

Board Meeting in Public Tuesday, 30 September 2025

Title of Paper	Supporting delivery of the NHS 10 Year Health Plan for England, now and in the future Agenda No. 3.4		3.4	
Nature of Paper	□ Official Sensitive			
Author(s)	Jim Barker, Head of Strategy			
Lead Executive	Carl Vincent, Chief Financial Officer			
Non-Executive Director Sponsor	Peter Wyman, Chair			
Presenter(s) at Meeting	Carl Vincent, Jim Barker			
Due a serte differe	☐ Approval	□ Information		
Presented for	☐ Update			
Executive Summary		·		
radical transformation of care delivery enabled by five reforms and centred on three shifts: Hospital to Community , Analogue to Digital , and Sickness to Prevention . NHSBT's corporate strategy and transformation plans are already well-aligned with these ambitions, particularly in areas of digital innovation, genomics, community engagement, and health equity. In addition to the Health Plan, another key policy document was published in July in the form of the Life Science Sector Plan. The Plan's roadmap for investment, regulatory reform and partnerships across government, industry and the NHS has significant relevance to NHSBT's Strategy. This paper outlines NHSBT's current contributions to the Health Plan and opportunities arising from the Life Science Sector Plan; and goes on to identify strategic gaps and opportunities across both				
polices, and proposes area Previously Considered b				
N/A				
Recommendation	 The Board is asked to receive this paper and acknowledge the many areas where NHSBT is already contributing to the NHS Health Plan and Life Science Sector Plan. note the areas where there are strategic gaps between NHSBT's current strategy and transformation goals and these plans. support the actions presented in section 5 to: Undertake a narrative update to NHSBT's living corporate strategy in 2025 Note the planned Executive Team strategy development session to coincide with the appointment of the substantive CEO. Associated plans to update internal governance frameworks. 			
Risk(s) identified (Link to Board Assurance Framework Risks)				
All risks are relevant as the they identify consequences of not delivering the NHSBT Strategy.				
Strategic Objective(s) this paper relates to: [Click on all that apply]				
☑ Collaborate with partne☑ Modernise our operation	·		tion	
Appendices:		<u> </u>	a summary	
Appendices.	 NHS 10 Year Health Plan: Fit for the Future, a summary The Life Science Sector Plan, a summary 			



Supporting delivery of the NHS 10 Year Health Plan for England, now and in the future.

1. Context and Vision of the Health Plan

The **10-Year Health Plan for England** (summarised in Appendix 1), is a response to what the government describes as the NHS's "worst crisis in its history." It acknowledges the scale of the challenge: millions waiting for treatment, staff demoralised, and outcomes for major conditions like cancer and cardiovascular disease lagging behind international peers. The Plan is unambiguous in its call to action: "**reform or die**."

It sets out a bold vision to transform the NHS into a **digitally enabled**, **community-anchored**, **prevention-focused health system**. This transformation is structured around **three radical shifts**:

- From Hospital to Community: Establishing Neighbourhood Health Services that bring care closer to home, reduce reliance on hospitals, and empower local systems.
- From Analogue to Digital: Making the NHS the most Al-enabled health system in the world, with a single patient record, digital front doors, and real-time data.
- From Sickness to Prevention: Harnessing genomics, data, and behavioural science to predict and prevent illness, reduce health inequalities, and improve population health.

To support the scale of change needed to deliver these three shifts at pace, the plan identifies five enabling reforms to ensure the NHS is ready:

- through a new operating model.
- by ushering in a **new era of transparency**.
- by creating a new workforce model with staff genuinely aligned with the future direction of reform.
- through a reshaped innovation strategy.
- by taking a different approach to NHS finances.

The Plan is rooted in **public engagement**, shaped by over 250,000 contributions through the Change.NHS platform. It reflects a growing public expectation for more personalised, accessible, and equitable care - and a system that is more transparent, responsive, and sustainable.

For NHSBT, the Plan presents both **validation** and **opportunity**. Many of the themes - digital transformation, genomics, innovation, and health equity - are already well embedded in NHSBT's strategy. The challenge now is to **deepen alignment**, **accelerate delivery**, **and position NHSBT as an enabler of the NHS's future model of care**.

