

NHSBT Executive Team & Board Performance Report

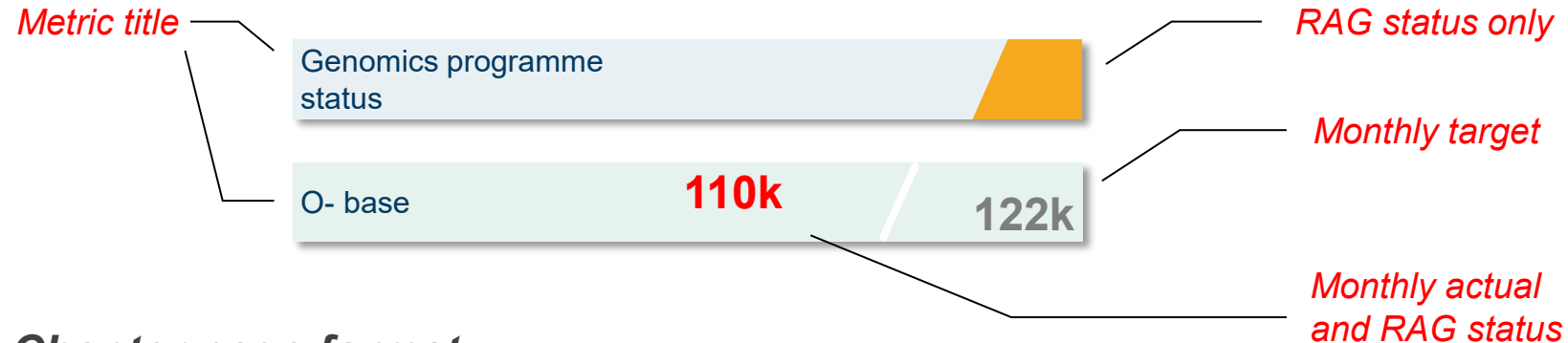
December 2022

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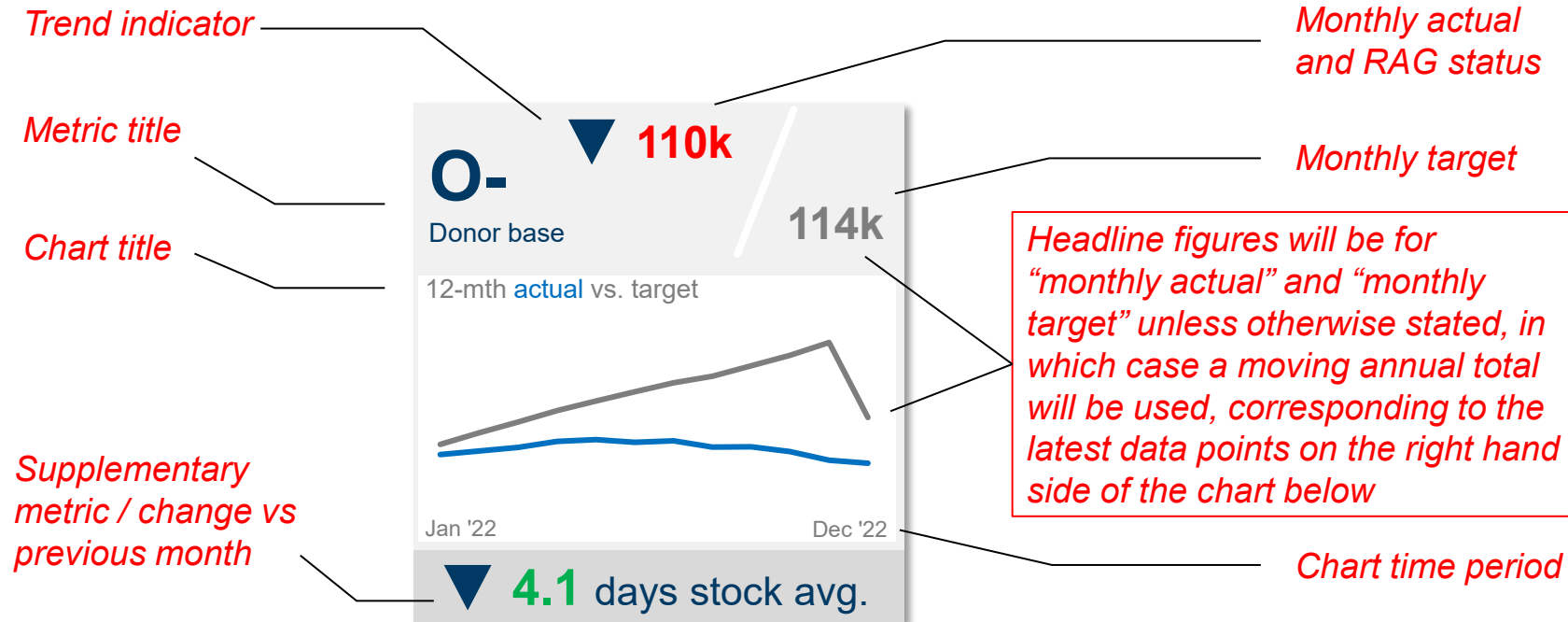


How to read this report

Dashboard page format



Chapter 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 structured around the strategic priorities of 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 five critical business areas of focus by the Executive Team:

1. Blood stocks continued to build into early December, before lower collection and higher demand than plan, once again, put pressure on blood stocks, particularly B negative and O negative. Blood stocks recovery and resilience is the operational priority in quarter 4.

Overall blood stocks peaked at 8.9 days of stock on the 11th December. This was due to higher collection and lower demand than expected and resulted in stock level growth. During the week commencing 12th December, collection levels fell sharply whilst issues increased to meet above forecast demand and stock levels began to fall. Additional pressure was placed on O negative stocks with low collection of Ro blood requiring high levels of substitution with O negative blood. Stocks fell to their lowest levels on the 5th/6th January but have subsequently improved to stand at 5.9 days of stock overall with O negative and B negative at 3.9 and 3.8 days of stock respectively as of 16th January.

2. Size and diversity of our donor base remains below target. The Xmas and New Year reduction in donation activity has halted the recent trend of donor base growth.

After an increase of 6k donors through quarter three, December 2022 saw the lowest number of donations in 2022 and almost 6k fewer donations than in December 2021. This was caused by lower new donor and re-activated donor activity and led to the Whole Blood donor base remaining static at 799K donors in December, with RO, O negative, B negative, O positive donor bases also remaining unchanged. NHSBT led short notice cancellations increased by 17% to 2,762 per week in December, which, combined with the impact of donor led cancellations and non-attendance due to illness, reduced our ability to expand our donor bases and collect sufficient volumes of blood.

3. Challenges in improving organ donation consent rates and organ transplant rates persist; Tissue and Eye Service (TES) ability to meet demand is hampered by low donation rates of tissue products.

December has been a strong month for deceased donor activity with 140 proceeding donors, a level last seen in December 2019. With the eligible donor pool approximately 18% below pre-pandemic levels, improving consent/authorisation and organ utilisation remain key foci to improving organ availability and transplant rates.

Despite performing strongly through quarter one with income £485k (13%) ahead of plan, Tissue and Eye Services (TES) is reporting a year-to-date income deficit of £767k (6%) below plan, primarily due to lower than planned ocular activity. TES' ability to realise the performance improvements required to achieve a break-even financial position in 22/23 remain constrained by low donation rates of tissue products, which limits availability of tissue to supply to customers when requested. Interventions to improve supply of products are yet to deliver improved metrics.




4. Plasma operating model challenged by fluctuations in blood collection levels.



The NHSBT proportion of the overall DHSC led programme continues to be challenging due to capacity constraints in plasma donor centres and NHSBT's testing services. In Source plasma a capacity recovery plan is on schedule and a Donor Experience led workstream is also in progress to ensure the increased capacity is filled. Plasma have also increased Recovered plasma targets to mitigate the shortfall in Sourced plasma. However, Recovered plasma performance has been below target in December because of under collection of whole blood. Whilst planning is on target for the next increase in capacity in 23/24 (July 2023), ability to deliver strategic ambitions is complicated by ongoing difficulties delivering a resilient blood supply.

