

ODT Performance Report

Monthly – April 2016



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1. EXECUTIVE SUMMARY FOR MAY ODT SMT MEETING AND OUTSTANDING ACTIONS

HEADLINES

- We now know the number of living donors in 2015/16. There were 96 living donors in March 2016, bringing the total for 2015/16 to 1070. This is 20 fewer than the 1090 living donations achieved last year and 153 short of the target.
 - Quarterly activity: Q1 256, Q2 276, Q3 281, Q4 257.
 - There were 1034 living donor kidney transplants and 36 living donor liver transplants (3%) in 2015/16.
 - 37% of living donor kidney transplants were performed pre-emptively in 2015/16 (no change from last year), against a target of 38%.
 - 55% of transplants identified in the National Living Donor Kidney Sharing Schemes occurred within the 8 week window. This is an improvement on the 36% achieved last year, but a long way from the 100% target.
- Following three green months for the consent rate (average 65% for Q4), the overall consent rate dropped back to 60.5% in April (63% for DBD and 59% for DCD).
- There has been no improvement in reducing the number of families overriding their loved one's ODR decision, with 9 in April.
- The BAME consent rate continues to be a challenge at 31% for April, against a target of 50%.
- There were 109 deceased donors in April (58 DBD and 51 DCD (53:47)), against a monthly target of 120 (amber).
- April was a good month for organ utilisation, with 107 utilised donors (98% of actual donors). The average for last year was 94%.
 - The organ utilisation rate was a 0.9% increase on the 2012/13 baseline in April.
- There were 284 deceased donor transplants in April (red), against a target of 325.
- Annual turnover remains a challenge, with % annual turnover currently at 15%.

KEY AREAS FOR DISCUSSION

- Living donation
- ODR overrides
- BAME consent
- DCD proportion

OUTSTANDING ACTIONS

Action	Owner	Due date	Status/progress	Rank
21/4/16 - Organ utilisation - JF to meet with CC/AS and others to come up with a strategy, which may include peer review.	JF	Aim for BTS Congress joint day	New	
21/4/16 - Staff retention and BAME recruitment - AC/MG to bring report to June SMT.	AC/MG	June SMT	In progress. Initiatives such as annualised hours are being taken forward.	
21/4/16 - ODR overrides - Continue to work with HTA. VG to liaise with Ian Bateman.	AC/VG		In progress.	
21/4/16 - BAME consent - Explore finding BAME families to be filmed talking about what their experience was like and why they consented. For social media and a tool for SNODs to show families.	New BAME lead (via AC)		New	
21/4/16 - Living donation - KQ to follow-up with LB to have assurance about the programme of work and how the rest of the UK can learn from Northern Ireland. Increased buy-in is needed from NHS England.	KQ/LB		New	
21/4/16 - General - SJ asked all to spread the message to staff that we will back staff for innovating even if unsuccessful. (Raised while discussing trying the nudge theory.)	All	May SMT	New	

2. ODT STRATEGIC OBJECTIVES

Objective ⁺	Final Target		Performance			2016/17 Performance					
	Target	Target date	2013/14	2014/15	2015/16	Target	Apr	May	Jun	Jul	Year to Date
1	80%	31-Mar-2020	59.4%	57.7%	61.8%	70.0%	60.5%				60.5%
2 [#]	26 pmp	31-Mar-2020	20.8 pmp	20.1 pmp	21.2 pmp	22 pmp					21.4
3	Increase of 5%	31-Mar-2020	3.1%	-0.1%	0.1%	1.0%	0.9%				0.9%
4 [#]	74 pmp	31-Mar-2020	55.4 pmp	52.4 pmp	54.8 pmp	60.0 pmp					55.3
5 [#]	26 pmp	31-Mar-2020		17.1 pmp	16.6 pmp	19.5 pmp					

+

1 Consent/authorisation for organ donation – aim for consent/authorisation rate above 80%.

2 Deceased organ donation – aim for 26 deceased donors per million population.

3 Organ utilisation – aim to transplant 5% more of the organs offered from consented, actual donors.

4 Patients transplanted – aim for a deceased donor transplant rate of 74 pmp.

5 Living Donation – aim for 26 living donors per million population

based on rolling 12 month period.

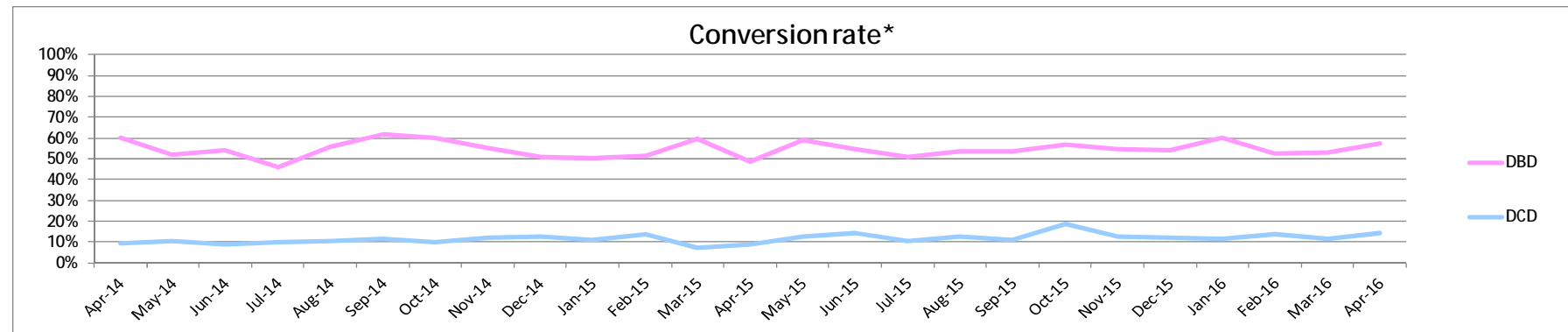
3. SUMMARY OF DECEASED DONOR PATHWAY

(In-month)

