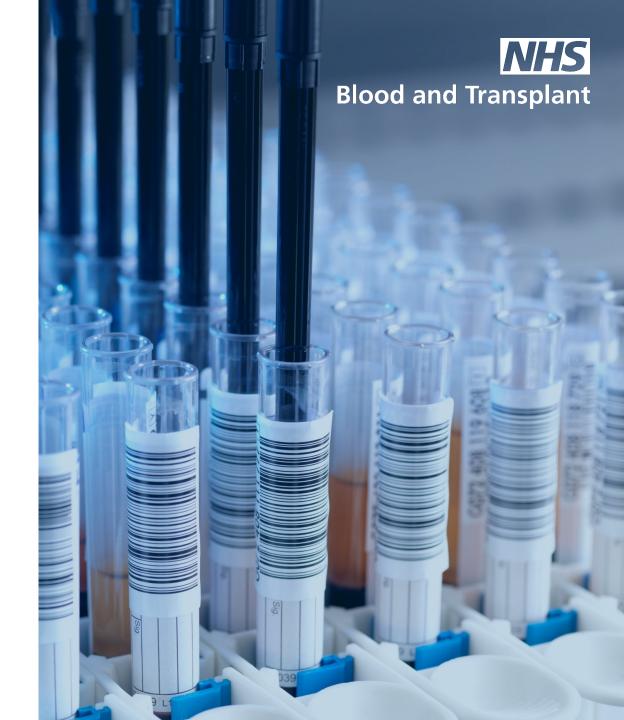
NHSBT ET & Board Performance Report

June 2022

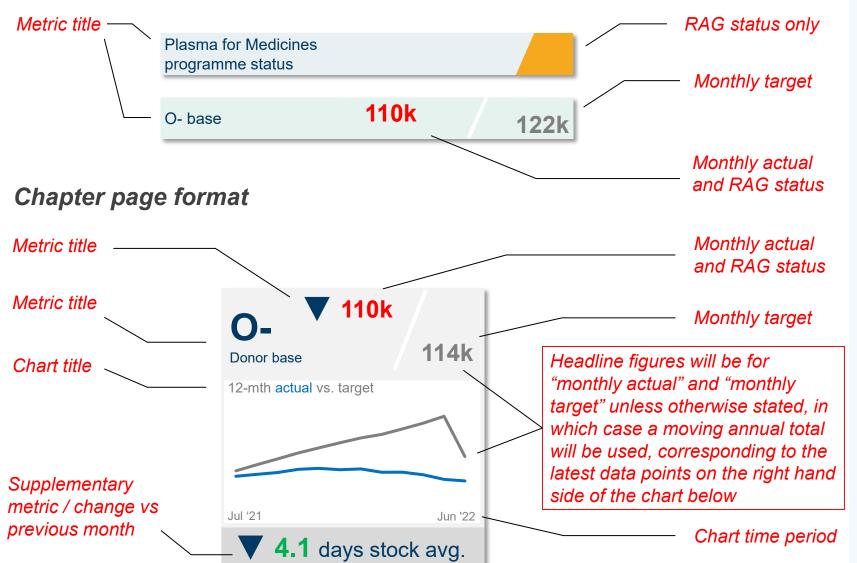
1.	How to read this report	2
2.	Executive Summary	3
3.	Performance summary against strategic targets	4
4.	Grow and diversify our donor base	5-6
5.	. Modernise our operations	
3.	Drive innovation	10
7.	Collaborate with partners	11-12
3.	Invest in people and culture	13-15
9.	Appendix: Glossary of metrics by strategic priority	16-20



How to read this report



Dashboard page format



Points to note

- This Performance Report is designed to be user-friendly, using a clear, simple and consistent approach to the presentation of metrics and data
- The report is now structured around the strategic priorities set out in the NHSBT Strategy
- The most common data presentations for the dashboard page and chapter pages are outlined here
- Unless stated otherwise, RAG status is green for at or above target, amber for within 2% of target, or red for >2% from target
- Wherever possible RAG status will be based on absolute numbers rather than percentage values
- Many metrics are expressed as a Moving Annual Total (MAT). This provides a rolling 12-mth total for performance data. 2

Executive Summary

Performance Insights

Five critical areas are not performing in line with targets and continued leadership intervention is required:

1.Blood stock stability has not recovered and is being managed by an incident response team

Red cell stocks have been declining and sit below target levels, with stocks of some ABO groups close to the two-day threshold at which NHSBT would declare an 'amber' alert. Should this happen, NHSBT would work with hospitals to manage demand, including asking them to consider postponing elective activity. The main reason for our declining stocks are some acute workforce issues on some blood collection teams, driven by a combination of high turnover (averaging 27% overall) and rising sickness absence (in part due to COVID-19).

Additionally, appointment fill rates have declined (91% of appointments filled vs 93% pre-pandemic) and donor non-attends have increased (20% vs 16% pre-pandemic).

An incident response team is actively managing blood stock levels with People and Donor Experience leading on immediate and longer-term interventions to stabilise the workforce and mobilise more donors.

2. Size and diversity of our donor base is below target and is being further impacted by blood stock stability

The whole blood and O neg donor base remain below target due to fewer new donors, lower reactivation and higher inactivation driving falls in month. The Ro donor base has also fallen for the first time since Jan 2021 and remains below target with growth slower than planned. Regular donors have been prioritised at the expense of new donor recruitment, to meet short term supply, which has impacted delivery of new donor targets.

