NHSBT ET & Board Performance Report

August 2022

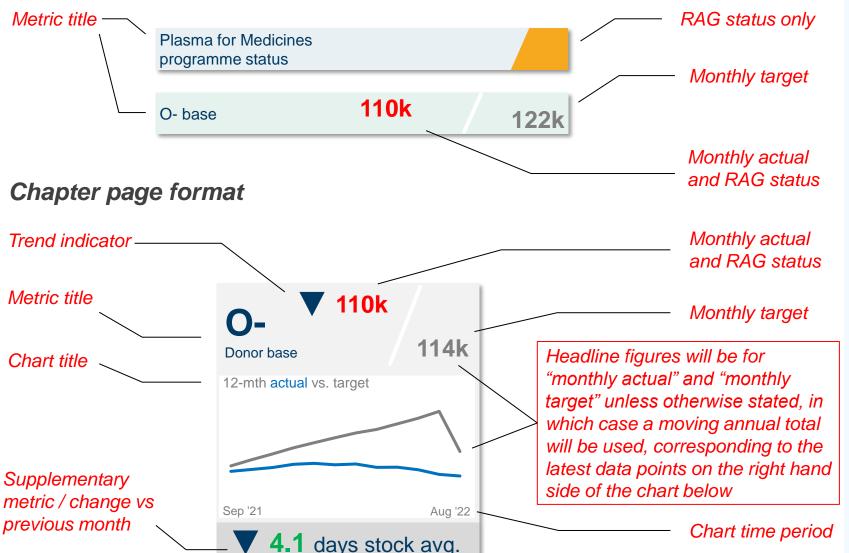
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How to read this report



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% below 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-month total for performance data.

Executive Summary

Performance Insights

There are six critical business areas that require Executive Team focus:

1. Early signs of return to Blood stock stability; recovery requires continuing investment and momentum

Red cell stocks, assisted by a fall in demand and increased collection, improved in August to average 21.4k and 4.6 days stock against 19.5k and 4.1 days stock in July. Whilst improvement has continued into early September, stocks are expected to decline again into October before recovering at a gradual pace. During this period, the risk of O groups dropping below 2 days remains, potentially triggering an amber alert. A stock recovery position is forecast by the end of October with a return to green 5.7 days of stock in mid-December.

Stock sufficiency during winter depends on stock being at higher levels than are currently forecast. Therefore, this requires rebuild to start earlier and/or to happen at a faster pace.

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

Whole blood, O neg and Ro donor bases remain below target due to fewer new donors, however at 25k, the Ro donor base is at a record level. Blood stock challenges have meant regular donors are being prioritised over new donor recruitment, which has impacted delivery of new donor targets. Whilst On Time In Full (OTIF) has improved in August, the lack of growth and diversification of donor bases will cause challenges to collection and stocks in the future. Work has begun to establish whether diversification measures are possible alongside initiatives to stabilise and rebuild stock.

3 .Organ donation and transplantation (OTDT) organ utilisation rates continue to improve, but the challenges in improving organ donation consent rates persist

OTDT has continued to recover with improved organ utilisation rates. However, challenges persist in stabilising and improving organ consent rates whilst managing the implications of a flat funding settlement for 22/23 and future years. Tissues (TES) performed strongly through quarter one with income £485k (13%) ahead of plan however quarter two to date income is £562k (18%) below plan. With interventions to improve availability of products yet to deliver improved metrics, TES will struggle to improve performance through 22/23 and beyond without identifying interventions which yield improvements in the medium and long term.

4. Plasma collection and donor base are below target

The Plasma programme RAG remains amber due to the impact of workforce issues across NHSBT and delays in the fractionator procurement process. Whilst sourced and recovered plasma collection and the sourced plasma donor base continue to underperform due to staff recruitment and training challenges at donor centres, recovered plasma manufacturing has delivered a step change in improved performance. "Back to Green" plans are in place to recoup the shortfall to date with activity reprofiled into the second half of 22/23 and early 23/24.

5. Innovation and Collaboration activity is progressing, building capacity and capability for the future.

Genomics and Component Development programmes are progressing to plan, focussing on developing infrastructure, capacity and capability for future developments in products and services. Cell and Gene Therapy income (CAGT) income continues above plan, driven by additional Therapeutics and Apheresis (TAS) activity, whilst British Bone Marrow Registry (BBMR) donor base, although below plan, is beginning to respond to donor recruitment initiatives.

