time to recruit has seen a slight decrease.
- Resolution Framework contract awarded to TCM; the initial report & recommendations are expected end March 22

### Recruitment

- High levels of activity continue with
- 172 adverts in month (Jan 163).
- Average time to recruit fell to 14.59 weeks from 14.79 weeks
- % successful recruitment decreased from 86.19% to 85.16%.
- Annual turnover continues to increase, now 16.64% from 16.30%.
- In February there were 82 new starters with 28 colleagues being from an ethnic minority background. With 71 leavers, of which 14 were from an ethnic minority, this represents a net increase of 14 ethnic minority colleagues. In Band 8 there were 5 leavers with 1 colleague(s) from an ethnic minority leaving. 6 new Band 8 starters commenced with 2 starters from an ethnic minority. **Net change +1**

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

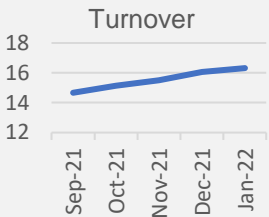
**+ 14 (+1)**

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

**34.15% (33%)**

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

**14.59**



### Leadership and Learning

- MT target = 95%, static at 92%
- PDPR target = 95%. Has increased by 2% to 82%.
- The February Engagement score is 7.85 (out of 10) a slight decrease from January (7.9).

	BME	%	Not Stated	%	White	%	Total
Advanced Line Manager	0	0%	0	0%	2	100%	2
Effective Line Manager	2	40%	0	0%	3	60%	5
The Inclusive Leader	10	19%	2	4%	42	78%	54
Total Delegates	12	6%	2	3%	47	77%	61

No. commencing leadership programmes

**61**

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

**82%**

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

**92%**

NHSBT Engagement Score (n out of 10)

**7.9**

### Case Resolution

- Live cases increased by 1 from January.
- 17 out of 28 cases are on track within the 90-day SLA timescale (61%).
- 11 cases are over-running against the SLA, being 3 in M&L, 2 in Blood Donation, 2 in Group, 1 in Donor Experience, 3 in Clinical.
- The over-running cases are 4 Grievances, 3 Dignity at Work and 4 Disciplinary.
- 5 out of the 11 over-running cases involve BAME colleagues - complex Grievance, Disciplinary or Dignity at Work cases.
- The case incidence rates for BAME colleagues will remain high until these long-running cases are resolved.
- 11 of the 28 live cases involve BAME colleagues (39%), of which 4 relate to the protected characteristic in terms of the issues raised.
- 4 of the 11 BAME cases relate to 2 individuals.
- 7 new cases raised in February, being 4 Disciplinary, 1 Dignity at Work, 1 Grievance and 1 Capability.
- 2 new BAME cases raised in February and 4 closed.
- 6 cases in total closed in February with an average duration of 127 days. 3 of these cases were closed within the 90-day SLA.

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

**7 (8)**

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

**6 (50%)**

No. of live cases month end

**28**

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

**16 (59%)**

Protected Characteristics Live Cases month end

**11 BAME (39%)**

**1 Disability (4%)**

**0 LGBT+ (0%)**

**17 Female (61%)**

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

**6 (6)**

No. of cases closed in month

**0**

Av days open in Q3

**25**

No of Live cases

**17**

### Freedom to Speak Up

- Variety of concerns raised, including recruitment/ restructure processes, sexual harassment by donor, manager conduct, data misuse
- Resolution Framework contract awarded to TCM; report & recommendations expected end March 22

# PEOPLE SERVICES: Director Report – February 2022

## Cases Live at month end

Headcount		Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22
2,051	BS - BD	6	7	7	7	6	7 (1)
1,212	BS - M&L	8	11	9	8	9	6 (2)
671	OTDT	1	0	3	2	1	1
1,016	CLINICAL	1	2	2	4	4	5 (1)
188	Donor Exp	2	1	1	1	1	1
749	Group	7	6	6	4	6	8 (3)
5,887	NHSBT	25	27	28	26	27	28
908	BAME	13	16	13	11	13	11
4,055	Female	14	14	17	15	14	17
1,832	Male	11	13	11	11	13	10
385	Disability	1	1	1	1	1	1
210	LGBT+	0	0	0	0	0	0