	Potential donors	Patients referred	Eligible donors	Families approached	Families consenting	Actual donors	Utilised donors	Conversion rate*	Consented patients who did not proceed to donation	Actual donors where no organs were transplanted	Total consented patients from whom no organs were transplanted	Total consented patients from whom no organs were transplanted %
DBD	127	122	101	90	57	58	58	57%	-1^	0	-1^	-2%
DCD	498	424	348	153	90	51	49	14%	39	2	41	46%
Total	625	546	449	243	147	109	107	24%	38	2	40	27%

(YTD)

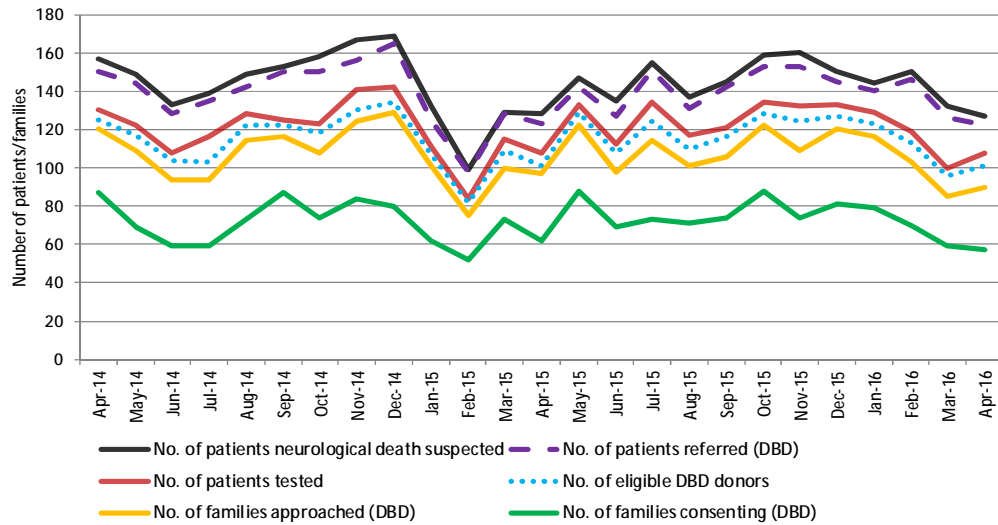
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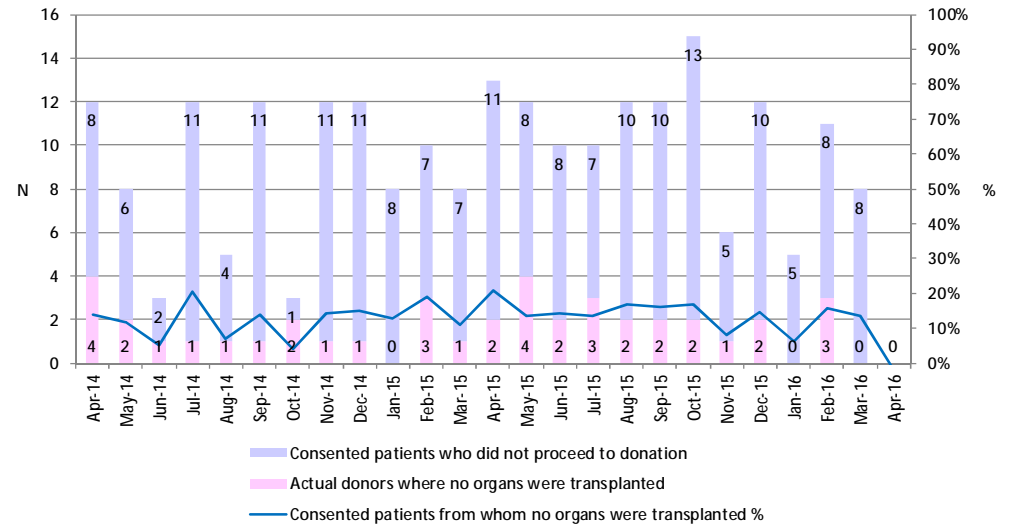
* The conversion rate represents the proportion of eligible donors from whom at least one organ was transplanted (utilised donors).

^ The number of families consenting and the number of actual donors come from two different data sources - the Potential Donor Audit (PDA) and UK Transplant Registry (UKTR), respectively. The PDA uses death date and the UKTR uses donation date, therefore there are occasions where patients fall within different months in the two data sources. This can cause occasions such as this where there are more donors than consents.