3.Organ donation and transplantation recovery has continued, but is still below plan

OTDT has continued to recover through quarter one despite uncertainties presented by a flat funding settlement and another wave of Covid-19. Tissues has also performed strongly through quarter one with income 16% and 450k ahead of target to date. However, average monthly growth rates have fallen and interventions to improve performance have plateaued, suggesting that TES might struggle to maintain performance throughout 22/23 without identifying further interventions which yield improved performance in the medium and long term.

4. Plasma collection and donor base are below target

The first consignment of Plasma for Diagnostics (PfD) of circa. 35k units (10.23KL) was delivered to Roche in Germany in June. It will be used to create non-clinical products such as calibration kits, diagnostic kits and reagents.

The Plasma programme RAG remains amber due to the slow ramp up in target volumes, caused by staff shortages across Blood Supply. With sourced plasma and recovered plasma collection and the sourced plasma donor base underperforming during quarter 1, back to green plans are in place to recoup the shortfall with additional activity in the second half of 22/23.

5. Workforce issues driven by high sickness and staff turnover rates are impacting across the organisation

These are showing up most acutely in Blood Supply.

Performance summary against most important strategic targets



Grow and diversify o	ur donor base to mee	t clinical demand	and reduce health inequalities			Modernise our operation and efficiency	ions to improve safe	ty, resilience
Size of Whole Blood donor base	791k	817k	Plasma vol. in stock (sourced), litres YTD	1,449	2,199	Blood stock stability Average days' of stock	5.2	5.5 – 7.0
O- base	110k	116k	Plasma vol. in stock (recovered), litres YTD	12,531	13,641	Serious Incidents	0 (1 YTD)	0
Ro base	25.0k	27.0k	Organ consent rate YTD (total)	64%	72%	Critical Infrastructure	100%	/ 00 050/
Blood donor mix: Black, Minority Ethnic (BME)	2.2%		Organ consent Black, Asian, Minority Ethnic YTD (BAME)	38%	43%	availability		99.95%
Sourced Plasma donor base		6.1k	BAME recipients of living & dec'd organ transplants ¹	24%	27%	Top quartile performance in key benchmarks	2	5
Net promoter score	87.1	86.0	Organ transplants – living & dec'd (moving annual total) ¹	4,367	4,429	Incremental savings (Blood & Group)	£0.75m	£3.0m
On Time In Full (OTIF) incl. Ro (YTD / 22/23)	96.8%	97.4%	British Bone Marrow Registry (BBMR) Fit-Panel volume	97.9k	99.8k	Reduction in carbon emissions vs. 2014/15	49%	50 % ²
Drive innovation to in	nprove patient outcome	es	Collaborate with partn services for the NHS	ners to develop	and scale new	Invest in people and continuous inclusive organisation	ulture to ensure a h	igh-performing,
Genomics programme status	3		Plasma for Medicines programme status			Weeks taken to recruit	13.78	11
No. of transplants per donor - 2.51		Cell, Apheresis and £8.54m		Staff turnover	18.1%	14%		
deceased (moving annual total)		2.45	Gene Therapies income	20.04111	£8.18m	Black, Asian, Minority Ethnic (BAME) Band 8+	14.6%	15%
Component Development Clinical Trials	Whole blood		Tissue & Eye Services income	£3.97m	£3.48m	Overall grievance rate (Cases)	0.32% (19)	
	Universal platelets		Transfusion 2024 programme		20110111	Engagement score	7.5/10	8/10
	Universal plasma		[reporting to commence Q2 2	022/23]		Sickness absence rate	5.07%	4%
	Dried plasma		Education & training metric		To be defined by Education strategy Q4 2022/23	Harm Incident Rate NHSBT (Harm to staff)	8.4	8.9

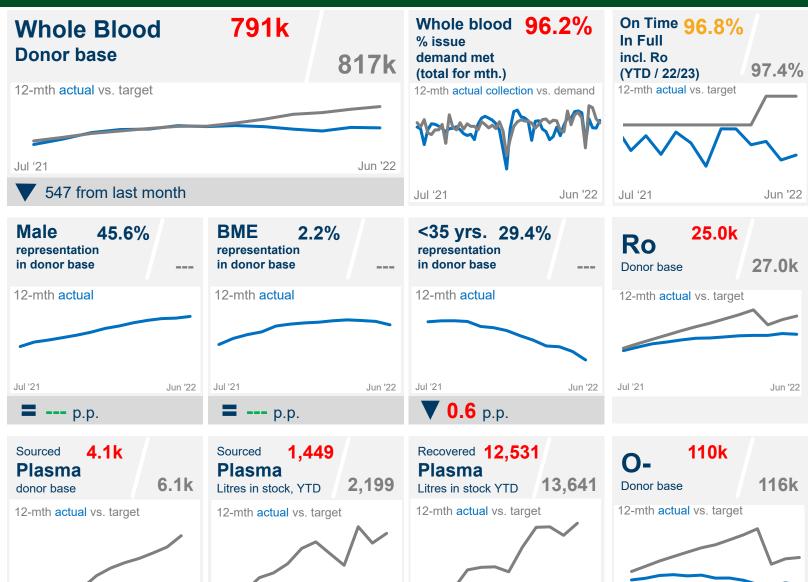
^{1.} Organ Transplants living and deceased reported one month in arrears. 2. Progress versus annual target of 50%

Blood and Transplant



Jun '22

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



Jul '21

Jun '22

Insight and Commentary

Donor Bases

- The current blood stocks issues, which began in June, have had a
 negative impact on the volume of new donors across the month,
 which remained flat, due to an increased focus on active donors. The
 O- and Ro donor bases also declined. National Blood Week gave a
 slight boost to donor bases but this has been challenged by the new
 donor cap, which has been re-applied due to the blood stocks issues
 and could be in place through to Autumn.
- The whole blood and O- donor base remain below target due to fewer new donors, lower reactivation and higher inactivation driving falls in month.
- The Ro donor base has also fallen for the first time since Jan 2021, along with a fall in the volume of donors from a black background. The launch of LonDonor campaign in July, targeting black donors across London, will help to improve this donor base.
- The under-35 donor base declined again in June for the seventh month in a row, which will be addressed through partnerships and community events.
- Marketing and communications activities are being adapted to tackle these issues and improve outcomes.

