NHSBT Executive Team & Board Performance Report

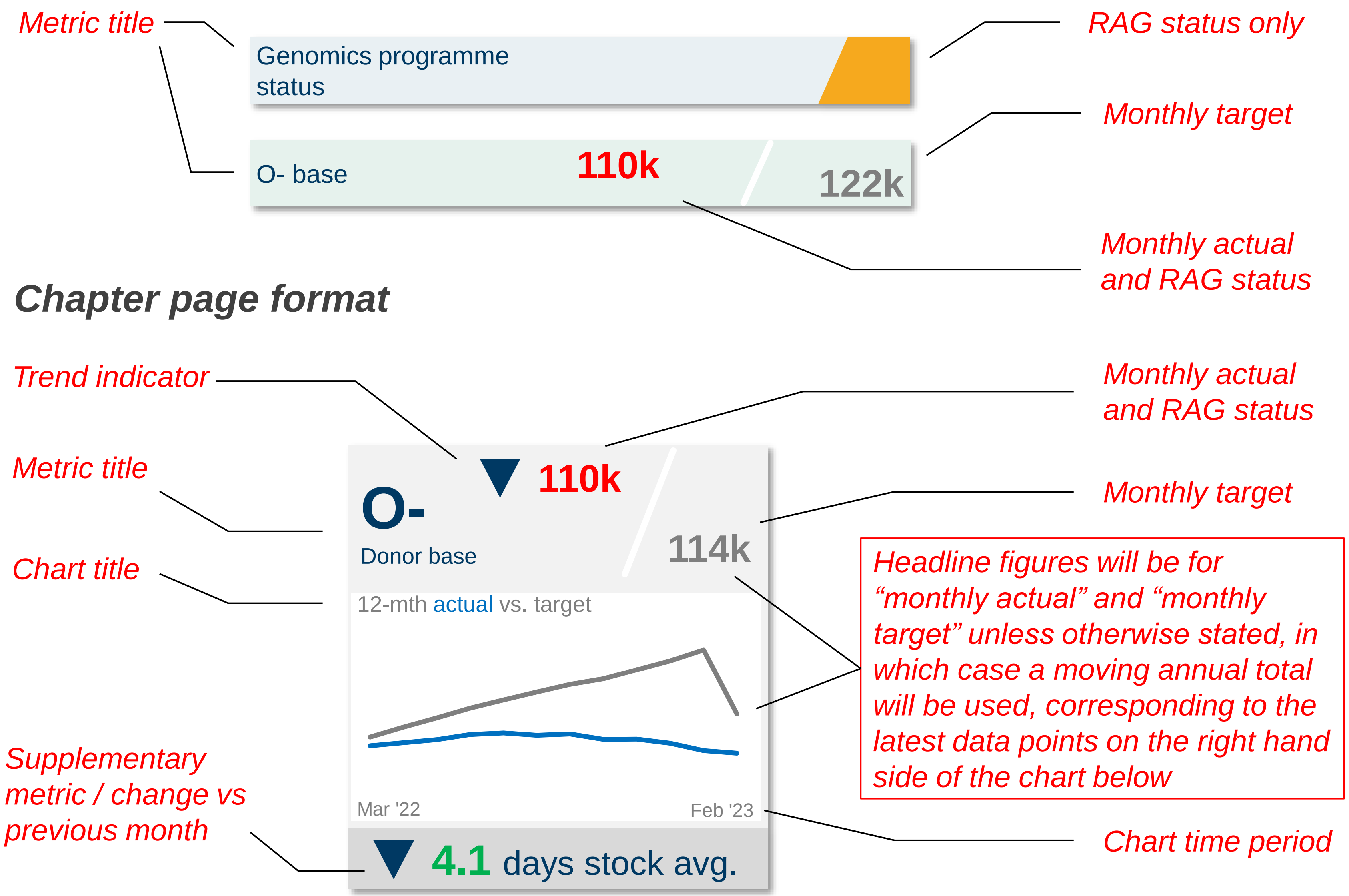
February 2023

How to read this report

Blood and Transplant

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 – February 2023

Performance Insights

There are five critical business areas of focus by the Executive Team:

1. Whilst overall blood stocks averaged 6.4 days of stock in February, B -, O- and A+ remain under pressure. Blood stock recovery and resilience remains the operational priority.

Red cell stocks have remained stable during February 2023, with stock standing at 6.1 days at month end (+0.1 days from previous month end) and with an average of 6.4 days of stock across the month (+0.4 days from January). Collections to target were 96.9%, a 4% increase compared to the previous month, whilst demand was 1.9% lower than forecast (98.1%). Stocks of some blood groups fell in month with B- and A+ stock falling amber in the latter part of February and B- falling red in early March. Current forecasts indicate overall stock levels to remain above or at target of 5.5 dos (green) with O- and A+ at amber and B- at red through to the end of March. However, collection has been below the level required to meet issues since 6th February. As a lead indicator of potential stock shortages, this suggests our current position remains uncertain with the potential to alter very quickly.

2. Lead indicators of pressure on Blood Supply work force are improving with sickness absence falling and Blood Donation establishment above target. NHSBT led cancellations of appointments remain a challenge.

Overall sickness absence in Blood Supply decreased to 6.4% (-0.1%) , with decreases in both short-term and long-term sickness. NHSBT led cancellations of appointments to donate decreased by 16.4% from the previous month (January average 2,925 cancellations per week). Over half of NHSBT short notice cancellations were sickness related. Overall, Blood Donation teams are above budgeted establishment, however there are variations at team level where staffing pressures remain.

3. Size and diversity of our donor base remains below target. Donor bases returned to limited growth following the Xmas and New Year reduction in donation activity.

After almost four months of consecutive growth the whole blood donor base fell slightly in February (from 799.6K to 799k) . Ro and O- groups donor bases stayed static at 26.2k and 111.9k, albeit below target. At group level, most group donor bases remained steady through February. However, positive groups experienced slight declines. Appointment grids are operating at a lower capacity than in January with a focus on recruiting newer donors. Strike action by healthcare workers and teachers and cold weather alerts were planned for during March in order to minimise the impact on blood collection sessions. During cold weather alerts we are more likely to see higher issues of O neg and B neg as cold weather can trigger sickle cell crises, raising demand for these blood groups.

4. Challenges in improving organ donation consent rates and organ transplant rates persist; Tissue and Eye Service (TES) ability to meet demand and achieve financial breakeven remains constrained by low donation rates of tissue products.

February ended with 112 proceeding donors, 12 fewer than in January. With the eligible donor pool approximately 29% below January levels, improving consent/authorisation and organ utilisation remain crucial to improving organ availability and transplant rates. The number of transplants per donor improved in February to 2.42 from 2.27 last month and remains steady at 2.5 year to date.

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 £1,439k (9%) 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 remain constrained by low donation rates of tissue products, particularly corneas and heart valves, which limits availability of tissue to customers.

5. Unprecedented winter pressures on the NHS, NHSBT people, donors and patients, continue through Q4.

Winter is a challenging period for service delivery and organisational resilience. Traditionally poor weather conditions and winter Covid-19 and ‘Flu infections impact on our services. This winter, unprecedented pressures in the acute NHS sector, widespread industrial action and pressures 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 and workforce planning ensures service delivery is maintained in the face of known risks, such as poor weather conditions.

