

NHSBT Executive Team & Board Performance & Risk Report

October 2024

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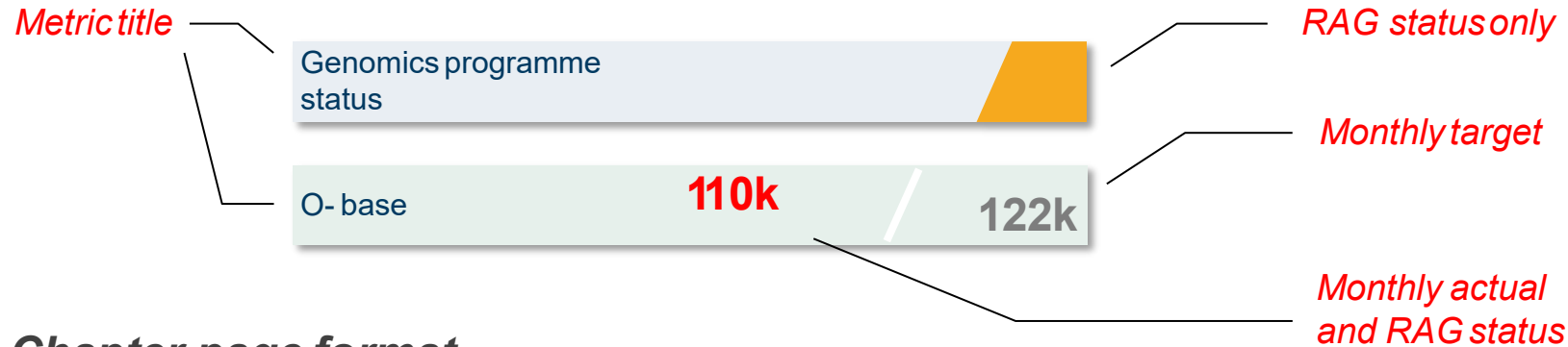


Blood and Transplant

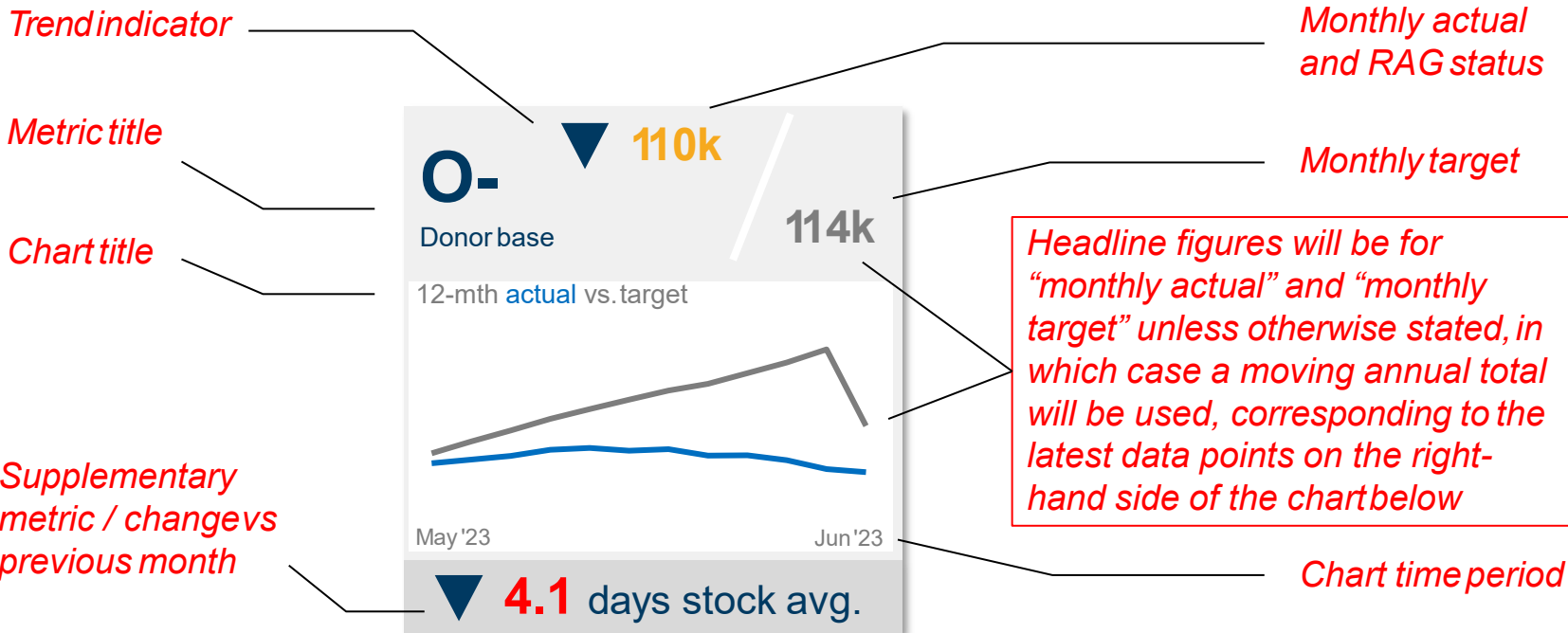


How to read this report

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
- RAG criteria have been adjusted and applied from July 2023 reporting onwards
- Unless stated otherwise, RAG status is **green** for at or above target, **amber** for within 5% below target, or **red** for >5% from target
- Wherever possible RAG status will be based on absolute numbers rather than percentage values
- Some metrics are expressed as a **Moving Annual Total (MAT)**. This provides a rolling 12-month total for performance data.
- Some metrics are reported **one month in arrears**. This is to ensure accuracy and completeness where data takes longer to collate e.g. living donor organ transplant numbers.
- Metrics measuring our progress in tackling Health Inequalities are marked with the icon

Performance Insights

1. Overall red cell stock levels remained steady and at target levels in October. O neg stocks have returned to target levels, but B neg stocks have fallen. An 'amber' stock alert remains in place until January, subject to regular review. Executive oversight is being given to a stock recovery action plan, while we navigate winter pressures.

Overall red cell stocks at the end of October 2024 stand at 7.8 days of stock (DOS). O neg stocks improved, returning to target levels at 7.1 DOS, from 4.8 DOS at the end of September. Conversely B neg stocks fell from 6.0 DOS at the end of September to 3.6 DOS at the end of October, mainly driven by increased substitutions (for unmet B positive Ro type demand). Short notice NHSBT-led donor cancellations remain above target, with 5.7% of booked appointments cancelled with <48 hours' notice in October (vs 4.5% target).

Back to Green Plan: Stock recovery is being managed through bi-weekly incident management meetings and a strategic oversight group. These groups are guiding the development of a long-term recovery and sustainability plan, including navigating winter pressures. In response to the Amber Alert, NHSBT launched urgent mass media campaigns to stabilize and rebuild stock and have instructed hospitals to implement enhanced blood management procedures and improve capacity management. We are working in partnership with DHSC and NHSE to regularly review status.

2. There was continued growth in the Blood Product Donor Base throughout October with the total blood donor base above target levels. While the O negative base continues to grow, it remains c1% below target and larger targets may be needed next year to ensure sufficient resiliency. The plasma base is now c18% below plan.

The whole blood donor base remained the biggest contributor to overall donor growth, up from 792.1K last month to 794.5K in October. The Black Heritage donor base experienced its fourth consecutive month of growth, rising from 19.8K to above 20k, although this remains below target as a % of the overall donor base. While the O neg donor base also continues to recover and now sits c1% below target, the target may need to further increase next year to deliver additional resiliency in this 'universal' type. The growth of the plasma base has further slowed and now sits c18% below target levels (1,270 fewer donors than planned).

Back to Green Plan: there is continued focus on growth of the whole blood base (including O neg and Ro) through utilisation of additional appointment capacity and campaign activity. The Brixton donor centre opening in mid-December will also create c1,100 additional appointments per week, in an area with high potential for Black heritage donor recruitment. The return of plasma capacity from whole blood collection in Twickenham will create additional opportunities to grow the plasma base, while increased donation frequency is also being leveraged to ensure increased collections.