5. Unprecedented winter pressures on: the NHS, NHSBT people, donors and patients.

Winter is typically a challenging period for service delivery and organisational resilience. Traditionally poor weather conditions and winter Covid-19 and 'Flu infections impact our ability to maintain operations with both NHSBT and donor led cancellations causing under collection of blood. This Winter, unprecedented pressure in the acute sector, impending industrial action and pressure on our people, donors and patients are impacting the capacity and resilience of NHSBT to maintain its level of service. Operational planning is taking place to manage the impacts of strike action, whilst Business Continuity plans exist to ensure service delivery is maintained in the face of known risks such as poor weather conditions. Medium term initiatives are ensuring blood collection teams are appropriately staffed to maintain collection services and cover absence due to illness, thus reducing NHSBT led session cancellation.

Performance summary against most important strategic targets

|  Grow and diversify our donor base to meet clinical demand and reduce health inequalities | | | |
|--|-----------|--------------------------|--|
| Size of Whole Blood donor base | 799k = | 836k | |
| O- base | 111.6k ▲ | 117.4k | |
| Ro base | 25.9k ▲ | 29.7k | |
| Blood donor mix: Black, Minority Ethnic (ME) | 2.31% ▲ | --- | |
| Sourced Plasma donor base | 7.6k ▲ | 10.4k | |
| Net promoter score YTD | 85.5 ▲ | 86.0 | |
| On Time In Full (OTIF) incl. Ro (YTD / 22/23) | 96.2% = | 97.4% | |
|  Drive innovation to improve patient outcomes | | | |
| Genomics programme status | = | | |
| No. of transplants per donor - deceased (moving annual total) | 2.52 ▲ | 2.38 | |
| Component Development Clinical Trials | | | |
| Whole blood | ▼ | | |
| Universal platelets & universal plasma | ▲ | | |
| Dried Plasma | ▲ | | |
|  Collaborate with partners to develop and scale new services for the NHS | | | |
| Plasma for Medicines programme status | = | | |
| Cell, Apheresis and Gene Therapies YTD income | £24.99m ▼ | £26.49m | |
| Tissue & Eye Services YTD income | £12.6m ▼ | £13.37m | |
| Transfusion 2024 programme status [reporting to commence Q2 2022/23] | — | | |
| Education & Training Strategy | — | To be defined Q4 2022/23 | |

|  Modernise our operations to improve safety, resilience and efficiency | | | |
|---|-----------------------|------------------|--|
| Blood stock stability | 7.9 = | 5.5 – 7.0 | |
| Average days of stock | | | |
| Serious Incidents | 0 ⁴ YTD = | 0 | |
| Critical Infrastructure availability | 100% ▲ | 99.95% | |
| Top quartile performance in key benchmarks | 2 = | 3 | |
| Incremental savings (Blood & Group) | £0.95m = | £3.0m | |
| Reduction in carbon emissions vs. 2014/15 | 49% = | 50% ² | |
|  Invest in people and culture to ensure a high-performing, inclusive organisation | | | |
| Weeks taken to recruit | 13.9 ▼ | 11 | |
| Staff turnover | 16.47% ▼ | 14% | |
| Minority Ethnic (ME) Band 8+ ³ | 14.02% ⁵ ▼ | 15% | |
| Employee Relations case rate ⁴ | 0.44% ▲ | --- | |
| Engagement Score | 7.5/10 = | 8/10 | |
| Sickness absence rate | 5.79% ⁵ ▲ | 4% | |
| Harm Incident Rate NHSBT (Harm to staff) | 7.4 ▼ | 8.9 | |

¹ reported one month in arrears² Progress versus annual target of 50%³ Band 8A –D, Band 9, plus VSM, Board & Medical employees⁴ For definition see slide 16⁵ Amber RAG threshold +/- 1.5 pp of target



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

December 2022

NHS

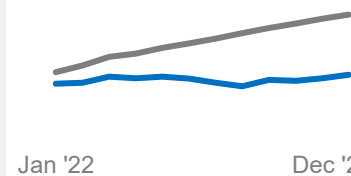
Blood and Transplant

Whole Blood
Donor base

799k

836k

12-mth actual vs. target

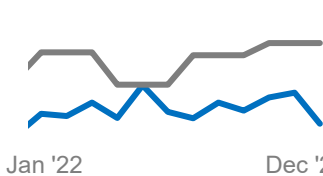


Ro Collection MAT

46.3k

56.2k

12-mth actual vs. target

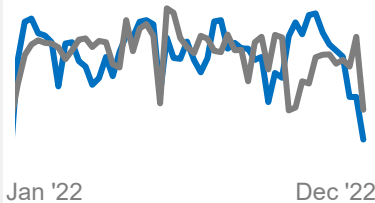


Whole blood
% issue demand met by collection

<100%

7.5% under collection

12-mth actual collection vs. demand

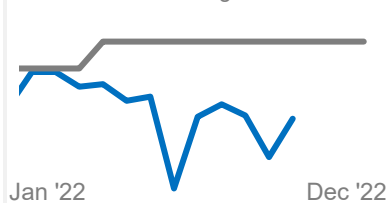


On Time In Full incl. Ro (YTD / 22/23)

96.2%

97.4%

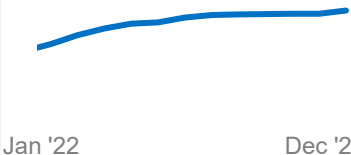
12-mth actual vs. target



Male representation in donor base

45.7%

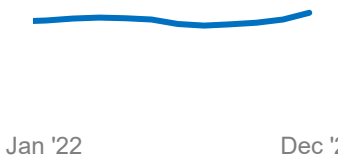
12-mth actual



BME representation in donor base

2.31%

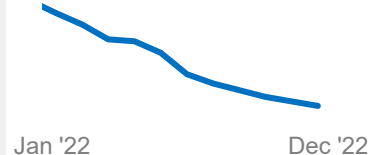
12-mth actual



<35 yrs. representation in donor base

28.5%

12-mth actual

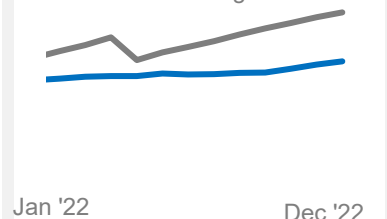


Ro Donor base

25.96k

29.3k

12-mth actual vs. target

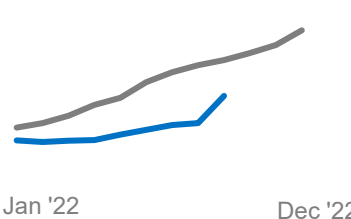


Sourced Plasma Donor base

7.6k

10.4k

12-mth actual vs. target

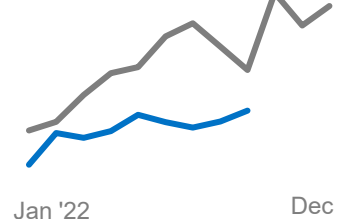


Sourced Plasma
Litres in stock, YTD

5,631

9,584

12-mth actual vs. target

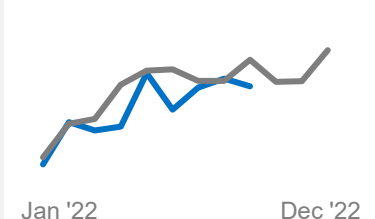


Recovered Plasma
Litres in stock YTD

55,182

63,808

12-mth actual vs. target

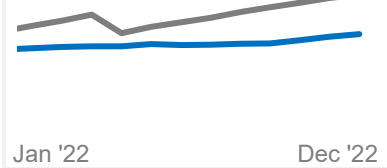


O- Donor base

111.6k

117.4k

12-mth actual vs. target



▼ 3.0 days of stock 31/12

Insight and Commentary

Donor Bases

- After an increase of 6k donors between September and November, lower than expected new donor and re-activated donor activity meant that the Whole Blood donor base remained static at 799K donors in December with the proportion RO and black and minority ethnic donors remaining unchanged. The downward trend of under 35 year olds representation in the donor base continues.
- December saw the lowest number of donations in the calendar year and almost 6k fewer donations than December 21. With issues rising through the month stock levels decreased.
- Overall stock levels started the month at 8.1 days of stock but ended on 6.5 days. While this overall level sits within the target range forecasts predict that this rate of decline is expected to continue.
- O neg and B neg have driven the decline in stock levels finishing the month with 3.0 days and 3.4 days of stock respectively. Both are forecast to continue declining, particularly O Negative.