Performance summary against most important strategic targets

NHS Blood and Transplant

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

Measure	Actual	Trend	Target
Size of Whole Blood donor base	799k	▼	835k
O- donor base	111.9k	=	117.8k
Ro donor base	26.1k	=	30.6k
Blood donor mix: Black, Ethnic Minority	2.39%	▲	2.2%
Sourced Plasma donor base	6.2k	▲	11.5k
Net promoter score YTD	85.7	▼	86.0
On Time In Full (OTIF) incl. Ro (YTD / 22/23)	96.6%	▲	97.4%
Plasma vol. in stock (sourced), litres YTD	7,253	▼	12,736
Plasma vol. in stock (recovered), litres YTD	69,946	▼	79,602
Organ consent rate YTD (total)	61%	▼	72%
Organ consent rate YTD (Ethnic Minority)	35%	▼	43%
Ethnic Minority recipients of living & dec'd organ transplants[1]	25%	=	27%
Organ transplants – living & dec'd (moving annual total)[1]	4,473	▲	4,781
British Bone Marrow Registry (BBMR) Fit-Panel volume	102k	=	114.5k

Modernise our operations to improve safety, resilience and efficiency

Measure	Actual	Trend	Target
Blood stock stability Average days of stock	6.4	▲	5.5 – 7.0
Serious Incidents	0 4 YTD	=	0
Critical Infrastructure availability	99.96%	=	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]

Drive innovation to improve patient outcomes

Measure	Actual	Trend	Target
Genomics programme status		=	
No. of transplants per donor - deceased (moving annual total)	2.50	=	2.36
Component Development Clinical Trials – Whole blood		=	
Component Development Clinical Trials – Universal platelets & universal plasma		=	
Component Development Clinical Trials – Dried Plasma		=	

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

Measure	Actual	Trend	Target
Plasma for Medicines programme status		=	
Cell, Apheresis and Gene Therapies YTD income	£31.18m	▲	£32.11m
Tissue & Eye Services YTD income	£15.35m	▼	£16.79m
Transfusion 2024 programme status [reporting commenced Q2 2022/23]		–	
Education & Training Strategy		–	To be defined Q4 2022/23

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

Measure	Actual	Trend	Target
Weeks taken to recruit	16.51	▲	11
Staff turnover	15.97%	▼	14%
Ethnic Minority Band 8+[3]	14.20%[5]	▲	15%
Employee Relations case rate[4]	0.37%	▼	---
Engagement Score	7.5/10	=	8/10
Sickness absence rate	4.51%[5]	▼	4%
Harm Incident Rate NHSBT (Harm to staff)	8.7	▼	8.9

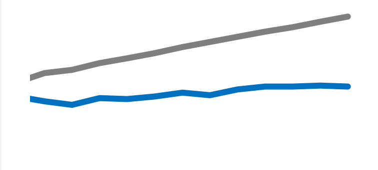
[1] reported one month in arrears [2] Progress versus annual target of 50% [3] Band 8A –D, Band 9, plus VSM, Board & Medical employees [4] For definition see slide 15 [5] Amber RAG threshold +/- 1.5 pp of target

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

NHS Blood and Transplant

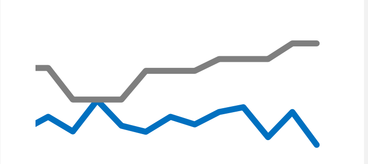
Whole Blood Donor base **799k** 835k

12-mth actual vs. target



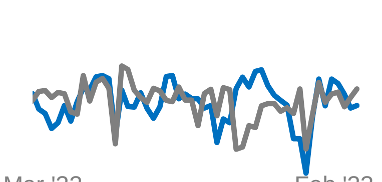
Ro Collection MAT **46.3k** 57.1k

12-mth actual vs. target



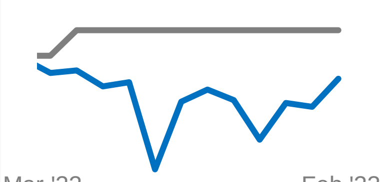
Whole blood % issue demand met by collection **<100%** -0.5% under collection

12-mth actual collection vs. demand



On Time In Full incl. Ro (YTD / 22/23) **96.6%** 97.4%

12-mth actual vs. target



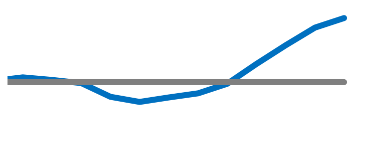
Male representation in donor base **45.7%** 45.1%

12-mth actual

= --- p.p.

BME representation in donor base **2.39%** 2.2%

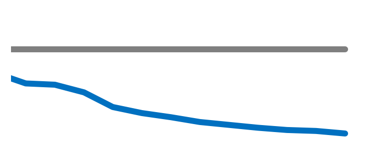
12-mth actual



▲ 0.05 p.p.

<35 yrs. representation in donor base **28.3%** 31.6%

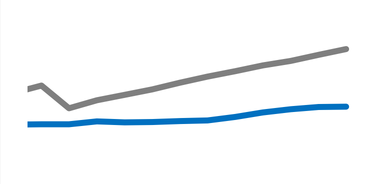
12-mth actual



▼ 0.05 p.p.

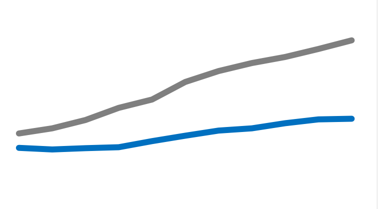
Ro Donor base **26.2k** 30.6k

12-mth actual vs. target



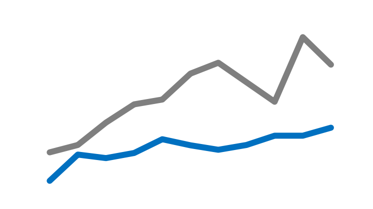
Sourced **Plasma** Donor base **6.2k** 11.5k

12-mth actual vs. target



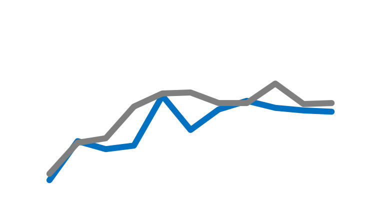
Sourced **Plasma** Litres in stock, YTD **7,253** 12,736

12-mth actual vs. target



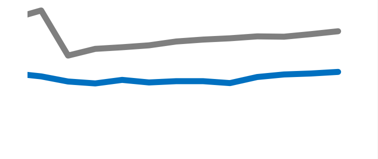
Recovered **Plasma** Litres in stock YTD **69,946** 79,602

12-mth actual vs. target



O- Donor base **111.9k** 118.2k

12-mth actual vs. target



▲ 6.8 days of stock 28/02

Insight and Commentary

Donor Bases

- After almost of four months of consecutive growth the whole blood donor base fell in February from 799.6K to 799k. Despite the overall fall, Ro and O- groups donor bases stayed static at 26.2k and 111.9k albeit below target. At group level, most group donor bases went unchanged through February however positive groups experienced slight declines
- New Donors dropped from January's figures but still remained over 10k for the fourth month in a row. However there was a notable fall in reactivated donors (12 months+ without donating) from 15.8k to 13.5k. The average for the financial year is 17.2k per month.
- Average weekly collections in February stood at 28k compared to 29k in January. There was a notable drop in collections W/C 13th Feb with collections averaging 27.4k per week. This drop coincided with the temporary relocation of Stratford Donor Centre one of the best performing centres.
- Strike action continued throughout February and impacted collections. RCN industrial action was cancelled allowing for some recovery of stocks.
- **Plasma for Medicine (sPfM):** Volumes collected were 849 litres (46% behind target) due to reduced capacity in all three centres, driven by low staffing levels and high levels of donor non-attendance. Capacity has been lost in the short term due to the whole blood collection trial at Twickenham donor centre. The reduced sPfM volume will not affect the overall volume of PFM supplied to NHSE/I as it can be supplemented by rPfM during 23/24
- **Recovered Plasma for Medicine (rPFM):** Volumes collected were 7,334 litres, (8.6% below target), due to reduced whole blood collection in February and a change in pack mix. Staffing remains a challenge in some areas of the supply chain and is being managed with tracking in place to identify and fill the gaps.
- Overall, we have processed 78 kilolitres (kl) year to date which is 11.9kl (13.1%) behind target. The overall target for rPFM and sPFM combined in FY 22/23 is 101kl. Our total stockpile from FY20/21 + FY21/22 is now 106kl.

