

NHSBT Business Plan 2022-23

Final Draft for Board
29th March 2022

1. Introduction - what is the business plan?
2. NHSBT Strategy
3. Where the business plan sits vs. strategy and directorate-level activity
4. Business plan alignment to wider DHSC and NHS priorities and standards
5. Targets and activity for each strategic priority – what we aim to do and how we'll do it
6. Performance management – how we monitor performance against the business plan
7. Financials - our forecast income and expenditure required to deliver the business plan

The NHSBT Business Plan sets out the strategic targets and key activities required to deliver the NHSBT Strategy

- The NHSBT Business Plan is an annual document that explains what we will do during the 2022-23 financial year to deliver against our strategic priorities
- It is driven by the NHSBT Strategy and it informs activity undertaken across all NHSBT directorates
- The NHSBT Business Plan presents activity against each strategic priority, and follows the structure outlined in the NHSBT Strategy, with the addition of targets for the year ahead as well as a 4-5 year horizon
- Each strategic priority section describes
 - What success looks like
 - How we'll measure that success
 - What specific targets we'll work towards
 - What are the most important things we'll do to get there
- Progress against the NHSBT Business Plan will be tracked at Board, Executive Team and Directorate levels via coordinated monthly, quarterly and bi-annual reporting
- The final section of the business plan is a summary of our finances, showing our expected income and expenditure next year, required to deliver our plan.

As we look to the future, our ambition is to save and improve *even more* lives Blood and Transplant

To deliver this we will:



Grow and diversify our donor base

to meet clinical demand and reduce health inequalities



Modernise our operations

to improve safety, resilience and efficiency



Drive innovation

to improve patient outcomes



Collaborate with partners

to develop and scale new services for the NHS



Invest in people and culture

to ensure a high performing, inclusive organisation

Our vision: a world where every patient receives the donation they need

3. Strategy and the Business Plan



The NHSBT Business Plan describes our targets and activity under each of our five strategic priorities set out in the overarching NHSBT Strategy

Strategic priorities

Grow and diversify our donor base

Modernise our operations

Drive innovation

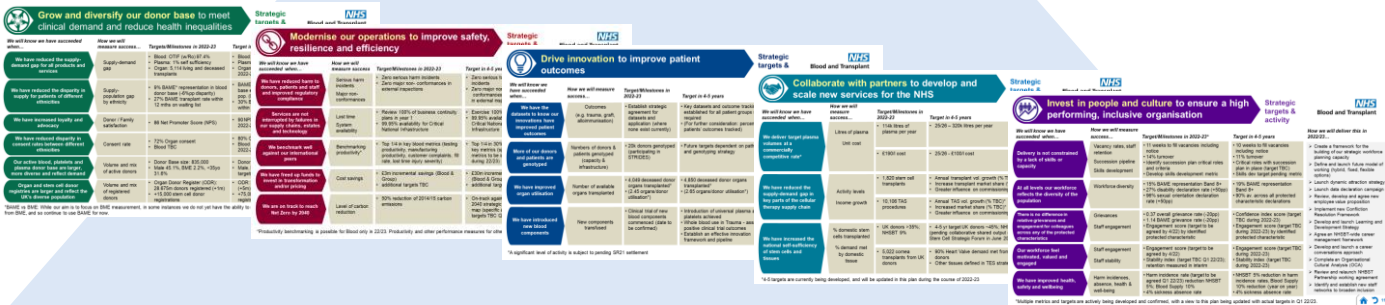
Collaborate with partners

Invest in people and culture

NHSBT Strategy*

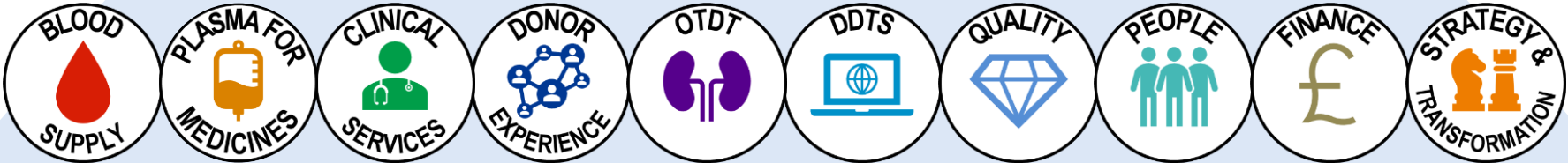
Strategic targets and activity

NHSBT Business Plan



Detailed directorate-led priorities, targets, and actions

Directorate-level business plans



*The new NHSBT Strategy will be published externally in March 2022, following ET, Board, and DHSC approval.