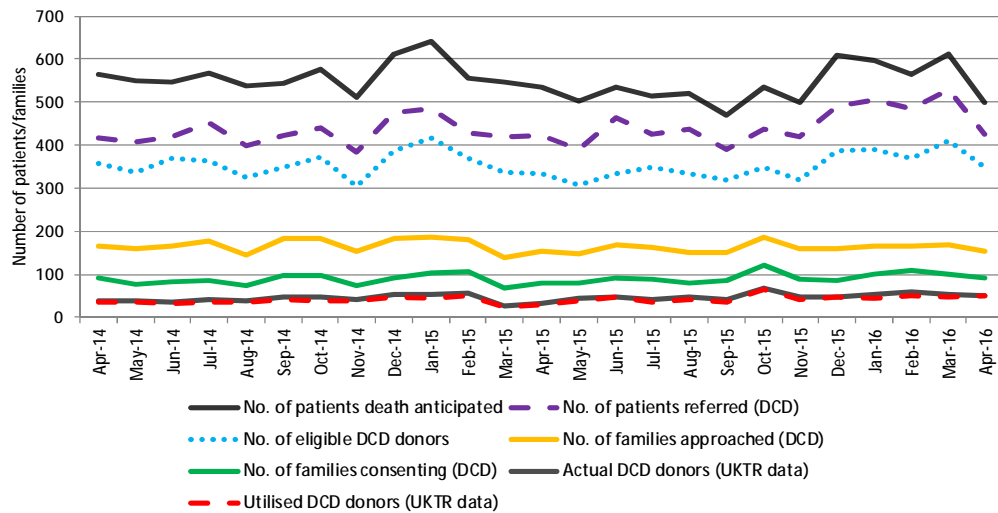
Summary of potential for DBD donation



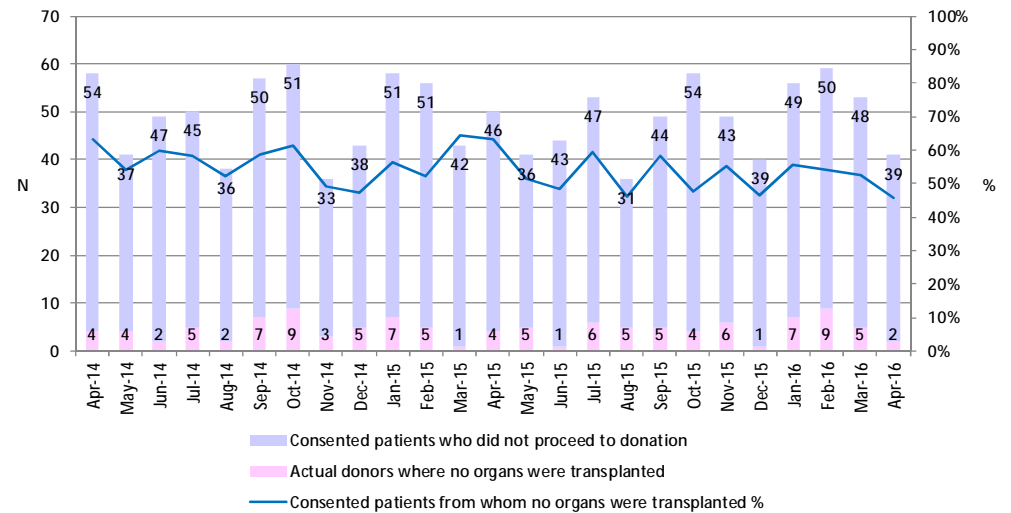
Non-proceeding consented DBD



Summary of potential DCD donation



Non-proceeding consented DCD



4. ODT BALANCED SCORECARD (ET MEASURES ONLY)


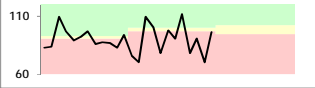
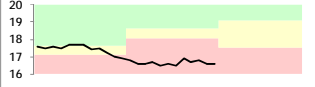
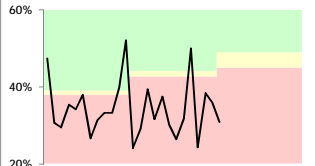