Plasma

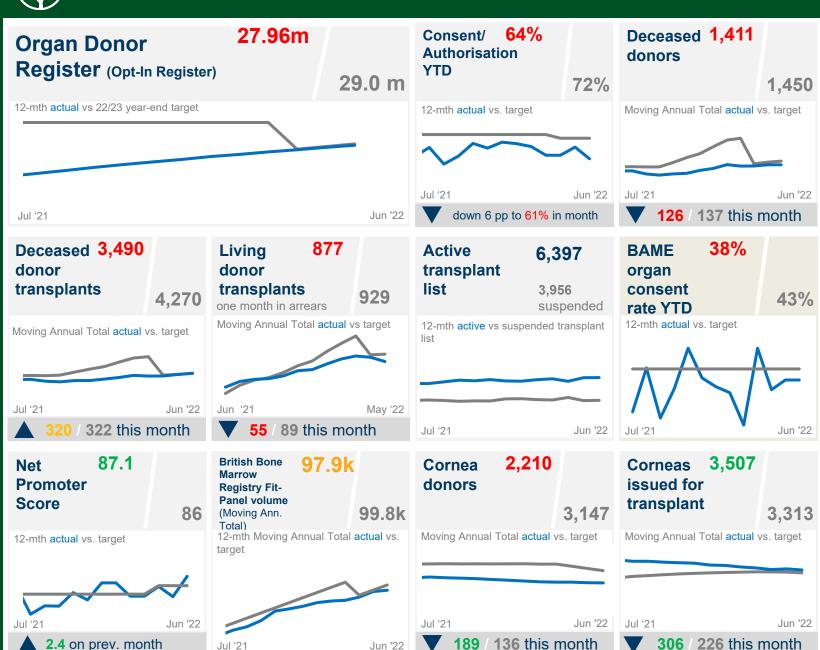
Jun '22

3.8 days stock at 30/6.

- sPfM¹: collection fell below business plan targets in June, due to high levels of donor non-attendance, deferrals, and staff shortages in Twickenham. Staff shortages have been addressed, but training will take some weeks to achieve this goal. The collection shortfall is being managed by targeting returning donors and whole blood conversions to make up the losses.
- rPfM² is ca.11% behind target volumes due to staff absences in Filton particularly. Measures to increase capacity are in place including additional staff for manufacturing and bringing forward additional staffing capacity from 2023 to November 2022.

¹sPfM = sourced Plasma for Medicine ²rPfM = recovered Plasma for Medicine

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



Insight and Commentary

Organs

- Deceased donor transplant targets have been revised downwards following notification of a flat funding settlement for 22/23.
- Covid-19 is impacting the ODT workforce, most notably in the National Organ Retrieval Specialists (NORS) teams who are being affected by staff sickness and multifactorial flight/airport issues. Although this has not yet affected donations proceeding, there is potential for this to have an impact on relationships in transplant units and donor hospitals.
- The eligible donor pool is 14% smaller than Q1 pre-pandemic levels.
 The ACCORD project (Achieving Comprehensive Coordination in Organ Donation) has been relaunched to understand patient flows.
- Living organ donation is currently less predictable with a considerable reporting backlog and transplants postponed due to Covid-19.

Net Promoter Score (NPS)

- June saw the highest NPS performance for the past 12 months, 1pt above target; however overall satisfaction remains under target as well as receiving higher number of complaints in June.
- Donors were less satisfied with wait times and on session experience although when asked, strongly recommend blood donation (NPS) knowing our immediate challenges for blood.

Ocular

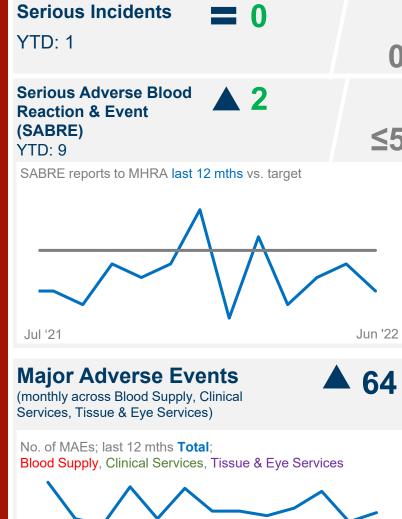
Following interventions in April, the ocular donation rate grew to ca.
56 donations/week. However, donation levels have fallen back to
average 44 donors/week vs. a target of 70 in June. Activity to
increase ocular donations is ongoing, and July has seen rates climb
to 46 donations/week. A project to make long term improvements has
been scoped and will start in July.