6. Organisation wide focus on prevention of racism, bullying, harassment and discrimination in the workplace

Wider work across the organisation is taking place in response to concerns expressed by staff of racism, discrimination, bullying and harassment. An action plan is being developed to address the concerns expressed which will be delivered through the 2022/23 performance year acknowledging the feedback from our staff to actively raise awareness, provide development, review our policies and processes and systems, and effectively communicate our intentions.

Performance summary against most important strategic targets



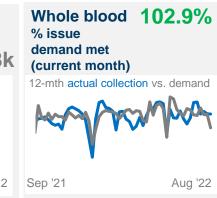
Grow and diversify our donor base to meet clinical demand and reduce health inequalities Modernise our operations to improve safety, resilience and efficiency								
Size of Whole Blood donor base	795k ▲	824k	Plasma vol. in stock (sourced), litres YTD	3,205 ▲	4,750	Blood stock stability Average days of stock	4.6	5.5 – 7.0
O- base	110.4k =	117k	Plasma vol. in stock (recovered), litres YTD	26,359 ▲	27,378	Serious Incidents	1 2 A	0
Ro base	25.0k 🛕	28.0k	Organ consent rate YTD (total)	64% ▼	72%	Critical Infrastructure	99.95% =	00.05%
Blood donor mix: Black, Minority Ethnic (BME)	2.15% -		Organ consent Black, Asian, Minority Ethnic YTD (BAME)	37% ▼	43%	availability Top quartile performance in	2 =	99.95%
Sourced Plasma donor base	e 4.6k ▲	7.5k	BAME recipients of living & dec'd organ transplants ¹	24% ▼	27%	key benchmarks		5
Net promoter score YTD	85.8 ▲	86.0	Organ transplants – living & dec'd (moving annual total) ¹	4,336 ▼	4,452	Incremental savings (Blood & Group)	£0.95m ▲	£3.0m
On Time In Full (OTIF) incl. Ro (YTD / 22/23)	96.2% ▲	97.4%	British Bone Marrow Registry (BBMR) Fit-Panel volume	100.9k ▲	103.5k	Reduction in carbon emissions vs. 2014/15	49% =	50 % ²
			,					
Drive innovation to in	mprove patient outcom	es	Collaborate with partri services for the NHS	ners to develop and	/	Invest in people and c inclusive organisation	ulture to ensure a h	igh-performing,
Prive innovation to in Genomics programme status		es	Collaborate with partri services for the NHS Plasma for Medicines	ners to develop and	/	Invest in people and continuous inclusive organisation Weeks taken to recruit	ulture to ensure a h	igh-performing,
Genomics programme status No. of transplants per donor	s =	es	Collaborate with partriservices for the NHS Plasma for Medicines programme status	=	/			11
Genomics programme status	s =	2.46	Collaborate with partri services for the NHS Plasma for Medicines	= £14.07m _▲	/	Weeks taken to recruit Staff turnover Black, Asian, Minority Ethnic	13.2	/
Genomics programme status No. of transplants per donor deceased (moving annual	= 2.50 =		Collaborate with partriservices for the NHS Plasma for Medicines programme status Cell, Apheresis and	= £14.07m _▲	scale new	Weeks taken to recruit Staff turnover	13.2 ▼ 17.6% ▼	11 14%
Genomics programme status No. of transplants per donor deceased (moving annual total) Component Development	= 2.50 =	2.46	Collaborate with partir services for the NHS Plasma for Medicines programme status Cell, Apheresis and Gene Therapies YTD income Tissue & Eye Services YTD income Transfusion 2024 programme	£14.07m ★ £6.88m ▼	£13.98m	Weeks taken to recruit Staff turnover Black, Asian, Minority Ethnic (BAME) Band 8+3 Employee Relations case	13.2 ▼ 17.6% ▼ 14.36% ▲	11 14% 15%
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Grow and diversify our donor base to meet clinical demand and reduce health inequalities

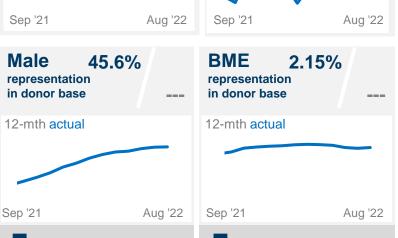










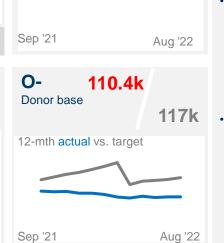


7.5k



Aug '22





3.1 days stock at 31/8.