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

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

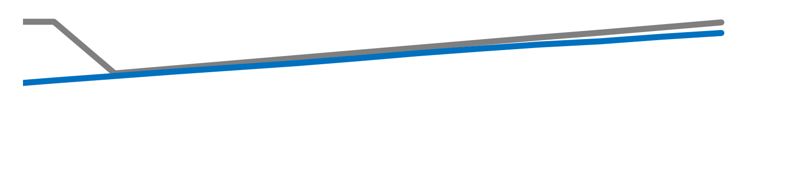
NHS Blood and Transplant

Organ Donor Register (Opt-In Register)

28.49m

28.67m

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

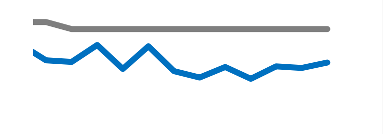


Consent/ Authorisation YTD

61%

72%

12-mth actual vs. target



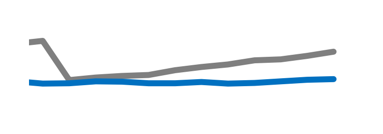
Up slightly at 62% in month

Deceased donors MAT

1,428

1,622

Moving Annual Total actual vs. target



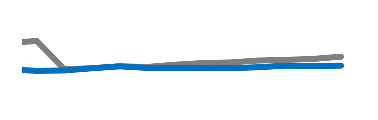
122 / 137 this month

Deceased donor transplants MAT

3,568

3,830

Moving Annual Total actual vs. target



271/ 322 this month

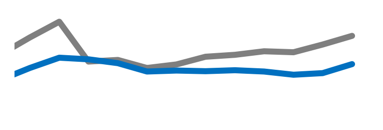
Living donor transplants

916

1,010

one month in arrears

Moving Annual Total actual vs target



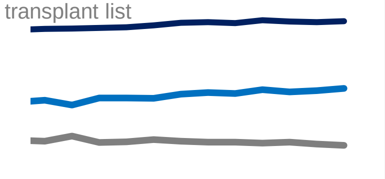
93 / 89 in January

Active transplant list

6,938

3,752 suspended

12-mth total, active vs suspended transplant list

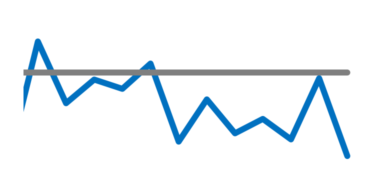


Minority Ethnic organ consent rate

35%

43%

12-mth actual vs. target

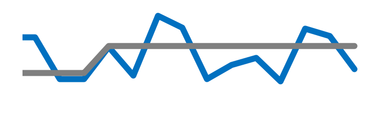


Net Promoter Score YTD

85.7%

86%

12-mth actual vs. target



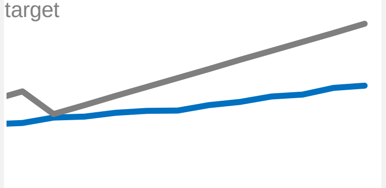
1.3 in month to 85.1

British Bone Marrow Registry Fit-Panel volume (MAT)

101,964

114,510

12-mth Moving Annual Total actual vs. target

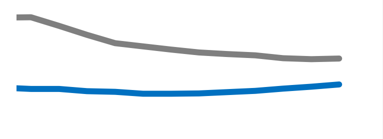


Cornea donors MAT

2,348

2,852

Moving Annual Total actual vs. target



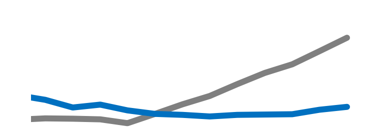
181 / 296 this month

Corneas issued for transplant MAT

3,544

4,535

Moving Annual Total actual vs. target



264 / 493 this month

Insight and Commentary

Organs

- There was a further 29% decrease in mechanically ventilated patients through the deceased organ donor pathway in February. This meant there were 20% fewer patients meeting referral criteria, 19% fewer eligible donors, 16% fewer families approached and 14% fewer consents/authorisations than in January. Consequently, we achieved 112 proceeding donors in February, 12 fewer than January (-10%).
- Whilst February was a strong month for organ utilisation overall, the donation after circulatory death (DCD) utilisation rate has decreased each month since November (2.37 transplants per DCD) to 1.98 in February.
- The steady 61-62% overall consent/authorisation rate continued into February, despite half of the regions achieving upwards of 70%. Most notably, Northern Ireland achieved rates of 100% across all parts of the organ donation pathway, with the team reporting that most families are aware of their loved ones' decision, suggesting a positive impact of social media campaigns related to the forthcoming organ donation law change
- January was a very strong month for living donor transplants, with 93 in month (one month in arrears). 'LivingPath' went live, a first step to reducing manual paper-based processes, and the accuracy and completeness of registration data.
- We are expecting an impact on organ donation from industrial action, notably Junior Doctor strikes. Contingencies are in place for the Hub and regular update meetings will be held with key members of the OTDT Clinical Team.

Net Promoter Score (NPS) – Blood & Plasma Donation

- NPS fell by 1.3 ppts in February to 85.1% and remained steady at 85.7% YTD. Donor satisfaction was below target with appointment cancellations the main reason for complaint.

Ocular

- The average weekly ocular donation rate in February was 45, against a target of 70, an increase on January (avg 41 donations/week).
- Strong demand for ocular tissue continued in February, and cornea stock levels decreased to 202 (vs target of 300) compared to an average of 205 in January.
- Problems with the clean rooms at Liverpool were resolved early in February. Ocular donations are now being processed and issued from both eye banks.
- The focus on increasing ocular donation continues with three main areas of improvement: 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.

Modernise our operations to improve safety, resilience and efficiency

NHS Blood and Transplant

Serious Incidents = 0

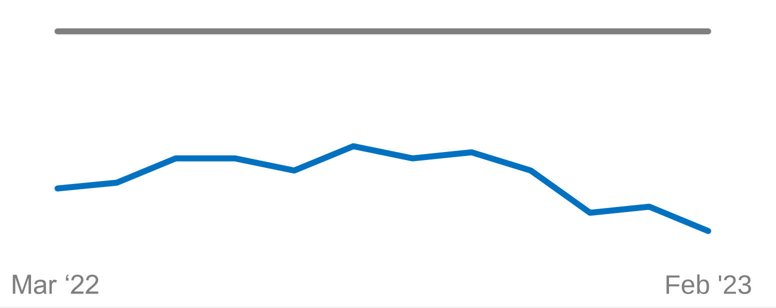
YTD = 4

0

Serious Adverse Blood Reaction & Event (SABRE) = 2

YTD: 26

≤5



External Majors = 0

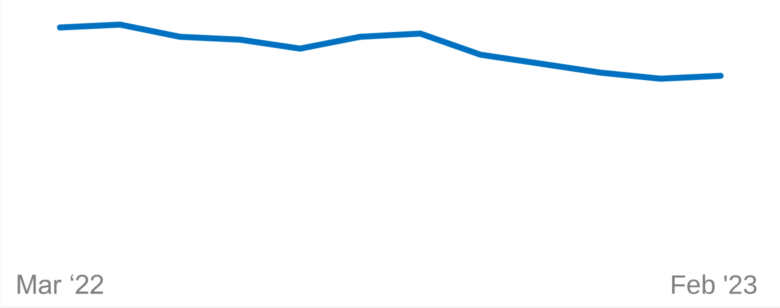
YTD = 6 CQC Musts

0

Serious Adverse Event & Reaction (SAEAR) = 4

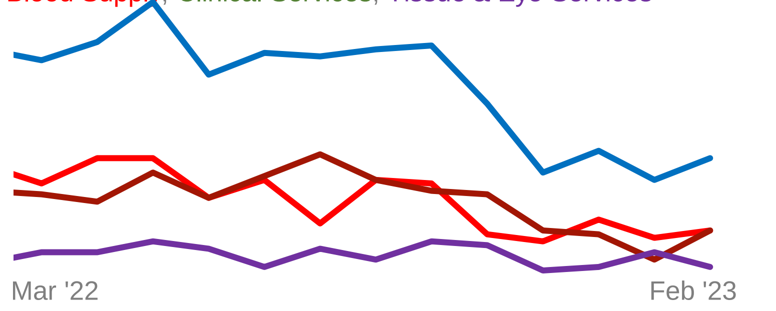
YTD: 62

No target



Major Adverse Events ▲ 35 (+6)