4. Business plan alignment to wider DHSC and NHS priorities

The NHSBT Business Plan is fully aligned to the relevant Department of Health and Social Care and NHS priorities



Blood and Transplant

The new multi-year NHSBT Strategy will be published in Q1 2022-23. This Business Plan represents the first year of our work to execute this strategy. The NHSBT Strategy has been developed in full alignment with Department of Health and Social Care (DHSC) and NHS Long Term Plan priorities. It reflects how we will most effectively fulfil our mission to save and improve lives, as well as our role in contributing towards wider DHSC and NHS objectives. Our strategy has five strategic priorities:

- Grow and diversify our donor base to meet clinical demand and reduce health inequalities
- Modernise our operations to improve safety, resilience and efficiency
- Drive innovation to improve patient outcomes
- Collaborate with partners to develop and scale new services for the NHS
- Invest in people and culture to ensure a high performing, inclusive organisation

Alignment to DHSC vision, core roles, and Outcome Delivery Plan

We enjoy strong sponsorship from the DHSC, as well as the Devolved Administrations, who together provide direction on ministerial priorities and hold us to account for our performance. Our Strategy and Business Plan contribute directly to the DHSC vision *to enable everyone to live more independent, healthier lives for longer*. Of the DHSC's core roles, the NHSBT particularly supports 'Delivering Services'. We do this through our delivery of health services to improve and protect the health and wellbeing of our patients, maintaining continuity of supply during the COVID pandemic and, in the longer term, improving healthcare outcomes and equality by delivering against our strategy. The Business Plan is a living document that will continue to reflect emerging priorities and policy focus, such as the upcoming 2022 White Paper on Health Disparities.

Alignment to NHS 2022-23 priorities

In a similar way, our Strategy and Business Plan have been designed to ensure we support wider NHS priorities for the coming year and contribute to the strategic

purposes of the newly established Integrated Care Systems, as outlined in the NHS 2022/23 priorities and operational planning guidance, specifically:

- Improving outcomes in population health and healthcare, particularly via our strategic priorities to drive innovation in order to improve patient outcomes, and collaborate with partners to develop and scale new services.
- Tackling inequalities in outcomes, experience and access, particularly via our strategic priority to grow and diversify our donor base.
- Enhancing productivity and value for money, particularly via our strategic priorities to modernise our operations, and to invest in our people and culture.

In addition, we continue to maintain focus on the 2021-22 NHS priority areas for tackling health inequalities, reflecting the Government's wider levelling up agenda, as well as the 2021 Health and Care Bill. We will do this by growing and diversifying our blood and organ donor base, improving the inclusivity of our donation experience, and removing the barriers that prevents many from donating. Our activity in 2022-23 will also take place in the context of the Government's *Living with COVID-19* plan, which will inform how we operate with colleagues, donors, and patients.

Finally, we are committed to meeting all relevant **Government Functional Standards** in a way that meets our business needs and priorities set out in our Business Plan. All 15 government functional standards have some relevance to the work of NHSBT. In Q1 2022-23 we will have completed an organisation-wide assurance mapping exercise that includes functional standards, and will inform our statement of compliance to the DHSC.

We are excited to share our Business Plan and to commit ourselves to targets and activity that will make such a significant and positive impact towards saving and improving even more lives in 2022-23 and the years ahead.



Section 5.
Strategic
targets &
activity


Grow and diversify our donor base to meet clinical demand and reduce health inequalities

We will know we have succeeded when...

How we will measure success...

Targets/Milestones in 2022-23

Target in 4-5 years

How we will deliver this in 2022/23...