The **Life Sciences Sector Plan** published in July 2025 (summarised in Appendix 2) is another key policy document for NHSBT's Strategy. It was 'developed in conjunction with the 10 Year Health Plan to ensure alignment of objectives and means of delivery', and sets out a **roadmap for investment, regulatory reform, and partnership across government, industry, and the NHS**. For NHSBT, it presents a strategic opportunity to further align with national priorities and funding in genomics, advanced therapies, Al-enabled diagnostics, and data-driven innovation - areas already embedded in the NHSBT Strategy.

NHSBT's five strategic priorities and activities remain highly relevant and already actively contribute to the delivery of both of these vital policy documents. The following pages outline how this is happening today and in the future, followed by an assessment of potential gaps against both the radical shifts and enabling reforms. The paper concludes with recommendations for consideration.



2. NHSBT existing contributions to the Health Plan

Radical Shift 1: Hospital to Community "The NHS of the future will be a service that offers instant access to help and appointments... a patient-controlled system"

NHSBT I	Priority	NHSBT strategic action	How this supports the radical shift
	Grow and diversify our	Donor Network Design	Ensuring collection venues are at the heart of the right communities.
	donor base to meet clinical demand and	Mobile and Community Donation Centres	Existing neighbourhood infrastructure that aligns with health service ambitions.
9	reduce health inequalities	Diversification of Donor Base and Health Inequalities strategy	Purposefully addresses inequalities across a range of identified health disparities, <i>particularly</i> in genomics.
	Drive innovation to improve patient outcomes	Transfusion Transformation	Enhancing safety and enabling access to the right care in patient-based settings.
	Collaborate with partners to develop and scale new services for the NHS	Community partnerships and outreach (including community grants programme)	Understanding place-based communities and their needs to maximise donation, donor retention, and service delivery (e.g. Brixton Donor Centre, Vanik Council Living Kidney Donation Project, RAFFA's 'One Love, One Blood' campaign)

Radical Shift 2: Analogue to Digital "This Plan will make the NHS the most artificial-intelligence-enabled care system in the world"

NHSBT I	Priority	NHSBT strategic action	How this supports the radical shift
	Modernise our operations to	Touchless Supply Chain (Donor and Session Platform and Communication Systems)	Reducing manual interventions, enhancing safety, and improving donor experience and operational efficiency.
(%)	improve safety, resilience and efficiency	Pathology and Testing Strategy	Driving interoperability with Providers through e-requesting/reporting/LIMS ¹
	emolericy	Estates Strategy	Enabling cost-effective service delivery and the delivery of net zero goals
(0)	Drive innovation to improve patient	Data Intelligence Programme	Accelerating workforce wide use of analytics, technology, data and Al literacy to support decision making
	outcomes	Digital Interoperability	Seamless requesting and reporting with NHS Providers
	Collaborate with partners to develop and scale new services for the NHS	Partnerships with NHS Digital and NHSE	Supporting interoperability and shared records

¹ LIMS: Laboratory Information System

_



Blood and Transplant

Radical Shift 3: Sickness to Prevention "We will get upstream of ill-health and make a reality of precision medicine."

NHSBT I	Priority	NHSBT strategic action	How this supports the radical shift
	Collaborate	Plasma for Medicines Programme	Partnering with NHSE to increase national self-sufficiency in the context of the extended use of Plasma Derived Medicinal Products (PDMPs), and the potential to explore the scope for increased UK based fractionation.
	with partners to develop and scale new services for the	Organ Assessment and Recovery Centres (ARC) and machine perfusion	Partnering with NHSE to build a UK- wide network of machine perfusion transforming quality and equity of donated organs
	NHS	Advanced Therapies and Stem Cell Strategy	Aligning with life sciences and innovation goals
		Tissue and Cornea national resilience	Partnering with NHS Providers to reduce reliance on international imports.
0	Drive innovation to improve patient	Genotyping Programme	Enabling better matching and long- term outcomes particularly for minority ethnic groups (sickle cell)
	outcomes	Blood and Transplant Research Units	Supporting personalised medicine, surveillance, organ utilisation and preservation and patient outcomes
	Grow and diversify our donor base to meet clinical demand and reduce health inequalities	International Blood Grouping Laboratory and Rare Blood Diagnostics and Tissue Typing	Supporting early detection and personalised care
***	Invest in people and culture to ensure a high performing, inclusive organisation	The People Plan	Supporting equity, equality and future workforce readiness (including Al literacy)