Jul '21

Modernise our operations to improve safety, resilience and efficiency







196

<220

Overdue majors

Overdue events

Jun '22

(excl. documents)

Insight and Commentary

- · Two of the three overdue event KPIs were missed at the end of June. However, continuous improvement workstreams are progressing, including updates to Q-Pulse to better reflect current departmental structures which is hoped will improve clarity of ownership on reporting.
- Of the 12 Major events which were overdue at the end of June, seven were in OTDT-TES, four were in Clinical Services, and one was in Blood Supply-BD. Nine of the events have now had their targets extended, and work is ongoing between QA and QMS Champions to keep the number of overdue Major events as low as possible.
- System issues with the MHRA online portal continue to delay updates to the WDA(H) licence. The MHRA are aware of the issue and are working to resolve the problem.
- There have been positive inspection performances this month, including an MHRA (IMP licence) inspection of the CBC (Clinical Biotechnology Centre) facilities at Langford and Filton, with no Major findings, and an HTA inspection of ODT with just two areas of Advice.

Additional acronyms used

MHRA: Medicines and Healthcare products Regulatory Agency HTA: Human Tissue Authority

Modernise our operations to improve safety, resilience and efficiency



Collection productivity

Annualised YTD 1,219

Actual vs target vs EBA top quartile benchmark

1,315 Jul '21

Hospital services productivity **Annualised YTD**

V 36,732

33.552



Incremental savings YTD (Blood & Group)

Jul '21

£3.0m

Top quartile performance in 5 key benchmarks

£0.75m

Note: Of key benchmarks, full data only currently available for testing and manufacturing productivity

1. Fulfilment of orders² in full rate 12-mth actual vs. target [Coming soon

2. Testing productivity **Annualised YTD 31.287** 31,092

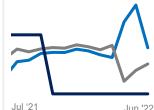


3. Manufacturing productivity **Annualised YTD**

T 11,195

10,831

Actual vs target vs EBA top quartile benchmark



4. Hospital customer complaints

12-mth actual vs. target

[Coming soon

5. Lost time injury incidents / severity 12-mth actual vs. target

Jun '22

[Coming

Metric target is a range. Performance outside this range will have a red RAG status.

² Orders for all blood products ordered by hospitals

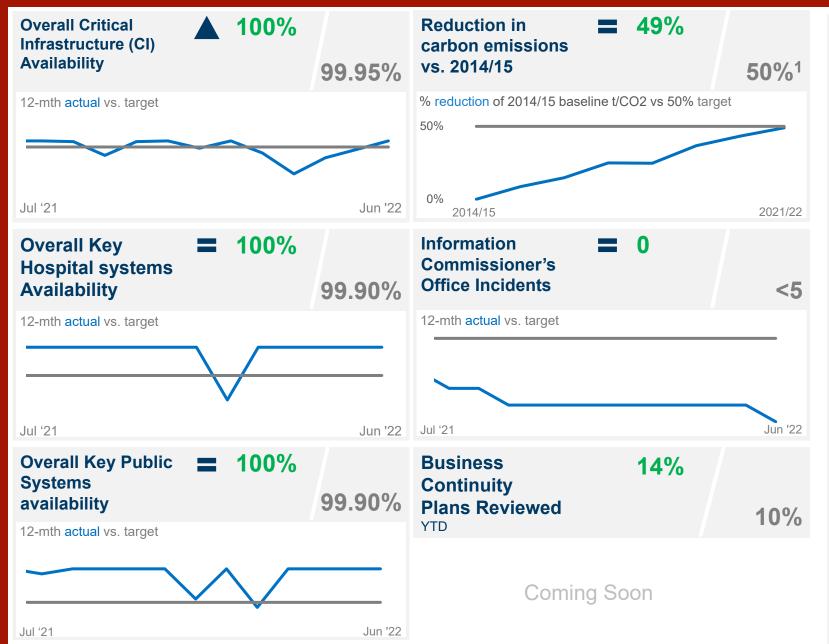
Insight and Commentary

- Red cell demand has restored to pre-pandemic levels. This was forecast, but despite planning a c10% increase in appointment capacity (vs prepandemic), collection levels have been low resulting in a decline in red cell stocks and challenges with platelet production.
- Whilst overall blood stock stability for June stands at an average of 5.2 days of stock, July data to date shows further decline to an average of 4.4 days with O+, A+, O- and B- particularly impacted.
- The main reason for low collection levels are acute workforce issues on many blood donation teams. This is due to a combination of rising sickness absence (driven by an increase in COVID-19) and high turnover in frontline roles. These factors combined have left some teams acutely short-staffed, and consequently NHSBT has been regrettably cancelling 2,000-3,000 donors per week, often at short-notice.
- Staff turnover is a particular issue as a donor carer need only give 4 weeks' notice of intention to leave whereas it typically takes c.16 weeks to recruit and train a replacement.
- In addition to these workforce challenges, appointment fill rates have declined (91% of appointments filled vs 93% pre-pandemic) and donor non-attends have increased (20% vs 16% pre-pandemic).
- An incident response team is actively managing low blood stocks.
- People are leading several initiatives to support teams with immediate interventions, whilst also bringing teams back to budgeted establishment and reviewing recruitment, training and retention policies. Immediate interventions include engaging agency staff and redeploying volunteers from across NHSBT to perform a front of house role on blood sessions, to free up multi-skilled donor carers to process more donors (therefore minimising donor cancellations).
- Donor Experience have deployed campaign, media and direct marketing activities to mobilise more donors, targeted to the blood groups we need. We have also prioritised regular donors at the expense of new donor recruitment, which has impacted our delivery against new donor targets.
- Collection productivity remains below target, driven by low collection levels which are the result of acute workforce issues.