(monthly across Blood Supply, Clinical Services, Tissue & Eye Services)



Quality Management System (QMS) Overdue Events

Documents overdue review	▼	0.9% (-0.2pp)	<1%
Overdue majors	▲	17 (+1)	0
Overdue events (excl. documents)	▼	291 (-4)	<220

Insight and Commentary

- In February 2023 the organisation achieved one out of three of its QMS related corporate KPIs (<1% documents overdue review). The other two KPIs (zero overdue major incidents and <220 overdue events) were missed. However, this was an improvement from January where none of these KPIs were met.
- Weekly calls between Quality Management System (QMS) Champions and directorates continue to be held to discuss specific overdue activities and review actions to ensure that risks are mitigated.
- A working group has been formed to complete a scoping exercise with a view to revise the incident management process, and formulate a plan to address the activities within the QMS.
- A plan has been agreed by the Quality SMT to support the closure of the longest standing open incidents in the system. This will take place in a phased manner and the first phase is expected to be completed by the end of March.
- The new location for Stratford donor centre has been approved by the MHRA and added to the BEA (Blood Establishment Authorisation) licence. Evidence of DHSC support for the relocation has been obtained and sent to the CQC to facilitate their approval.
- The Quality and respective business areas continue to work through any regulatory findings and prepare for upcoming external inspections.

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

Modernise our operations to improve safety, resilience and efficiency

NHS Blood and Transplant

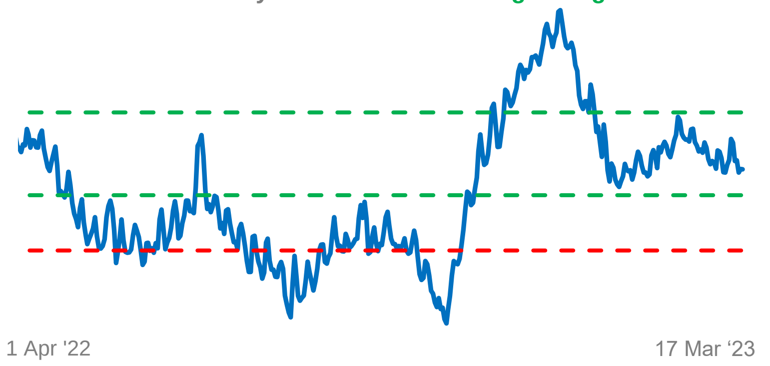
Blood stock stability[1]

Average days of stock ▲ **6.4** Feb 23

Actual days of stock **6.0** 17 Mar

5.5 – 7.0

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



Incremental savings YTD (Blood & Group)

£0.95m

£3.0m

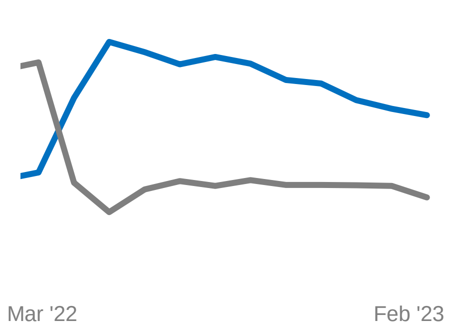
Hospital services productivity

Annualised YTD

▼ **35,271**

33,364

Actual vs target



Top quartile performance in 3 key benchmarks

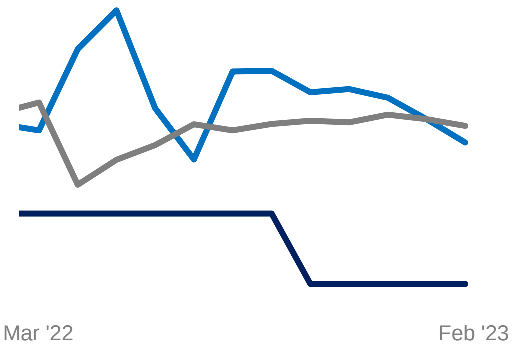
1. Manufacturing productivity

Annualised YTD

▼ **10,858**

11,020

Actual vs target vs EBA top quartile benchmark



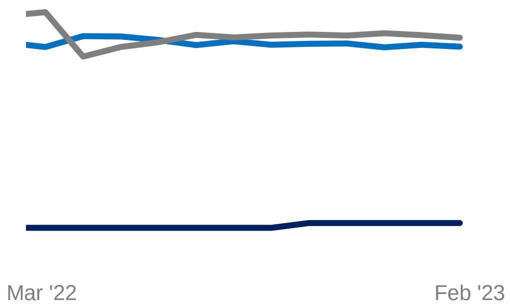
2. Testing productivity

Annualised YTD

▼ **30,691**

31,473

Actual vs target vs EBA top quartile benchmark



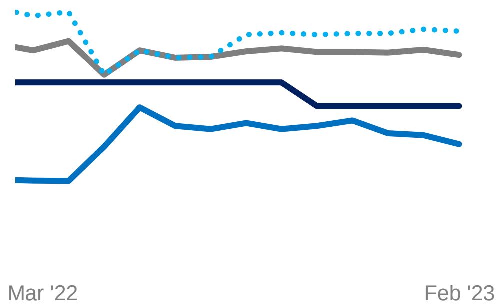
3. Collection productivity

Annualised YTD

▼ **1,193**

1,352

Actual vs target vs revised target & EBA top quartile benchmark



Insight and Commentary

- Red cell collections stood at 96.1% of business plan target (-3.3% decrease from January 2023), however marginally lower issues than forecast have helped overall blood stocks remain stable. Overall red cell stocks stood at 6.1 days (January 2023 = 6.1 days). O+ and B- stocks remain variable, with 5.2 and 4.7 days of stock respectively. (January 2023 = 5.3 and 4.0 days respectively).
- Red cell issues decreased when compared to January 2023 (-9.1%); however issues remained 1.9% below forecast demand.
- On Time, In Full performance increased to 96.6% (+0.4% compared to January 2023), with an increases in 'In Full' fulfilment (97.1%) and 'On Time' (99.5%) performance compared to the previous month.
- Across Blood Supply 6.4% of available time was lost due to sickness absence (6.5% in January 2023). The decrease is as a result of reductions in both short-term sickness (-0.3%) and long-term sickness (-0.1%).
- The number of appointments that NHSBT has cancelled at short notice has reduced from the previous month (-16.4%) with an average of 2,435 cancellations per week (compared to 2,925 weekly cancellations in January 2023). Two thirds of cancellations were driven by short term sickness and donation session over-runs.
- Recruitment to Blood Donation collection team establishment continues with 87 WTE posts currently being recruited.

