

# NHSBT Executive Team & Board Performance & Risk Report

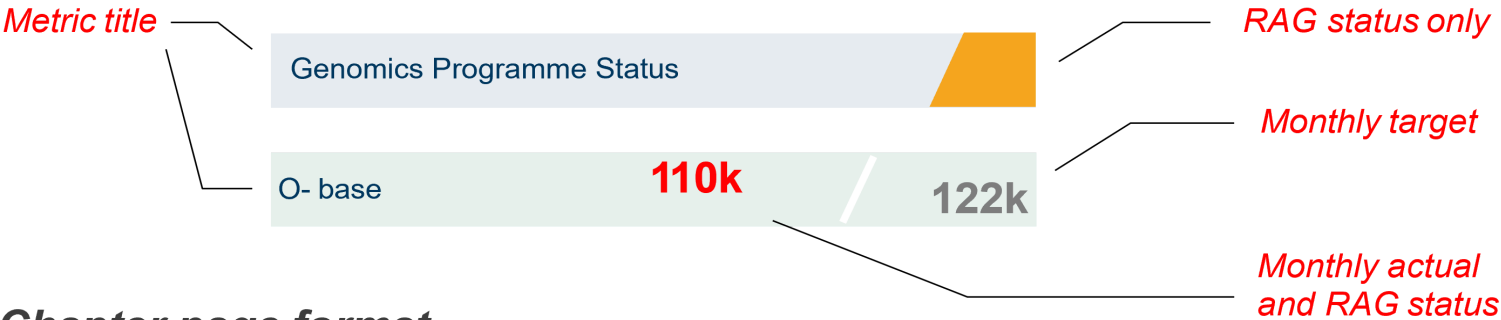
## December 2025

1.How to Read this Report	2
2.Executive Summary- performance insights	3-4
3.Performance Summary against strategic targets	5
4.Grow and diversify our donor base	6-7
5.Modernise our operations	8-9
6.Invest in people and culture	10-11
7.Drive innovation	12
8.Collaborate with partners	13-14
9.Risk Summary	15-16