Modernise our operations to improve safety, resilience and efficiency



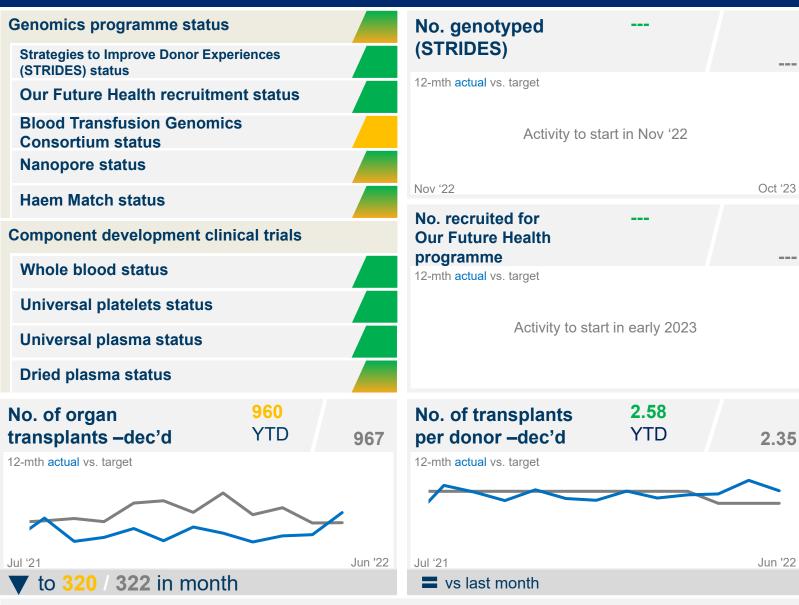


Insight and Commentary

- Critical Infrastructure, Key Hospital Systems and Key Public Systems exceeded their SLA target in June.
- · All recent ICO incidents are now closed, with recommendations and actions being addressed internally. No new ICO incidents reported since May 2022.

1. Progress versus annual target of 50%





Insight and Commentary

Genomics Programme

- STRIDES Donors Genotyping.
 - DNA extraction contract signed 67k samples completed
 - Genotyping planned to start Q3; target 20k samples 22/23
- Our Future Health (OFH) recruitment.
 - OFH delayed the recruitment start date to early 2023
- Blood Transfusion Genomics Consortium (BGC).
 - First samples genotyped with good concordance results
 - Phase 2 (4,000 samples) planned for the summer
 - Array issues driving project's 'Amber' status.
- · Nanopore collaboration.
 - Procurement of equipment & recruitment commenced.
- HaemMatch.
 - NIHR AI grant started; Staff recruitment ongoing

Component development clinical trials

- Whole blood use in trauma trial due to open 18 July 2022.
- 2nd phase universal plasma project being planned and combined with universal platelets. Work currently unfunded with business case due later this year.
- Dried plasma £5m project in initiation.

Organ transplant and utilisation

 Deceased donor transplant activity is on track against the revised targets, with a very strong transplant per donor rate of 2.58 YTD indicating improved organ utilisation. The culture with transplant units is starting to change, possibly due to the investment in organ utilisation initiatives.

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

BTRU, Research & Development performance reported through Board R&D sub-committee



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



Biotechnology YTD

12-mth CAGR **45.2%**

Centre income

Jul '21

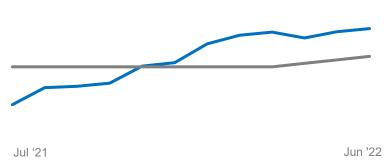
Cell Apheresis and Gene £8.54m Therapies income YTD excl. DHSC Grant in Aid funding; 12-mth CAGR 14.2% £8.18m

12-mth Moving Annual Total actual vs. target, £m



Transfusion 2024 programme status







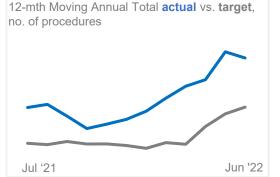
97.9k

Therapeutic 2,766 **Apheresis** YTD Services no. of procedures



Marrow Registry

Fit-Panel volume



Insight and Commentary

Plasma for Medicines

- The Plasma programme status is amber due to the slow ramp up of target volumes caused by staff shortages in Manufacturing and Hospital services.
- This is being addressed through over establishment and additional recruitment, but new staff require training which has timescale implications. Further interventions are planned later in 22/23 to recoup plasma volumes.

Transfusion 2024

- The strategic outline case was approved by ET in June 2022 and the programme is being formally established.
- RAG status and updates will be reported from September.

Cellular Apheresis and Gene Therapies (CAGT)

- Activity levels continue to improve steadily across most operational areas, driving at or above target income levels across most service lines.
- Overall, CAGT income is £0.36m better than plan, driven by extra TAS activity (Plasma Exchange and Photopheresis).
- Clinical Biotechnology Centre (CBC) income is £0.4m behind plan YTD; driven by the phasing of work; year-end forecast remains close to budget £4.4m.
- CBC project at Amber-Red status due to resource and critical consumable challenges; replanning ongoing.
- Stem cell transplants supported in CMT are just above plan this year, routine service activity is also above target.
- A KPI on NHSBT's share of domestic UK stem cell transplants will be reported at the mid-year point.

(MAIN)

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



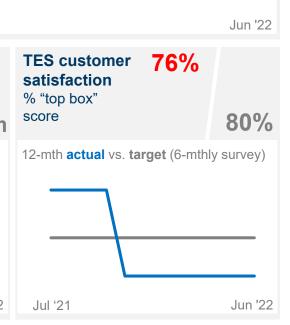


Income 12-mth Av. Mthly Growth Rate 12% 12-mth actual vs. target, £ Jul '21 Jun '22

Cardiovascular £273k



Serum Eye- £1.33m



Insight and Commentary

Overall income

TES income in June has been strong and above target. The
ocular & serum eyedrop product lines are ahead of the June target,
however the tissue product line (bone, tendons etc.) is behind
target, following a strong recovery in May activity. The decrease
in tissue activity is partly due to several products being on
backorder, and when the short-term supply issues are resolved
next month, will recover the income position.