Balanced Scorecard: ODT - as at the end of April 2016

Dimension / CSFs	Measure description	2015/16 Actual	2016/17 YTD	Target	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16	Apr-16	Commentary	
Customer Deliver more donors	Number of eligible donors 	5,595	449	Target	434	436	441	471	444	436	476	442	514	514	481	506	449	The number of eligible donors fluctuate. These numbers are provided for information.	
	Number of new opt-in registrants on the ODR (million) * 	2.000	0.095	Target	0.090	0.090	0.100	0.110	0.120	0.200	0.200	0.200	0.250	0.240	0.200	0.200	0.095	These figures must continue to be interpreted with caution. ODR software fixes have been deployed and we are processing the backlog of registrations made via partners since November 2015 - before the service can fully resume. This is taking longer than expected, but we are confident that all risks are controlled. Direct web registrations remain unaffected (36k in April).	
	Proportion of referrals where a trained professional (SN-OD) led the approach 	79.0%	83.0%	Target	79.0%	79.0%	79.0%	79.0%	79.0%	79.0%	79.0%	79.0%	79.0%	79.0%	79.0%	79.0%	79.0%	83.0%	The proportion of SNODs leading the approach is higher than last month but has moved from green to amber due to a higher target in 2016/17. 9/12 ODSTs achieved 100% DBD SNOD involvement during April (average 96% across the 12 teams). The DCD SNOD involvement rate was 77% in April. Getting a SNOD into the room is being addressed in regional teams through reflective practice sessions using Action Learning Sets (ALS) and Plan, Do, Study, Act (PDSA) cycles.
	Number of consented eligible donors 	2,125	147	Target	177	177	177	177	177	177	177	177	177	177	177	177	177	147	The average number of eligible donors, approaches and consents per month in 2015/16 were 466, 269 and 166, respectively. In April there were 449 eligible donors and this smaller pool has followed through to less families being approached (243) and less consents (147).
	Overall consent rate * 	64.0%	70.0%	Target	64.0%	64.0%	64.0%	64.0%	64.0%	64.0%	64.0%	64.0%	64.0%	64.0%	64.0%	64.0%	64.0%	70.0%	Following three green months for the consent rate (average 65% for Q4), the overall consent rate dropped back to 60.5% in April (63% for DBD and 59% for DCD). A number of initiatives continue in progress across the teams which include targeted training and development, ALS and PDSA cycles. As part of the "LEAD 2 success" development programme all team managers are working on change and development projects to support donation pathway increases. This work will be presented to a panel in October.
	DBD consent rate 	72.5%	72.0%	Target	72.5%	72.5%	72.5%	72.5%	72.5%	72.5%	72.5%	72.5%	72.5%	72.5%	72.5%	72.5%	72.5%	72.0%	
	DCD consent rate 	58.5%	68.0%	Target	58.5%	58.5%	58.5%	58.5%	58.5%	58.5%	58.5%	58.5%	58.5%	58.5%	58.5%	58.5%	58.5%	68.0%	

Note: * denotes metric is also a strategic target.
Chart begins from Apr-14

Dimension / CSFs	Measure description	2015/16 Actual	2016/17 YTD	Target	Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16	Apr-16	Commentary	
Customer Deliver more donors	Number of families overruling patient consent 	50		Target	4	4	4	4	4	4	4	4	4	4	4	4		<p>There has been no improvement in reducing the number of families overriding their loved one's ODR decision, with 9 in April. The consent rate for patients on the ODR with and without a SNOD involved were 88% and 71% respectively in April. During 2015/16 these rates were 90% and 72%, respectively.</p> <p>Actions across ODSTs include</p> <ul style="list-style-type: none"> i) SNODs discussing overrides with TMs at the time of occurrence ii) roll out of ODR override DVD for facilitated discussion with SNODs iii) Designated requester role - phased roll out to ODS teams underway. Apr 16 - 2018 iv) Engagement with HTA re consent, retraction and information <p>During April, when a patient was not on the ODR and a SNOD was involved in the approach to the family, 62% of families gave consent. However, when a SNOD was not involved, only 27% of families gave consent (8/30). During 2015/16 these rates were 66% and 21% (79/383), respectively.</p> <p>There were 109 deceased donors in April against a new monthly target of 120 (amber). The proportion of DCD assumed for 2016/17 is 41%, but in April the proportion was 47% (58 DBD and 51 DCD).</p> <p>The number of deceased donors per million population continues to increase, but has turned amber due to a higher target for 2016/17.</p>	
	Consent rate when patient on ODR * 	95.0%		Target	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%	95.0%		
	Consent rate when patient not on ODR * 	51.0%		Target	51.0%	51.0%	51.0%	51.0%	51.0%	51.0%	51.0%	51.0%	51.0%	51.0%	51.0%	51.0%	51.0%		
	Number of deceased donors (DBD/DCD) * 	1,365	120	Target	114	114	114	114	114	114	114	114	114	114	114	114	114		120
	Deceased donors pmp * 	21.0	22.0	Target	21.0	21.0	21.0	21.0	21.0	21.0	21.0	21.0	21.0	21.0	21.0	21.0	21.0		22.0
				Actual	12	6	9	8	7	16	7	5	10	11	8	8			9
			Actual	84.0%	92.0%	87.5%	89.3%	90.4%	82.2%	92.0%	91.7%	88.4%	88.0%	88.9%	89.6%		86.2%		
			Actual	44.3%	50.8%	50.3%	47.3%	46.9%	50.3%	58.8%	51.7%	47.2%	52.1%	58.4%	51.7%		51.1%		
			Actual	84	124	109	108	108	104	143	115	118	126	121	104		109		
			Actual	19.4	19.8	20.0	20.3	20.3	20.0	20.4	20.4	20.4	20.7	21.0	21.2		21.4		