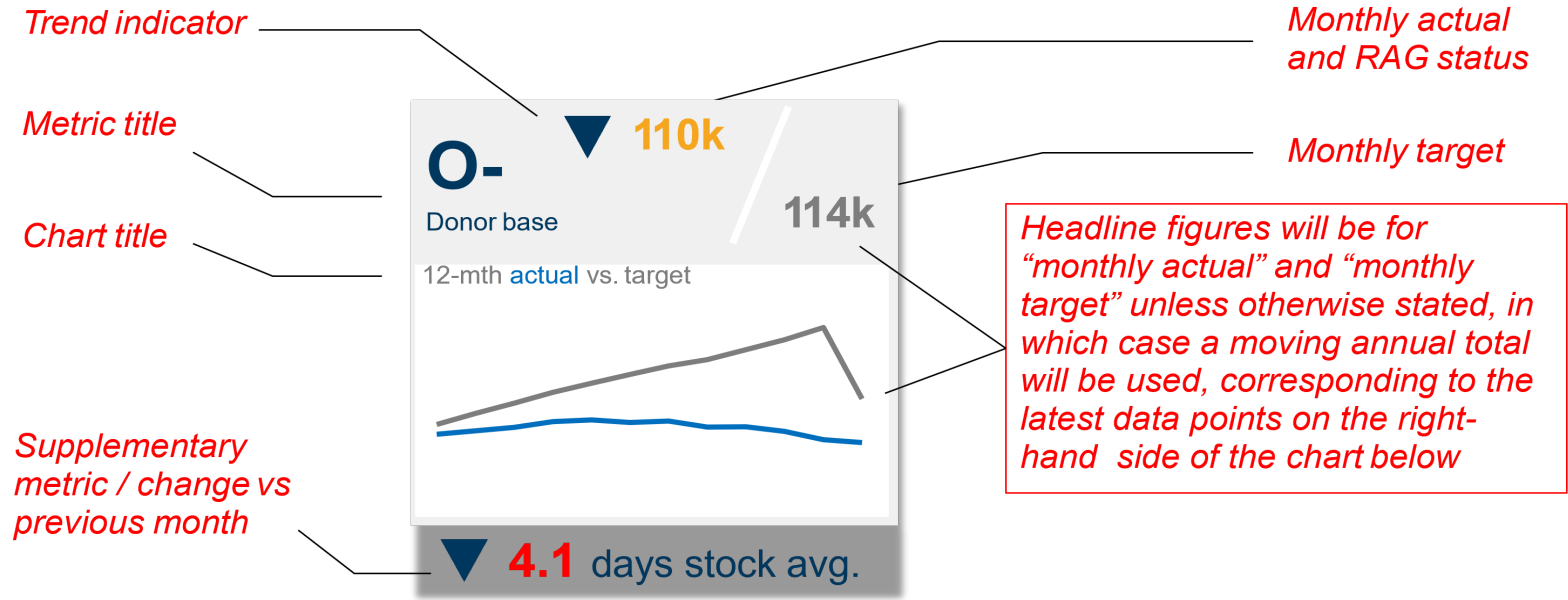


# How to read this report

## 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.
- Metrics measuring our progress in tackling Health Inequalities are marked with the icon
- Charts marked 12-mth actual vs projected target display April 2025 to March 2026 data
- All other charts display rolling 12 months data ending the current reporting month.

# Executive Summary (1/2) - December 2025

## Performance Insights

### 1. Organ donor performance remains green YTD but the gains in transplant activity experienced in the first half of 2025/26 have started to erode due to a drop in consent rates across all categories.

We are currently 6 deceased donors ahead of YTD target and 11 transplants behind target. We are one living donor transplant ahead of target, resulting in a deficit of 10 transplants overall YTD (deceased and living). Q3 is usually a high activity quarter, and seasonal targets were set accordingly. In Q3 2025/26 we achieved the equivalent number of deceased donors as Q2, albeit with a slightly improved proportion of deceased donors after brain death (DBD) due to a welcome increase in the neurological death testing rate. The public's diminishing support for organ donation remains a huge challenge and actions continue to address falling consent rates across all categories of donors. Despite approaching 33 more families than expected in Q3, consent was gained on 31 fewer occasions than anticipated. Of particular concern is the increasing volume of unsupported donation decisions for donors registered on the ODR. There were double the number of unsupported opt-in cases in Q3 than Q2, resulting in the opt-in consent rate falling from 90% to 83%. At the same time, consent for patients meeting the deemed criteria continues to be a major challenge, with only 40% of families supporting the deemed legislation in Q3.

**Back to Green Plan:** Although deceased donor numbers remain positive this year, we are continuing targeted actions to recover consent and authorisation rates following last year's decline and mitigate the decrease in the size of the eligible donor pool. Work is underway to implement recommendations from the Organ Donation Joint Working Group, including development of a refreshed Marketing and Communications strategy, enhanced focus on family conversations, and increasing neurological death testing. In parallel, we are progressing the second year of the two-year, 10-point action plan led by the IMPACT group following the NBTA/NHSBT conference, aimed at improving engagement and consent among minority ethnic communities through faith-based messaging and collaborative outreach.

### 2. Overall red cell stocks increased in December, ending the month at 8.9 days of stock (DoS) (+0.6 DoS from November) and remaining above the >5.5 DoS target. O Neg and B Neg Stocks both showed overall improvement in month, albeit still under target (5.5 DoS) at the end of the month ( O Neg 5.1 DoS and B Neg 3.8 DoS).