3. The number of deceased organ donors and transplants were behind target in October. Several actions are underway to drive donation.

In October, the number of deceased organ donors and transplants were both behind target. We remain behind target YTD for deceased donor transplants (with 2,016 patients transplanted vs. 2,170 target), the number of deceased donors YTD is also behind target (actual 798 vs. 892 target). The number of transplants per donor was amber for the first time this year (although ahead of target YTD).

Back to Green Plan: The decline in Deceased Organ Donation rates is driven by several factors. Efforts are underway to improve consent rates, particularly by increasing registrations on the Organ Donor Register (ODR). Additionally, we are analysing changes in NHS practices that have reduced the donor pool. NHSBT is also supporting the optimization of neurological death testing (NDT) in hospitals, in line with the new code of practice.

4. Overall, Clinical Services (CS) Operations directorates (CAGT and Pathology) ended the period to the end of October 2024 £0.7m better than their income and expenditure budget.

Pathology is £1.7m ahead of plan, the main drivers being Histocompatibility and Immunogenetics (H&I) income above plan and underspends from vacant posts. In CAGT, adverse income variances £2.2m (SCI, CBC, ATU and TAS) have been offset in part by £1.2m pay/non-pay underspends and is £1.0m adverse overall year-to-date (YTD). The forecast for CS Operations is £0.5m adverse at year-end, Pathology £1.6m favourable and CAGT £2.2m adverse. Overall, CS is £1.8m ahead of budget in the year-to-date and is forecast to be £0.9m favourable at year-end.

5. Productivity remains an organisational performance focus, with strong operational performance in some areas and the introduction of new capabilities in Donor Experience.

Our blood Manufacturing and Testing productivity continues to perform above target levels YTD and sit within EBA top quartile levels. The Marketing Automation Tool project has delivered new capabilities in our Donor Experience Team, halving the time it takes to communicate tailored messages to donors and delivering over 3,500 O negative donor bookings in response to the recent 'amber' stock alert. Blood donation productivity remains c.7% below target. This is largely a result of our response to resiliency challenges, including unplanned closures of donor centres (e.g. Southampton, Shepherds Bush), higher than planned sickness absence/staff turnover in some areas and the sustained increase in O neg demand resulting from the Synnovis cyber-attack. Transformation programmes that will deliver improvements to collection productivity in the medium-term are beginning to mobilise, including Donor and Session Platform (DASP) and Touchless Supply Chain.

Performance summary against most important strategic targets

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

Size of Blood Product donor base	814k	▲	/	803k
Size of Ro blood donor base	26.6k	▲	/	27.5k
Size of O-blood donor base	112k	▲	/	113k
Black Heritage representation in whole blood donor base	2.52%	▲	/	3.1%
Short notice cancellation of appointments	5.7%	▼	/	4.5%

Size of regular Plasma donor base (MAT) ¹	5,841	▼	/	7,111
Plasma collected (sourced & recovered), litres (YTD)	168k	▼	/	116k
No. of Organ transplants living & deceased ² (MAT)	4,561	▼	/	4,673
Organ consent rate (YTD)	60%	▼	/	60%
Corneas Issued for Transplant (YTD)	2,363	▲	/	2,255

Modernise our operations to improve safety, resilience and efficiency

Blood stock stability Average days of stock	7.9	▼	/	5.5 – 8.0
On Time In Full (OTIF) including Ro (YTD)	96.6%	=	/	96.3%
Critical Infrastructure availability	100%	▲	/	99.95%
Patient Safety Incident Investigation (PSII) ³	2	▲	/	---
Overdue internal majors	16	▼	/	0

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

% Minority Ethnic Employees at Band 8A-8C	15.3%	▼	/	---
Employee Turnover	11.6%	▼	/	14%
Recruitment Time to Offer (weeks)	10.6	▲	/	11
Vacancy Fill Rate	94%	▲	/	88%
Sickness absence rate	5.2%	▲	/	4%
Harm Incident Rate NHSBT (Incident rate per 1000 employees)	9.2	▲	/	7.6

Drive innovation to improve patient outcomes

No. of transplants per deceased organ donor YTD	2.53	▼	/	2.47
Component Development Clinical Trials				
Whole Blood (SWIFT)	=			
Universal platelets & universal plasma	=			
Dried Plasma	▲			
RESTORE	=			

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

Clinical Biotechnology Centre (CBC) Income YTD	£1.60m	▼	/	£2.22m
Advanced Therapies Unit Income (YTD)	£0.64m	▲	/	£0.93m
No. of Therapeutic Apheresis Procedures YTD	7,428	▼	/	8,012
Tissue & Eye Services YTD income	£13.3m	▼	/	£12.4m
Transfusion 2024 programme status		▲		

¹MAT = moving annual total

²reported one month in arrears

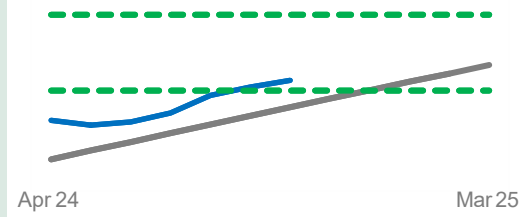
³Replacing Serious Incidents Metric



Blood Product Donor base

814k / 803k

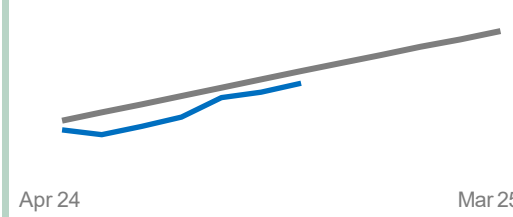
12-mth actual vs. projected target vs target range



O- Donor base

112k / 113k

12-mth actual vs. projected target



Ro Donorbase

26.6k / 27.5k

12-mth actual vs. projected target



Insight and Commentary

Blood Donor Base

Growth in the Blood Product Donor Base continued throughout October reaching 814K (up from 813.4K last month). Whole Blood remained the biggest contributor to growth up from 792.1K to 794.5K. The whole blood donor base is now larger than this time last year. The B Neg Donor Base is at its lowest level since February 2021 and continues to require additional support to return it to target levels.

The Black Heritage donor base experienced its fourth consecutive month of growth, rising from 19.8K to above 20k. The proportion of black heritage donors in donor base also grew from 2.5% to 2.52% in October, after being in constant decline or stagnation since March 2024. This was due to a range of activity, particularly through social media channels encouraging Black Heritage groups to sign up/donate to commemorate Black History month.

Bookings in October remained strong, averaging 66.6K per week, up from 63.1K in September. The week of 30th September saw the highest bookings of the month, nearing 70K, driven by additional support for O Neg donors.

NHSBT led cancellations remain higher than target at 5.7% in October (vs 4.5% target). Short-term sickness continues to be the primary driver, with 60% of appointments cancelled for this reason. Our NPS score, below target all year declined from 86 in September to 85 in October. Donor complaints remained at 0.3% over the same period.

Plasma

Total collection of PFM in October was 53% ahead of target (25,546 litres vs. 16,667 litres), set at the minimum committed volume of plasma to the NHS during 24/25.

The source plasma regular donor base continued to grow in October though remains below target (5,841 donors vs target 7,111 donors) due to lower than expected new donor recruitment driven by staffing challenges and organisational response to the Amber Alert. **Back to Green Plan:** Several actions are underway to increase both new donor recruitment and the volume of source plasma collection from the three centres by increasing capacity and focussing on switching blood donors to Plasma.