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Deliver more donors	Number of deceased donors where at least one organ was transplanted	108		Target	108	108	108	108	108	108	108	108	108	108	108	108		April was a good month for organ utilisation, with 107 utilised donors (98% of actual donors). The average for last year was 94%.
		1,283	107	Actual	78	115	106	99	101	97	137	108	115	119	109	99	107	
	Number of living donors *	1,223		Target	102	102	102	102	102	102	102	102	102	102	102	102	102	
	1,070		Actual	76	70	110	100	78	98	91	112	78	91	70	96			
Living donors pmp	19.0		Target	19.0	19.0	19.0	19.0	19.0	19.0	19.0	19.0	19.0	19.0	19.0	19.0	19.0		
	16.6		Actual	16.8	16.6	16.6	16.7	16.5	16.6	16.5	16.9	16.7	16.8	16.6	16.6			
Ensure donor's reflect society	Consent Rate of BAME Families	45.0%	50.0%	Target	45.0%	45.0%	45.0%	45.0%	45.0%	45.0%	45.0%	45.0%	45.0%	45.0%	45.0%	45.0%	50.0%	The BAME consent rate continues to be a challenge at 31% for April, against a new target of 50%. ODST cultural awareness training is almost complete, with a few final sessions planned. In future, this will be incorporated into cohort training The 'Caring for Multi-Ethnic Communities: Religion, Culture and Organ Donation' guide has now been finalised and is going to print mid-May.
		32.8%	31.0%	Actual	24.1%	29.2%	39.4%	31.6%	37.5%	30.3%	26.5%	31.8%	50.0%	24.4%	38.5%	36.0%	31.0%	
Enhance Donor Family Experience	Family Survey Results	90%	90%	Target	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	This measure is reported quarterly in arrears. The next update is due in July.
		94%		Actual			98%			92%			91%					




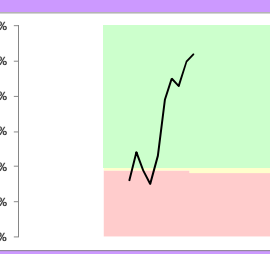
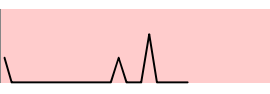
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					Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual			
Customer Deliver products patients need	Organ utilisation rate 	1.0%	1.0%	Target	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	The organ utilisation rate was a 0.9% increase on the 2012/13 baseline in April.	
		0.1%	0.9%	Actual	2.8%	0.3%	0.0%	-2.0%	2.6%	-1.7%	3.0%	0.4%	2.6%	-1.4%	-4.3%	-0.8%	0.9%		
	Number of deceased donor transplants * 	3,694	325	Target	308	308	308	308	308	308	308	308	308	308	308	308	308	325	Although it was an amber month for deceased donors, given the higher than expected proportion of DCD donors in April (47%), it was a red month for transplants (284 against a new target of 325).
		3,530	284	Actual	231	330	281	269	280	259	376	312	317	336	285	254	284		
Deceased donor transplants pmp * 	57.0	60.0	Target	57.0	57.0	57.0	57.0	57.0	57.0	57.0	57.0	57.0	57.0	57.0	57.0	57.0	60.0	At the end of April there were 9895 patients on the transplant list (6446 actively waiting). There are 42 fewer suspended patients than at the end of March, but 9 more active patients.	
	54.9	55.3	Actual	50.6	51.7	52.3	53.1	53.0	52.0	53.1	53.4	53.2	54.2	54.9	54.9	55.3			
Growth in total (active and suspended) transplant waiting list (^ at end of 			Target																
	-390	-33	Growth	+99	-37	-50	+79	-78	+13	-177	-38	-17	-130	-79	+25	-33			

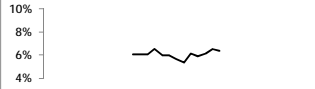
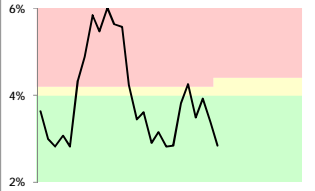
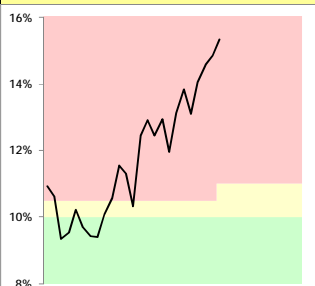
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					Target													
Resources	Deliver better VFM for the NHS 			Target	18.16	18.16	18.16	18.16	18.16	18.16	18.16	18.16	18.16	18.16	18.16	18.16	17.60	Cost per organ exceeds the target due to a lower number of transplants within the 12 month rolling period.
	Actual	18.16	18.16	18.16	20.33	20.28	20.15	19.15	18.95	18.75	18.46	18.29	18.39	19.19				
	Reduce net tax-payer burden Quarterly average number of organs retrieved per abdominal team (Qtrly in arrears) 			Target														The quarterly average number of abdominal and cardiothoracic organs retrieved per team has reduced from Q3 to Q4. With the changes to the cardiothoracic rota introduced on 4th April we are expecting the cardiothoracic quarterly average to increase in 2016/17. The impact of the new rota is being closely monitored.
	Actual						133			134			161			149		
Reduce net tax-payer burden Quarterly average number of organs retrieved per cardiothoracic team (Qtrly in arrears) 			Target														The NORS teams will attend donors as requested by the SNODs and the duty office. The decision to attend a donor does not sit with the retrieval team, so the rates should reflect referrals and the suitability of the donors, rather than anything related to NORS. The drop in retrieved organs is not due to the stand down targets or the rates of organ damage.	
Actual						25			26			27			22			
Invest for the long-term Transformation forecast spend vs plan 	100.0%	100.0%	Target	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	All projects are forecast to fully utilise 2016/17 funding.
Actual				100.0%	100.0%	96.0%	92.8%	92.7%	65.7%	65.7%	65.7%	62.2%	96.4%	89.6%	74.6%	100.0%		