[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

NHS Blood and Transplant

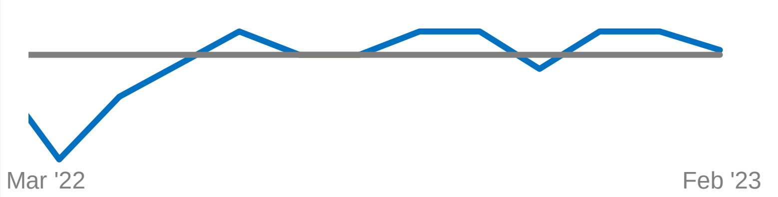
Modernise our operations to improve safety, resilience and efficiency

Overall Critical Infrastructure (CI) Availability

▼ 99.96%

99.95%

12-mth actual vs. target

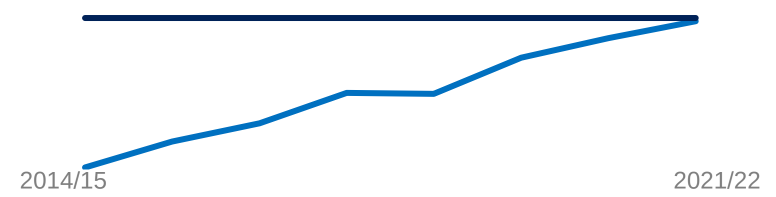


Reduction in carbon emissions vs. 2014/15

= 49%

50%[1]

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

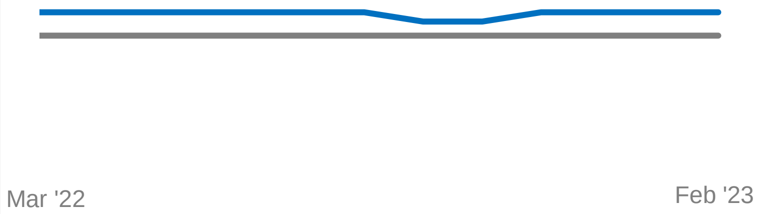


Overall Key Hospital systems Availability

= 100%

99.90%

12-mth actual vs. target

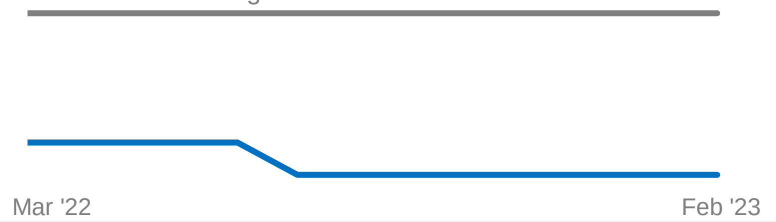


Information Commissioner's Office Incidents

= 0

<5

12-mth actual vs. target

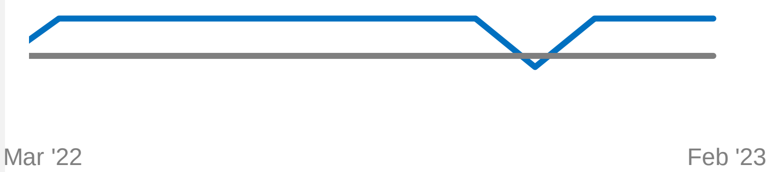


Overall Key Public Systems availability

= 100%

99.90%

12-mth actual vs. target



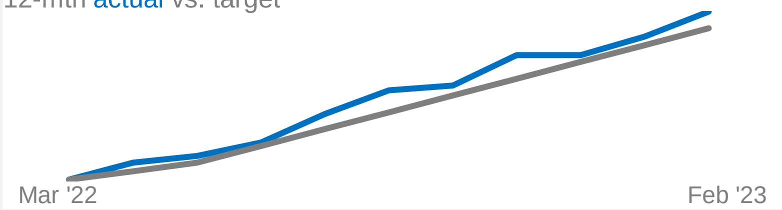
Bus. Continuity Plans Reviewed

YTD

▲ 100%

90%

12-mth actual vs. target



Insight and Commentary

- All Critical Infrastructure (CI), Key Public Systems (KPS), and Key Hospital Services met availability targets except for NTxD (NTx on BPMS).
- The long-running problem on the Contronics Prolog service has now been resolved, which should mean that the performance of Prolog in Filton matches observed performance at other sites of this service.
- The Gennaro performance issues from December and January have also been understood and addressed, which should provide a permanent fix to this problem.
- The review of 35 Business Continuity Plans was completed in February, ahead of schedule.

1. Progress versus annual target of 50%

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

Drive innovation to improve patient outcomes

NHS Blood and Transplant

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, with ca 6.5k typed by the end of February

No. recruited for Our Future Health (OFH) programme

--- ---

12-mth actual vs. target

Activity to start in 2023.

No. of organ transplants –dec'd

3,288 YTD

3,550

12-mth actual vs. target

Mar '22 Feb '23

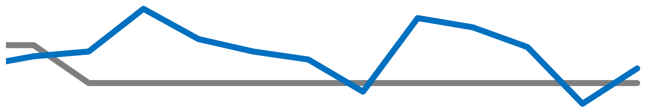
▼ to **271** vs 322 in month

No. of transplants per donor –dec'd

2.50 YTD

2.35

12-mth actual vs. target



Mar '22 Feb '23

▲ **0.17** vs last month

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

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

Insight and Commentary

Genomics Programme

- **Strategies to Improve Donor Experiences (STRIDES) Genotyping**
  - DNA sample extractions now complete with volumes approximately 72k.
  - Genotyping of STRIDES donors ongoing .
- **Our Future Health (OFH)**
  - Awaiting a new start date to be confirmed by OFH; likely to be mid 2023.
- **Blood Transfusion Genomics Consortium (BGC)**
  - All laboratory testing complete; Cambridge undertaking analysis of data.
  - Regulatory/ accreditation progress being progressed at pace due to sickle cell project
- **Nanopore collaboration**
  - IT procurement complete; commissioning by DDTS continuing
- **NHS England** has approved a business case and funding for NHSBT to scale up genotyping capability to type all (ca 17k) Sickle Cell and Thalassemia patients.
  - Operational capacity being assessed; Comms and engagement in development.
- **IT Infrastructure for Genomics**
  - 2 week discovery phase re digital capability commenced.
- **HaemMatch**
  - Contract for NHSBT Health Informatics Collaboration complete
  - Engagement with hospital sites to transfer data ongoing.

Component development clinical trials

- Whole blood use in trauma clinical trial started in December. Study site openings to be staggered; first site opened December 2022.
- 2nd phase universal plasma project being planned in conjunction with universal platelets. A business case was approved by ET in February to invest £1.6m over the next two years.
- Dried plasma £5m project ongoing; internal approval being sought for the key equipment supplier; Invitation to tender for the site build issued in February

Organ transplant and utilisation

- In the short term, continued high rates of organ utilisation are somewhat offsetting the impact of low consent/authorisation rates across the UK.
- 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.
- The regional 'Be a Lifesaver' campaign launched at the end of February and we are closely monitoring the regional impact.

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

NHS Blood and Transplant

Plasma for medicines programme =

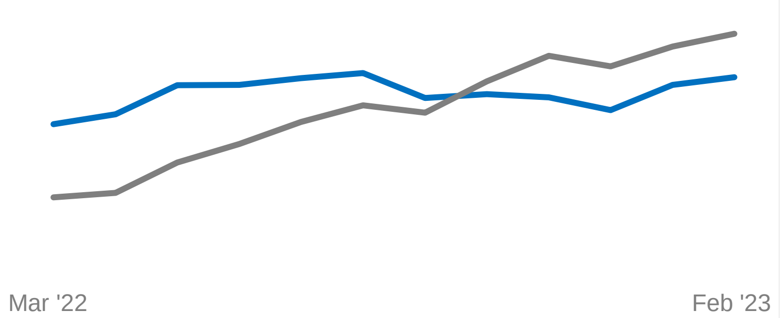
Transfusion 2024 programme status =

Cell Apheresis and Gene Therapies income excl. DHSC Grant in Aid funding; 12-mth CAGR **4.2%**