Plasma

- Source Plasma for Medicine (sPFM):** Volumes were 774 litres (50.6% below target) due to reduced donation capacity in all three centres, primarily as a result of low staffing levels and high levels of donor non-attendance and donor deferrals reducing the number of donations. Recruitment of staff has been successful and capacity is now increasing. Targets for 23/24 will be revised and reflected in overall PFM modelling and business planning.
- Recovered Plasma for Medicine (rPFM):** Volumes were 7,589 litres, 18.4% below target, due to a decrease in the whole blood collection volume. Capacity is in place to process at target levels but as the supply from whole blood is reduced it is not possible to collect to target.
- Overall, we have processed 62KL year to date which is 9KL (13%) behind target. The overall target for rPFM and sPFM combined in FY 22/23 is 102KL. Our total stockpile from FY20/21 + FY21/22 is now 89KL.

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

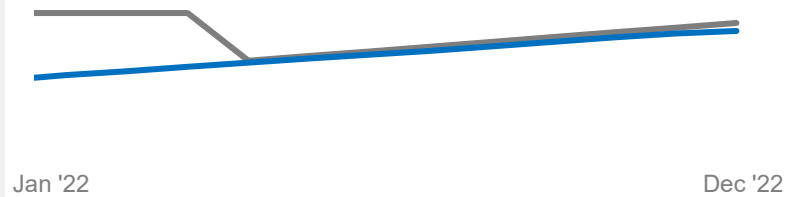


Organ Donor Register (Opt-In Register)

28.36m

28.5 m

12-mth **actual** vs 22/23 year-end target

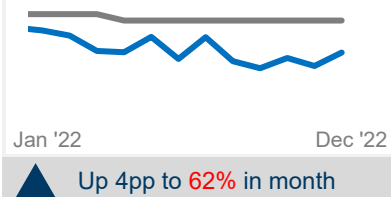


Consent/ Authorisation YTD

62%

72%

12-mth **actual** vs. target

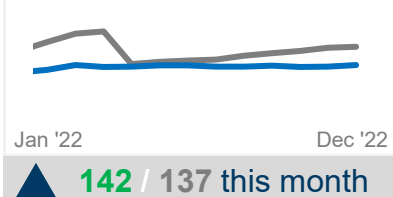


Deceased donors MAT

1,413

1,568

Moving Annual Total **actual** vs. target



Insight and Commentary

Organs

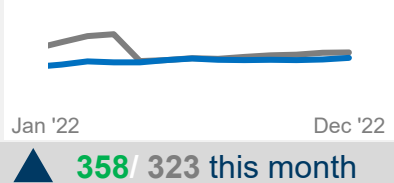
- December saw a strong level of deceased donor activity with 142 proceeding donors, despite persistent NHS challenges. We last surpassed 140 deceased donors in December 2019, and this reverses the recent monthly decline.
- With the eligible donor pool remains considerably lower than pre-2020 levels (currently ~18% below Apr-Dec 2019 levels), consent / authorisation remains a key focus. Organ Donor Register opt-ins reduced by an unusually high rate in December, possibly reflecting public sentiment. A strategic marketing approach is being developed, with the aim of launching in one region in February 2023.
- The increased organ utilisation rate continues with 2.52 (target 2.35) transplants per deceased donor in December. Transplant numbers (358) were positively affected by the high number of proceeding donors.
- A spike in Covid cases is predicted for January, in addition to usual winter pressures and industrial action. We are readying our teams to maintain service and maximise donation.
- Living donor transplantation is already being affected, with planned transplants being cancelled due to Covid in the donor or recipient, and ongoing capacity issues.

Deceased donor transplants MAT

3,566

3,732

Moving Annual Total **actual** vs. target



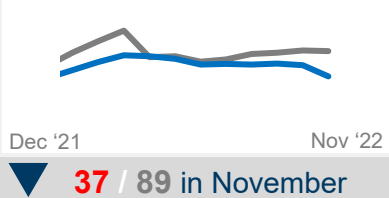
Living donor transplants

828

one month in arrears

955

Moving Annual Total **actual** vs target

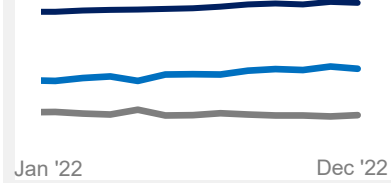


Active transplant list

6,736

3,943 suspended

12-mth **total, active** vs suspended transplant list

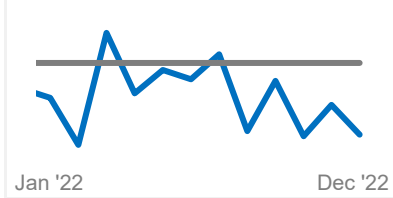


Minority Ethnic organ consent rate

35%

43%

12-mth **actual** vs. target



Net Promoter Score (NPS) – Blood & Plasma Donation

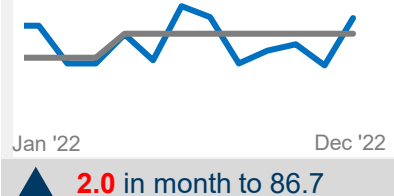
- NPS improved by 2 ppts to 86.7% in December and remains steady at 85.5% YTD. Donor satisfaction remains below target with appointment cancellations and appointment availability impacting experience scores.

Net Promoter Score YTD

85.5%

86%

12-mth **actual** vs. target

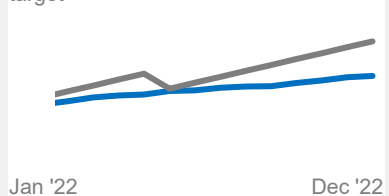


British Bone Marrow Registry Fit-Panel volume (MAT)

100,120

110,844

12-mth Moving Annual Total **actual** vs. target

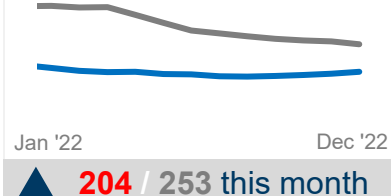


Cornea donors MAT

2,270

2,857

Moving Annual Total **actual** vs. target

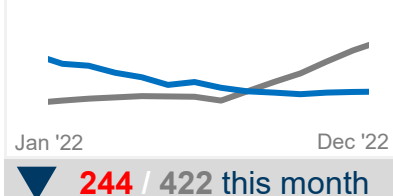


Corneas issued for transplant MAT

3,444

4,155

Moving Annual Total **actual** vs. target



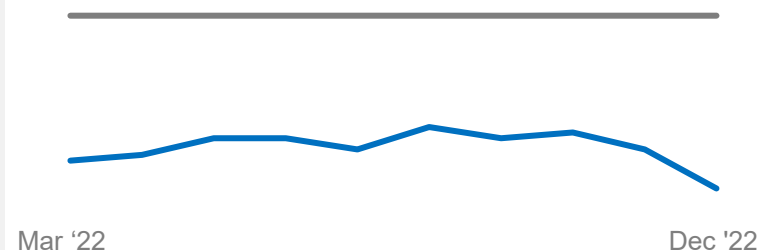
Ocular

- The average weekly ocular donation rate in December was 45, against a target of 70 (average of just under 7 a day).
- The focus on increasing ocular donation continues to be a priority for OTDT with three main areas for improvements: increasing referrals in our current organ donor and tissue donor pathways, new pathways for hospice referrals, and a simpler referral system for our key partner sites.
- There is a strong demand for ocular tissue, Ocular stock levels have increased to around 227 in December (vs target of 300) compared to an average of 210 in November, mainly as a result of reduced demand between Christmas and New Year.
- The two-tier ocular ordering system has been replaced with issues prioritised by patient urgency as of 1st January 2023.