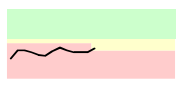


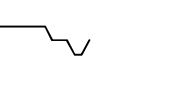
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					Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Actual		
Operations	Operate a single 24/7 business	0	0	Target	0	0	0	0	0	0	0	0	0	0	0	0	0	There was one occasion where ODT did not offer an organ in accordance with the allocation policy in April. An incident investigation is underway and corrective actions will be put in place.	
		7	1	Actual	0	0	0	2	0	1	1	1	0	0	2	0	1		
	Manage Daily Improvement			Target															This measure is reported quarterly. An update will be provided in July.
				Actual			6			3			1			8			
	Become a digital enterprise	Digital take up % (as a % of all registrations)	25%	25%	Target	25%	25%	25%	25%	25%	25%	25%	25%	25%	25%	25%	25%	25%	These data must continue to be interpreted with caution due to the suspension of the ODR data feeds.
	97%	95%	Actual	29%	57%	20%	33%	36%	33%	34%	51%	97%	96%	96%	97%	95%			
Develop collaborative solutions	% of new registrations from partnerships (exc DVLA)	20%	20%	Target	20%	20%	20%	20%	20%	20%	20%	20%	20%	20%	20%	20%	20%	The DVLA/Boots/GP data transfer issue is still impacting overall partnership contribution; we are unable to determine the realistic partnerships impact. Please therefore interpret this information with caution. Golden Page registrations are down on Mar 16, but EHIC and Register to Vote both performed well in Apr 16. Partnership engagement programme - approaches and support: <ul style="list-style-type: none"> • National Citizen Service Trust • Marks and Spencer - Supporting the approach to M&S for a joint blood and organ donation partnership. • Apple Medical ID - Liaising with Apple in USA and UK to incorporate prompting through the Med ID app. • Barclays Bank and Barclaycard - blood and organ recruitment stands at the Poole and Northampton offices (5,000) staff. • Thurrock Council • GP prompted choice trial - Held interviews in conjunction with the Institute for Health Research (Uni of Bedford) and Medici Medical Centre - Luton to select PhD student to run the 3 year trial. Successful candidate appointed and trial to commence in Sep 16 with year one 'proof of concept'. 	
	52%	52%	Actual				16%	24%	19%	15%	23%	39%	45%	43%	50%	52%			
Operate safely	Number of Serious Incidents Requiring Investigation (SIRIs)	0	0	Target	0	0	0	0	0	0	0	0	0	0	0	0	0	No SIRIs reported in month. 52 incidents reported to us during April 2016. 7 SAEARs reported to HTA in April 2016, (3 SAEs and 4 SARs). Complaints- 6 complaints reported in month.	
	3	0	Actual	0	0	0	1	0	0	0	2	0	0	0	0	0			

Note: * denotes metric is also a strategic target.
Chart begins from Apr-14

Dimension / CSFs	Measure description	2015/16 Actual	2016/17 YTD													Commentary		
				Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16		Apr-16	
Lead employees driving improvement	% vacant Clinical Lead - Organ Donation (CL-OD) and Donation Committee Chair	6%	6%	Target														There are currently 19 vacant ODC Chair posts with some resignations and some appointments in month. RCLODS, CLODS, Team Managers and SNODs are working with Trusts to identify potential candidates and encourage recruitment into these roles. There are 6 vacant CLOD posts. Prospective CLODs have been invited to Collaboratives and 1 region is interviewing in June.
				Actual	6%	6%	6%	7%	6%	6%	6%	5%	6%	6%	6%	7%	6%	
Lead motivated employees	Sickness Absence	4.0%	4.0%	Target	4.0%	4.0%	4.0%	4.0%	4.0%	4.0%	4.0%	4.0%	4.0%	4.0%	4.0%	4.0%	Overall absence continues to reduce in-month and remains within target for the Directorate set at <4%. However, there remain 5 organ donation teams with absence in excess of 4% overall. We are working with colleagues to manage absence and expect the long term absence cases to reduce again next month. The organ donation teams in excess of target have absence ranging from 4.7% to 8.3% which has reduced from 12% highest level of absence in March. The Education and Governance Team and Commissioning also have absence in excess of target range this month at 6% but this is reduced from 7.8%. A consistent approach to returning staff to the on-call rota and making reasonable adjustments to enable return to work has been agreed and will be implemented.	
		3.5%	2.8%	Actual	4.2%	3.4%	3.6%	2.9%	3.2%	2.8%	2.8%	3.8%	4.3%	3.5%	3.9%	3.4%		2.8%
	% annual turnover	10.0%	10.0%	Target	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	10.0%	% annual turnover continues to rise and is currently at 15%; well above the <10% target for the Directorate. We continue to undertake bespoke exit interviews with SNODs who agree to provide feedback. Regional and team managers are exploring options to avoid resignation if possible individually. Commencing medium to long term initiatives via organ donation teams including: i) workshops with teams to explore motivations for staying in role/ barriers to staying and address locally ii) analysis of exit data and comparing lowest and highest turnover teams to understand reasons for leaving and address iii) exploration of bank working for SNODs to support rotas and retain valuable skills iv) reviewing requirement for nursing / SNOD experience for each nursing post in ODT and broaden criteria where possible.	
	13.1%	15.4%	Actual	10.3%	12.5%	12.9%	12.4%	12.9%	12.0%	13.1%	13.8%	13.1%	14.1%	14.6%	14.8%	15.4%		