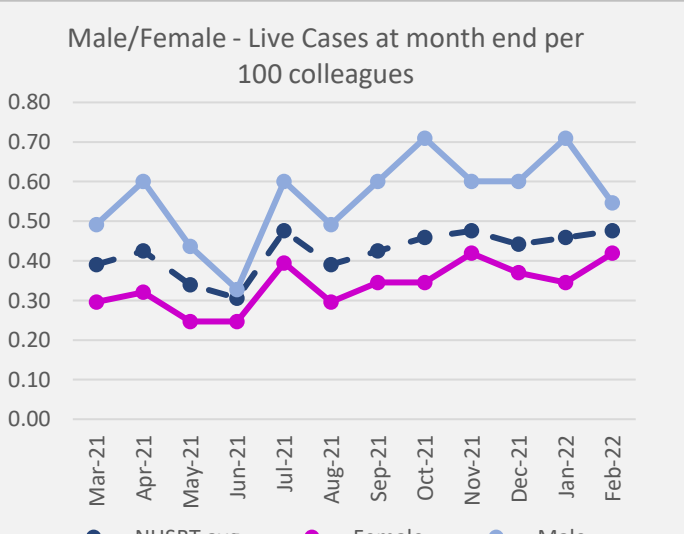
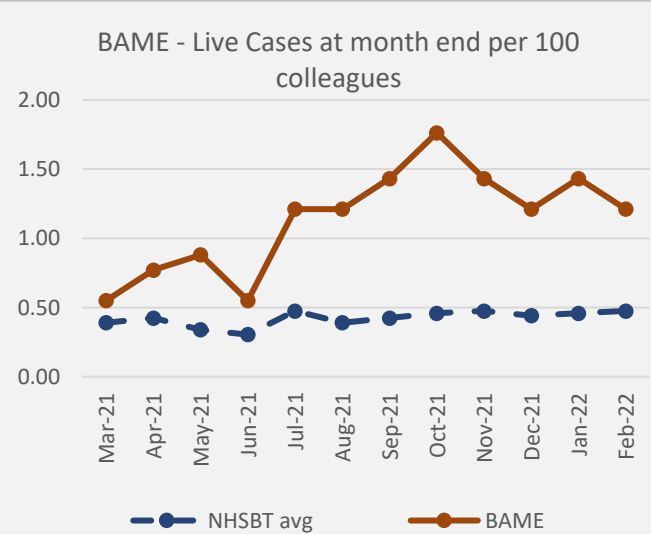
## Incidence Rates

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	6	0.5	202
671	OTDT	1	0.15	671
1,016	CLINICAL	5	0.49	203
188	Donor Exp	1	0.53	188
749	Group	8	1.07	94
5,887	NHSBT	28	0.48	210
908	BAME	11	1.21	83
4,055	Female	17	0.42	239
1,832	Male	10	0.55	183
385	Disability	1	0.26	385
210	LGBT+	0	0	0

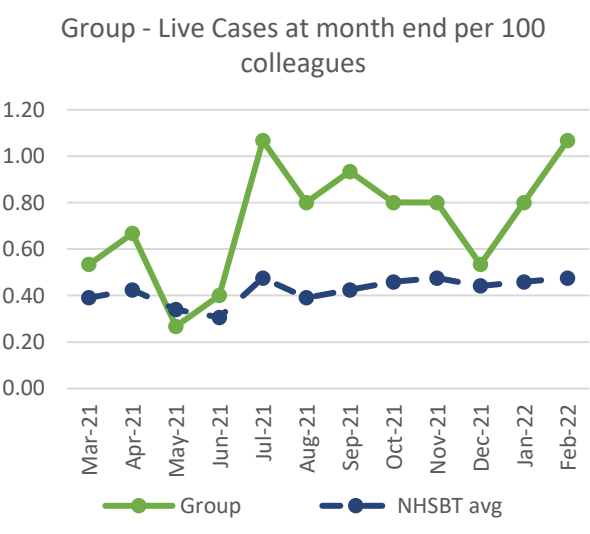
Data includes conflict resolution casework (disciplinary, grievance, dignity at work, capability, probation). Excludes other forms of casework undertaken by the HR function

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 – February 2022


## Key DDTS Updates & Risks

- Key Hospital Systems met availability targets. Critical National Infrastructure (CNI) and Key Public Systems (KPS) did not meet availability targets, details below.
- Within the Shared Server & Storage Project and Live Service Operations a substantial amount of legacy hardware has been safely and securely decommissioned and disposed.
- A substantial amount of change was implemented in February including network connectivity to the new Liverpool Donor Centre, 7 releases across critical line of business applications and core infrastructure .
- A DonorPath enhancement release went live successfully on the 23rd February. It provided a number of improvements to the Potential Donor Audit application in DonorPath, from small user experience changes (such as a visual indicator between draft and complete records) to changing the question flow for potential DCD donors giving a more logical order to questions and improving our ability to report on the use of screening in donor assessment. There were also a number of changes to DonorPath, including updates to the absolute contraindications and improvements to the coroner information triggered from a clinical incident.