Serious Incidents ▲ **0**
YTD = 4

Serious Adverse Blood Reaction & Event (SABRE) = **1**
YTD: 22

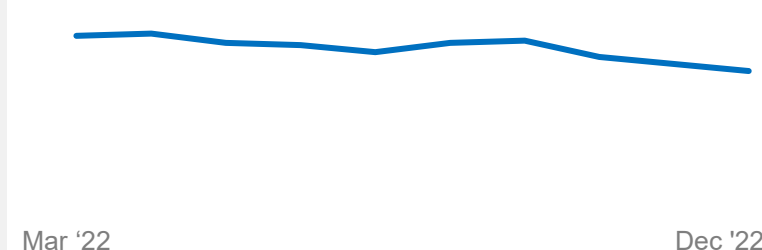
SABRE reports to MHRA moving annual total actual vs. target



External Majors ▼ **0**
YTD = 6 CQC Musts

Serious Adverse Event & Reaction (SAEAR) = **4**
YTD: 50

SAEAR reports to HTA moving annual total actual vs. target

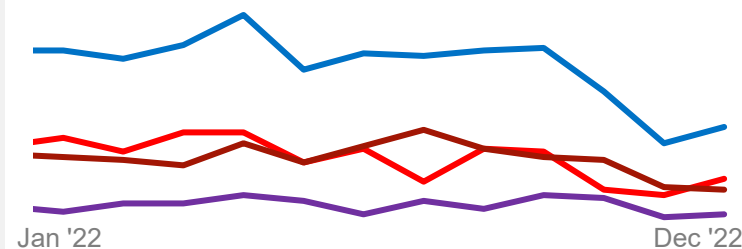


Insight and Commentary

- Externally reported incidents remained low in December, with the SABRE target met for the tenth consecutive month. There were also no serious incidents recorded during December. However, performance against the overdue events targets remains a challenge, and two of the three corporate KPIs were missed at the end of the month (compared to only one missed at the end of November). It is important to remember that December was a peak holiday period, and that this may have had an impact on both incident investigations and the number of overdue events.
- Ten Major events were overdue at the end of December, which is fewer than the previous month (11). Eight of these events were still overdue as of 4th January, one has now been closed and one has had its target date extended.
- A revised version of the ISO 15189 (Medical Laboratories) standard has been published. This accreditation is currently held by our RCI, H&I, NTMRL, NBL and IBGRL testing labs. Key updates to the standard include a greater focus on clinical risk and the impact of services on patients, incorporation of the requirements of ISO 22870 (Point-of-Care Testing) and a structural reorganisation to bring the standard in line with ISO 17000 standards. Implementation will begin with gap analysis against the previous version. Any required changes to current ways of working will be implemented over a 3-year transition period.
- The organisation's action plan in response to the CQC inspection is being proactively monitored in the weekly Executive Team meeting.

Major Adverse Events ▲ **37**
(monthly across Blood Supply, Clinical Services, Tissue & Eye Services) (+8)

No. of MAEs; last 12 months **Total**;
Blood Supply, Clinical Services, Tissue & Eye Services



Quality Management System (QMS) Overdue Events

Documents overdue review = **0.9%**

Overdue majors ▼ **10**

Overdue events (excl. documents) ▲ **249**

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

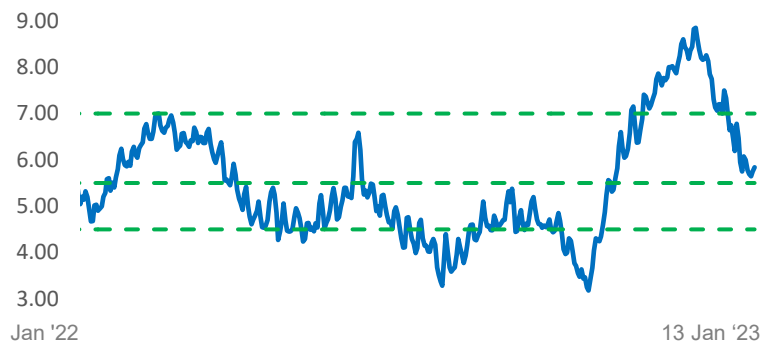


Blood stock stability¹ ▲ **7.9** Dec 22
Average days of stock

5.8 13 Jan

5.5 – 7.0

12-mth actual vs. 4.5 day limit and 5.5 – 7.0 target range



Incremental savings **£0.95m**
YTD (Blood & Group)

£3.0m

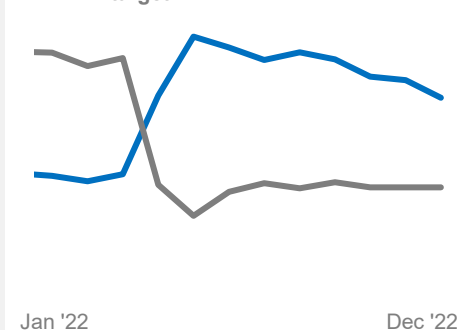
Hospital services productivity

Annualised YTD

▼ **35,623**

33,650

Actual vs target



Insight and Commentary

- A decrease in red cell collections (9.6% lower than business plan target) and an increase in demand in the second half of the month has led to some stock pressure. **Whilst overall red cell stocks stood at 6.4 days at the end of December 2022 (November 2022 = 7.9) O Neg and B Neg stock levels had declined to 3.0 and 3.4 days of stock respectively.**
 - Red cell collections have decreased, with December 2022 collections being 90.4% of business plan target (November 2022 = 100.5%). In part lower collections were as a result of an increase in donor cancellations and donors not attending due to illness.
 - Overall, Red cell issues decreased when compared to November 2022 (-0.7%); whilst, analysis shows that issues rose above forecast demand in the latter half of December 2022. (Actual Issues vs Forecast Demand: 01/12/2022 – 16/12/2022 = 93%, 17/12/2022 – 31/12/2022 = 102%).
 - On Time, In Full performance increased to 96.2% (95.7 % October 2022), with an improvement in 'In Full' fulfilment (96.9% compared to 96.1% in November 2022). There was a small decrease (-0.2%) in 'On Time' performance.
 - 8.4% of available time was lost due to sickness absence (7.7% in November 2022). The increase is as a result of more short-term sickness (+0.9) compared to the previous month. Long-term sickness decreased to 2.5% (-0.2%).
 - The number of appointments that NHSBT has cancelled at short notice has increased by 16%, with an average of 2,762 cancellations per week (compared to 2,400 weekly cancellations in November 2022). Cancellation increases were driven by cold weather; cancellations due to sickness decreased by 2.4%
 - In current Donor Carer recruitment activity there are currently 20 Donor Carer vacancies and 76 FTE with conditional offers but no confirmed start dates.
- ¹ Metric target is a range. Performance outside this range is rated as red RAG status.

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

Top quartile performance in 3 key benchmarks

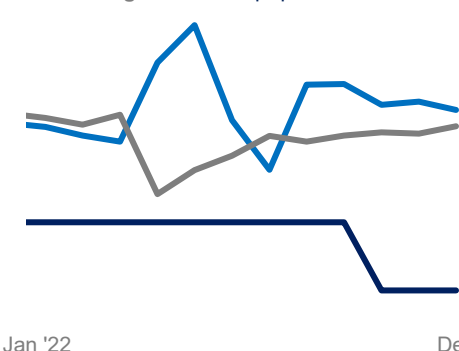
1. Manufacturing productivity

Annualised YTD

▼ **11,297**

11,132

Actual vs target vs EBA top quartile benchmark



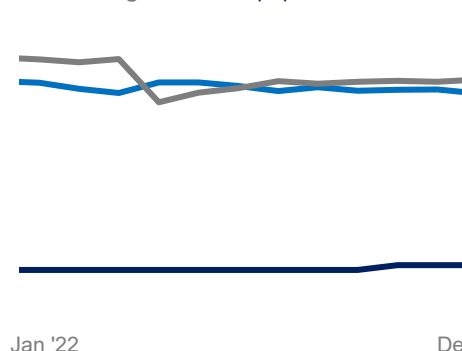
2. Testing productivity

Annualised YTD

▼ **30,636**

31,874

Actual vs target vs EBA top quartile benchmark



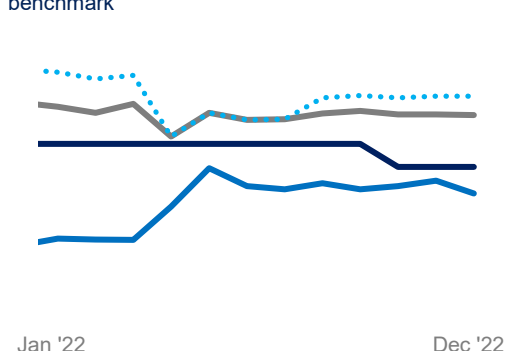
3. Collection productivity

Annualised YTD

▼ **1,209**

1,349

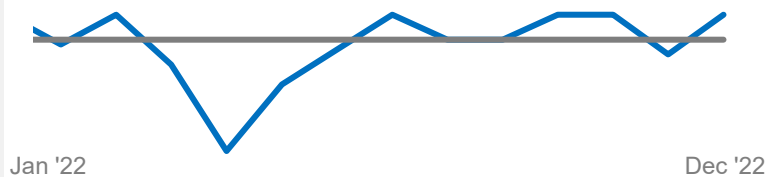
Actual vs target vs revised target & EBA top quartile benchmark