We have reduced the supply-demand gap for all products and services

Supply-demand gap¹

- Blood: 57,500 Ro units
- Plasma: 114k litres
- Organs: 5,114 living and deceased transplants
- Corneas: 5,022 UK donor transplants

- Blood: 104,490 Ro units
- Plasma: 320k litres (2025-26)
- Organs: target TBC during 2022-23
- Corneas: target TBC as part of 2023 TES Strategy

- Refresh insight on post-pandemic donor sentiment and behaviours
- Implement seasonal promotion of donation in the NHS App

We have reduced the disparity in supply for patients of different ethnicities

Supply-population gap by ethnicity

- 9% BME² representation in blood donor base (6pp disparity with BME representation of UK population)
- Target related to BAME² representation among deceased organ donor base TBC during Q1 2022-23

- BME % of blood donor base equals BME % of UK pop. (zero disparity)
- Target related to BAME² representation among deceased organ donor base TBC during Q1 2022-23

- Deliver new marketing technology for more efficient engagement of donors
- Recruit, on-board and launch a new Partnerships and Community Engagement Team and multi-year plan

We have increased loyalty and advocacy

Donor / Family satisfaction

- 86 Net Promoter Score (NPS) (+1)

- 90 NPS (+5) (target TBC during 2022-23)

We have reduced disparity in consent rates between different ethnicities

Consent rate

- 43% BAME organ consent rate (no increase in disparity vs. non-BAME rate)³

- Target for BAME organ consent rate TBC during 2022-23

- Introduce Blood typing at home for priority transfusion donor enrollees

Our active blood, platelets and plasma donor base is larger, more diverse and reflect demand

Volume and mix of active donors

- Donor Base size: 835,000
- Male 45.1%, BME 2.2%, <35yo 31.6%⁴
- 11/11 blood types and components to plan

- Donor base size: 1m
- Male 51%, BME 8.4%, <35yo 34%⁴
- 11/11 blood types and components to plan

- Integrate all registration and management for transfusion donors into Web and App

Organ and stem cell donor registries are larger and reflect the UK's diverse population

Volume and mix of registered donors

- Organ Donor Register (ODR): 28.675m donors registered (+1m)
- 115k stem cell donor registrations⁵ (+30k new registrations)

- ODR: 33m donors registered (+5m)
- 193k stem cell donor registrations⁵ (+150k new)

- Launch updated transfusion environment in new centres

1. Supply-demand gap targets are based on volume (supply) as the most meaningful way currently available to measure performance against this overall supply-demand gap metric.
 2. BME vs BAME: Black and Mixed Ethnicity used for Blood as target ethnicity for Ro Blood Type, BAME is relevant for organ donation which includes Asian ethnicity.
 3. Consent rate disparity held steady in 2022-23 due to a focus on raising consent rates among both non-BAME and BAME groups, as this will have an overall positive impact on availability to BAME patients; Longer-term focus will be to grow consent rate among BAME potential donors at a faster rate, thus reducing disparity.
 4. Donor mix targets for Male, BME, <35yo representation are whole blood targets and will be updated to reflect total donor base during Q1 2022-23.
 5. Stem cell donor targets are contingent on marketing funding and may be adjusted to reflect this. Totals include est. 6% p.a. attrition rate.



Modernise our operations to improve safety, resilience and efficiency

We will know we have succeeded when...

How we will measure success

Target/Milestones in 2022-23

Target in 4-5 years

How we will deliver this in 2022/23...

We have reduced harm to donors, patients and staff and improved regulatory compliance

Serious harm incidents
Major non-conformances

- Zero serious harm incidents
- Zero major non-conformances in external inspections

- Zero serious harm incidents
- Zero major non-conformances in external inspections

- Safely deliver the Blood Technology Modernisation Programme
- Successfully deliver the Testing Development Programme
- Implement automated results transfer
- Embed and mature Cyber capabilities
- Develop integrated testing and pathology strategy and transformation programme across NHSBT

Services are not interrupted by failures in our supply chains, estates and technology

Service delivery
Lost time
System availability

- Blood: OTIF (w/Ro) 97.4%
- Review 100% of business continuity plans in year 1
- 99.95% availability for Critical National Infrastructure

- Blood: OTIF (w/Ro) 98.9%
- Exercise 100% of BC plans
- 99.95% availability for Critical National Infrastructure