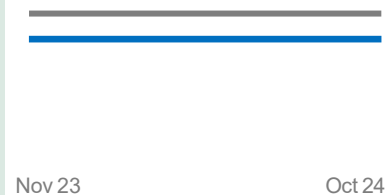
Plasma for Medicine is consistently dispatching plasma for fractionation, with 12 shipments (108 KL) sent by mid-November and 7 more ready for dispatch. Validation of launch stock is on track, keeping ahead of schedule. Testing for HAV/B19 antibodies is crucial for these shipments, and the testing lab has processed over 1 million samples in 2024 to date. A significant milestone was reached in October, as all plasma not used for clinical purposes can now be utilised in the production of Plasma for Medicines.

Plasma continues to support whole blood collection at Twickenham Donor Centre where there has been growth in the whole blood donor base of over 2,000 donors in the last 6 months. Total collection of plasma for fractionation YTD is 168 KL.

Black Heritage Representation in donor base

2.52% / 3.1%

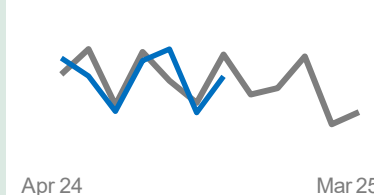
12-mth actual vs. target



Red Cell Units Collected

122k / 126k

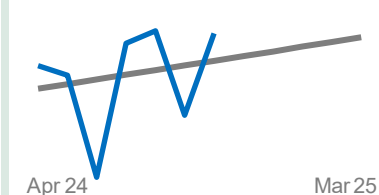
12-mth actual vs forecast target



Ro Units Collected

4,264 / 4,129

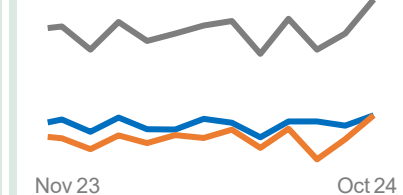
12-mth actual vs projected target



Ro Supply Demand Gap YTD

46.7% / ---

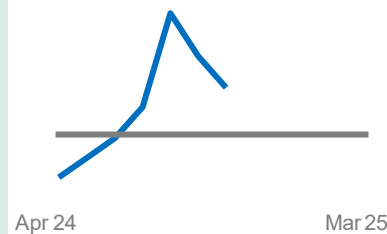
12-mth issued vs requested vs Ro gap



Short Notice Cancellation Of Appointments

5.7% / 4.5%

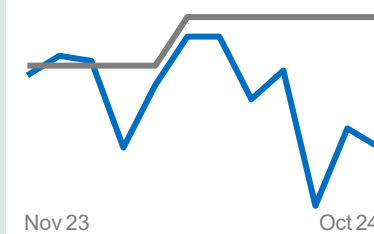
12-mth actual vs. target



Net Promoter Score

85 / 88

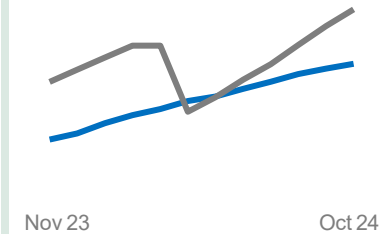
12-mth actual vs. target



Plasma Regular Donor Base

5,841 / 7,111

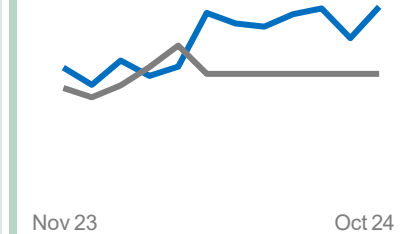
12-mth actual vs. target



Plasma Collections Source & Recovered YTD

168k / 116k

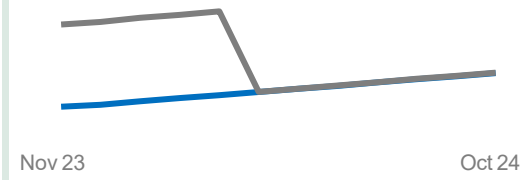
12-mth actual vs. target





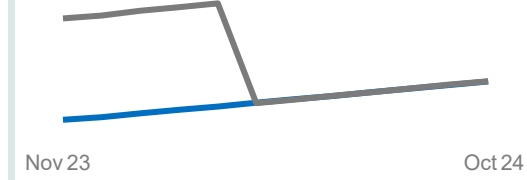
Organ Donor Register¹ **28.2m** / **28.2m**
Opt-In Register - Total

12-mth actual vs. target



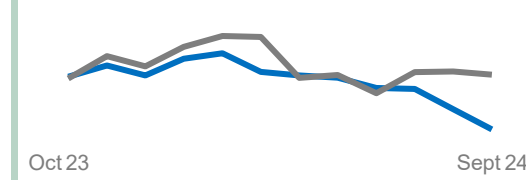
Organ Donor Register¹ **24.1m** / **24.1m**
(Opt-In Register Eng. & Wales)

12-mth actual vs. target



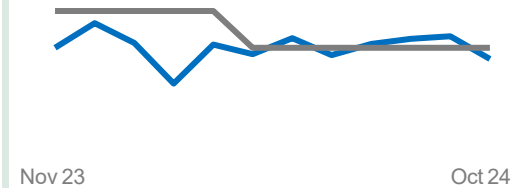
Living & Deceased Organ donor transplants **4,561** / **4,673**
(MAT 1 month in arrears)

12-mth MAT actual vs. target



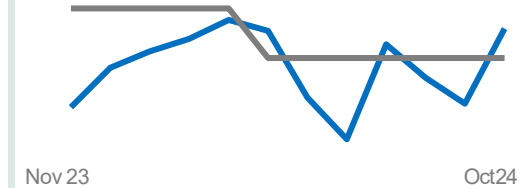
Organ Consent/Authorisation YTD **60%** / **60%**

12-mth actual vs. target



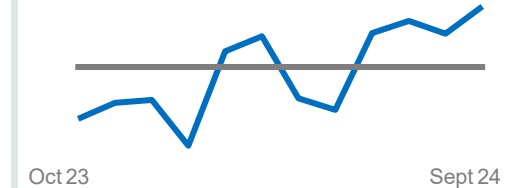
Minority Ethnic (ME) Organ Consent Rate YTD **29%** / **33%**

12-mth actual vs. target



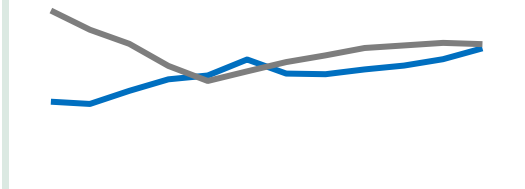
ME Recipients of Organ Transplants **27%** / **27%**
(YTD 1 month in arrears)

12-mth actual vs. target



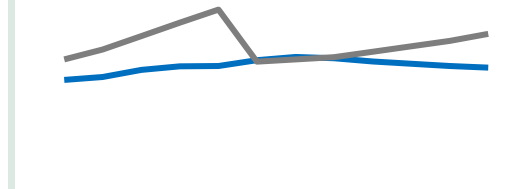
Corneas issued for transplant YTD **2,363** / **2,255**

12-mth MAT actual vs. target



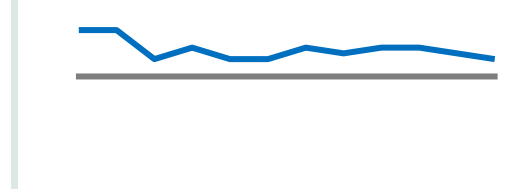
NHS Stem Cell Donor Registry Fit Panel Volume **111.9k** / **119k**

12-mth actual vs. target



ME % of New NHS Stem Cell Door Registry Fit Panel **23%** / **20%**

12-mth actual vs. target



Insight and Commentary Organs

- In October, the number of deceased organ donors and transplants were both behind target. We are behind target YTD for deceased donor transplants (with 2,016 patients transplanted vs. 2,170 target), but the number of deceased donors YTD is now at red RAG status (actual 798 vs. 892 target). The number of transplants per donor was amber in month for the first time this year at 2.31 vs 2.47 (although ahead of target YTD).
- The eligible donor pool continues to shrink, despite strong referral and SNOD presence in hospitals. Donation depends on Critical Care Clinicians and Coroners/Procurator fiscals, but both the neurological death testing (NDT) rate and coroner/procurator fiscal permission rate have declined. The NDT rate dropped to 65% for the month (74% YTD), with 56 patients not tested. The permission rate also fell to 66% (75% YTD), with 31 refusals.
- Back to Green Plan:** The decline in Deceased Organ Donation rates is driven by several factors. Efforts are underway to improve consent rates, particularly by increasing registrations on the Organ Donor Register (ODR). Additionally, work is being done to analyse changes in NHS practices that have reduced the donor pool. NHSBT is also supporting the optimisation of neurological death testing (NDT) in hospitals, in line with the new code of practice.
- Despite fewer eligible donors than last month, more families were approached, but the consent/authorisation rate was low at 58%, causing the YTD position to slip back to 60%. The consent/authorisation rate for ethnic minority patients remains a challenge.