Blood and Transplant

3. Areas currently not in agreed strategic plans where NHBST could better support the radical shifts in the Health Plan

Area of the Health Plan	What NHSBT <u>could</u> do	How
Neighbourhood Health Integration	Embed NHSBT services (e.g. donation, education, diagnostics) in Neighbourhood Health Centres	Explore NHSBT presence in NHCs with ICSs and NHSE
Digital Ecosystem Alignment	Integrate donor systems with NHS App and Single Patient Record.	Further collaboration with NHS Digital and NHSE on interoperability standards
Genomics and Personalised Prevention	Expand NHSBT's role in genomic testing, counselling, and data integration	Partner with Genomics England, DHSC, and NIHR to co-develop pilots
Organ and Tissue Donation Reform	Modernise consent systems and increase public engagement	Revise opt-out law, mandate choice recording, integrate with NHS App, and run targeted campaigns
Workforce Reform Alignment	Align NHSBT's People Plan with national reforms (AI, flexible careers, digital skills).	Map NHSBT roles to future NHS workforce models; update training pathways
Commercial Innovation and R&D	Accelerate commercial models for plasma, cell therapies, and digital services	Develop investment cases aligned to multi-year budgets and transformation funding
Public Health and Prevention	Collaborate on education and outreach in underserved areas	Expand partnerships and work with ICSs and local authorities
Value-Based Commissioning	Align NHSBT services with outcome-based funding models	Engage NHSE/DHSC to co-design pricing linked to outcomes and equity
Transparency and Data Publication	Publish richer data on donation rates, transplant outcomes, and equity metrics	Align with NHS transparency reforms and develop public dashboards.

4. Review of the five Enabling Reforms

In addition to the three radical shifts, the Health Plan outlines five enabling reforms that underpin system-wide transformation. NHSBT is well-positioned to contribute to these reforms, though further alignment may be required in some areas:

New Operating Model:

NHSBT is adapting to a more devolved NHS landscape, engaging with Integrated Care Systems (ICSs) and regional partners. Continued collaboration with ICSs and NHSE will be essential to ensure NHSBT's services are embedded in local commissioning and transformation plans.



• Transparency and Accountability:

NHSBT maintains high standards of regulatory compliance and performance benchmarking. However, there is an opportunity to enhance public-facing transparency—particularly around donation rates, transplant outcomes, and equity metrics—in line with the Health Plan's emphasis on real-time data and patient feedback.

Workforce Transformation:

NHSBT's People Plan aligns well with national workforce reform, focusing on inclusive recruitment, leadership development, and future skills. Further integration with national initiatives—such as Al literacy, flexible career pathways, and digital upskilling—will strengthen NHSBT's contribution to a future-ready NHS workforce.

Innovation Strategy:

NHSBT is a recognised leader in clinical innovation, with active programmes in genomics, organ perfusion, universal blood components, and translational research. Its partnerships with NIHR and academia position it strongly to support the Health Plan's ambition to make the NHS a global research and innovation powerhouse.

• Financial Reform:

NHSBT's commercial strategy and digital transformation roadmap support productivity and costefficiency. There is scope to further align with the Health Plan's financial reforms by developing multi-year investment plans, exploring value-based pricing models, and contributing to systemwide savings through innovation and self-sufficiency.

5. Alignment with the Life Science Sector Plan

The Life Sciences Sector Plan complements the Health Plan by reaffirming the UK's ambition to be a global leader in health innovation. It sets out a roadmap for investment, regulatory reform, and partnership across government, industry, and the NHS. For NHSBT, this presents a strategic opportunity to align with national priorities in genomics, advanced therapies, Al-enabled diagnostics, and data-driven innovation - areas already embedded in our corporate strategy.

- NHSBT's innovation strategy aligns closely with the Life Sciences Sector Plan's focus on frontier
 industries. NHSBT is well-positioned to contribute to national ambitions in genomics, precision
 medicine, and advanced therapy medicinal products (ATMPs). Opportunities include partnering
 with the National Institute for Health and Care Research (NIHR) Innovation Catalyst to pilot
 ATMPs and diagnostics and engaging with Genomics England and Health Data Research UK
 (HDRUK) to integrate NHSBT data into national platforms.
- The Sector Plan's emphasis on regional innovation clusters and export support aligns with NHSBT's infrastructure and reach. We will explore opportunities to participate in Regional Health Innovation Zones and assess export pathways for services such as the Clinical Biotechnology Centre. Engagement with the Life Sciences Council and Voluntary Scheme for Branded Medicines Pricing and Access (VPAG) Investment Programme will support NHSBT's role in commercial trials and international partnerships.