£31.18m YTD

£32.11m

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

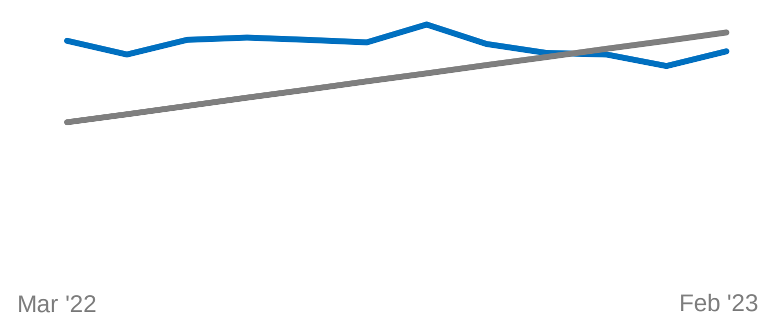


Cell & Molecular Therapies: stem cell transplants supported

1,655 YTD

1,683

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

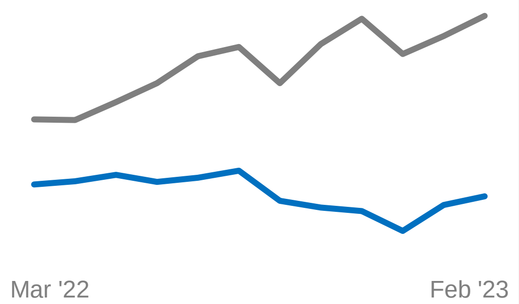


Clinical Biotechnology Centre income
12-mth CAGR **-5.4%**

£2.12m YTD

£4.00m

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

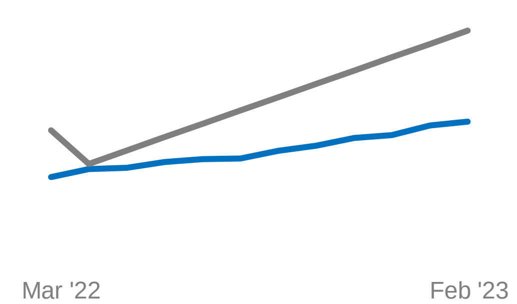


British Bone Marrow Registry Fit-Panel volume (Moving Ann. Total)

101,964

114,510

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

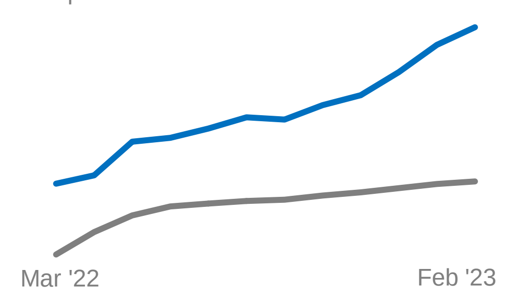


Therapeutic Apheresis Services no. of procedures

10,087 YTD

9,223

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



Insight and Commentary

Plasma for Medicines

- The NHSBT proportion of the overall DHSC programme continues to be challenging due to capacity constraints in plasma donor centres and testing activities, however, source plasma had its strongest collection weeks of the year in January.
- Procurement delays at NHSE/I have pushed back fractionator procurement . NHSBT have been asked to extend the stockpiling programme by 8-10 weeks to April 24. Testing risk (HAV/B-19) is now being managed by the Testing & Development Programme (TDP).
- 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 strategy is also in progress to ensure that increased capacity is filled.
- In Recovered plasma, planning is taking place for the next required ramp up of capacity in 23/24 which has been delayed to Sept 23.

Transfusion 2024

- Blueprint for managing blood stocks inventory with hospitals: initial discovery work finalised; summary paper well received at the National Commissioning Group meeting. Workshop in March to progress.
- RCI Remote Interpretation: pilots to start in April across 10 hospital sites.
- E-requesting/e-reporting: Fetal RHD typing pilot expected to go-live in March following further user acceptance testing.
- Scientific/technical education/training: stakeholder engagement process complete in month and priority areas identified.
- Options appraisal on benefits of a clinical trials network. Workshop completed in February to capture current strengths and weaknesses.

Cellular Apheresis and Gene Therapies (CAGT)

- CAGT total income £0.93m worse than plan YTD. Extra Therapeutic Apheresis (TAS) activity offset by Clinical Biotechnology Centre (CBC) and Stem Cell Donation & Transplantation (SCDT) income below plan
- CBC income £1.89m behind plan YTD; year-end forecast £1.03m below budget £4.39m; driven by project delays and slippage in the phasing/timing of customer work
- CBC project moving towards completion in March. A closure report including lessons learned and benefits realisation will be produced. CBC Filton opened 10 March 2023.
- Stem cell transplants supported in Cellular & Molecular Therapies (CMT) was equal to plan in month and remains just below target year to date.
- British Bone Marrow Registry (BBMR) Fit panel volumes 11% behind target YTD; impacted by prioritisation of existing blood donors' vs new donors'; working on a new donor recruitment proposition using buccal swabs.

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

NHS Blood and Transplant

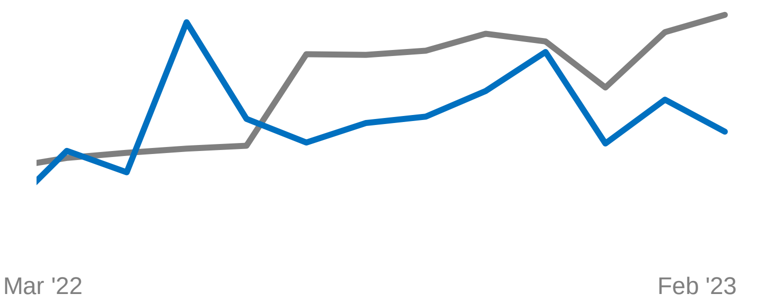
Tissue & Eye Services (TES) income

£15.4m YTD

12-mth Av. Mthly Growth Rate **1.3%**

£16.8m

12-mth **actual** vs. **target**, £



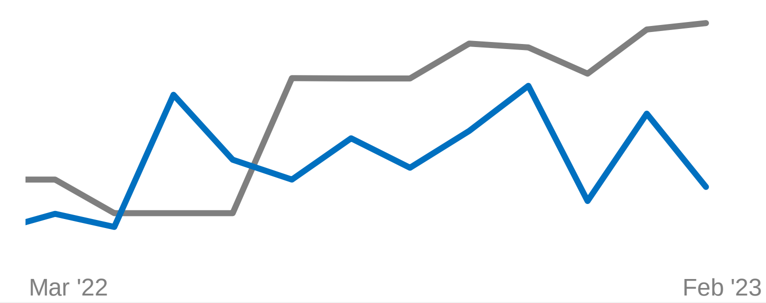
Ocular income

£4.91m YTD

12-mth Av. Mthly Growth Rate **0.6%**

£6.1m

12-mth **actual** vs. **target**, £



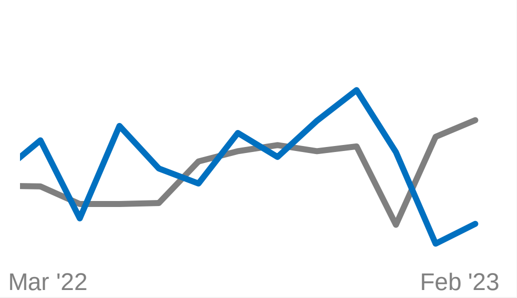
Cardiovascular Income

£968k YTD

12-mth Av. Mthly Growth Rate **1.2%**

£957k

12-mth **actual** vs. **target**, £



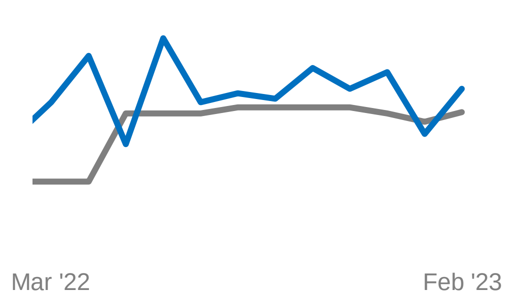
Serum Eye-drops Income

£4.89m YTD

12-mth Av. Mthly Growth Rate **1.6%**

£4.7m

12-mth **actual** vs. **target**, £



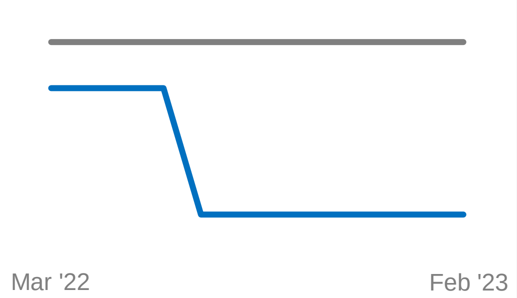
TES customer satisfaction

65%

% "top box" score

80%

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



Education and training metric

To be defined Q4 2022/23

Insight and Commentary

Overall income

- February's overall income position was 25.1% behind target (-£438k), which is mainly attributed to low sales of ocular products (-£334k) with low stocks preventing planned income growth. Tissues fell behind target (-£80k) which unusually was due to lower-than-expected cardiovascular sales (-£41k behind target). Serum Eyedrops were ahead of target (£11k). The total value of backorders has risen slightly in month and is currently valued at £86k.