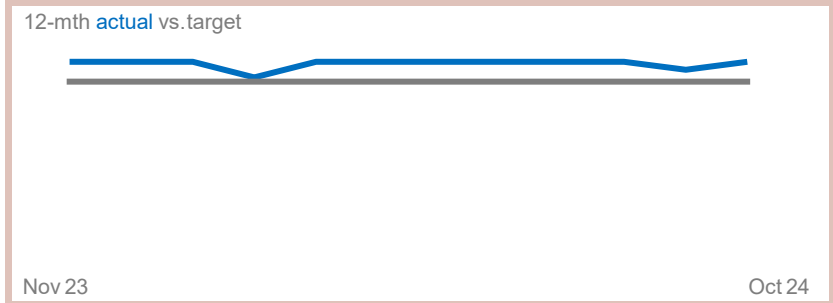
Ocular

- The average weekly ocular donation rate has increased to 54.5 in October, compared to 48.5 in September. Ocular stock levels have increased across the month to 283 at the end of October (target of 300, 250 in September).
- Work to increase cornea supply continues as part of the iORbiT project, and engagement with potential future partners has been continuing. Two new Eye Retrieval Scheme sites are now live, the University Hospital North Midlands, went live on 1st October and the Northern Care Alliance NHS Foundation Trust went live on 19th October.

Pathology

- Screen 25k blood donors for extended types and additional antigens:** Screening is behind plan YTD (10.0k v 14.6k) due to long term staff absence; an additional fixed term resource has been recruited for 6 months and started in late October.
- Retest 5k STRIDES donors to enable clinical use:** Activity expected in Q4.

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

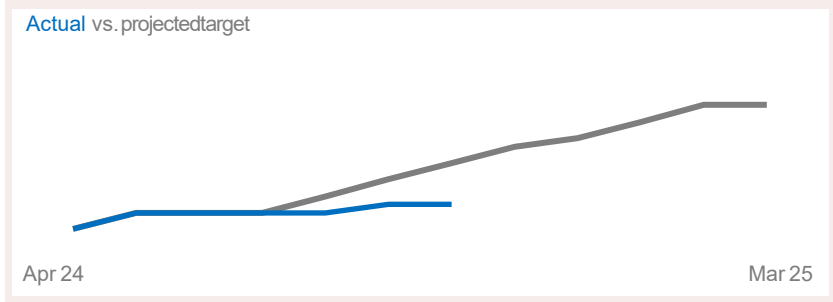


Reduction in scope 1&2 CO₂ emissions vs. 2020/21 baseline ▲ **21%** / ---

(reported quarterly end Q1 07/24; next end Q3 01/25)

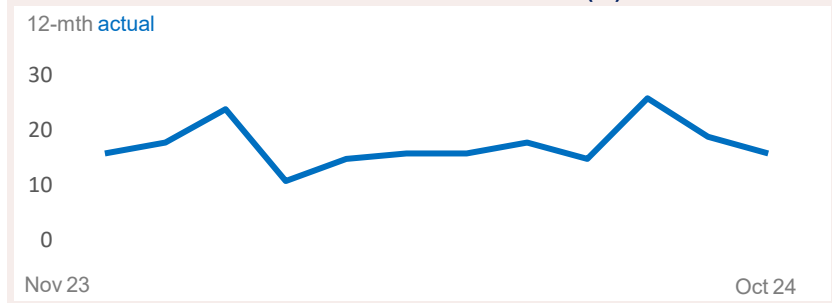


Business Continuity Plans Exercised YTD = **20%** / **53%**



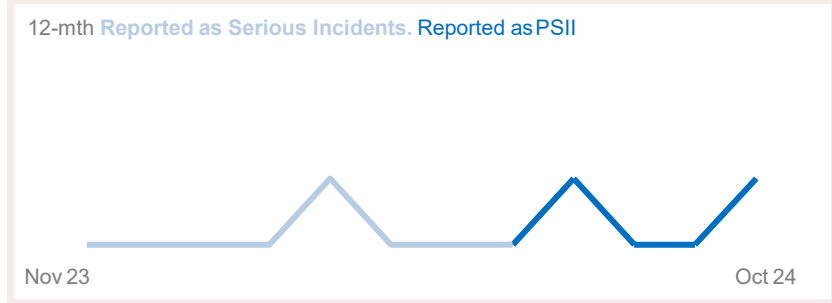
Overdue Internal Majors ▼ **16** / **0**

(-3)



Patient Safety Incident Investigation (PSII)¹ **2** / ---

YTD = 5



External Majors **1** / ---

YTD = 2



Insight and Commentary
Quality

- The number of Overdue Major incidents at the end of October has decreased to 16, down by 3 incidents against September (19). A deep dive into the open major incidents took place at the Performance ET Meeting in October. **Back to Green Plan:** Two parallel improvement initiatives have commenced that will result in the proportional closure of low-risk incidents (short term), whilst delivering a simplified process for effective incident management (long term) following a comprehensive value stream analysis (VSA). We have also increased executive oversight of overdue internal major events.
- **PSIIs:** Two unrelated incidents 1. Death of patient with rare blood type following liver transplant and transfusion of incompatible blood. Investigation ongoing. 2. Delayed reporting resulted in mismatched transfusion. Potential patient harm. Improvements in workload management have been made.
- The MHRA issued one major external finding during an IMP/Specials inspection at Liverpool. This was the first inspection of this activity since 2018. The major finding consists of a series of smaller findings related to sterility assurance controls. A response will be submitted including corrective and preventative actions within the standard 28-day deadline.

Critical Infrastructure

- Critical Infrastructure (CI) met availability target for October. Minor issues affecting RCI Mat and the supporting services for Hematos were resolved swiftly, resulting in minimal impact. Over the past 12 months, DDTS has dedicated significant effort to maintain service stability and reliability, resulting in CI meeting the target every month for the last 12 months.

Progress Towards Net Zero

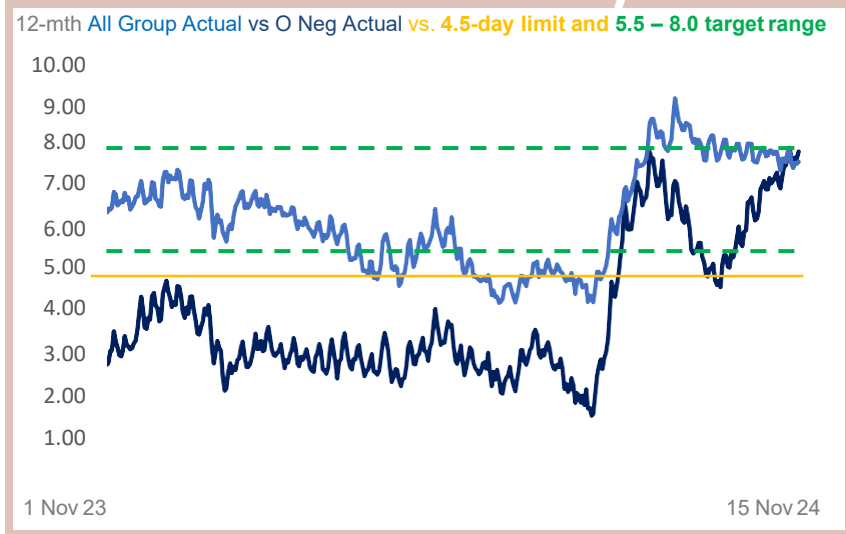
- Progress towards achieving 80% reduction in CO2 emissions vs. 2020/21 baseline by 2031/32 has slowed through 2023/24 and the first half of 2024/25.
- At current rates we are projecting a reduction of 33% versus a target of 80%
- **Back to Green Plan:** A new Net Zero strategy focussed on managing our Scope 1,2 and 3 emissions is currently being developed.