Insight and Commentary

Donor Bases

- At 795k, the whole blood donor base has more than recovered the losses incurred since peaking at 794k in January 2022, however growth has been behind plan with the gap to the donor base target increasing to 29k. Growth has been driven by reactivation of lapsed donors rather than by recruitment of new donors. Ongoing lack of recruitment of new donors is limiting both donor base growth and diversity.
- Low recruitment has meant Black and Minority Ethnic representation has slipped to 2.15%, with under 35 representation also down to 29% since April.
- · This is because the cap on new donors limits recruitment volumes and our ability to address diversification targets. Work has begun to establish whether diversification measures are possible alongside initiatives to stabilise stock.
- At 25k the Ro donor base is at a record level yet the gap to meet the donor base target has increased to 3k.

Plasma

- Source Plasma for Medicine (sPfM): August volumes were 32.5% behind target due to reduced collection capacity as a result of challenges in recruiting, inducting and training new employees. The 'Back to Green' plan anticipates reduced capacity for the next few months before work begins to recover lost volumes. Whilst reduced capacity will not affect the overall volume of PFM supplied to NHSE it will impact our ability to build the plasma donor base.
- Recovered Plasma for Medicine (rPFM): Despite a clear improvement in Manufacturing performance, rPFM remained 1,019L (3.7%) behind target in August. The overall target for rPFM in FY 22/23, originally 114kL, has been re-forecast downwards to 102kL as a result of re-profiling, without impacting our ability to meet a commitment of 250kL for fractionator go-live (est. Feb 2024).

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

12-mth actual vs. target

4.6k

Sourced

Plasma

Donor base





Recovered **26,359**



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



Insight and Commentary

Organs

- There were 103 donors in August, equivalent to August 2021's activity and close to previous summer trends, but short of the 137 donor target.
- Whilst YTD, we are achieving the expected number of family approaches, a low and fluctuating consent / authorisation rate has led to 13% fewer donors than target and 6% fewer donors than pre-pandemic (2019/20 YTD).
- In the short term, historically high rates of organ utilisation are offsetting this (2.55 YTD). Past trends suggest more activity in the six months to March.
- There are large variations in consent rates between teams, which are being influenced by ongoing NHS constraints including staffing, theatre access and length of process. Verbally expressed opt-outs (112 YTD) and deemed consent overrides (168 YTD) continue to have a major impact on the consent rate.
- There are similar NHS constraints in living donation with staffing, imaging capacity, theatre access and Covid continuing to impact activity levels.
- Initial insights from a survey of living donor kidney transplant centres indicate that we are likely to achieve a steady state this year.

Net Promoter Score (NPS) - Blood Donation

 Net Promoter Score fell by 1.9ppts to 84.8% in August and 85.8% YTD. Donor experience also fell, by -3.6ppts to 76.4% in month with appointment cancellations and waiting times driving experience scores down.

Ocular

- August's donation rates remained at an average of 44 donors per week vs. a target of 70. Actions to improve donation include this month's go-live of both a new electronic referral form and the pilot of a new collaboration between a local SNOD team and a hospital bereavement department in Stoke, where we are seeing early signs of increases in referrals.
- There is strong demand for ocular tissue, and product issues are being capped due to low stocks (average stock in August 215 vs. 300 target).

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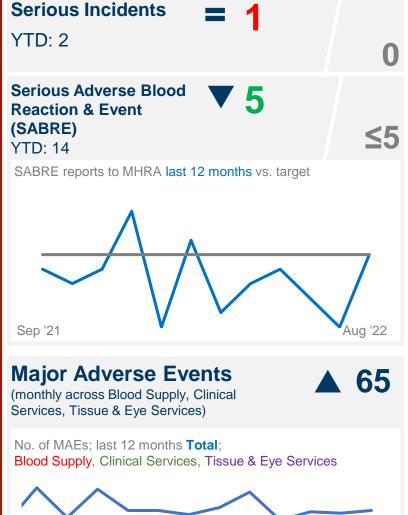
Sep '21

Modernise our operations to improve safety, resilience and efficiency

External Majors

Overdue events (excl. documents)