We benchmark well against our international peers

Benchmarking productivity¹

- Top ¼ in 30% of key blood metrics (incl. testing and manufacturing productivity, customer complaints, fill rate, lost time injury severity)

- Top ¼ in 75% of NHSBT key metrics (specific 4-5 yr metrics to be confirmed during 22/23)

- Complete donor-to-patient Value Stream Map
- Develop multi-year cost improvement plan
- Design and implement our collection footprint and optimal collection model

We have freed up funds to invest in transformation and/or pricing

Cost savings

- £3m incremental savings (Blood & Group)
- additional targets TBC

- £30m incremental savings (Blood & Group)
- additional targets TBC

We are on track to reach Net Zero by 2040

Level of carbon reduction

- 50% reduction of 2014/15 carbon emissions

- On-track against Net Zero 2040 strategic plan / road map (specific annual targets TBC Q1 22/23)

- Refresh Sustainability Strategy 2025
- Roadmap to align to 2040 target
- Implement revised greenhouse gas protocol methodology

¹Productivity benchmarking is possible for Blood only in 22/23. Productivity and other performance measures for other areas will be developed in due course.



Drive innovation to improve patient outcomes

We will know we have succeeded when...

How we will measure success...

Target/Milestones in 2022-23

Target in 4-5 years

How we will deliver this in 2022/23...

We have the datasets to know our innovations have improved patient outcomes

Outcomes
(e.g. trauma, graft, alloimmunisation)

- Establish strategic agreement for datasets and application (where none exist currently)

- Key datasets and outcome tracking established for all patient groups where required
- (For further consideration: percentage of patients' outcomes tracked)

- Develop and advance the Genomics Programme
- Deliver Organ Utilisation Group recommendations as agreed with DSHC*
- Digitalisation of the paper based system for the management of living donors and recipients, to reduce clinical risk
- Complete Universal plasma / Universal platelets: Feasibility and cost benefit analysis
- Commence Whole Blood use in trauma clinical trial
- Support UK Stem Cell Strategic Forum Data mapping work across the stem cell pathways
- Set up Transfusion 2024 programme
- Launch 5 new Blood and Transplant Research Units
- Establish NHSBT-wide systematic horizon scanning framework
- Further research partnerships and collaborations (e.g. the SIGNET Study)

More of our donors and patients are genotyped

Numbers of donors & patients genotyped (capacity & infrastructure)

- 20k donors genotyped (participating in STRIDES)

- Future targets dependent on pathology and genotyping strategy

We have improved organ utilisation

Number of available organs transplanted

- 4,049 deceased donor organs transplanted*
- (2.45 organs/donor utilisation¹)

- 4,850 deceased donor organs transplanted*
- (2.65 organs/donor utilisation*)

We have introduced new blood components

New components transfused

- Clinical trial of new blood components commenced (date to be confirmed)

- Introduction of universal plasma and platelets achieved
- Whole blood use in Trauma - assumes positive clinical trial outcomes
- Establish an effective innovation framework and pipeline