Business Continuity Plans Exercised

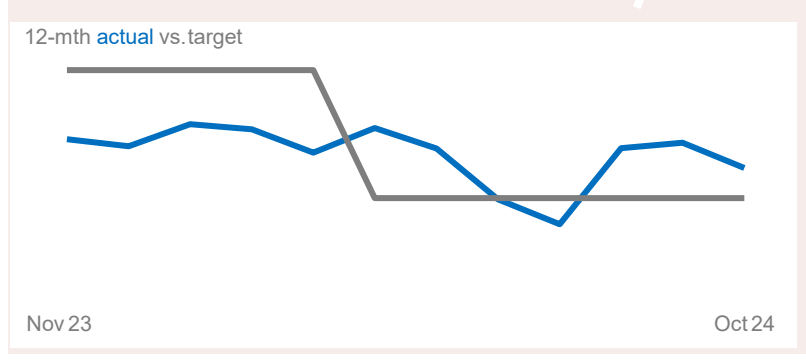
- The Business Continuity Exercise Programme is at 20%, which is behind target of 53%. **Back to Green Plan:** We are behind in the process of reviewing business continuity documents. The aim is to ramp up progress on reviewing business continuity documents in Q3 and Q4 which will enable us to then exercise business continuity plans.



Blood stock stability
 Average days of stock **7.9** Avg. Oct 24
 Actual days of stock **7.8** Actual 31/10
5.5 – 8.0 days



On Time In Full
 incl. Ro (YTD) **96.6%** / **96.3%**



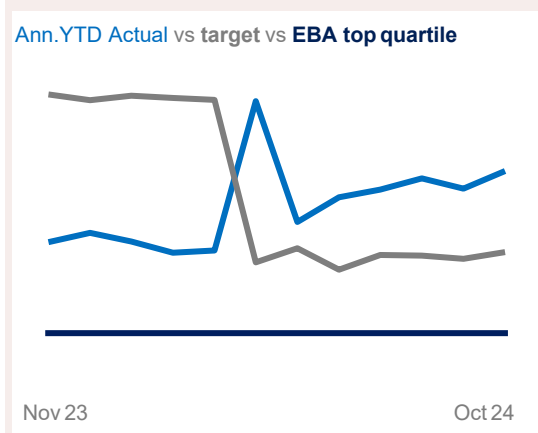
Cost/Budget savings **£9.5m** / **£15.8m**
 (full year forecast) at Q2; next report end Q3

% Commercial Pipeline Savings YTD at Q2; next report end Q3 **3.7%** / **1%**

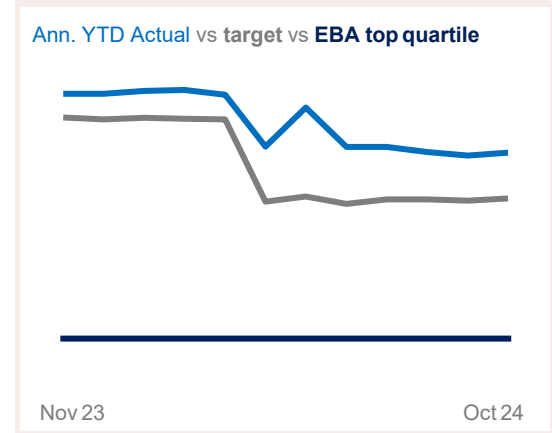
Insight and Commentary

- In October 2024 red cell collections stood at 96.6% of business plan target, a -1.8pp decrease from the collection performance seen in the previous month. Over the course of the financial year collections stand at 99.4% of business plan target. Red cell issues increased in volume when compared to the previous month (+6.9pp) but were -0.6pp below forecast demand, in part due to continuing blood stocks management engagement with hospitals. Over the course of the financial year to date red cell demand is below forecast. The number of red cell units being issued as substituted products for all requests increased (+0.5pp) driven by insufficient supply of Ro units.
- Back to Green Plan:** Stock recovery is being managed through bi-weekly incident management meetings and a strategic oversight group. These groups are guiding the development of a long-term recovery and sustainability program. In response to the Amber Alert, hospitals have been instructed to implement enhanced blood management procedures, improve capacity management, and launch urgent mass media campaigns to stabilize and rebuild stock
- On Time, In Full performance decreased this month (+0.3pp) and stood at 96.6%, driven by a 0.4pp decrease in In Full performance, driven by the increase in red cell substitutions. 'On Time' performance remains stable. Over the course of the first 6 months of the financial year performance remains stable in terms of both 'On Time' and 'In Full', at 96.6%.
- Sickness absence in Blood Supply has risen to its highest level in the year to date, standing at 7.6%, driven largely by a +0.9pp increase in Short Term Sickness. Available time lost due to sickness has increased by +1.0pp in Blood Donation collection teams and Manufacturing & Logistics teams.
- Back to Green Plan:** 16 collection teams remain operating at reduced capacity, driven by a combination of long-term sickness, high attrition and problematic recruitment. 11 of these teams are planned to transition towards full capacity at the end of Quarter 3.

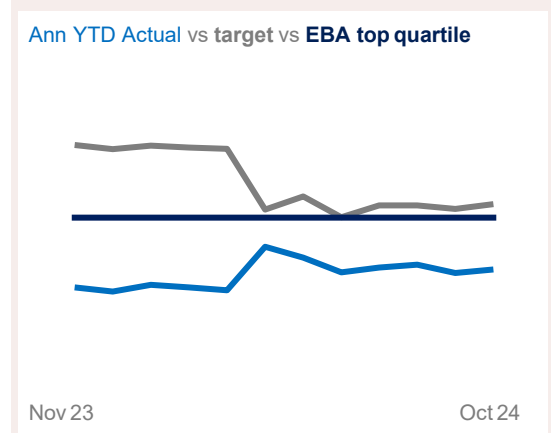
Manufacturing Productivity **10,732** / **9,984**
 Annualised YTD