Aug '22





259

Insight and Commentary

- NHSBT's first never event in early September is included within this report.
 for transparency and completeness for Board, even though the event did not occur during the August reporting period.
- The never event concerns the unintended transplant of three ABO incompatible organs due to an incorrect blood group temporarily put into a Trust LIMS (Laboratory Information Management System) during a massive haemorrhage situation. This is the first never event that NHSBT has been involved in and an update will be given to the Board at the meeting.
- Whilst two of the three overdue KPIs were missed at the end of August, performance against the 3rd KPI (total overdue excluding document reviews) improved from the previous month. Closure of events appears to have been impacted by the Bank Holiday when fewer staff were working. The QA Incident Management Working Group are exploring the use of an external training provider to modernise the management of the quality incidents.
- With regard to the 14 Major events which were overdue at the end of August, these were spread among six directorates, with just over half in OTDT-TES and Clinical Services. Five of the events were still overdue on 7th September, the rest have been closed or had their target date extended.
- There was a Serious Incident recorded during August, related to growth identified in microbiology samples for a transplanted cornea. The incident occurred during Q1 and was notified to the HTA at the time, but was reclassified as an SI in August after the patient developed an infection, meaning that the cornea needed to be replaced. The incident has been fully investigated and a formal duty of candour letter has been sent.
- After an extended development period, the EU has released the latest revision of Good Manufacturing Practice (GMP) Annex 1, which details the requirements for the manufacture of sterile medicinal products and permits the use of Quality Risk Management and Pharmaceutical Quality System principles. The revision will take effect in August 2023, and will impact teams within Cellular & Molecular Therapies and Tissue & Eye Services.

Modernise our operations to improve safety, resilience and efficiency



Collection productivity **Annualised YTD**

1,223

Actual vs target vs revised target & EBA top quartile benchmark 1.347 Aug '22 Sep '21

Hospital services productivity **Annualised YTD**

36,624

Actual vs target 33,630 Sep '21

Aug '22

YTD (Blood & Group)

Top quartile performance in 5 key benchmarks

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

£3.0m

1. Fulfilment of orders² in full rate 12-mth actual vs. target [Under review]

Aug '22

Sep '21

Sep '21

2. Testing productivity **Annualised YTD 31,168**

31,503

Actual vs target vs EBA top quartile benchmark

Aug '22

3. Manufacturing productivity **Annualised YTD**

11.556

10,976

Actual vs target vs EBA top quartile benchmark



4. Hospital customer complaints

12-mth actual vs. target

[Under review]

12-mth actual vs. target [Under review]

5. Lost time injury

incidents / severity

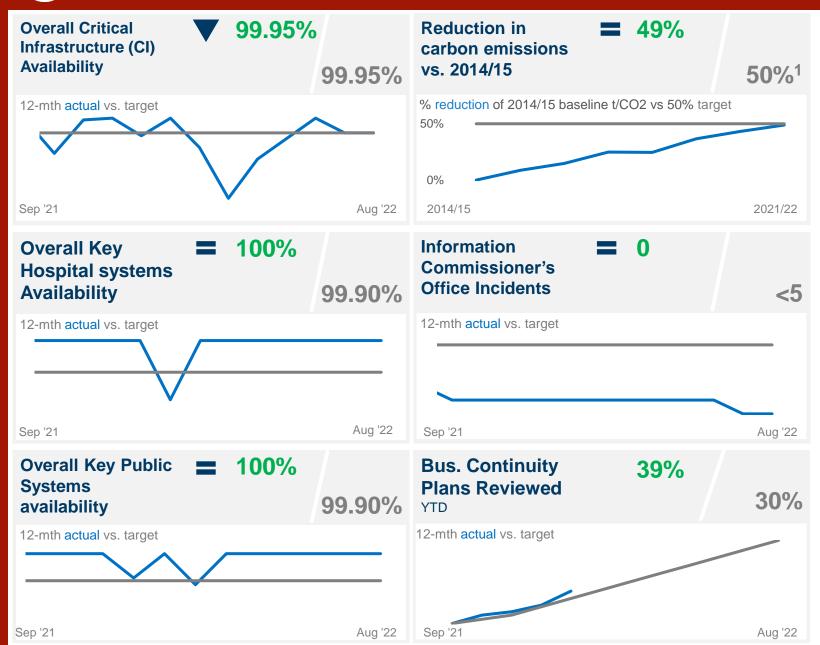
- ¹ Metric target is a range. Performance outside this range is rated as red RAG status.
- ² Orders for all blood products ordered by hospitals