Ocular income

Following strong levels of donation in March and April, income from ocular sales have continued favourably against the June target. Demand for ocular products is high, and plans are currently being deployed to increase donation rates. The step change in ocular income forecast from Q2 is being pushed back to Q3, offset by above target sales in Q1.

Heart Valves

 The rates of heart donation for heart valves in this period have continued to be high, meaning that NHSBT have been able to exceed the forecast levels of supply to our customers.

Serum Eyedrops

• The production of serum eyedrops has been 3% ahead of plan, meaning that more products have been issued to our patients.

Customer Satisfaction

 The main issue for customer dissatisfaction is the unavailability of tissue when requested, predominately corneas. A turnaround project is being launch to resolve this. There are also issues with our courier service, FedEx, which are being resolved through our contract review process.

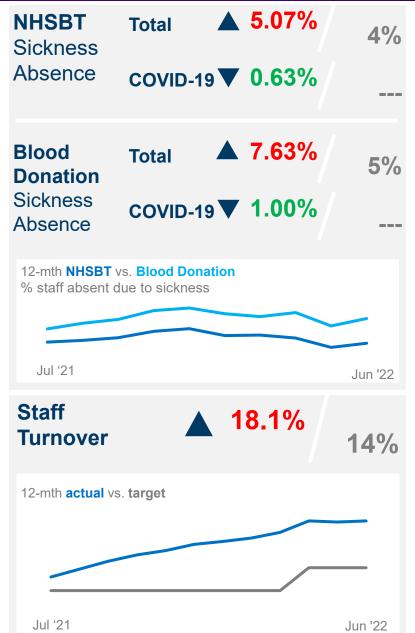
Education and training metric

To be defined by Education strategy Q4 2022/23

Blood and Transplant

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





Insight and Commentary

Sickness absence

- Blood Supply Absence has increased in Blood Donation from 6.86% in May, to 7.63% and it is likely that this will continue to rise further because of Covid-19.
- This headline rate is masking significantly higher sickness absence rates across collection teams.
- Turnover is extremely high at 27.5% in June and in combination with high sickness absence, is causing acute workforce issues in collection teams and severely impacting NHSBT's ability to collect sufficient blood to maintain stock levels.
- A formal workforce project has been established to mobilise immediate support to recover the position deploying a range of initiatives that will address the situation in the short, medium and long term.
- Clinical services Sickness absence has increased slightly this month to 2.46% (2.01% for May 22), but remains within target.
- OTDT- Absence is up to 5.1%, 56.6% of which is short term absence and 43.4% is Long term sickness. TES absence is down from 3.8% to 3.18% and Organ Donation increased from 5.1% to 5.66%. All services have been maintained, with Specialist Nurse - Organ Donation (SN-OD) teams continuing to cross cover.



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







Insight and Commentary

Recruitment & Retention

- · Recruitment activity remains high with 141 starters and 179 adverts this month.
- Average time taken to recruit has increased slightly from 13.73 weeks to 13.78 weeks. As part of the work around blood stocks, focus is being given on how best to support the recruitment team and where parts of the process might be outsourced to reduce this time.
- Annual turnover saw a slight increase to 18.09% from 18.00% in May.
- In June there were 91 individuals set up on the Electronic Staff Record System (ESR), 26 of whom were of an ethnic minority background. With 69 leavers, of which 7 were from an ethnic minority, this represents a net increase of 19 ethnic minority colleagues. At Band 8 there were 6 leavers with 1 colleague(s) from an ethnic minority leaving. 4 new Band 8 starters commenced with 4 starters from an ethnic minority – a +1 Net change.

Blood and Transplant

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

Live 0.32% **Total** Cases at month BAME **=** 0.91% end

% of staff with a live case; total, Black, Asian, **Minority Ethnic**

Live Cases at month end

Jul '21

Jul '21

0.54% Male

Female = 0.20%

% of total with a live case; total, male, female

Total no. live cases at month end

New cases

(last month)

5,896 total staff

% cases on track for resolution within 90-day agreed timescale

80%

% of total by protected characteristic

Female 44%

BAME 47%

Disability 16%

LGBT+

Closed cases

(11)

Avg. days open to date

0%

No. of new Freedom To Speak Up cases (last month)

(14)

Top reasons for live cases

Behaviour/conduct of 50% of managers/colleagues live cases

Insight and Commentary

Live cases.

- 8 out of 19 cases are on track within the 90day SLA timescale (42%).
- 11 cases are over-running against SLA: 3 M&L, 1 BD, 3 DDTS, 3 Clinical and 1 Finance. Over-running cases are: 4 Grievances, 2 Dignity at Work, 3 Disciplinary and 2 Capability.
- 6 of the 11 over-running cases have been delayed due to employee long-term sickness.
- 6 out of the 11 over-running cases involve BAME colleagues (1 Disciplinary, 1 capability, 2 Grievances and 2 Dignity at Work).
- Overall, 9 of 19 live cases involve BAME colleagues (47%). 3 of these cases relate at least partly to the protected characteristic in terms of the issues or concerns raised.
- 4 new cases opened in June 2022 = 2 Dignity at Work, 1 Grievance and 1 Probation. Of these new cases 2 involve BAME colleagues.