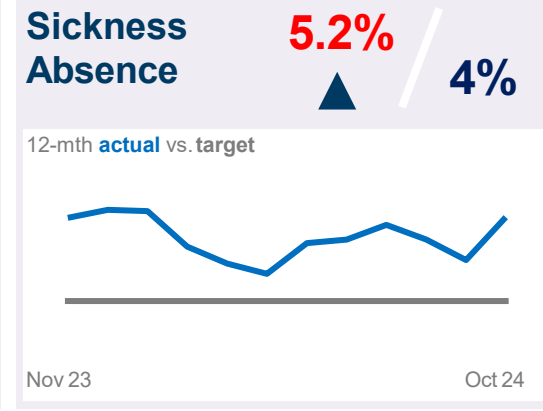


Testing Productivity **29,860** / **26,167**
 Annualised YTD



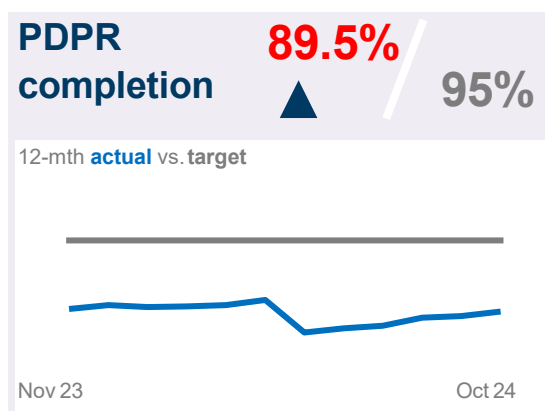
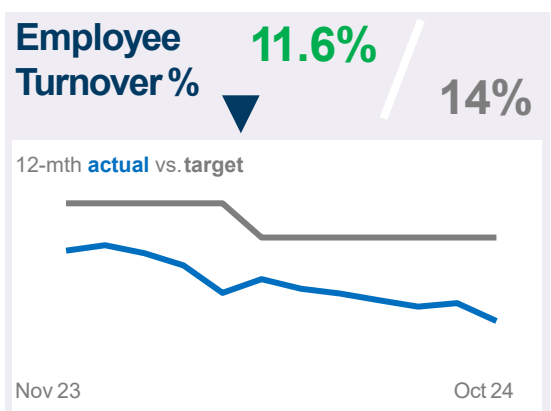
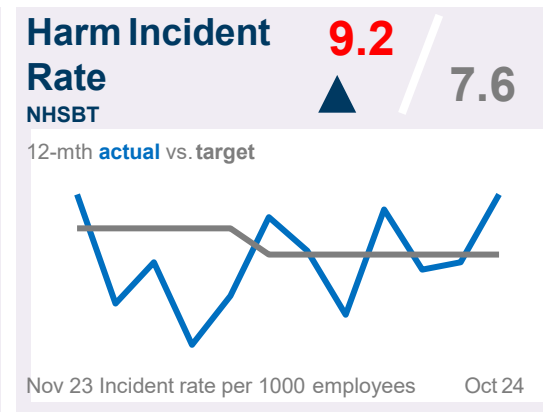
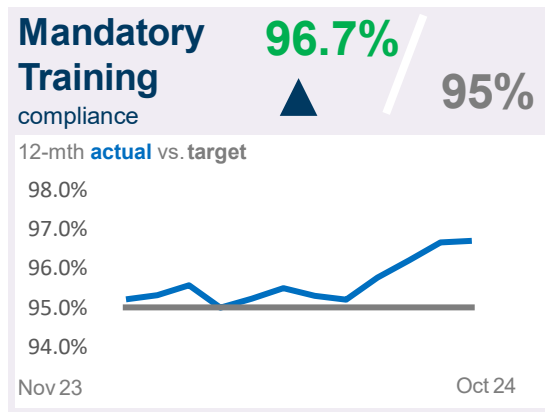
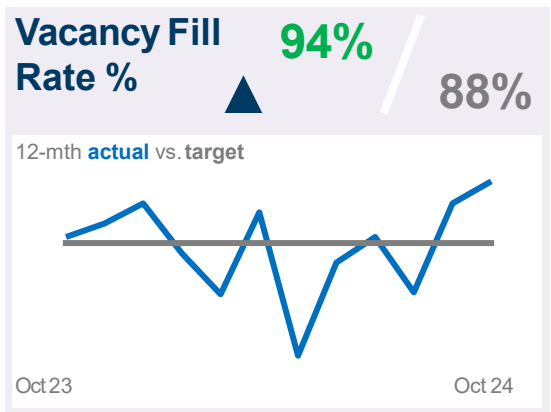
Collection Productivity **1,168** / **1,263**
 Annualised YTD





Insight and Commentary

- Recruitment: Time to offer increased to 10.6 weeks in October from 10.4 weeks in September and remains below target of 11 weeks, for the sixth consecutive month. Time to offer has reduced by 19% over the previous 12 months. Vacancy demand has fluctuated, with a 22% decrease in requests compared to last month, marking the lowest volume since May 2024.
- The Vacancy fill rate remains above target in October at 94%. Employee Turnover fell by 0.5pp in October to 11.6%.
- Mandatory Training compliance remains above target and stable at 96.7% in October. PDPR compliance remains below target at 89.5%, however this represents an increase of 0.3pp from September. **Back to Green Plan:** The new PDPR form and guidance is being launched in October, with the expectation that it will boost compliance.
- Overall sickness absence increased by 0.6pp in October to 5.2%, 0.3pp below this time last year (5.5%) but above target (4%). At directorate level, movements in sickness level in October were:
 - Blood Donation up by 1.0pp to 8%
 - M&L sickness up 0.9pp to 6.8%
 - OTDT up 1.0pp to 5.7%



- NHSBT's harm incidence for October was 9.2, above the target of 7.6, with a total of 66 incidents—an increase of 14 compared to September's 52. Blood donation saw a significant rise of 11 incidents, primarily due to blood exposure, dirty needlesticks, and slips and trips.
- Bloods Supply Harm incidence for October was 14.5, above the target of 11.4 with 52 harm incidents. The most common causes being musculoskeletal injuries (9), injuries from sharp objects (8), being hit by a moving object or contact with blood (7), and trapping incidents (5). **Back to Green Plan:** The people team are working to analyse the latest sickness absence data across the directorates and are looking at implementing interventions.



Component development clinical trials

Whole blood use in trauma status (SWIFT)	
Universal plasma and universal platelets status	
Freeze Dried Plasma (MOD) status	
RESTORE clinical trial	
Platelets in PAS clinical trial/validation study	

Patient Outcome datasets

Serum eyedrop – post treatment follow up data	Programme in development. Pilot starting Q4	
Patient Outcomes Data	Approach and scope in development	

Insight and Commentary

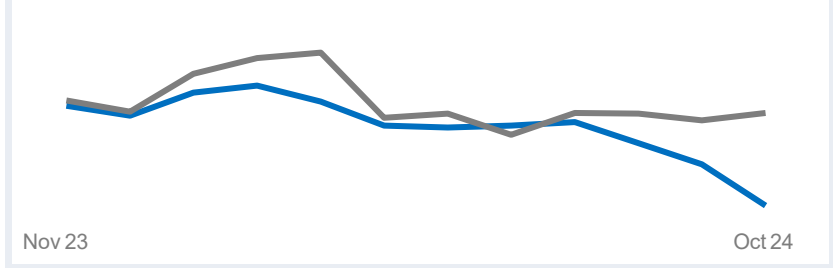
Component development clinical trials

- SWIFT:** 10 trial sites (air ambulances) opened, with recruitment of 900 patients completed 3 months ahead of schedule (Sept 2024). Developing a process for data originally to be obtained via TARN (Trauma Audit and Research Network) with NMTR (National Major Trauma Registry) and study sites; database change required; estimated go live mid-November.
- Universal Plasma & Platelets:** Planned technology supplier unable to commit beyond the end of 2023 (driver for Amber status); Potential alternative technology partners are under evaluation. Path to Green dependent on updated project plan once technology partner evaluation is complete.
- Dried Plasma:** Specialist equipment successfully delivered and installed; equipment user training has taken place. NHSBT sponsorship of the clinical trial has been awarded in principle. Returned to Green following re-baselining of milestones and the signing of an amended MoU by the MoD and NHSBT.
- RESTORE:** Clinical trial of in-person use of red cells manufactured from stem cells. Path to Green requires a change request with an updated schedule to completion and a revised financial forecast. Clarification expected Oct. 2024.