Insight and Commentary

- The slight decrease in Red Cell demand evident at the end of July 2022 continued into August. With collections over the same period increasing, this has translated in to an improved and more stable stock position.
- Whilst overall blood stock stability for August stands at an average of 4.6 days of stock (compared to 4.1 DoS in July 2022), September data to date shows a potential improvement to an average of 4.8 days assuming demand and collections is in line with plan. Stocks of O+, O-and AB- are forecast to remain challenging.
- A period of sustained stock recovery has led to an increase in On Time, In Full performance with 96.8% of requests being fulfilled 'In Full' (July 2022 = 95.8%).
- Whilst workforce issues remain in many blood donation teams, sickness absence in frontline roles has fallen from the levels seen in June 2022 and July 2022.
- The number of NHSBT led appointment cancellations rose again in August 2022 to an average of 3,300 donors per week, often at shortnotice. This is attributed to the higher percentage of new joiners and staff in training on collection teams, resulting in capacity reductions and lower collection levels as they are inducted and trained.
- Blood Supply productivity (collection, manufacturing, testing and hospital services) has improved through August, supporting the relatively improving picture across the supply chain.
- Ability to deliver incremental savings is under review given Blood Supply revised financial forecasts for 22/23 (Blood Supply £2.5m of £3.0m target).

(P)

Modernise our operations to improve safety, resilience and efficiency



Insight and Commentary

- Critical Infrastructure, Key Public Systems and Key Hospital Systems all met availability targets for August.
- Critical Infrastructure availability was 99.95%, due to users reporting that NTxD was showing poor performance across the entire service. DDTS teams investigated, and service was restored without any action. A fix was subsequently identified and will be implemented to restore NTxD performance in mid September.
- All recent incidents referred to the Information Commissioner's Office (ICO) are now closed, with recommendations and actions being addressed internally. No new ICO incidents reported since June 2022.

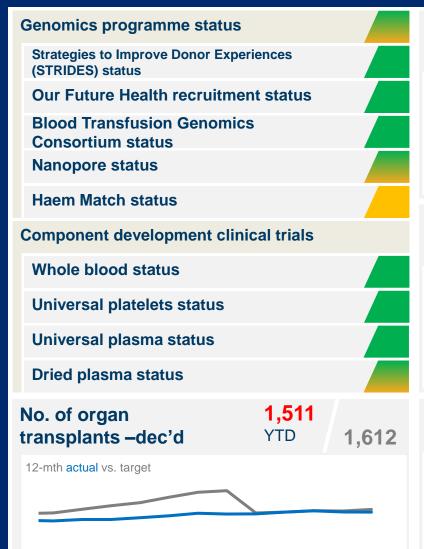
1. Progress versus annual target of 50%

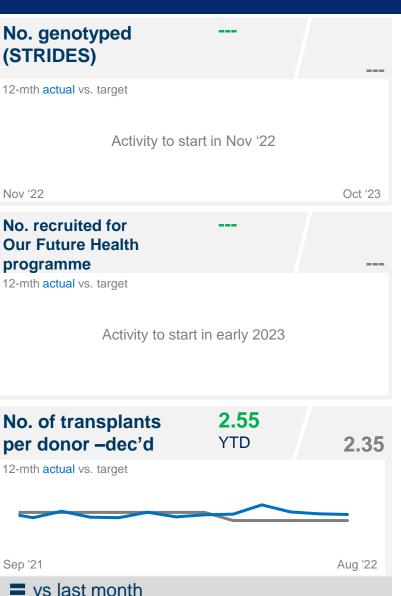
Drive innovation to improve patient outcomes



Sep '21

vs 322 in month





Insight and Commentary

Genomics Programme

- Strategies to Improve Donor Experiences (STRIDES) Genotyping
 - 1219 DNA sample extractions completed in August (total 69,266)
 - Positive outcomes to date with doubling of ethnic minority donors recruited to the STRIDES Bioresource.
- Our Future Health (OFH)
 - Recruitment due to start in early 2023; value for NHSBT is in the data received back to support improved matching
- Blood Transfusion Genomics Consortium (BGC)
 - Plan to progress genotyping BGC Pre-clinical study 4
- Nanopore collaboration
 - ICT installation has started; planned completion is November
- Data sharing agreements and DPIAs being established between hospitals and NHSBT with data transfer capability expected late Q2.