Ocular income

- Ocular income was 47% behind target in February due to rephasing of income targets from Q2 and insufficient stock preventing planned income growth. Overall demand for ocular products remains high, and plans are currently being deployed to increase donation rates. Cornea stock levels are currently maintaining an average of 200, with weekly orders capped at circa 75 per week. Problems with the clean rooms at Liverpool were resolved in early February and ocular donations are again being processed at both eye banks.

Heart Valves

- Income for Heart Valves was behind February's target by £39k. This was a result of low donations around 12 weeks ago leaving a smaller amount of heart valves available for issue. The rates of heart donation for heart valves in February have averaged 7 a week (vs 8 a week target, and up from 5 a week avg. in December).

Serum Eyedrops

- Serum Eyedrops were behind target in month by 9 issues, with the team achieving 331 batches issued to patients against a target of 340.

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 the availability of corneas.

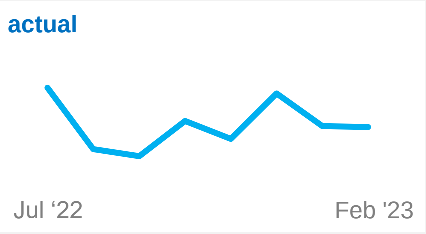
RAG: Above target, Within 2% of Target, More than 2% Below Target

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

NHS Blood and Transplant

Short-term Sickness Absence

= 2.4%



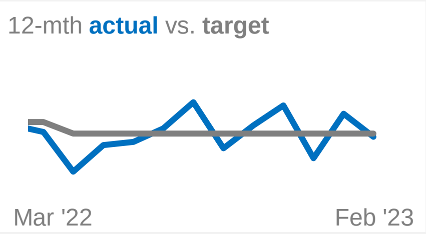
Long-term Sickness Absence

▼ 2.1%

Harm Accident Incident Rate (staff)

▼ 8.7

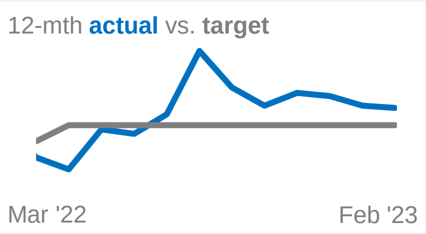
8.9



Near Miss Incident Reporting Rate

▼ 13.5

11.9



Lost Time Incidents

Incidents resulting in staff absence >3 days

March 2022 – Feb 2023 Moving Annual Total

▲ 42

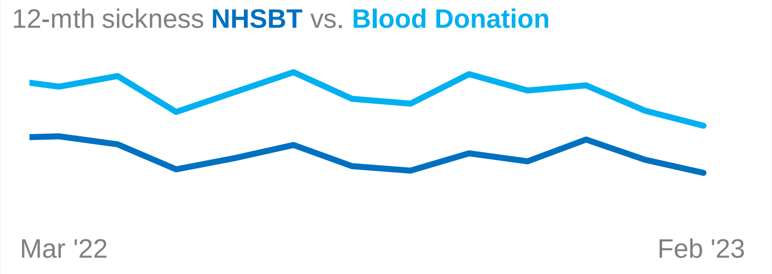
28

NHSBT Sickness Absence

Total	▼ 4.51%[5]	4%
COVID-19	▼ 0.29%	---

Blood Donation Sickness Absence

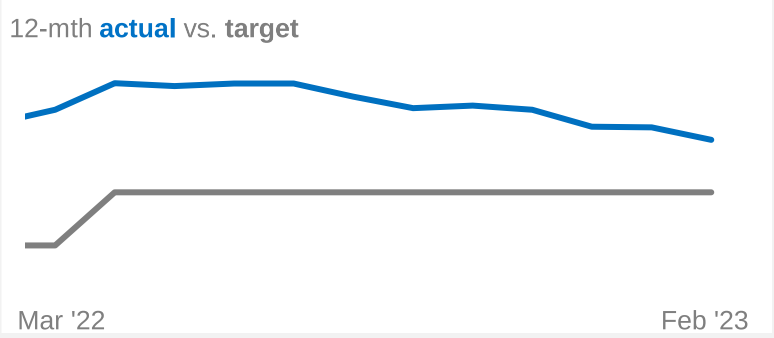
Total	▼ 6.32%	5%
COVID-19	▲ 0.47%	---



Staff Turnover

▼ 15.97%

14%



Insight and Commentary

Sickness absence

- Overall sickness absence has decreased to 4.51% from 5.01% last month Despite expected seasonal increases in respiratory related sickness, coughs, colds and 'flu, overall Covid-19 absence has fallen to just 0.29%
- Blood Donation sickness absence fell to 6.3% in February from 6.9% last month. Manufacturing and Logistics sickness absence has also reduced, to 4.9% from 5.7% in January.

Staff Turnover

- Overall staff turnover peaked of 18.1% between April and July 2022. It has since decreased steadily, reaching 15.97% in February, albeit remaining well above target of 14%.
- Staff turnover in Blood Donation fell once again in February to 23.6% from 24.1% in January.

Harm Incidents

- The harm accident incident rate has fluctuated above and below target since June 2022 and now stands above target at a rate of 10.1
- Near miss incident reporting rate has decreased steadily in recent months but remains above target.

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

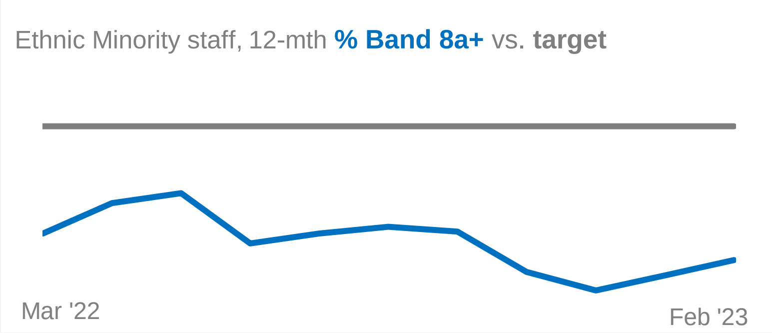
[5] Amber RAG threshold +/- 1.5 pp of target

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

NHS Blood and Transplant

Recruitment & Retention

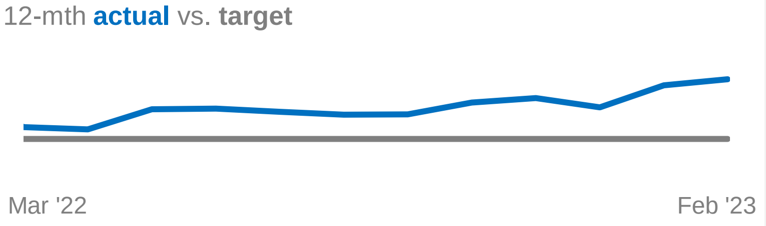
Ethnic Minority staff % Band 8A+ ▲ 14.20%[5] 15%



Ethnic Minority staff net change NHSBT ▼ +25 Band 8a+ ▲ +1

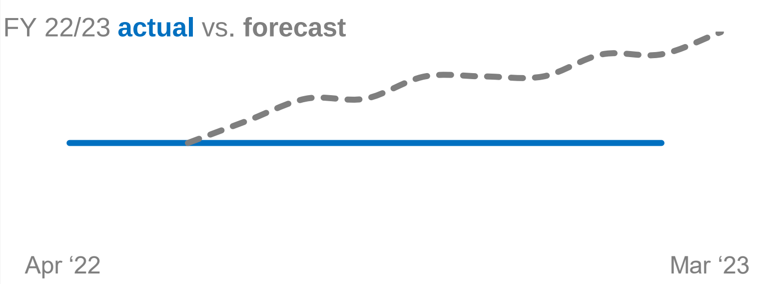
Ethnic Minority staff % new starters NHSBT ▲ 35% Band 8a+ ▲ 20%