## Key Systems Availability

### Critical National Infrastructure (CNI)

**Overall CNI Availability**  
**99.88%** ↓

Overall CNI 12 month trend  


**Pulse**  
(Target = 99.95%)  
**99.5%** ↓

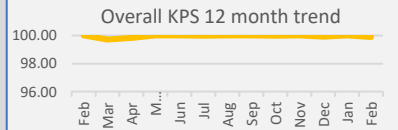
**Hematos**  
(Target = 99.95%)  
**100%** ↔

**National Transplant Database (NTxD)**  
(Target = 99.95%)  
**100%** ↔

**Organ Donor Register (ODR)**  
(Target = 99.95%)  
**100%** ↔

### Key Public Systems (KPS)

**Overall KPS Availability**  
**99.89%** ↓

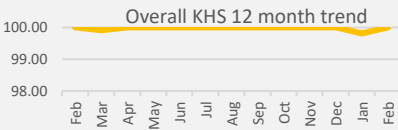
Overall KPS 12 month trend  


**Donor Portal**  
(Target = 99.90%)  
**100.00** ↔

**Corporate Websites**  
(Target = 99.00)  
**99.97%** ↓

### Key Hospital Systems (KHS)

**Overall KHS Availability**  
**100.00%** ↑

Overall KHS 12 month trend  


**Transport Mgt**  
(Target = 99.70%)  
**100%** ↑

**Online Blood Ordering System (OBOS)**  
(Target = 99.90%)  
**100%** ↔

**SO99**  
(Target = 99.90%)  
**100%** ↔


- NHSBT were prevented from issuing Blood via PULSE for a period of 3 Hours 22 Minutes on 11/02/22 due to an exceeded file storage issue resolved by removing older files. Root cause is under investigation.
- A planned change had an unexpected service impact that prevented web registrations via the Organ Donation website <https://www.organdonation.nhs.uk> for 1 Hour 45 Minutes on 23/02/22. Root cause was identified as the interaction of product specific configurations with the updated website code and could not have been identified in testing. The Change was rolled back to restore service.
- Clientele (an application to record and track to resolution complaints, queries and compliments from donors and members of the general public) was unavailable for a period of 14 Hours 58 minutes between 10/02/22 and 14/02/22. A workaround was identified that restored service. Clientele is due to be replaced shortly.
- Users who were not logged into Workspace (Desktop service) on 16/02/22 were unable to access the service for a period of 2 hours 35 minutes due to a security certificate renewal that had been updated on the application and also required installation within the network infrastructure. This has been documented and associated with the devices for future renewals.

## Cyber and Information Governance

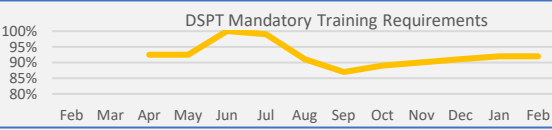
**ICO Incidents (Target =<5)**  
**1** ←

**DPIAs subject to COPI**  
**0** ↓

**DSPT Mandatory Training Requirements**  
(G = 100%; A = >90%; R = <90%)  
**92%** ↑

ICO Incidents - 12 month trend  


Trending graph will be available from April 2022 report onwards

DSPT Mandatory Training Requirements  


- **ICO Incidents:** Reportable Information Commissioner's Office (ICO) incidents as at Feb 22: One actively being managed - NHSBT has provided additional information in line with further questioning from the ICO in Jan 22, and is waiting a response. It is anticipated that the next phase of correspondence will provide a finalised resolution. The complaint re. ODR Freedom of Information reported on last month has now been closed, with the ICO issuing a decision notice in NHSBTs favour that all recorded information had been provided.
- **CNI DPIA's:** As at the Feb 22 board report, DDTS will report on CNI DPIA's (Data Protection Impact Assessments) instead of DPIA's subject to COPI (Control of Patient Information) as this work was closed out in Jan 22. As at Feb 22, two CNI DPIAs are in progress and final stages of sign off (ODR + Hematos), one in initial scoping (Pulse) and two to be scoped out (NTxD and IRGBL).
- **DSPT Mandatory Training Requirements:** Whilst training compliance has reduced since the DSPT submission in June 2021 (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.