Component development clinical trials

- Whole blood use in trauma Trial due to open in October 2022; awaiting local site approvals and NHSBT blood stocks to recover.
- 2nd phase universal plasma project being planned and combined with universal platelets. A business case is planned for Q4 2022/23.
- Dried plasma £5m project ongoing; procurement and facility build in progress; status due to slight delay in the procurement process

Organ transplant and utilisation

- Lower than planned rates of donation continue as outlined on page 6.
- The number of transplants would have been lower, were it not for continued high rates of organ utilisation, which were 2.49 in-month (2.55 YTD) against a target of 2.35

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

Aug '22



Clinical

Biotechnology YTD

12-mth CAGR **23.1%**

Centre income

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

Plasma for medicines programme



Therapies income YTD excl. DHSC Grant in Aid funding; 12-mth CAGR 12.0% £13.98m

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

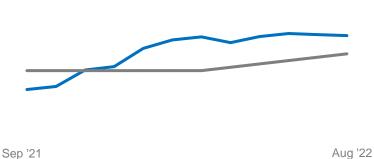


Aug '22

Transfusion 2024 programme status

Cell & Molecular **Therapies:** stem cell transplants supported

12-mth Moving Annual Total actual vs. target



Therapeutic

Services no.

Apheresis

776

YTD

British Bone 100.861 **Marrow Registry Fit-Panel volume**

103.512



£0.66m

Sep '21 Aug '22

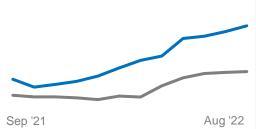
12-mth Moving Annual Total actual vs. target, £m



of procedures 12-mth Moving Annual Total actual vs. target, no. of procedures

4,660

YTD



Insight and Commentary

Plasma for Medicines

- The programme remains at Amber status due to the reprofiling of collection volumes, particularly in recovered plasma for medicine (rPfm), due to workforce issues impacting across NHSBT.
- This is being addressed through over establishment and additional recruitment. However, new staff require training which has timescale implications with change not visible until early September. Lost volumes will be recouped later in the year.
- Planned changes in NHS England & NHS Improvement (NHSEI) procurement timescales have resulted in a reprofiling of plasma deliveries to fractionators from November 2023 into Jan/Feb 2024.

Transfusion 2024

765

- Discovery work has started on the options for our future blood stock management approach
- Engagement is ongoing with potential pilot hospitals for the e-requesting/ereporting pilot for Foetal RHD typing; a successful end to end process test has been completed with one hospital

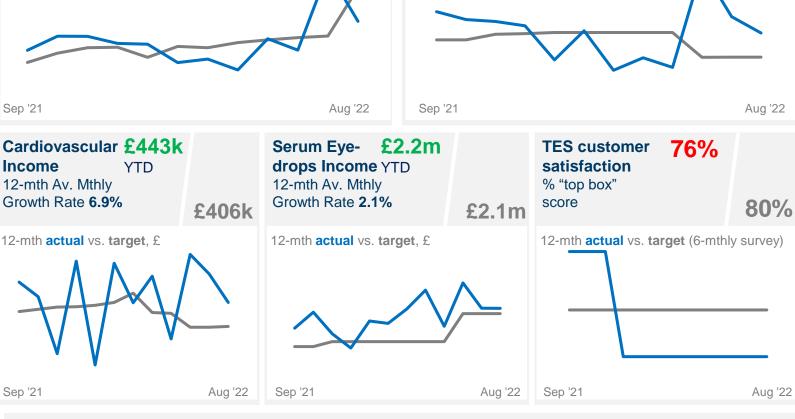
Cellular Apheresis and Gene Therapies (CAGT)

- CAGT total income £0.09m better than plan, driven by extra TAS activity (Plasma Exchange and Photopheresis)
- Clinical Biotechnology Centre (CBC) income £0.92m behind plan YTD; yearend forecast £1.16m below budget £4.39m; driven by project delays and slippage in the phasing/timing of work
- CBC project at Amber-Red status due to resource and critical consumable challenges; project closure likely to be early 2023 (3-4 months later than planned)
- Stem cell transplants supported in CMT continues to fluctuate close to plan, moving just above target this month
- BBMR Fit panel volumes behind target YTD; impacted by prioritisation of existing blood donors vs new donors; SCDT and DX working on new donor recruitment proposition
- SCDT income behind budget YTD, forecast remains just under plan; BBMR matches at 71 (plan 82) expected to recover; cord blood issues at 13 (plan 20)

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









Overall income

- TES income in August was adverse to plan by (£241k) 15.1%, due to lower than planned sales in Corneas, Skin, Tendons & Meniscus. Sales of Cardiovascular and Serum Eyedrop products continue to be strong.
- The decrease in tissue sales is partly due to several products being on backorder and reported lower activity in elective surgery.

Ocular income

 The low ocular donation rate in July has resulted in less supply for sales in August. Demand for ocular products is high, and plans are currently being deployed to increase donation rates. As income continues to be behind target (20.3% adverse in August) there are plans to rephase income in line with donation improvement plans.