Note: * denotes metric is also a strategic target.
 Chart begins from Apr-14

Dimension / CSFs	Measure description	2015/16 Actual	2016/17 YTD		Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16	Apr-16	Commentary	
People Create Flexible Employee Base	Proportion of SN-OD establishment competent on the rota 	85.0%	85.0%	Target	85.0%	85.0%	85.0%	85.0%	85.0%	85.0%	85.0%	85.0%	85.0%	85.0%	85.0%	85.0%	85.0%	26 supervised SNODs on the rota (20 from Cohort 3, 1 return from sickness absence, 4 returns from maternity leave and 1 other). Cohort 3 - SN-ODs in post - module 1 completed. Cohort 2 - SNODs all signed off and on the rota independently.	
		75.2%	77.6%	Actual	71.9%	76.6%	76.2%	75.1%	73.7%	73.3%	75.6%	78.0%	76.3%	75.5%	75.5%	75.0%	77.6%		
	Vacancies not filled after 3 months			Target														Data on vacancies not filled after three months are not readily available. However, 25 ODT appointments (100% successful recruitment) were made in April with an average time taken to recruit of 17 weeks.	
				Actual															
Recruit and Retain Expert, Caring Employees	H&S Incidents (LTA) 	0	0	Target														These data are reported a month in arrears. During 2015/16 there were no level 1 or 2 incidents reported. There were no reported level 3 incidents in March, but 8 overall for the whole of 2015/16 (red against a target of <5).	
		0		Actual	0	0	0	0	0	0	0	0	0	0	0	0			
	Number of BAME Managers 			Target	≥1 (2017)														We are taking positive actions for the current SNOD recruitment including: i) targeted online recruitment to 400,000 RCN nurses ii) offering open days and visits to local teams iii) feedback to BAME applicants not shortlisted or appointed after attending assessment centre iv) using the BAME network to promote roles v) offering shadowing with a SNOD during recruitment. We will monitor the effectiveness of these interventions and evaluate in June. For future campaigns we will include profiles of a diverse workforce in our recruitment campaigns on the new careers website.
			Actual	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
	Number of BAME staff 			Target															
			Actual	19	19	19	19	19	19	19	19	18	18	18	17	17	18		

Note: * denotes metric is also a strategic target.
Chart begins from Apr-14

5. OD KEY PERFORMANCE MEASURES: MONTHLY AND YTD SUMMARIES

OD Regional Performance Dashboard IN-MONTH

OD Regional Dashboard (in-month)		Month Reported: April 2016						Data Production Date: 09/05/2016				
		Deceased Donor Pathway									Competent SNODs on the rota	
		Donors	Approx* donor target	Difference*	Utilised donors	BSD testing	Referral	Approach	SNOD Present	Consent / Authorisation		Consent / Authorisation for eyes (Quarterly in arrears)
Targets	Combined									70.0%		85.0%
	DBD									72.0%		
	DCD									68.0%		
Eastern	Combined	7	12	-5	7					55.6%	44%	58.1%
	DBD	4			4	75.0%	100.0%	100.0%	100.0%	66.7%		
	DCD	3			3	95.2%	100.0%	50.0%	73.3%	53.3%		
London	Combined	12	13	-1	12					59.3%	38%	69.3%
	DBD	7			7	100.0%	100.0%	88.9%	100.0%	68.8%		
	DCD	5			5		88.7%	32.4%	81.8%	45.5%		
Midlands	Combined	13	13	0	13					50.0%	35%	74.2%
	DBD	6			6	56.3%	81.3%	100.0%	85.7%	57.1%		
	DCD	7			7		82.4%	45.1%	73.9%	47.8%		
North West	Combined	10	14	-4	10					54.8%	38%	83.3%
	DBD	4			4	93.3%	100.0%	78.6%	100.0%	45.5%		
	DCD	6			6		80.6%	39.2%	85.0%	60.0%		
Northern	Combined	9	8	2	9					72.2%	25%	81.7%
	DBD	6			6	84.6%	100.0%	81.8%	100.0%	66.7%		
	DCD	3			3		89.5%	34.6%	77.8%	77.8%		
N Ireland	Combined	2	5	-3	2					50.0%	33%	86.7%
	DBD	1			1	80.0%	100.0%	100.0%	100.0%	50.0%		
	DCD	1			1		73.7%	44.4%	75.0%	50.0%		
Scotland	Combined	13	8	5	13					70.6%	32%	94.2%
	DBD	8			8	84.6%	92.3%	90.9%	90.0%	80.0%		
	DCD	5			5		62.5%	46.7%	71.4%	57.1%		
South Central	Combined	9	9	0	8					57.9%	62%	71.7%
	DBD	6			6	88.9%	100.0%	100.0%	100.0%	62.5%		
	DCD	3			2		81.6%	40.7%	63.6%	54.5%		
South East	Combined	12	13	-1	12					59.3%	45%	98.8%
	DBD	7			7	88.2%	94.1%	86.7%	84.6%	53.8%		
	DCD	5			5		90.4%	42.4%	100.0%	64.3%		
South Wales	Combined	4	5	-1	4					88.9%	54%	83.3%
	DBD	3			3	100.0%	100.0%	100.0%	100.0%	100.0%		
	DCD	1			1		84.0%	28.6%	83.3%	83.3%		
South West	Combined	9	9	0	9					71.4%	45%	64.1%
	DBD	3			3	50.0%	100.0%	100.0%	100.0%	50.0%		
	DCD	6			6		100.0%	60.0%	66.7%	75.0%		
Yorkshire	Combined	9	10	-1	8					60.0%	33%	75.0%
	DBD	3			3	100.0%	100.0%	80.0%	100.0%	75.0%		
	DCD	6			5		81.8%	67.7%	71.4%	57.1%		
National	Combined	109	120	-11	107					60.5%	40%	77.6%
	DBD	58	71	-13	58	85.0%	96.1%	89.1%	95.6%	63.3%		
	DCD	51	49	2	49		85.1%	44.0%	77.1%	58.8%		