¹A significant level of activity is subject to pending SR21 settlement



Collaborate with partners to develop and scale new services for the NHS

<i>We will know we have succeeded when...</i>	<i>How we will measure success...</i>	<i>Target/Milestones in 2022-23</i>	<i>Target in 4-5 years</i>	<i>How we will deliver this in 2022/23...</i>
We deliver target plasma volumes at a commercially competitive rate	Litres of plasma Unit cost Self-sufficiency	<ul style="list-style-type: none"> 114k litres of plasma £190/l cost 	<ul style="list-style-type: none"> 2025-26: 320k litres of plasma 2025-26 - £100/l cost 20% UK self sufficiency 	<ul style="list-style-type: none"> ➤ Collaborate closely with DHSC, NHSE, MHRA in the development and growth of services ➤ Commence fractionator integration ➤ Build new plasma capabilities; test & learn ➤ Collect every drop of recovered plasma
We have reduced the supply-demand gap in key parts of the cellular therapy supply chain	Activity levels Income growth	<ul style="list-style-type: none"> 1,820 stem cell transplants supported (+1%) 10,106 TAS procedures (+2%) 	<ul style="list-style-type: none"> Annual transplant vol. growth (% TBC)¹ Increase transplant market share (% TBC)¹ Greater influence on commissioning Annual TAS vol. growth (% TBC)¹ Increased market share (% TBC)¹ Greater influence on commissioning 	<ul style="list-style-type: none"> ➤ Drive activity and income growth across Cell, Apheresis and Gene Therapies (CAGT) ➤ Work with partners to develop UK Stem Cell Strategic Forum recommendations ➤ Develop and launch CAGT Strategy
We have increased the national self-sufficiency of stem cells and tissues	% domestic stem cells transplanted % demand met by domestic tissue	<ul style="list-style-type: none"> UK donors >35%; NHSBT 9% Develop plan to increase self-sufficiency in tissue as part of 2023 TES Strategy 	<ul style="list-style-type: none"> 4-5 yr target UK donors ~45%; NHSBT 15% (pending collaborative shared output of UK Stem Cell Strategic Forum in June 2022) 90% Heart Valve demand met from UK donors Other tissues defined in 2023 TES Strategy 	<ul style="list-style-type: none"> ➤ Agree optimal size and shape of British Bone Marrow Registry (BBMR) ➤ Develop Tissue and Eye Service (TES) strategy ➤ Increase the number of cornea donors through better utilisation of organ donors for ocular donation; improve quality and quantity of tissue donor referrals ➤ Map clinical and scientific education activities and funding



Invest in people and culture to ensure a high performing, inclusive organisation

We will know we have succeeded when...

Delivery is not constrained by a lack of skills or capacity

At all levels our workforce reflects the diversity of the population

There is no difference in relative grievances and engagement for colleagues across any of the protected characteristics

Our workforce feel motivated, valued and engaged

We have improved health, safety and wellbeing

How we will measure success...

Vacancy rates, staff retention
Succession pipeline
Skills development

Workforce diversity

Grievances
Staff engagement

Staff engagement
Staff stability

Harm incidences (HI), absence, health & well-being

Target/Milestones in 2022-23*

- 11 weeks to fill vacancies including notice
- 14% turnover
- Identify succession plan critical roles and criteria
- Develop skills development metric

- 15% BAME representation Band 8+
- 27% disability declaration rate (+50%)
- 96% sexual orientation declaration rate (+50%)

- 0.37 overall grievance rate (-20%)
- 1.14 BAME grievance rate (-20%)
- Engagement score (target to be agreed by 4/22) by identified protected characteristic

- Engagement score (target to be agreed by 4/22)
- Stability index (target TBC Q1 22/23); retention measured in interim

- 8.9 HI rate NHSBT (-5%)
- 14.0 HI rate Blood (-10%)
- 4% sickness absence rate

Target in 4-5 years

- 10 weeks to fill vacancies including notice
- 11% turnover
- Critical roles with succession plan in place (target TBC)
- Skills dev target pending metric

- 19% BAME representation Band 8+
- 90% av. across all protected characteristic declarations

- Confidence index score (target TBC during 2022-23)
- Engagement score (target TBC during 2022-23) by identified protected characteristic

- Engagement score (target TBC during 2022-23)
- Stability index (target TBC during 2022-23)

- 7.37 HI rate NHSBT (-5% p.a.)
- 9.21 HI rate Blood (-10% pa.)
- 4% sickness absence rate

How we will deliver this in 2022/23...

- Create a framework for the building of our strategic workforce planning capacity
- Define and launch future model of working (hybrid, fixed, flexible options)
- Launch dynamic attraction strategy
- Launch data declaration campaign
- Review, develop and agree new employee value proposition
- Implement new Confliction Resolution Framework
- Develop and launch Learning and Development Strategy
- Agree an NHSBT-wide career management framework
- Develop and launch a career conversations approach
- Complete an Organisational Cultural Analysis (OCA)
- Review and relaunch NHBST Partnership working agreement
- Identify and establish new staff networks to broaden inclusion

6. Performance management

Progress against the NHSBT Business Plan will be tracked at Board, Executive Team and Directorate levels across coordinated monthly, quarterly and bi-annual reporting