Heart Valves

 Donated hearts that have been supplied to the Oxford Heart Bank are now directed to NHSBT. The rates of heart donation for heart valves in August have averaged 5 a week (vs 8 a week target). Income for this product group was ahead of August target by 10k.

Serum Eyedrops

 The production of serum eyedrops has been 2.1% ahead of plan in August, 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

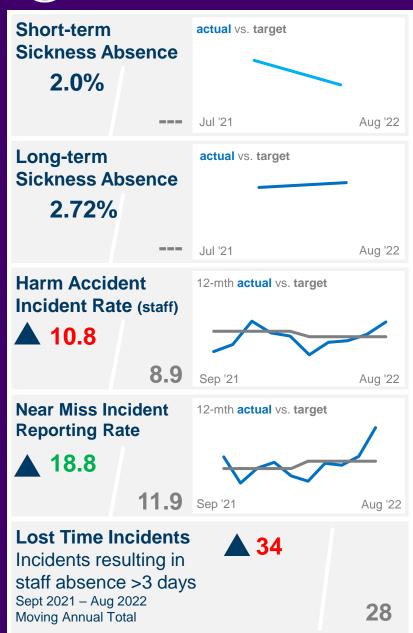
To be defined by Education and Training Strategy Q4 2022/23

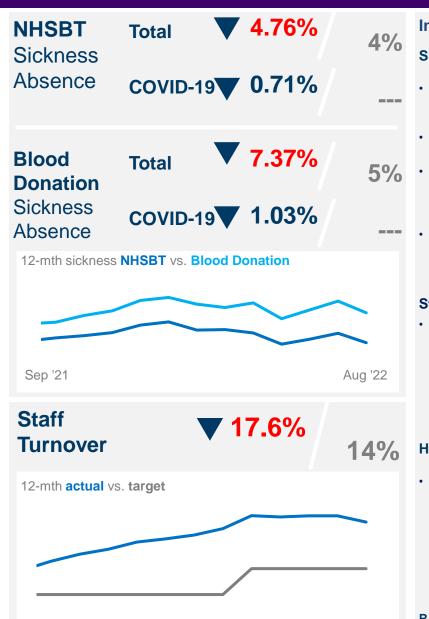


Invest in people and culture to ensure a high performing, inclusive organisation

Sep '21







Insight and Commentary

Sickness absence

- Clinical Services absence has fallen to below 3% and short term absence has significantly decreased to below 0.5%, and of this less than 0.2% is due to coughs, colds and flu.
- We are currently reviewing the long term cases to ensure they are being appropriately managed
- OTDT overall absence is up to 6.3% from 5.1%. The majority of this is attributable to Short Term Sickness which accounts for 65.2% of total sickness. Total number of days lost is 1,255 days (an increase from a total of 977 days from previous month).
- Within this figure TES absence has increased from 3.18% to 7.13% mainly due to Colds, Coughs and Influenza. Organ Donation also increased from 5.66% to 6.68%, again a majority due to S13.

Staff Turnover

Organisational turnover has reduced in August to 17.6% from 18.1% reported for July. This remains above the target of 14%. Highest rates of turnover remain in the Blood Donation teams, however the rate is reducing. In August, we published the support for carers financial support and an additional opportunity at the start of 2023 to sell annual leave. Action continues to take place considering the financial and non-financial interventions to retain and improve the resilience and experience of our workforce.

Harm Incidents

Aug '22

 The Harm Incident rate has increased in August (10.8) compared to July (9.2), influenced by Blood Supply and Plasma. Action to address includes direct engagement from the Health, Safety and Wellbeing team, discussion with SMTs about skills mix to avoid fatigue and burnout and SMTs reviewing targets.

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





Insight and Commentary

Recruitment & Retention

Time to recruit continues to decrease from 13.5 weeks to 13.2 weeks. Activity to reduce further includes the launch of the new eRecruitment System in September. The launch of the new system will improve the experience for both hiring managers and candidates, through the recruitment process, and will provide improved data to understand where delays occur through the process. As part of the launch, we are introducing new SLAs designed to support and speed up recruitment, especially for our 'volume' areas.

The candidate market remains exceptionally challenging as we face one of the tightest labour markets on record in the UK. With record vacancy levels, and unemployment remaining low at 3.8%, there is currently less than 1 unemployed job seeker per vacancy in the UK. This means we are facing tough competition when hiring and competing to retain staff against external opportunities from across multiple sectors and organisations who are aggressively recruiting.