* Rounded to the nearest integer

Consent / Authorisation for eyes is the last reported quarterly figure.

OD Regional Performance Dashboard

YTD

OD Regional Dashboard (YTD) 2016/17		Month Reported: April 2016				Data Production Date: 09/05/2016								
		Deceased Donor Pathway										Competent SNODs on the rota		
		Deceased donors pmp	Donors	Approx* donor target	Difference*	Utilised donors	BSD testing	Referral	Approach	SNOD Present	Consent / Authorisation		Consent / Authorisation for eyes (Quarterly in arrears)	
Targets	Combined	22.0										70.0%		85.0%
	DBD											72.0%		
	DCD											68.0%		
Eastern	Combined		7	12	-5	7						55.6%	35%	58.1%
	DBD		4			4	75.0%	100.0%	100.0%	100.0%		66.7%		
	DCD		3			3		95.2%	50.0%	73.3%		53.3%		
London	Combined		12	13	-1	12						59.3%	45%	69.3%
	DBD		7			7	100.0%	100.0%	88.9%	100.0%		68.8%		
	DCD		5			5		88.7%	32.4%	81.8%		45.5%		
Midlands	Combined		13	13	0	13						50.0%	32%	74.2%
	DBD		6			6	56.3%	81.3%	100.0%	85.7%		57.1%		
	DCD		7			7		82.4%	45.1%	73.9%		47.8%		
North West	Combined		10	14	-4	10						54.8%	44%	83.3%
	DBD		4			4	93.3%	100.0%	78.6%	100.0%		45.5%		
	DCD		6			6		80.6%	39.2%	85.0%		60.0%		
Northern	Combined		9	8	2	9						72.2%	20%	81.7%
	DBD		6			6	84.6%	100.0%	81.8%	100.0%		66.7%		
	DCD		3			3		89.5%	34.6%	77.8%		77.8%		
N Ireland	Combined		2	5	-3	2						50.0%	29%	86.7%
	DBD		1			1	80.0%	100.0%	100.0%	100.0%		50.0%		
	DCD		1			1		73.7%	44.4%	75.0%		50.0%		
Scotland	Combined		13	8	5	13						70.6%	32%	94.2%
	DBD		8			8	84.6%	92.3%	90.9%	90.0%		80.0%		
	DCD		5			5		62.5%	46.7%	71.4%		57.1%		
South Central	Combined		9	9	0	8						57.9%	64%	71.7%
	DBD		6			6	88.9%	100.0%	100.0%	100.0%		62.5%		
	DCD		3			2		81.6%	40.7%	63.6%		54.5%		
South East	Combined		12	13	-1	12						59.3%	45%	98.8%
	DBD		7			7	88.2%	94.1%	86.7%	84.6%		53.8%		
	DCD		5			5		90.4%	42.4%	100.0%		64.3%		
South Wales	Combined		4	5	-1	4						88.9%	44%	83.3%
	DBD		3			3	100.0%	100.0%	100.0%	100.0%		100.0%		
	DCD		1			1		84.0%	28.6%	83.3%		83.3%		
South West	Combined		9	9	0	9						71.4%	39%	64.1%
	DBD		3			3	50.0%	100.0%	100.0%	100.0%		50.0%		
	DCD		6			6		100.0%	60.0%	66.7%		75.0%		
Yorkshire	Combined		9	10	-1	8						60.0%	33%	75.0%
	DBD		3			3	100.0%	100.0%	80.0%	100.0%		75.0%		
	DCD		6			5		81.8%	67.7%	71.4%		57.1%		
National	Combined	21.4	109	120	-11	107						60.5%	38%	77.6%
	DBD	12.2	58	71	-13	58	85.0%	96.1%	89.1%	95.6%		63.3%		
	DCD	9.2	51	49	2	49		85.1%	44.0%	77.1%		58.8%		

* Rounded to the nearest integer

Consent / Authorisation for eyes is the last reported quarterly figure.