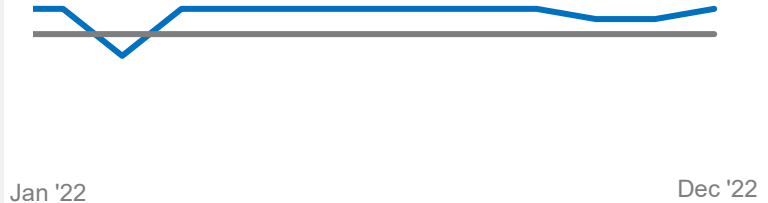
Overall Critical Infrastructure (CI) Availability ▲ 100% 99.95%

12-mth actual vs. target



Overall Key Hospital systems Availability = 100% 99.90%

12-mth actual vs. target



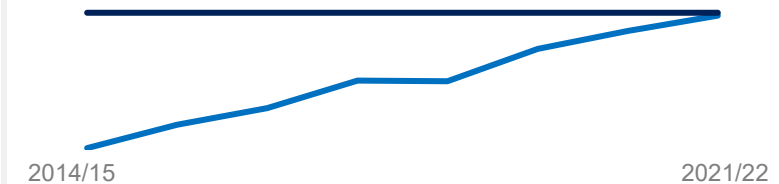
Overall Key Public Systems availability ▲ 100% 99.90%

12-mth actual vs. target



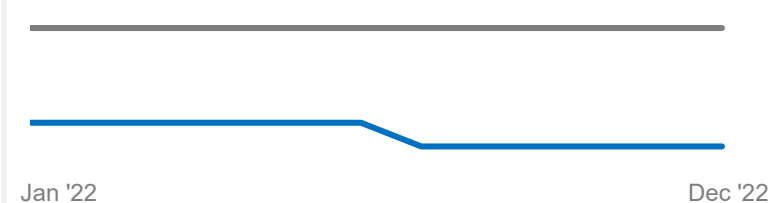
Reduction in carbon emissions vs. 2014/15 = 49% 50%¹

% reduction of 2014/15 baseline t/CO2 vs 50% target



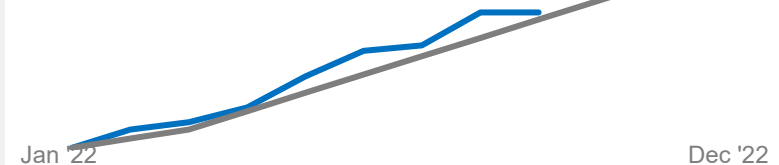
Information Commissioner's Office Incidents = 0 <5

12-mth actual vs. target



Bus. Continuity Plans Reviewed YTD = 74% 70%

12-mth actual vs. target



Insight and Commentary

- Critical Infrastructure, Key Public Systems (KPS), and Key Hospital Services met availability targets, despite further major incidents which occurred in the month:
- There were 2 Gennaro outages, which impacted Session Solution. Investigations are ongoing with the suppliers and internal stakeholders to understand and address the root causes.
- There were 3 National Transplant Database (NTx) related incidents. While in all instances the main service remained operational, in each case there was an impact to some users and an overall degradation of service.
- The Barnsley site suffered a significant flood over the Christmas break. However, no IT systems or services were impacted locally by the event.

1. Progress versus annual target of 50%

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



Genomics programme status

Strategies to Improve Donor Experiences (STRIDES) status

Our Future Health recruitment status

Blood Transfusion Genomics Consortium status

Nanopore status

Haem Match status

Component development clinical trials

Whole blood status

Universal plasma and universal platelets status

Dried plasma status

No. genotyped (STRIDES)

12-mth **actual** vs. target

Activity started in December 2022. Data will be available for January 2023 reporting in February 2023

No. recruited for Our Future Health (OFH) programme

12-mth **actual** vs. target

Start date to be confirmed by OFH, likely mid 2023

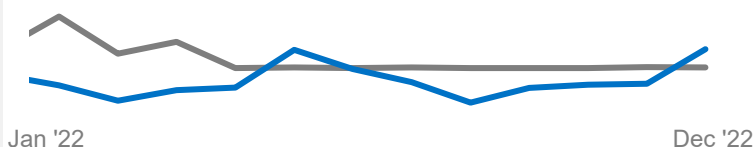
No. of organ transplants –dec'd

2,737

YTD

2,903

12-mth **actual** vs. target



▲ to **358** vs 324 in month

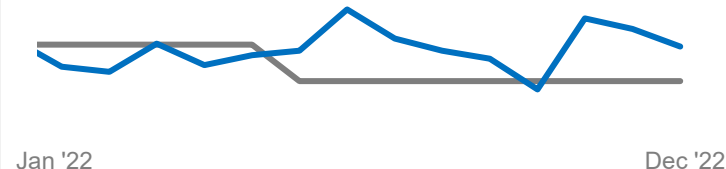
No. of transplants per donor –dec'd

2.54

YTD

2.35

12-mth **actual** vs. target



▬ vs last month

Insight and Commentary

Genomics Programme

- **Strategies to Improve Donor Experiences (STRIDES) Genotyping**
 - DNA sample extractions now complete with volumes approximately 72k.
 - Genotyping STRIDES donors began in December, slightly later than planned.
- **Our Future Health (OFH)**
 - Awaiting a new start date to be confirmed by OFH; likely to be mid 2023.
 - Value for NHSBT is in the data received back from study to support improved matching.
- **Blood Transfusion Genomics Consortium (BGC)**
 - Samples for Pre-clinical study 4 have been processed (ca 5k)
 - Challenge plates processed and analysis ongoing.
- **Nanopore collaboration**
 - Contractual collaboration agreement now signed with Oxford Nanopore Technologies (ONT) for a 3-year development of 'long read' HLA solution
 - IT procurement complete; installation of hardware and infrastructure commenced..
 - NHS England have approved a business case and funding for NHSBT to scale up genotyping capability to type all (ca 17k) Sickle Cell and Thalassemia patients.
- **HaemMatch**
 - Engagement with hospital sites to transfer data ongoing.

Component development clinical trials

- Whole blood use in trauma trial to start in December (delayed due to amber alert).
- 2nd phase universal plasma project being planned in combination with universal platelets. Work currently funded by a small R&D grant. A business case is planned for Q4 22/23.
- Dried plasma £5m project ongoing; procurement and facility build in progress; decision on key equipment supplier imminent.

Organ transplant and utilisation

- Despite high donor numbers in December we remain red YTD, at 13% short of target. We are anticipating finishing 2022/23 at approximately 1,430 deceased donors, ~2.5% higher than last year.
- We are fundamentally reviewing the approach to organ donation promotion and our clinical practices, given the continued high number of family refusals and opt-outs, and more recently the reduction in monthly ODR opt-in registrations. In the short term, continued high rates of organ utilisation are somewhat offsetting the impact of low consent/authorisation rates.