Time to recruit (weeks) ▲ 16.5 11

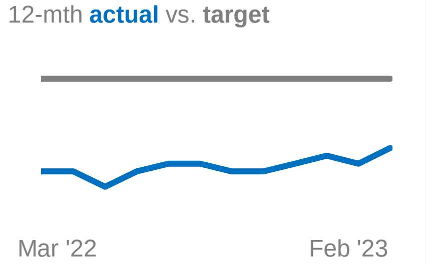


Engagement & Development

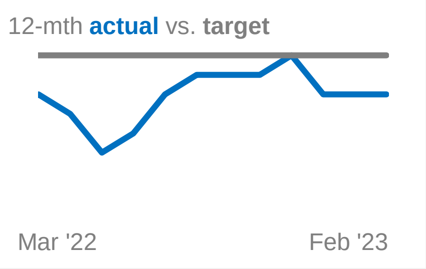
Engagement Score = 7.5/10 8/10



PDPR completion rate ▲ 86% 95%



Mandatory training compliance rate = 93% 95%



No. commencing leadership programmes (ME) ▼ 1 (0) 609 (79) YTD

Insight and Commentary

Recruitment & Retention

- Time to recruit reached its highest level this financial year at 16.51 weeks from 15.94 weeks in January.
- Time to offer was 12.04 weeks from 11.37 weeks in January.
- February half term holidays impacted recruitment timescales with a high proportion of vacancies taking significantly longer to progress through shortlisting and interview stages.

Leadership

- Leadership development via open house sessions has continued through February.
- To date 150 managers have attended these sessions with 56 colleagues attending during February.

Mandatory Training

- Whilst NHSBT remains 2% below target, Blood Supply have reported 96% compliance in February, joining CEO and Quality in exceeding the 95% target.

Engagement

- The next staff survey will be launched in April 2023.

[5] Amber RAG threshold +/- 1.5 pp of target

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

NHS Blood and Transplant

Employee Relations (ER) Cases at month end

Total ▼ 0.37%

Ethnic Minority ▲ 0.67%

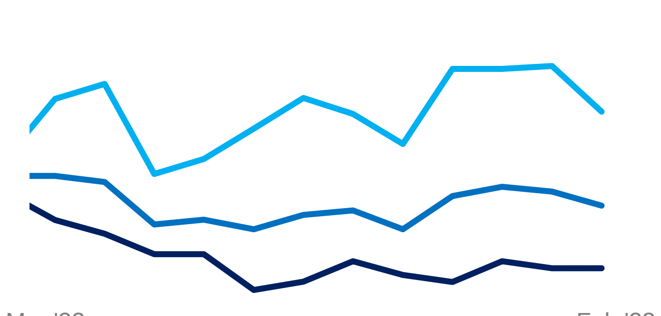
% of staff with a live case; **total**, **Minority Ethnic**

Live ER Cases at month end

Male ▼ 0.71%

Female = 0.15%

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



Total no. ER cases at month end

▼ 22 (-3) / 5,899 headcount

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

▼ 36% / 80%

% of total by protected characteristic

Female	▼	24%
Ethnic Minority	=	32%
Disability	▼	5%
LGBT+	▲	5%
Male	▼	59%

New ER cases (last month)

= 4 (6)

YTD 65

Closed ER cases

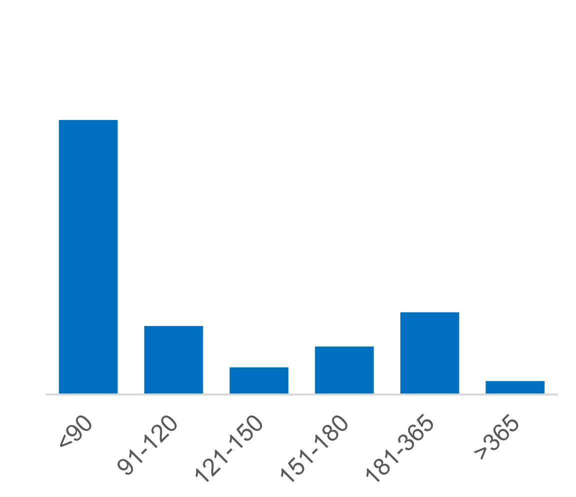
▲ 7 (7)

YTD 75

Avg. days ER cases open

▼ 95 / 90

53% of ER cases closed within 90 days vs. 55% Q4 21/22.



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

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

▲ 16 (+2)

No. of live concerns 51

Insight and Commentary

Employee Relations (ER) Cases

- Live cases month end February 2023 stand at 22, which is 3 less than last month.
- 8 of the 22 cases remain within the 90-day SLA
- 8 cases exceed 90 days: 4 Grievance, 1 Dignity at Work, 1 Capability and 2 Disciplinary cases.
- 7 of 22 live cases involve ethnic minority colleagues.
- 4 new cases opened in February.
- 7 cases closed in February with an average case timeline of 96 days. 4 closed within the 90-day SLA.

Freedom to Speak Up Concerns (FTSU)

- Service development is progressing with a FTSU service relaunch planned for April/May 2023 to announce:
  - Appointment of two new guardians
  - A new Champion network
  - FTSU App
- Top reasons for concerns are:
  - Increasing challenges around change management processes, (restructures and service changes).
  - Workplace behaviours

Risk Summary continued

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	● 15, ○ 16
BAF-02a	Service Disruption (Internal) / Director of Quality	26 Jan 2022 / 7 Mar 2023	Disruption / Minimal	○ 16, ● 20
BAF-02b	Service Disruption (External) / Director of Quality	26 Jan 2022 / 7 Mar 2023	Disruption / Minimal	○ 12, ● 16
BAF-03	Change Programme scale & pace / Interim CEO/Strategy & Transformation Director	26 Jan 2022 / -	Programme / Open	○ 15, ● 16
BAF-04	Donor Numbers & Diversity / Director of Donor Experience	26 Jan 2022 / 12 Jan 2023	Operational / Open	● 12, ○ 16
BAF-05a	Financial Shortfall (sudden policy changes) /Chief Finance Officer	26 Jan 2022 / 6 Feb 2023	Finance / Open	● 12
BAF-05b	Stakeholder and partner support for strategic objectives / Chief Finance Officer	26 Jan 2022 / 6 Feb 2023	Finance / Open	○ 12, ● 15

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-06	Inability to access data sets / Chief Medical Officer	26 Jan 2022 / -	Innovation / Open	1	2	3	4	5	6	7	● 8	9	10	11	○ 12	13	14	15	16	17	18	19	20	21	22	23	24	25
BAF-07	Staff Capacity and Capability / Chief People Officer	26 Jan 2022 / 13 Oct 2022	People / Open	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	● 16	17	18	19	20	21	22	23	24	25
BAF-08	Managers Skills and Capability / Chief People Officer	13 Oct 2022 / 02 Feb 2023	People / Open	1	2	3	4	5	6	7	8	○ 9	10	11	12	13	14	15	● 16	17	18	19	20	21	22	23	24	25
BAF-09	Regulatory Compliance / Director of Quality	26 Jan 2022 / 7 Mar 2023	Legal, Regulatory & Compliance / Cautious	1	2	3	4	5	6	7	8	9	10	11	● 12	13	14	15	16	17	18	19	20	21	22	23	24	25

The most significant and dynamic risk over the last month has been risk 7 (staff capacity and capability) which is affected by industrial action, otherwise there has been little change. Significant review has been undertaken on disruption, finance and donor numbers and diversity risks. The outcome of these reviews will be discussed in the Board workshop in late March, and will be incorporated into future risk reports. Discussions in the Clinical Governance Committee and recorded in the Clinical Governance Report, have led to a reduction in the risk score for BAF-01. This is not reflected in this report as a structural change in the Pentana risk system is underway and the score for BAF-01 in this report is driven by an operational risk. BAF risks will not have their scoring driven by operational risks when the next report is issued.