Level of accountability	Where activity & targets are stated	Scheduled output	Frequency	Level of review
NHSBT-wide (ET)	<div><p>NHSBT Strategy</p><div><div>Grow and diversify our donor base</div><div>Modernise our operations</div><div>Drive innovation</div><div>Collaborate with partners</div><div>Invest in people and culture</div></div><p>NHSBT Budget</p><div></div><p>NHSBT Business Plan</p><div></div></div>	<ul style="list-style-type: none">NHSBT Performance Report	<ul style="list-style-type: none">Monthly	<ul style="list-style-type: none">ET & Board
		<ul style="list-style-type: none">NHSBT Investment Portfolio Status Report	<ul style="list-style-type: none">Monthly	<ul style="list-style-type: none">ET
		<ul style="list-style-type: none">Financial Performance Report	<ul style="list-style-type: none">MonthlyQuarterly	<ul style="list-style-type: none">ET & BoardFinance Committee
		<ul style="list-style-type: none">Strategy and Business Plan Review	<ul style="list-style-type: none">Bi-annual	<ul style="list-style-type: none">ET & Board
Directorates	<div><p>Directorate Business Plans</p><div><div><div>BLOOD SUPPLY</div><div>PLASMA FOR MEDICINES</div><div>CLINICAL SERVICES</div><div>DONOR EXPERIENCE</div><div>OTDT</div><div>DDTS</div><div>QUALITY</div><div>PEOPLE</div><div>FINANCE</div><div>STRATEGY & TRANSFORMATION</div></div></div></div>	<ul style="list-style-type: none">Directorate Performance Review	<ul style="list-style-type: none">Quarterly (operational directorates)Bi-annual (group services directorates)	<ul style="list-style-type: none">CEO

Income

Blood and Transplant

Income (£m)	2020/21 Actual	2021/22 Budget	2021/22 Forecast	2022/23 Budget	Movement from Forecast	Virements	Movement excl Virements	% Change From Forecast
Programme Funding - Organ Donation & Transplantation	62.3	68.6	68.6	67.3	-1.3	-0.5	-0.8	-1%
Programme Funding - Organ Donation and Transplantation - Opt Out	11.5	0.0	0.0	2.0	2.0	0.0	2.0	-
Programme Funding - BBMR and Cord Blood	4.2	4.2	4.2	4.5	0.3	0.0	0.3	8%
Programme Funding - Convalescent Plasma	57.6	0.0	9.1	0.0	-9.1	0.0	-9.1	-100%
Programme Funding - Plasma for Medicines	0.0	46.0	21.7	14.1	-7.6	0.0	-7.6	-35%
Programme Funding - Corporate	11.1	10.9	12.0	12.4	0.4	0.0	0.4	4%
Programme Funding - Tissue and Eye Services	0.0	0.0	0.0	0.6	0.6	0.5	0.1	-
Blood & Components Income	277.0	288.3	288.2	305.6	17.4	0.0	17.4	6%
Non-Clinical Issues	3.2	3.5	2.6	1.2	-1.4	-2.2	0.8	32%
Plasma for Medicines Income	0.0	0.0	0.0	7.5	7.5	2.2	5.3	-
Blood Supply Other Income	3.2	3.3	3.8	3.5	-0.2	0.0	-0.2	-7%
Clinical Services Income	58.6	66.7	68.9	72.4	3.5	0.0	3.5	5%
Medical Directorate Income	1.2	1.0	1.0	1.2	0.2	0.0	0.2	20%
Research and Development Income	2.0	2.4	2.6	2.6	0.0	0.0	0.0	0%
Tissue & Eye Services Income	12.0	14.3	15.2	17.9	2.7	0.0	2.7	18%
Organ Donation & Transplantation - UKHDs & Other Income	12.6	12.9	12.3	12.6	0.3	0.0	0.3	2%
Organ Donation & Transplantation - NHSE Income	1.6	3.3	2.2	3.4	1.2	0.0	1.2	57%
Group Services Other Income	3.4	1.7	2.0	1.7	-0.3	0.0	-0.3	-14%
Total Income	521.5	527.1	514.4	530.6	16.3	0.0	16.2	3%
Total Operating Costs	-506.1	-516.3	-500.5	-508.1	-7.6	0.0	-7.5	2%
Transformation Fund Blood / Group	-12.7	-17.0	-17.0	-15.0	2.0	0.0	2.0	-12%
Transformation Fund Plasma	0.0	0.0	0.0	-5.5	-5.5	0.0	-5.5	-
Transformation Fund ODT	-14.9	-13.0	-10.2	-4.5	5.7	0.0	5.7	-56%
Transformation Fund Clinical Services	-0.9	-3.7	-1.8	-3.8	-2.0	0.0	-2.0	112%
Net I&E Position	-13.0	-23.0	-15.1	-6.2	8.9	0.0	8.9	-59%