Plasma for medicines programme

=

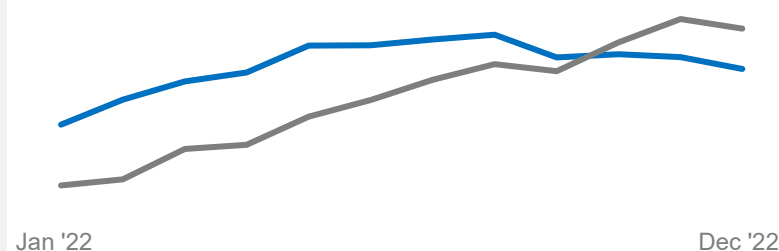
Cell Apheresis and Gene Therapies income excl. DHSC Grant in Aid funding; 12-mth CAGR 5.7%

£24.99m

YTD

£26.49m

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



Transfusion 2024 programme status

=

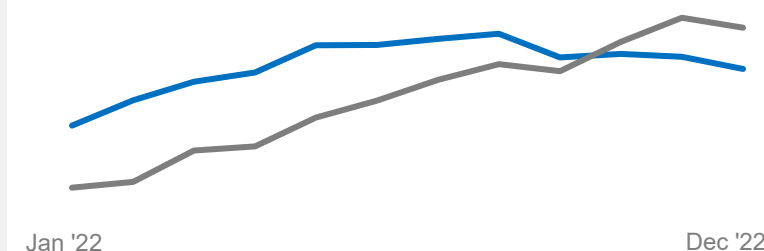
Cell & Molecular Therapies: stem cell transplants supported

1,218

YTD

1,224

12-mth Moving Annual Total **actual** vs. **target**



Insight and Commentary

Plasma for Medicines

- A capacity recovery plan for Source Plasma is on schedule with one centre at establishment and recruitment/training on track at the other two. The associated Donor Experience demand workstream is also in progress to ensure that increased capacity is filled. We have increased the target in recovered plasma to mitigate the shortfall in Sourced
- Recovered plasma performance was below target in December because of the fall in whole blood collection, but planning is on target for the next required ramp up of capacity in 23/24 with a target date of July

Transfusion 2024

- Blueprint for managing blood stocks inventory with hospitals: initial discovery work finalised; workshop held to review; summary paper to be submitted into National Commissioning Group process
- RCI Remote Interpretation: work progressing; pilot delayed by customer internal governance; new date to be confirmed
- E-requesting/e-reporting: number of hospitals interested in the Foetal RHD typing pilot; first go-live is expected in January; Enterprise software to be configured in January
- Scientific/technical education/training: pathway analysis complete, output collated for wider stakeholder engagement. Options appraisal on benefits of a clinical trials network ongoing
- Link to the National haemoglobinopathy Register: work ongoing; go-live expected February

Cellular Apheresis and Gene Therapies (CAGT)

- CAGT total income £1.50m worse than plan. Extra Therapeutic Apheresis (TAS) activity offset by Clinical Biotechnology Centre (CBC) and Stem Cell Donation & Transplantation (SCDT) income below plan
- CBC income £2.00m behind plan YTD; year-end forecast £1.05m below budget £4.39m; driven by project delays and slippage in the phasing/timing of customer work
- CBC project at Amber-Red status due to resource and critical consumable challenges; project closure forecast March 2023
- Stem cell transplants supported in Cellular & Molecular Therapies (CMT) continue to fluctuate above/below plan; below target in-month and YTD
- British Bone Marrow Registry (BBMR) Fit panel volumes behind target YTD; impacted by prioritisation of existing blood donors vs new donors; SCDT and Donor Experience (DX) working on a new donor recruitment proposition
- NHSBT share of stem cell provision to UK patients at 6% v plan 9%; overall provision from UK sources at 29% v 35% plan

Clinical Biotechnology Centre income

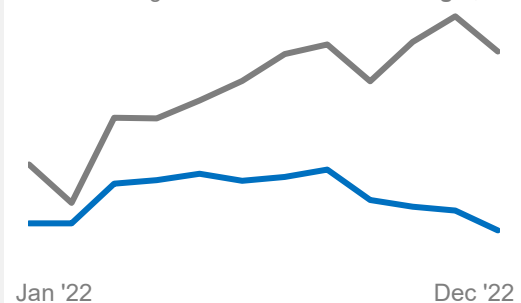
£1.47m

YTD

12-mth CAGR -4.0%

£3.47m

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

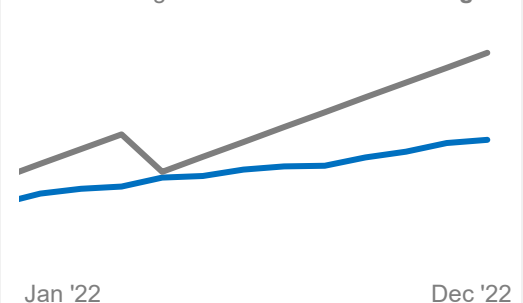


British Bone Marrow Registry Fit-Panel volume (Moving Ann. Total)

100,120

110,844

12-mth Moving Annual Total **actual** vs. **target**



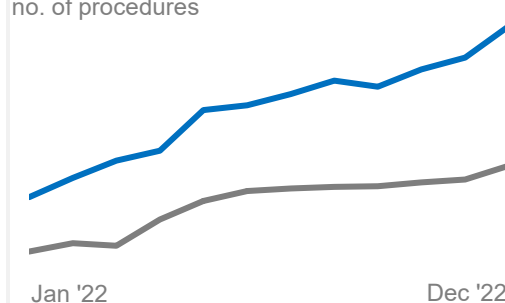
Therapeutic Apheresis Services no. of procedures

8,284

YTD

7,597

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





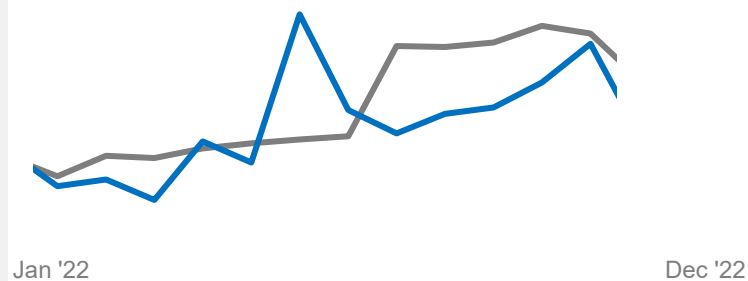
Tissue & Eye Services (TES) income

£12.6m
YTD

12-mth Av. Mthly Growth Rate
1.1%

£13.37m

12-mth **actual** vs. **target**, £



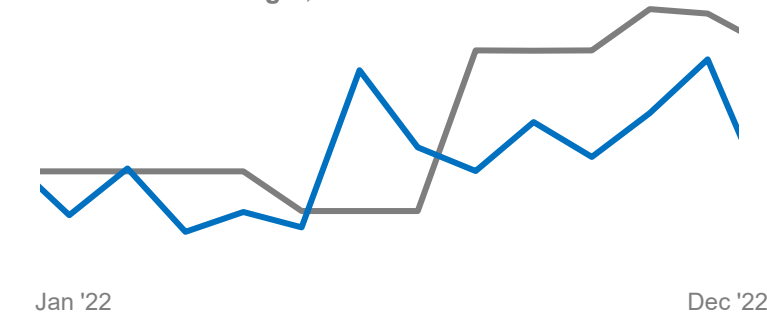
Ocular income

£4.0m
YTD

12-mth Av. Mthly Growth Rate
0.3%

£4.7m

12-mth **actual** vs. **target**, £



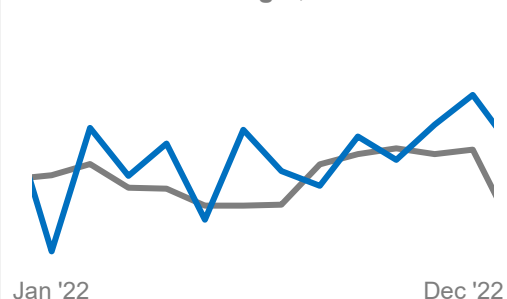
Cardiovascular Income

£843k
YTD

12-mth Av. Mthly Growth Rate
2.2%

£756k

12-mth **actual** vs. **target**, £



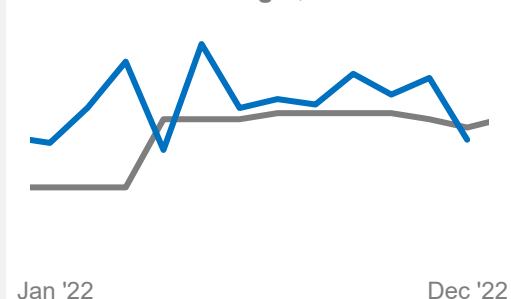
Serum Eye-drops Income

£3.99m
YTD

12-mth Av. Mthly Growth Rate
1.9%

£3.8m

12-mth **actual** vs. **target**, £



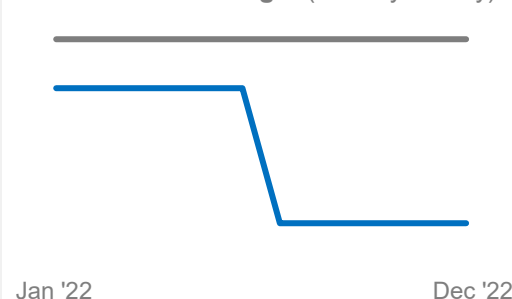
TES customer satisfaction

65%

% "top box" score

80%

12-mth **actual** vs. **target** (6-mthly survey)



Insight and Commentary

Overall income

- December is the lowest monthly sales target of the year, and the overall income position was 13.6% behind target (-£201k), which is mainly attributed to low sales of ocular products (-£257k) due to low stocks. Serum Eyedrops were also slightly behind target (-£13k), due to unexpected issuing problems over the holidays. The total value of backorders has reduced in month, and there has been a large demand for skin, both of which have contributed towards a positive variance in income from tissue sales (+ £86k).