PDPR

Completion rates for PDPR remain below the target of 95%, remaining static at 84%. A factor influencing the completion rate is the high priority to deliver operational services. The People and Culture team will continue to with their Directorates to improve completion rates.

Mandatory Training

The compliance rate is improving, increasing from 93% reported in July to 94% reported in August.

Engagement

Following the last Our Voice survey, directorates continue to build and deliver action to improve engagement. Wider work across the organisation is taking place in response to concerns expressed by staff of racism, discrimination, bullying and harassment. An action plan is being developed to address the concerns expressed which will be delivered through the 2022/23 performance year acknowledging the feedback from our staff to actively raise awareness. provide development, review our policies and processes and systems, and effectively communicate our intentions.

Insight and Commentary

more cases than last month.

People, 2 Clinical.

Employee Relations (ER) Cases.



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



Employee Relations (ER) Cases at month end

0.34% **Total**

BAME **1** 0.51%

% of staff with a live case; total, Minority Ethnic Sep '21 Aug '22

Live ER Cases **0.76%** Male at month end

Female **10.10%**

% of total with a live case; total, male, female Sep '21 Aug '22 Total no. ER cases at month end

20 (+3)

5,896 total staff

80%

Closed ER cases

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

65%

% of total by protected characteristic

20% Female 25% BAME

Disability

5% LGBT+

open (days)

7 88

Avg. time ER cases

Male

Over-running cases are: 5 Grievances and 2 Disciplinary. **70%**

Overall, 5 of the 20 live cases involve BAME colleagues, an increase of 1 case from last month, but significantly reduced from previous months.

Live cases at month end August 2022 = 20 cases. Three

7 cases are over-running against SLA: 3 M&L, 1 BD, 1

7 new cases opened in August 2022, 2 Grievance, 1 Probation and 4 Disciplinary. We continue to review all disciplinary submissions via the Triage panel process.

• 4 cases closed in August with an average case timeline of 88 calendar days (mostly due to 2 long-running cases of 183 and 147 days).

New ER cases (last month)

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

17 (12)

No. of live 32 concerns

Top reasons for FTSU concerns

Bullying & harassment

Inappropriate behaviour 6

Employee Relations (ER) cases include conflict resolution casework (disciplinary, grievance, dignity at work, capability, probation) and excludes other casework.

Freedom to Speak Up Concerns (FTSU)

Of the 32 live concerns, 14 relate to bullying, and a further 6 relate to inappropriate behaviour.

Plans to address these concerns include:

- The response to NHSBT wide concerns of racism, inequality, bullying and harassment.
- Expanding the Champion network from 5 to 50, with one day per month protected time
- Consideration to Increasing the number of Freedom to Speak Up Guardians





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

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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
Net Promoter Score	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 Minerity Ethnia (DAME)	% of the time consent is given for organ donation among Black, Asian or minority ethnicity identified population in last 12
Organ consent Black, Asian, Minority Ethnic (BAME)	months vs target
Organ transplants doo'd 8 living (moving appual total)	No. organ transplants for the last 12 months, actual vs target. This is a combined figure consisting of the no. of deceased
Organ transplants – dec'd & living (moving annual total)	donor transplants plus the number of living donors, which is used as a proxy for living donor transplants
British Bone Marrow Registry (BBMR) Fit-Panel volume	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
Diffish Bolle Marrow Registry (BBMR) i 11-Famer Volume	British Bone Marrow Registry
Additional content metrics	
Whole blood % issue demand met (total for month.)	% 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 years old 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
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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,
Childa National Illiastructure availability	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 Programme 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 Universal 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	Compound Annual Growth Rate (CAGR) provides a growth rate based on a moving annual total, that
CAGR	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
TEO and a second of factors	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
Staff turnover	% 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
	% Employee Relations (ER) cases include conflict resolution casework (disciplinary, grievance, dignity at work, capability, probation). This metric excludes other casework.
Engagement Score	Staf engagement score based on most recent Our Voice 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
NHSBT sickness absence rate (total; COVID-19)	% 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 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 the total.
Near Miss Incident Reporting 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. The incidence reporting rate indicates the rate at which such near miss incidents were reported. The higher the better
Lost Time Incidents	Incident resulting in staff absence of >3 days, this month
Ethnic Minority staff net change	Net change in the number of staff identifying as being of an ethnic minority at NHSBT
Ethnic Minority staff % new starters	% 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
No. of new Freedom To Speak Up cases (last	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