No. of organ donor transplants **2,016** / 2,170

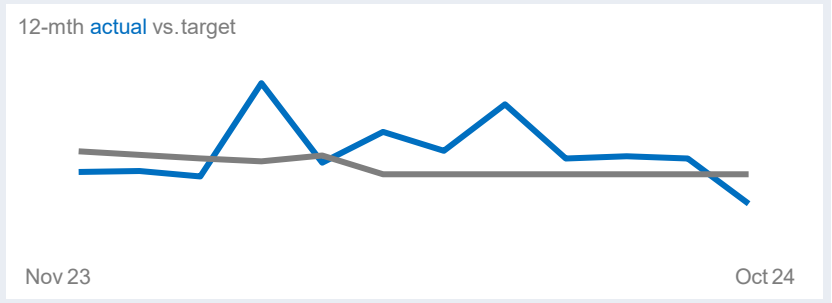
Deceased Donors YTD

12-mth MAT actual vs. target



No. of organ transplants per deceased donor YTD **2.53** / 2.47

12-mth actual vs. target

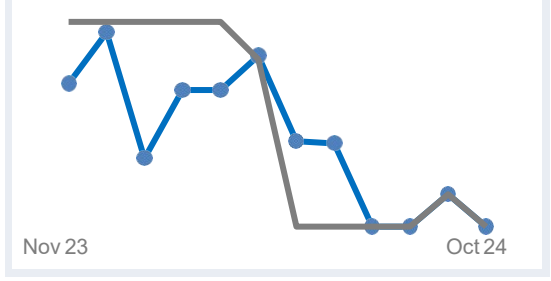


Genomics

- The programme moved to Green RAG status** post September Programme Board as MHRA Exceptional Use Authorisation received, sample testing has now started for the NHSE sickle cell project (10/09/24), plus resumption of the HLA Selected Red Cell pilot (09/09/24).
- Strategies to Improve Donor Experiences (STRIDES):** All STRIDES donors now genotyped, with the final confirmed number at 77,156. 68k samples invoiced, 9k remaining to be invoiced to the National Institute for Health and Care Research (NIHR) BioResource.
- Confirmatory Testing of 'valuable' / rare donors from STRIDES genotyped cohort:** Ca 34k donors identified as 'valuable' category 1 and 2 donors. Planning to complete confirmatory test on ca 11k donor samples by year-end.
- NHSE funded project to genotype all sickle cell and thalassaemia patients:** 5,642 patient samples received from 106 hospitals. Targeting 100% of cohort ca 18k patients. BBC film produced and aired on 28 October on BBC Morning Live.

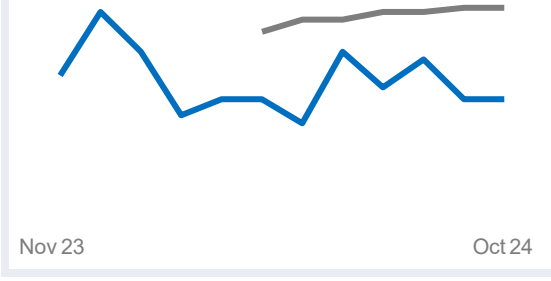
No. genotyped (STRIDES) **77,156** / 77,500

12-mth actual vs contract



No. recruited to SIGNET 1 Clinical Trial (OTDT) YTD **257** / 385

12-mth actual vs target



No. genotyped Sickle Cell & Thalassaemia YTD --- / ---

12-mth actual vs target

Testing started 10/09, reporting to follow.

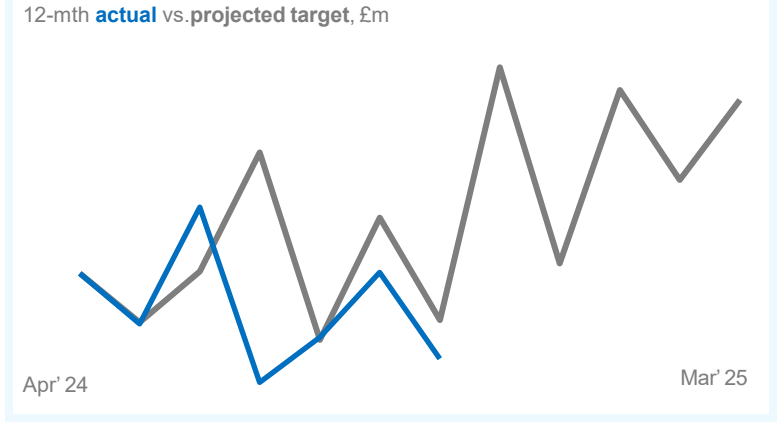
Organ Transplant & Utilisation

- Statins for Improving Organ Outcome in Transplantation (SIGNET):** Currently at red status as recruitment targets were set based on the number of DBD donors pre-COVID-19 pandemic. Post Covid-19, the number of DBD donors has fallen, so despite the study performing well in terms of % eligible donors, we are likely to remain at red status for the rest of the financial year.



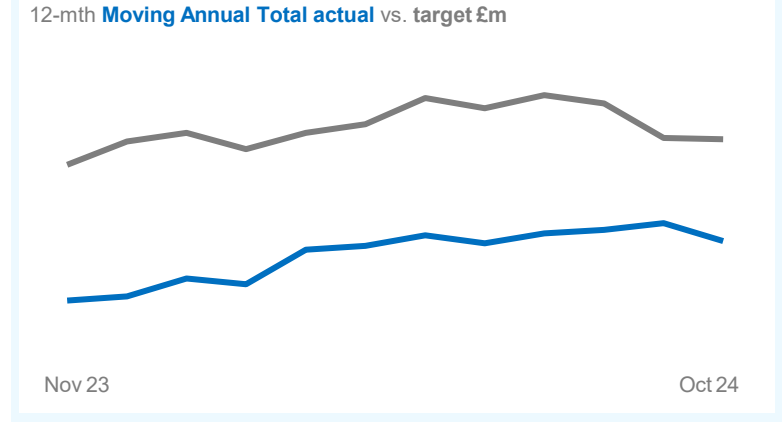
Transfusion 2024 programme status

Clinical Biotechnology Centre (CBC) income YTD **£1.60m** / £2.22m



Fetal RHD electronic requesting & reporting status

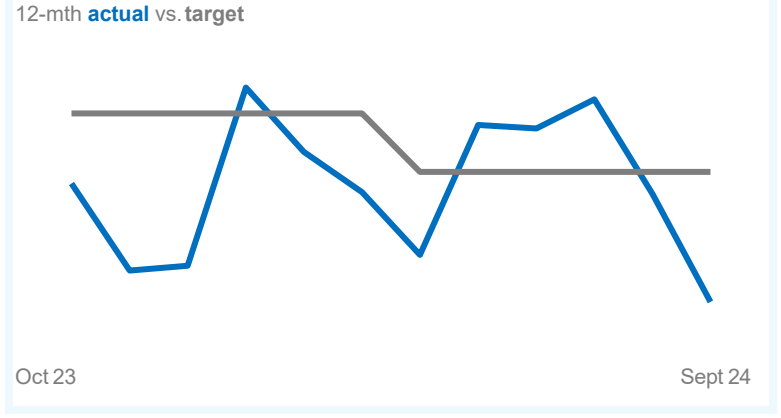
Advanced Therapies Unit Income YTD **£0.64m** / £0.93m



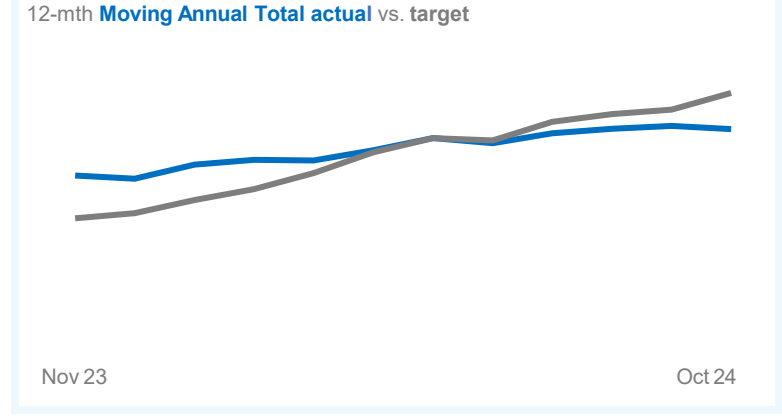
Insight and Commentary

- Transfusion 2024 Programme**
 - Overall programme at Green RAG Status
 - Fetal RHD electronic requesting and reporting:** Amber status as progress slower than planned in-year, however expecting to move back to Green in November. Ten hospitals are live after two more went live in October. Pathology has a target of reaching 1% of Hospital orders ordered/referred electronically by the end of 24/25; a report has been developed to track this, with actual at 1.7% this year.
 - RCI Assist Referral Support Tool:** Eight hospitals participated in the pilot, after which a business case was approved for the referral support tool. Amendments to the electronic version of RCI Assist complete; test scripts underway following initial review/testing. Proposals for hospital training and engagement agreed.
 - Connection to National Haemoglobinopathy Register (NHR):** Phase 1 is live - NHSBT red cell antibody data is available in the NHR for transfusion labs to access; Phase 2 specification (to add phenotype and genotype) has been signed off and development completed. Go-live is anticipated in early November.