6. Next steps

The Board is asked to note the following actions

- Within 2025/26 the Strategy Team will undertake a short-term update to NHSBT's corporate strategy to ensure narrative alignment with the 10-Year Health Plan, reflecting current national priorities and language.
- Ensure NHSBT's strategy refresh explicitly considers alignment with the Life Sciences Sector Plan, including engagement with national funding programmes and innovation ecosystems.
- The Strategy Team will convene an Executive Team strategy session to review NHSBT's long-term strategic alignment with the Health Plan and broader national direction of travel. This session should include a structured prioritisation process to assess strategic initiatives against impact, feasibility, and alignment with NHSBT's core mission. It is envisaged that this session will occur within the first 3 months of the appointment of NHSBT's substantive CEO.
- The Strategy Team will work with services and departments to update internal frameworks to
 ensure that future strategic decisions are guided by available funding opportunities, delivery
 capacity, and the need to maintain organisational focus.



Appendix 1: The NHS 10 Year Health Plan: Fit for the Future, a summary (1/2)

The case for change

WHS is at an existential brink: In critical condition, public satisfaction has fallen from to 21%; productivity down 20-25% post-COVID

Financial unsustainability: NHS consumes 38% of government spending, projected to reach 50%.

Demographic challenges: Aging population; 25% of population have long-term conditions accounting for 65% of NHS spending

However, there is transformational opportunity: unparalleled population health data, single-payer efficiency, and digital healthcare revolution driving genomics leadership and new era of patient choice

Three major shifts

From Hospital to Community



- Neighbourhood health service to bring care and vaccinations to places where people live.
- Infrastructure: Neighbourhood Health Centres open 12hrs/day, 6 days/week, co-locating NHS, council and voluntary services.
- Patient empowerment: 95% of complex patients to have care plans by 2027; 1 million personal health budgets by 2030
- Financial reallocation: Lower UEC spend in systems spending more on community services (£100 spent on community care can unlock £131 of acute savings (Confed research)
- Digital transformation: 2/3 of outpatient appointments (costing £14bn a year) to be replaced by digital advice

From Analogue to Digital: Power in Patients' Hands

- NHS App "front door": Al-powered advice, appointment booking, self-referral, medicines management, care plans (Plus HealthStore: a marketplace for approved patient health apps
- Single Patient Record: Patient controlled data via NHS App by 2028 (starting with maternity). Supplemented by advances in genomic data for personalised and predictive care
- Staff liberation: Ambient voice technology reduces paperwork by 51%; procurement framework 2026/27. Altools being tested on the Federated Data Platform, which connects information across healthcare settings and links siloed sources, increasing productivity

From Treatment to Prevention



- Tobacco & Alcohol: Create smoke-free generation (£6.6bn savings by 2100); mandatory health warning labels for alcohol; increasing 'alcohol free' threshold to 0.5% ABV
- Obesity: Expand Healthy Start scheme, free school meals (Sep 2026), increase soft drinks levy. Digital NHS points scheme, rewarding people taking healthy actions
- Mental health: national coverage of mental health support teams in schools and colleges by 2029/30
- Genomics Population Health Service: for predictive and personalised medicine. Universal access (via SPR and NHS app) by decade end; 150,000 adult sequencing study; babies and all cancer patients to be offered genomic analysis
- Vaccinations and screenings for disease elimination: Cervical cancer eliminated by 2040; end HIV transmissions by 2030; 10,000 cancer vaccines to clinical trial patients in next 5 years



The NHS 10 Year Health Plan: Fit for the Future, a summary (2/2)

Underpinned by 5 key enabling reforms

New Operating Model



- Merge NHSE with DHSC, central headcount halved by 2027.
- Reintroduce earned autonomy; every NHS provider to be a Foundation Trust by 2035. Some to be Integrated Health Organisations (from 2027) holding population health budgets
- Integrated Care Boards to be strategic commissioners; close Commissioning Support Units. ICBs to aim to be coterminous with strategic authorities.