Freedom to Speak Up

 Behaviour/conduct of managers/colleagues remains the biggest area of concern at 50% of concerns raised.

23

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

Jun '22





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

Metric	Description
Size of Whole Blood Donor base	No. active whole blood donors in the last 12 months actual vs target
O Negative Donor base	No. active O negative donors in the last 12 months actual vs target
Ro Donor Base	No. active RO donors in the last 12 months actual vs target
Blood donor mix: Black, Minority Ethnic (BME)	% of active whole blood donor base that have identified as BME, actual for month vs target
Sourced Plasma Donor Base	No. of plasma for medicine donors, actual vs target
	Likelihood of donor to recommend donating blood by subtracting the no. of promotors scoring 9-10 from the no. detractors
Net Promoter Score	scoring 0-6. Overall score is out of 100, with this being most likely to recommend
On Time in Full (OTIF) including Ro (YTD / 22/23)	% of orders for all blood products ordered by hospitals that are met on time and in full YTD
Plasma vol. in stock (sourced), litres	No. of litres of plasma available for use that month, collected via plasma donation centres
Plasma vol. in stock (recovered) litres	No. of litres of plasma available for use that month, collected by recovering plasma from whole blood donations
Organ consent rate (total)	% of occasions that consent is given for organ donation in the last 12 months vs target
Organ consent Black, Asian, Minority Ethnic (BAME)	% of the time consent is given for organ donation among BAME identified population in last 12 months vs target
Organ transplants – dec'd & living (moving annual total)	No. organ transplants for the last 12 months, actual vs target. This is a combined figure consisting of the no. of deceased
	donor transplants plus the number of living donors, which is used as a proxy for living donor transplants
	No of white male donors aged 17 to 40 and Black, Asian or minority ethnicity donors of either gender, aged 17 to 40 on the
British Bone Marrow Registry (BBMR) Fit-Panel volume	British Bone Marrow Registry
Additional content metrics	
Whole blood % issue demand met (total for mth.)	% of the time that month that the whole blood issued to hospitals met by collections each month, based on weekly data
Male representation in donor base	% of male donors in the active whole blood donor base
BME representation in donor base	% of Black, Minority Ethnic donors in the active whole blood donor base
<35 yo representation in donor base	% of donors aged under 35 donors in the active whole blood donor base
Organ donor register	No. of people on the organ donor register in last 12 months vs target
Deceased donors	No. of deceased organ donors in last 12 months vs target
Deceased donor transplants	No. of transplants made from deceased donors in the last 12 months vs target
Living donor transplants	No. of living organ donors in the last 12 months vs target
Active transplant list	No. of people on the active transplant list
Cornea donors	No. of cornea donors in the last 12 months vs target
Corneas issued for transplant	No. of corneas issued for transplant in the last 12 months vs target





Modernise our operations to improve safety, resilience and efficiency

Metric	Description
Serious Incidents	No. of serious incidents
Blood stock stability - average days' stock	Average days' stock in whole blood, based on daily stock levels that month. Note this is a proxy to illustrate stability levels
Critical National Infrastructure availability	% of time Critical National Infrastructure was deemed available (combined score based on availability levels of Pulse, Hematos,
	National Transplant Database, and Organ Donor Register systems)
Top Quartile Performance in key benchmarks	How many of the five identified key benchmarks for blood supply that we are currently performing in the top 25% of our peer group (see
	below for actual benchmarks and scores)
Incremental savings (Blood & Group)	Incremental savings achieved across Blood and Group directorates
Reduction in carbon emissions vs. 2014/15	% of reduction achieved in carbon emission at 2014/15 level vs today
Additional content metrics	
External majors	No. of external major classified events occurring
Serious Adverse Blood Reaction & Event (SABRE)	No. of Serious Adverse Blood Reaction & Event incidents occurring
Serious Adverse Event & Reaction (SAEAR)	No. of Serious Adverse Event & Reaction incidents occurring
Major Adverse Events (monthly across Blood Supply, Clinical	No. of Major Adverse Event incidents occurring
Services, Tissue & Eye Services)	
Quality Management System (QMS) Overdue Events	No. of Quality Management System overdue events
Documents overdue review	No. of documents requiring review that are overdue
Overdue majors	No. of major incident reviews overdue
Overdue events (excl. documents)	No. of overdue review events, excluding documents
Top Quartile Performance in key benchmarks	How many of the five identified key benchmarks for blood supply that we are currently performing in the top 25% of our peer group (see
	below for actual benchmarks and scores)
Fulfilment of orders in full rate	% of blood orders that are met in full
Testing productivity	Testing productivity score vs. target (and in chart vs. European Blood Alliance (EBA) top quartile benchmark)
Manufacturing productivity	Manufacturing productivity score vs. target (and in chart vs. European Blood Alliance (EBA) top quartile benchmark)
Hospital customer complaints	Measure of hospital customer complaints vs. target and vs. benchmark
Lost time injury incidents / severity	Measure of lost time injury incidents vs. target and vs. benchmark
Collection productivity	Collection productivity score vs. target (and in chart vs. European Blood Alliance (EBA) top quartile benchmark)
Hospital services productivity	Hospital Services productivity score vs. target
Overall Key Hospital systems availability	% of time Key Hospital systems were deemed available (combined score from transport management, online blood ordering, and SO99
	systems availability)
Information Commissioner's Office Incidents	No. of incidents requiring reporting to the Information Commissioner's Office
Overall Key Public Systems availability	% of time Key Public Systems were deemed available (combined score based on availability of online donor portal and corporate
	websites)
Business Continuity Plans reviewed	% of business continuity plans reviewed (annual reviews required on all such plans)