NHSBT Provided UK Stem Cell Donors YTD **7%** / 7%
Next report – end Q3 2024/25



Therapeutic Apheresis Services **7,428** / 8,012
no. of procedures YTD



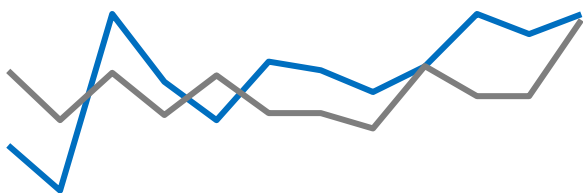
Cellular Apheresis and Gene Therapies (CAGT)

- Therapeutic Apheresis Service (TAS)** procedure volumes are 7.3% below plan YTD but are 6.4% ahead of last year. The main drivers are a decrease in Extracorporeal photopheresis (ECP) procedures due availability of a new Graft versus Host Disease (GvHD) treatment, and a reduction in cell collections; The year-end forecast has been revised down from the original plan figure of 13,646 to 13,197, which would equal growth of 8.9% versus plan of 12.6%.
- Clinical Biotechnology Centre (CBC) income** is £0.6m behind plan YTD. Forecast is £3.2m versus plan £5.4m (but above last year £1.9m). This reflects changes in customers' in-year requirements, with some prospects not materialising and some delayed until next year. **Back to Green Plan:** The Business Development Team are working on new leads/requests, but they are unlikely to positively impact in this financial year.
- Advanced Therapy Unit (ATU) income** is £0.5m behind plan YTD. A contract has been signed in-year with a new commercial customer in support of CAR-T manufacture. Income is forecast to grow from £1.2m last year to £1.8m in 2024/25, £0.2m below plan of £2.0m.
- The NHS Stem Cell Donor Registry (SCDR) Fit panel volume ended 5.9% below the phased YTD target. The H&I lab is currently changing suppliers, which has resulted in a lower volume of donor typing in the last five months, and therefore, less additions to the register (ca 7k backlog). The lab is expected to restart typing from November and catch-up on SCDR work over the rest of the financial year.
- NHSBT's share of stem cell provision to UK patients was at 7% and equal to plan in the first half of the year (next update at the end of Q3).



Tissue & Eye Services (TES) income YTD **£13.3m** / **£12.4m**

12-mth actual vs. target



Nov 23

Oct 24

Donation & Transplantation Academy Implementation

Insight and Commentary

- Implementation of the Donation and Transplantation Academy is underway, and an internal NHSBT workinggroup has recently been established.
- Awaiting a read out from project team re. October meeting with academic partners, Northumbria University, developing ways of working, Terms of Reference and agreeing outputs.

Insight and Commentary

Tissue & Eye Income - Overall income

- The overall October sales income position was 0.9% ahead of target (£18.9k), where we experienced positive sales for both Ocular and Tears product groups. The main product lines that did not hit target were Skin (-£43.7k), Femoral Heads (-£20.9k), Demineralised Bone Matrix (-£8.1k) and Processed Bone (-£3.8k).

Tissue Income

- Tissue product income was behind target by £58.5k in month, despite Amnion, Tendons, dCELL (Human Dermis) and Cardiovascular finishing the month positive to target.

Ocular income

- Ocular income was ahead of the financial target by 1.8% in month (£11.5k), however donations remain behind the weekly operational target (stretch target linked to meeting demand), which is putting pressure on our ability to fulfil orders.
- A change in process is currently being piloted within the National Referral Centre (NRC) with the aim of increasing ocular consents. Current cornea orders over the festive period are extremely low, so NHSE has been contacted to try and increase operation levels at hospitals to reduce any wastage due to time expiry.

Heart Valves

- Cardiovascular sales were ahead of target by £7.3k this month. There were 24 donations in October (target of 35), down slightly from 26 retrieved in September. The training of a member of the Southwest retrieval team in heart retrieval has been completed, so new hospitals are now accessible for heart retrievals.

Serum Eyedrops

- Serum Eyedrops was ahead of the financial target in month (£20.9k), with 26 batches being issued over target (484 vs. target of 458). There is a slight reduction in daily issuing capacity over November, but the financial target is still expected to be met for the month.

Ref	Risk Title / Owner	Date of last change / last review	Appetite Category / Level	Risk Score against Appetite (● = Current Residual Score, ○ = Residual Score in previous report, where a change to the score is noted)
P-01	Donor & Patient Safety / Chief Nursing Officer	24 Nov 20023 / 06 Nov 2024	Clinical / Minimal	
P-02	Service Disruption / Director of Quality	23 July 2024 / 09 Oct 2024	Disruption / Minimal	
P-03	Service Disruption (Interruption of critical ICT) Chief Digital Officer	05 July 2024 / 08 Nov 2024	Disruption / Minimal	
P-04	Donor Numbers & Diversity / Director of Donor Experience	12 Aug 2024 / 02 Oct 2024	Disruption / Minimal	
P-05	Long term financial sustainability / Chief Financial Officer	21 Aug 2024 / 12 Nov 2024	Finance / Open	
P-06	Inability to access data sets / Chief Nursing Officer	06 Jun 2023 / 08 Nov 2024	Innovation / Open	

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 in previous report, where a change to the score is noted)
P-07	Staff Capacity and Capability / Chief People Officer	28 May 2024 / 16 Oct 2024	People / Open	
P-08	Managers Skills and Capability / Chief People Officer	18 Mar 2024 / 16 Oct 2024	People / Open	
P-09	Regulatory Compliance / Director of Quality	10 July 2024 / 10 Oct 2024	Legal, Regulatory & Compliance / Cautious	
P-10	Change Programme scale & pace / Deputy Chief Executive	04 Apr 24/ 25 Oct 2024	Innovation / Open	
P-11	Corporate Governance / Director of Quality	29 May 24/ 09 Oct 2024	Governance / Minimal	

Risk Summary continued

Risks at Risk Limit. Three Principal Risk remain recorded at the risk limit. These risks are:

- Principal risk P-02 (Service Disruption).The residual score of this risk remains at $4 \times 4 = 16$.The contributory risk influencing P-02 continues to be risk BS-02 Shortage of Blood Components /Inability to meet hospital demand. The residual score of this risk remains at $4 \times 4 = 16$.
- Principal risk P-03 (loss of critical ICT).The residual score of this risk remains at $5 \times 4 = 20$.The contributory risks influencing this risk score is DDTS-08 Cyber Security. This contributory risk is scored $5 \times 4 = 20$.
- Principal risk P-04 (Donor numbers and diversity). The residual score of this risk remains at $4 \times 4 = 16$. The contributory risks influencing this risk score is DX-01. Failure to attract and retain donors. This contributory risk is scored $4 \times 4 = 16$.

Risk movement

There has been no risk movement to any principal risk scores since the last report.

Appetite Levels

- Three principal risks are at the risk limit
- Three principal risks are recorded in the Judgement zone
- Four principal risks are at the tolerable risk level
- One principal risk is recorded at the Optimal risk level