In December, overall stock levels averaged 8.9 Days of Supply (+1.1 vs November), reflecting an improved position driven by lower than planned demand and targeted interventions such as collection caps, which increased bookable slots for priority donors (O Neg, B Neg, Ro). Whole blood collection was 121,282 units (+7.2% vs November), maintaining collection to requirement at c 98%. Blood donation teams deployed over 100% of planned capacity, with 224.5k appointments available through December. Operational metrics improved, with short-notice cancellations falling from 3.8% last month to 2.8%, and deferrals averaging 11.2% (-0.7 pp), including low haemoglobin at 3.9% (-0.3 pp vs last month and -8.4 pp vs June 2025).

**Back to Green Plan:** BOLT (Blood Operations Leadership Team) continues to monitor these pressures daily and is working to implement additional interventions across all areas of the supply chain to support recovery of O Neg and B Neg stocks, improve session fill rates, and build resilience over the winter months.

### 3. The Blood Product donor base, O Neg donor base and Ro donor base all improved in December, albeit remaining below year to date targets. The plasma donor base declined further.

The Blood Product donor base increased in December (+3,181 to 800,016 donors overall). The Whole blood donor base was the biggest contributor to this growth, with an additional 3.3k donors, primarily driven by reactivated donors (16,477). The O Neg donor base (+490) now sits at c.107.5k although still behind its target of 116.7k. B Neg saw an additional 120 donors finishing the year with 19,990 donors. The Black Heritage Donor Base increased to 20,938 (+291), whilst the Ro base also rose by 342 donors to 27,320, albeit both remain below plan. The source plasma donor base decreased to 10,813 (-86) due to donor attrition, reduced capacity in Reading, and weakness in new donor numbers.

**Back to Green Plan:** January traditionally represents an opportunistic time to connect with the public, tying in with themes of new years resolutions and generosity. Our campaign 'Giving Types, blood is needed every day' will continue to run throughout the new year and will include several direct to donor messages to tap into this spirit. These include a partnership with Radio 1 Xtra for coverage and an interview, a 2025 wrapped edition of the Donor Magazine and the second episode of 'Love is in the Blood' (partnership with channel 4). Additionally, emails will be sent to pre lapsing and typed enrolled O Neg and B Neg pre lapsing donors to help continue the upward trend of these groups. The priority lists also continue to be used as a means of creating more booking routes for these donors.

# Executive Summary (2/2) - December 2025

## Performance Insights

**4. YTD TES income remains ahead of target at £19.45m (+0.3%), however December sales income 6% (-£134k) behind target with only Serum Eyedrops being positive to target. Improved rates of cornea donation continued through Xmas and New Year.**

Ocular income was behind the financial target by 18.3% in month (£154.9k) due to lower demand over the Christmas/New Year period, exacerbated by the doctors strike in England. Supply side, Ocular donation rates in month averaged 8 donors a day, down from 8.6 in November, with ocular donors reaching 247 vs 258 in November. The SitRep continued through the Christmas period and continued high donation rates accompanied by low issues over Xmas, resulted in cornea stocks increasing to 378 (target of 300) by the end of December (up on 365 in November). Consequently, the cap on the number of corneas issued a week has been lifted to 140 for the start of January and is set at 120 for the following two weeks.

**Back to Green Plan:** A workshop was held in September 2025 and a plan created to improve rates of ocular donation at pace, which included, implementing a daily SitRep call to resolve operational issues in real-time and re- scoping the iOrbit project. This work had an immediate impact. Challenging all blockers to donation and improving the cross departmental working for the cornea pathway, has resulted in an increase in corneas donated, improved stock levels with the cap on the number of corneas issued per week being relaxed through December and lifted to 140 for the start of January.