Drive innovation to improve patient outcomes

Metric	Description
Genomics Programe status	Overall RAG status of the Genomics Programme
No. of available organs transplanted (moving annual total)	No. of available organs transplanted - moving annual total provides a number for the previous 12 months
Component Development Clinical Trials	Specific component development trials, identified as of strategic importance
 Whole Blood 	RAG status of the Whole Blood component development trial
 Universal Platelets 	RAG status of the Universal Platelets component development trial
 Universal Plasma 	RAG status of the Univeral Plasma component development trial
 Dried Plasma 	RAG status of the Dried Plasma component development trial
Blood & Transplant Research Units (BTRUs)	Metric (TBC) to indicate performance of Blood and Transplant Research Units
Additional content metrics	
Genomics Programme status	Overall RAG status of the Genomics Programme
 STRIDES genotyping status 	RAG status of the STRIDES genotyping programme
Our Future Health recruitment status	RAG status of the Our Future Health recruitment programme
 Blood transfusion Genomics Consortium status 	RAG status of the Blood transfusion Genomics Consortium programme
 Nanopore status 	RAG status of the Nanopore programme
Haem Match status	RAG status of the Haem Match programme
No. genotyped (STRIDES)	No. of people genotyped under the STRIDES programme
No. recruited for OFH	No. of people recruited for the Our Future Health programme
Organ utilisation rate	No. of organs per identified deceased donor that are effectively used





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

Metric	Description
Plasma for Medicines programme status	RAG status for the Plasma for Medicines programme
Cellular, Apheresis and Gene Therapies income	Income level for Cellular, Apheresis and Gene Therapies. This is used as a proxy for measuring the development, growth and scaling of these services, which is our strategic aim
Tissue & Eye Services income	Income level for Tissue and Eye Services. This is used as a proxy for measuring the development, growth and scaling of these services, which is our strategic aim
Transfusion 2024 Programme status	RAG status for the Transfusion 2024 Programme
Education & training metric	Metric (TBC) for measuring progress against our education and training strategic goals
Additional content metrics	
Cellular, Apheresis and Gene Therapies income; 12-mth CAGR	Compound Annual Growth Rate (CAGR) provides a growth rate based on a moving annual total, that indicates annual growth month by month
Cellular & Molecular Therapies: stem cell transplants supported	No. of stem cell transplants supported
Clinical Biotechnology Centre income; 12-mth CAGR	Clinical Biotechnology Centre income. The Compound Annual Growth Rate (CAGR) provides a growth rate based on a moving annual total, that indicates annual growth month by month.
Therapeutic Apheresis Services no. of procedures	No. of Therapeutic Apheresis Services performed
Tissue & Eye Services (TES) income 12-mth Av. Mthly Growth Rate	Average monthly growth rate is the average growth over the last 12 months. Note: this will be updated with CAGR figures when required data is available
Ocular income; 12-mth av. mthly growth rate	Average monthly growth rate is the average growth over the last 12 months. Note: this will be updated with CAGR figures when required data is available
Cardiovascular income; 12-mth av. mthly growth rate	Average monthly growth rate is the average growth over the last 12 months. Note: this will be updated with CAGR figures when required data is available
Serum eye-drops income; 12-mth av. mthly growth rate	Average monthly growth rate is the average growth over the last 12 months. Note: this will be updated with CAGR figures when required data is available
TES customer satisfaction	Customer satisfaction score for Tissue and Eye Services.





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

Metric	Description
Weeks taken to recruit	Average weeks taken to recruit a new member of staff
	% of total workforce that have left over past 12 months
Black, Asian, Minority Ethnic (BAME) Band 8+	% of Band 8+ (management) positions held by staff identifying as Black, Asian, Minority Ethnic
Overall grievance rate	% of staff that have a live grievance case
Engagement score	Staff engagment score, based on most recent survey
Sickness absence rate	% of staff that are absent due to sickness, average for the month
	Harm is an unplanned event which resulted in injury or ill health to a person and/or property damage. Incidence rate for accidents
	and near misses is a monthly number of incidents divided by total number of staff x by 1000
Additional content metrics	
Short-term Sickness Absence	% of staff that are absent due to short-term sickness, average for the month
Long-term Sickness Absence	% of staff that are absent due to long-term sickness, average for the month
i ·	% of NHSBT total staff that are absent due to sickness, average for the month. Total and COVID-19 related, which is a subset of the
<u> </u>	total.
•	% of Blood Donation staff that are absent due to sickness, average for the month. Total and COVID-19 related, which is a subset of
ļ	the total.
	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. The incidence reporting rate indicates the rate at which such near miss incidents were reported. The higher
	the better
	Incident resulting in staff absence of >3 days, this month
:	Net change in the number of staff identifying as being of an ethnic minority at NHSBT
	% of new starters for the month that identify as being of an ethnic minority
PDPR completion rate	% of staff that are recorded as having their Personal Development and Performance Reviews completed
Mandatory training compliance rate	% of staff that are recorded as having completed their mandatory training
No. commencing leadership programmes (% BME)	No. of staff starting a leadership programme, and % of which identify as BME
Live Cases at month end	Live cases of all type (disciplinary, grievance, dignity, capability, probation) at the end of the month
	Cases raised via the Freedom To Speak Up programme of identified points of contact, through which any staff member can raise
month)	any issue confidentially