Note: Budgets for 2022-23 will depend to a certain extent on DHSC allocations, which may not be fully confirmed until May/June 2022, and so are subject to change, which may impact Business Plan targets and activity. The Business Plan will be updated as and when funding is confirmed.

Expenditure

Expenditure (£m)	2020/21 Actual	2021/22 Budget	2021/22 Forecast	2022/23 Budget	Movement from Forecast	Virements	Movement excl Virements	% Change From Forecast
Cost of Sales - Blood Component Stock Movement	-0.5	0.0	-1.3	0.0	1.3	0.0	1.3	100%
Cost of Sales - Tissue and Eye Services	-0.7	-0.8	-0.7	-0.5	0.2	0.0	0.2	26%
Convalescent Plasma	-57.6	0.0	-9.1	0.0	9.1	0.0	9.1	100%
Plasma for Medicines	0.0	-46.0	-20.8	-11.0	9.9	0.0	9.9	47%
Plasma for Medicines Transformation	0.0	0.0	0.0	-5.5	-5.5	0.0	-5.5	-
Donor Experience	-18.3	-20.5	-20.5	-23.9	-3.4	-1.8	-1.6	-8%
Blood Supply: Blood Donation	-61.8	-71.4	-75.7	-75.7	0.0	-1.5	1.5	2%
Blood Supply: Manufacturing, Testing & Issue	-68.2	-65.7	-65.5	-66.1	-0.6	1.8	-2.3	-4%
Blood Supply: Logistics	-20.3	-19.7	-21.3	-22.2	-0.8	0.0	-0.8	-4%
Clinical Services Operations	-53.5	-60.8	-60.3	-65.8	-5.6	-0.1	-5.5	-9%
Clinical Services Change Programme	-0.9	-3.7	-1.8	-3.8	-2.0	0.0	-2.0	-112%
Medical Directorate	-15.6	-17.0	-16.4	-17.7	-1.3	0.3	-1.6	-10%
Research and Development	-4.8	-5.3	-5.5	-6.1	-0.6	-0.4	-0.2	-4%
OTDT - Organ Donation and Transplantation	-55.3	-68.6	-62.8	-71.9	-9.2	0.0	-9.2	-15%
OTDT - Organ Donation and Transplantation Change Programme	-14.9	-13.0	-10.2	-4.5	5.7	0.0	5.7	56%
OTDT - Tissue and Eye Services	-10.9	-12.0	-11.8	-12.5	-0.8	0.0	-0.8	-6%
Estates & Facilities	-45.3	-44.8	-44.8	-49.0	-4.2	0.3	-4.6	-10%
Digital, Data and Technology Services	-34.9	-40.4	-40.6	-44.3	-3.7	-0.3	-3.4	-8%
People	-9.5	-10.1	-11.2	-11.0	0.1	-0.5	0.6	5%
Quality	-5.6	-7.2	-7.3	-8.6	-1.4	-0.3	-1.1	-15%
Finance	-7.0	-6.6	-7.3	-7.3	-0.0	0.0	-0.0	0%
Strategy and Transformation	-1.9	-2.3	-2.6	-0.5	2.1	1.8	0.3	14%
Business Transformation Services	-1.7	-0.6	-0.5	-0.6	-0.1	0.0	-0.1	-12%
Chief Executive and Board	-0.6	-0.8	-0.7	-0.8	-0.1	0.0	-0.1	-12%
Change Programme (Blood & Corporate)	-12.7	-17.0	-17.0	-15.0	2.0	0.0	2.0	12%
Miscellaneous and Capital Charges	-32.1	-15.6	-13.9	-12.5	1.4	0.6	0.8	6%
Total Expenditure	-534.5	-550.1	-529.4	-536.8	-7.5	0.0	-7.4	-1%