**5. Therapeutic Apheresis Service (TAS) activity, Clinical Biotechnology Centre (CBC), and Advanced Therapy Unit (ATU) income are all forecast to finish behind plan for 2025/26, however, each is expected to match/deliver growth compared to last year.**

TAS procedure volumes, CBC income and ATU income are all forecast to finish 2025/26 behind plan but ahead of last year's performance. TAS procedure volumes are forecast at 13.7k (up 5.3% YoY) versus a 14.4k target (c.5% shortfall), with lower cell collections due to new Myeloma and Lymphoma treatments offset by strong red cell exchange and new service launches. CBC income is forecast at £3.1m (0% YoY) versus £5.50m (c.44% shortfall), mainly due to the removal of viral vector and plasmid projects from forecast and changes in customer requirements. ATU income is forecast at £1.47m (0% YoY) versus £2.40m (c.39% shortfall), driven by delayed validation runs and uncertainty following Galapagos' potential exit from cell therapy, alongside other removed prospects.

**Back to Green Plan:** In the short term, the Clinical Services (CS) SMT are mitigating the financial impact of these KPIs being below plan this year through better than plan financial performance in Pathology; under spending on our Transformation Portfolio; and under spending of CS support functions. This results in a forecast that is just ahead (£0.2m) of budget for CS overall. TAS activity remains below plan but ahead of last year and broadly aligned with strategy, with growth expected to continue at a slower pace, supported by the Med Tech funding initiative and DHSC/NHSBT efforts to address apheresis capacity. For ATU and CBC, the Boston Consulting Group review emphasised the need to invest in additional commercial roles and expertise to drive future growth, with a business case in development.

**6. Most People & Culture metrics continue to report at green status maintaining and surpassing previous high levels of performance. Persistent challenges remain in three key metrics.**

PDPR compliance improved this month to 93% (+1pp), its highest recorded level, however, remains below 95% target. December's harm incident rate increased to 7.5 reports/1000 employees from 5.5 in November, driven by incidences of injury from sharp objects and slip and trip incidents across Blood Supply Chain (+15). Sickness absence across NHSBT increased by 0.4pp to 5.8% vs 5% target.

**Back to Green Plan:** With 56.3% of absence being long term (+4.8pp), activity to reduce absence is focussed on active management of long-term sickness on a case-by-case basis. Fluctuations in Harm incidence rate between months are to be expected. HSW monitor activity for at least four months to distinguish clear trends from normal fluctuations.

**7. Quarter 2 Arms Length Body (ALB) reporting revised downwards from Amber/Green, to Amber/Red by DHSC. Q3 ALB reporting submitted w/c 12 January.**

Q2 ALB performance originally confirmed as Amber/Green - successful delivery is probable, but there are risks/obstacles to overcome. This based on four of five metrics being on track (Green) and one metric (Size of Ro Donor Base) off track (Red). Revised downwards by DHSC to Amber/Red - successful delivery is possible, but unlikely to happen without significant action to address risks/obstacles.



Performance summary against most important strategic targets

🌱 <b>Grow and diversify our donor base</b> to meet clinical demand and reduce health inequalities			🔄 <b>Modernise our operations</b> to improve safety, resilience and efficiency		
Size of Active Blood Product Donor Base	800K ↑ / 835K		Active Plasma Donor Base	10,813 ↓ / 13,850	
Size of Active Ro Blood Donor Base	27.3K ↑ / 28.3K		Plasma Collected (Sourced & Recovered), Litres YTD	250K ↑ / 180K	
Size of Active O- Blood Donor Base <sup>⚖️</sup>	108K ↑ / 117K		No. of Organ Transplants Living & Deceased <sup>⚖️</sup>	4,700 ↓ / 4,688	
Ro Supply Demand Gap YTD <sup>⚖️</sup>	52% ↓ / 44%		Organ Consent Rate YTD <sup>⚖️</sup>	58% ↓ / 62%	
Short Notice cancellation of Appointments	2.8% ↓ / 4.5%		Corneas Issued for Transplant YTD	3,218 ↑ / 3,620	
👥 <b>Invest in people and culture</b> to ensure a high performing, inclusive organisation			💡 <b>Drive Innovation</b> to improve patient outcomes		
% Minority Ethnic Employees at Band 8A-8C	16.0% ↓ / — — —		No. of Transplants Per Deceased Organ Donor YTD	2.53 ↓ / 2.56	
Employee Turnover	10.4% ↓ / 12%		Component Development Clinical Trials  (SWIFT) Whole Blood-Project Complete <div></div> <div>Universal Platelets &amp; Universal Plasma</div> <div>→</div> <div></div> <div>Dried Plasma</div> <div>→</div> <div></div> <div>RESTORE</div> <div>→</div> <div></div>		
Recruitment Time to Offer (weeks)	7.6 ↓ / 11.0				
Vacancy Fill Rate	92% ↑ / 88%				
Sickness Absence Rate	5.8% ↑ / 5.0%				
Harm Incident Rate NHSBT (Incident rate per 1000 employees)	7.5 ↑ / 7.1				
			🤝 <b>Collaborate with partners</b> to develop and scale new services for the NHS		
			Clinical Biotechnology Centre (CBC) Income YTD £	2.1M ↑ / 3.3M	
			Advanced Therapies Unit Income YTD £	0.97M ↑ / 1.74M	
			No. Of Therapeutic Apheresis Procedures YTD	10,171 ↑ / 10,685	
			Tissues and Eye Services (TES) Income	19.5M ↑ / 19.4M	
			Transfusion 2024 Programme Status	→ <div></div>	
			*The 5 Metrics highlighted are reported to DHSC Quarterly*		