Ocular income

- Ocular income was 42.3% behind target in December, due to the current low level of eye donation and higher target from Q2 onwards. The overall demand for ocular products remains high, and plans are currently being deployed to increase donation rates.

Heart Valves

- Income for Heart Valves was ahead of target in month by £28k. Rates of heart donation for heart valves in December averaged 7 a week (vs 8 a week target).

Serum Eyedrops

- Serum Eyedrops was behind target in month by 11 issues, with the team achieving 311 batches issued to patients against a target of 322.

Customer Satisfaction

- The main issue for customer dissatisfaction is the unavailability of tissue when requested, predominately corneas. We continue to focus on this area through our work to increase levels of tissue donation sufficient to meet demand for our products.

Education and training metric

To be defined Q4 2022/23

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



Short-term Sickness Absence

▲ 2.9%

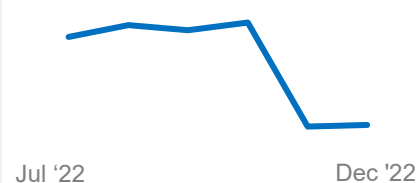
actual



Long-term Sickness Absence

▲ 1.54%

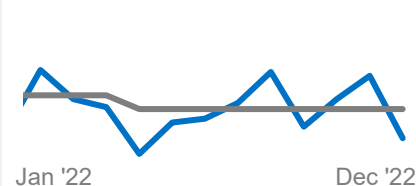
actual



Harm Accident Incident Rate (staff)

▼ 7.4

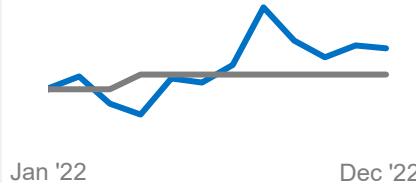
12-mth actual vs. target



Near Miss Incident Reporting Rate

▼ 14.6

12-mth actual vs. target



Lost Time Incidents Incidents resulting in staff absence >3 days

▼ 41

Sept 2021 – Aug 2022
Moving Annual Total

28

NHSBT Sickness Absence

Total ▲ 5.79%⁵

4%

COVID-19 ▼ 0.52%

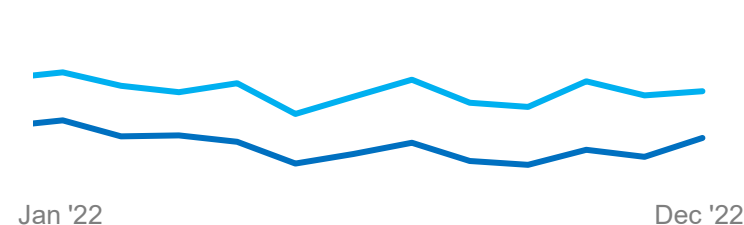
Blood Donation Sickness Absence

Total ▲ 7.88%

5%

COVID-19 ▼ 0.34%

12-mth sickness NHSBT vs. Blood Donation

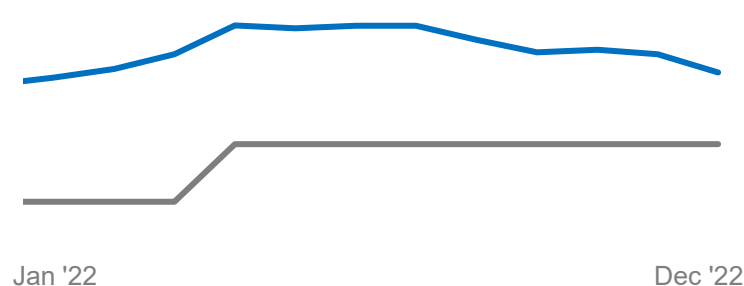


Staff Turnover

▼ 16.47%

14%

12-mth actual vs. target



Insight and Commentary

Sickness absence

- Overall sickness absence has increased to 5.79% from 4.95% last month. Despite expected seasonal increases in respiratory related sickness, coughs, colds and 'flu, overall Covid-19 absence remains has fallen to just 0.52%
- Blood Donation (BD) sickness absence has also increased slightly to 7.88% from 7.6% last month. As above, coughs, colds and 'flu remain the main cause of sickness with Covid-a9 related absence falling to 0.34%.

Staff Turnover

- Overall staff turnover peaked at 18.1% between April and July 2022. It has since fallen consistently to 16.47% in August, but remains too high.
- Staff turnover in Blood Donation stands at 24.3% in December, down from 25.6% in October.

Harm Incidents

- The harm accident incident rate has fluctuated above and below target through quarter 2 and is now below target at a rate of 7.4.
- The top cause of harm incidents is contact with blood (9). occurred.
- Near miss rates continue to exceed target. The top cause of these are equipment fault or failure, and slips, trips or falls. Over 50% of the slips trip and falls were related to poor weather conditions.

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

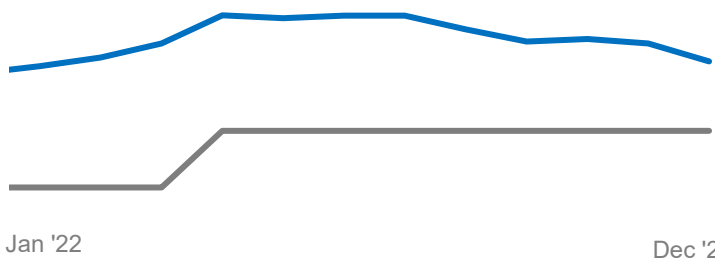
⁵ Amber RAG threshold +/- 1.5 pp of target



Recruitment & Retention

Ethnic Minority staff % Band 8A+ ▼ **14.02%**⁵ / **15%**

Ethnic Minority staff, 12-mth % Band 8a+ vs. target

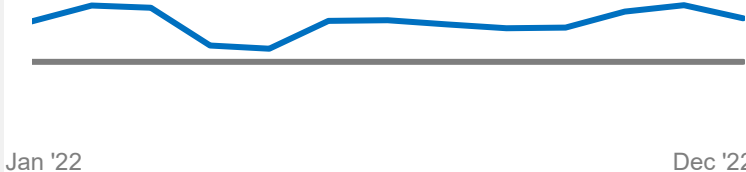


Ethnic Minority staff net change NHSBT = **+9**
Band 8a+ ▼ **+0**

Ethnic Minority staff % new starters NHSBT ▲ **32%**
Band 8a+ ▲ **0%**

Time to recruit (weeks) ▼ **13.9** / **11**

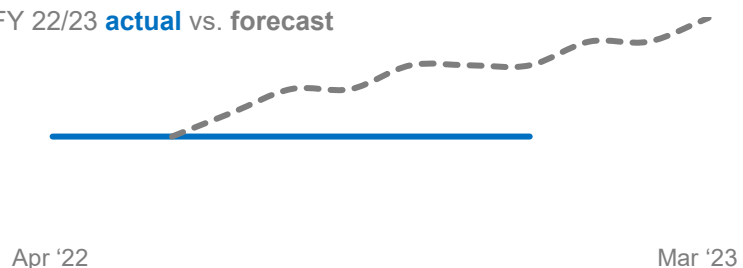
12-mth actual vs. target



Engagement & Development

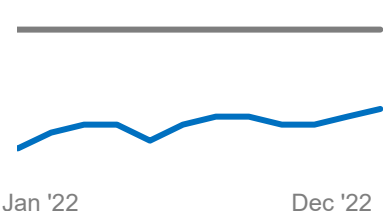
Engagement Score = **7.5/10** / **8/10**

FY 22/23 actual vs. forecast



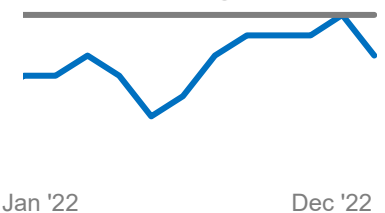
PDPR completion rate ▲ **85%**

12-mth actual vs. target



Mandatory training compliance rate ▼ **93%**

12-mth actual vs. target



No. commencing leadership programmes (ME) ▲ **29 (2)**
577 (76) YTD

Insight and Commentary

Recruitment & Retention

- All members of the recruitment team are now trained and using the new e-Recruitment system.
- Hiring managers are being offered 1:1 contact with a recruitment team member through all stages of the recruitment process/system.
- The team took a phased approach to the introduction of the new e-Recruitment system. Existing recruitment on the NHS Jobs system continued while introducing the new e-recruitment system. This ensured there was no downtime in recruitment activity.
- Appointments made were lower in December at 110 appointments compared with 161 in November.
- Time taken to recruit, whilst high, fell back to 13.9 weeks in month.