$New\,tran sparency\,of\,care$



- League tables of providers and patient reported experience measures to be published, to make data easier to understand and more accessible (NHS App) to providers and patients. Maternity care to be a priority
- National Quality Board to be revitalised, and be single authority on quality of care, supported by Dr.
 Penny Dash's report.
- Al led warning system building on Federated Data Platform, to identify services at high risk, based on clinical data

Workforce transformation



- Fewer staff than previous projections but better equipped (Al training for all), releasing £13bn through technology-enabled productivity
- Advanced practice roles for nurses/AHPs; reduce international recruitment to <10% by 2035
- Ultra-flexible employment contracts; eliminate agency staffing by parliament end; prioritise staff wellbeing to save £12b cost of poor wellbeing among NHS staff

Innovation & technology



- Five "big bets": Data, Al, Genomics and predictive analysis, Wearables, Robotics
- Global Institutes for each bet (NIHR funded) to drive global leadership;
 Regional Health Innovation Zones to bring together ICBs, providers, and industry.
- Clinical trial set-up: 250→150 days by March 2026; participant volunteering via NHS App
- Pro-innovation regulation: MHRA and NICE joint process (Apr 2026) to improve speed of medicines access
- £600m Health Data Research Service

- 2% annual productivity gains; return to pre-pandemic levels and by parliament end
- Phase out deficit funding from 2026/27
- Introduce multiyear budgets and require 3%+of budget for service Transformation
- Patient Power Payments: patient satisfaction to influence provider payments
- New capital models including private finance and pension fund partnership

Timeline of key commitments Al integrated into most Al supported Personal Health Budgets First wave of new Integrated Health NHS App complete for 1m people teledermatology hubs clinical pathways Foundation Trusts Organisations SPR accessible 2025 Few commitments mentioned 2030-35 2026 2028 2035 2027 2029 2030 **NHS Central** Patient reported Genomic service All NHS providers Maternity Outcomes Al scribe procurement **Booking into** Signals System headcount halved framework experience measures accessible to all to be FTs urgent care



Appendix 2: The Life Science Sector Plan

- The Plan reaffirms the UK's ambition to be a global leader in life sciences.
- It highlights the importance of collaboration between government, industry, and the National Health Service.
- There is an emphasis on the role of innovation in improving patient outcomes and economic growth.
- It commits to long-term investment and regulatory reform to support the sector.
- The Plan outlines a roadmap to make the United Kingdom the third largest life sciences economy globally by 2035.
- It focuses on improving the speed and ease of doing business in the United Kingdom.
- There is purposeful support for frontier industries such as genomics, advanced therapies, and artificial intelligence in healthcare.
- It promotes regional innovation clusters and partnerships with business.
- There is over £2 billion of backing in public and private investment.

The Life Science Sector Plan is presented across four strategic pillars:

Strategic Pillar 1: Ease, Speed, and Long-Term Stability

- Streamline regulatory pathways to accelerate access to market for innovative products.
- Enhance the Medicines and Healthcare products Regulatory Agency's capabilities.
- Introduce multi-year funding models to provide stability for research and development.
- Improve clinical trial processes and reduce startup times across the National Health Service.

Strategic Pillar 2: Supporting Frontier Industries

- Invest in genomics, precision medicine, and advanced therapy medicinal products.
- Expand the United Kingdom Biobank and Health Data Research United Kingdom infrastructure.
- Support artificial intelligence and digital technologies in diagnostics and treatment.
- Foster collaboration between academia, industry, and the National Health Service to accelerate innovation.

Strategic Pillar 3: Supporting City Regions and Clusters

- Develop regional innovation hubs to drive economic growth and health equity.
- Support infrastructure and skills development in key life sciences clusters.
- Encourage local partnerships between healthcare providers, universities, and industry.
- Promote inclusive growth and job creation across the United Kingdom.

Strategic Pillar 4: Supporting City Regions and Clusters

- Establish a new Life Sciences Council to guide policy and investment.
- Create a stable and attractive environment for private sector investment.
- Enhance export support and international trade opportunities for life sciences companies.
- Ensure alignment between industrial strategy and health system priorities.