PDPR & Mandatory Training (MT)

- Following the Care Quality Commission (CQC) report there is a specific action for directorate SMT's to have a standing agenda item to monitor MT and PDPR rates

Engagement

- Accountability for action plans following the Our Voice survey has been agreed, with directorate actions forming part of performance discussions between each Executive Director and the CEO.

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

⁵ Amber RAG threshold +/- 1.5 pp of target



Employee Relations (ER) Cases at month end

Total ▲ **0.44%**

Minority Ethnic ▲ **0.76%**

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



Jan '22

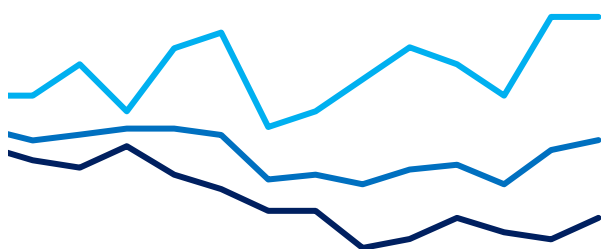
Dec '22

Live ER Cases at month end

Male = **0.87%**

Female ▲ **0.17%**

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



Jan '22

Dec '22

Total no. ER cases at month end

▲ **26 (+2)**

5,896
headcount

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

▼ **69%**

80%

% of total by protected characteristic

Female ▲ **27%**

Minority Ethnic ▲ **31%**

Disability = **8%**

LGBT+ ▲ **4%**

Male ▲ **62%**

New ER cases (last month)

= **6 (13)**

YTD 55

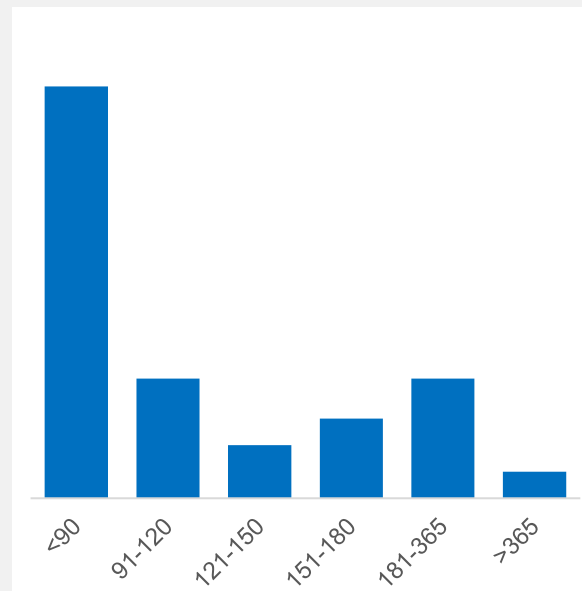
Closed ER cases

▲ **4 (6)**

YTD 61

Avg. days ER cases open ▼ **107** / **90**

51% of ER cases are closed within 90 days vs. 55% Q4 21/22 with an average 107/90 days



Apr '22

Dec '22

Insight and Commentary

Employee Relations (ER) Cases

- Live cases month end December 2022 stand at 26, which is 2 more than last month.
- 18 of the 26 cases remain within the 90-day SLA
- 8 cases exceed 90 days, being 3 M&L, 1 BD, 2 People, 1 Clinical, 1 DDTS.
- 4 of the 8 over-running cases are substantially delayed by employee long-term sickness.
- 8 of 26 live cases involve Minority Ethnic colleagues (31%).
- 6 new cases opened in December = 1 Grievance, 1 Probation, 1 Dignity at work and 4 Disciplinary.
- 4 cases closed in December. Average duration of 108 calendar days. One closed within 90-day SLA.

Freedom to Speak Up Concerns (FTSU)

- Plans to recruit 2 x 0.5 WTE FTSU Guardians are underway, to be in post by the end of March 2023.
- FTSU Champion Network now at 26 with recruitment of remaining 24 in progress.
- Systems and processes being reviewed with DDTS, including possible introduction of a new FTSU App

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

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

▲ **3 (13)**

No. of live concerns

38

Risk Summary

| Ref | Risk Title / Owner | Date of last change / last review | Appetite Category / Level | Risk Score against Appetite (● = Current Residual Score, ○ = Residual Score at last change) | | | | | | | | | | | | | | | | | | | | | | | | |
|---------|--|-----------------------------------|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| BAF-01 | Donor & Patient Safety / Clinical Director | 26 Jan 2022 / - | Clinical / Minimal | <div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div> <div>○●</div> | | | | | | | | | | | | | | | | | | | | | | | | |
| BAF-02a | Service Disruption (Internal) / Director of Quality | 26 Jan 2022 / 12 May 2022 | Disruption / Minimal | <div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div> <div>●○</div> | | | | | | | | | | | | | | | | | | | | | | | | |
| BAF-02b | Service Disruption (External) / Director of Quality | 26 Jan 2022 / 12 May 2022 | Disruption / Minimal | <div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div> <div>○●</div> | | | | | | | | | | | | | | | | | | | | | | | | |
| BAF-03 | Change Programme scale & pace / Strategy & Transformation Director | 26 Jan 2022 / - | Programme / Open | <div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div> <div>●</div> | | | | | | | | | | | | | | | | | | | | | | | | |
| BAF-04 | Donor Numbers & Diversity / Director of Donor Experience | 26 Jan 2022 / 12 Jan 2023 | Operational / Open | <div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div> <div>●○</div> | | | | | | | | | | | | | | | | | | | | | | | | |
| BAF-05a | Financial Shortfall (sudden policy changes) /Chief Finance Officer | 26 Jan 2022 / 12 Jan 2023 | Finance / Open | <div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div> <div>●</div> | | | | | | | | | | | | | | | | | | | | | | | | |
| BAF-05b | Stakeholder and partner support for strategic objectives / Chief Digital Officer | 26 Jan 2022 / 12 Jan 2023 | Finance / Open | <div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div> <div>○●</div> | | | | | | | | | | | | | | | | | | | | | | | | |
| BAF-06 | Inability to access data sets / Chief Medical Officer | 26 Jan 2022 / - | Innovation / Open | <div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div> <div>●</div> | | | | | | | | | | | | | | | | | | | | | | | | |
| BAF-07 | Staff Capacity and Capability / Chief People Officer | 26 Jan 2022 / 13 Oct 2022 | People / Open | <div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div> <div>●</div> | | | | | | | | | | | | | | | | | | | | | | | | |
| BAF-08 | Managers Skills and Capability / Chief People Officer | 26 Jan 2022 / 13 Oct 2022 | People / Open | <div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div> <div>○●</div> | | | | | | | | | | | | | | | | | | | | | | | | |
| BAF-09 | Regulatory Compliance / Director of Quality | 26 Jan 2022 / 7 July 2022 | Legal, Regulatory & Compliance / Cautious | <div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div> <div>●</div> | | | | | | | | | | | | | | | | | | | | | | | | |

BAF-02a & 02b: the worst child risks influencing the scores of these two service disruption risks have been reviewed by the business area Risk Lead and responsible persons. The current residual scores of both TAS-08 staffing and CMT-29 remain scored at 4x4=16. Disruption to NHSBT as a result of industrial action has been reviewed by the responsible risk owner and the current score of 3x5=15 has been confirmed as correct at this time. The residual score applied to the risk associated with adverse weather remains at a tolerable level. These scores are under regular review.

BAF 04: the worst child risk influencing the previous residual score of 16 should not be allocated to BAF-04. Consequently the residual risk score has been agreed as 12.

BAF 08: Managers and leaders capability and skills has been reviewed and agreed that this should rise to Major and Likely at 4x4 = 16