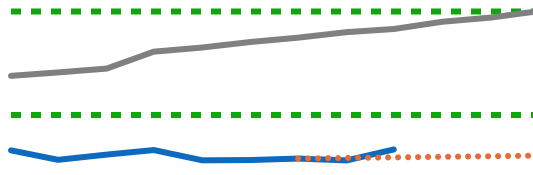


# Grow and diversify our donor base to meet clinical demand and reduce health inequalities

## Size of Active Blood Product Donor Base

800K / 835K

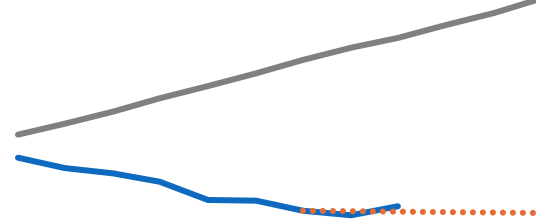
12-mth MAT Actual vs MAT Tgt. vs Tgt. Range vs Forecast



## Active O- Donor Base

107.5K / 116.7K

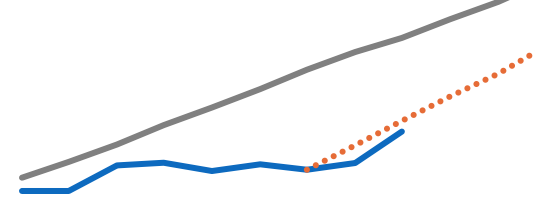
12-mth MAT Actual vs MAT Target vs Forecast



## Active Ro Donor Base

27.3K / 28.3K

12-mth MAT Actual vs MAT Target vs Forecast



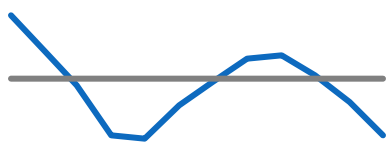
## Insight & Commentary Blood Donor Base

- The Blood Product donor base increased in December (+3,181 to 800,016 donors overall). The Whole blood donor base was the biggest contributor to this growth, with an additional 3.3k donors, primarily driven by reactivated donors (16,477).
- All blood groups saw a rise in the Donor Base in December; the first time all groups have seen an uplift in the same month since July 2023. Notably O Neg and O Pos which have both been declining in 2025 both reversed their trend. O Neg donors now sit at 107.5k although still behind its target of 116.7k. B Neg saw an additional 120 donors finishing the year with 19,990 donors.
- The Black Heritage Donor Base increased to 20,938 (+291), the Ro base also rose by 342 donors to 27,320, albeit both remain below plan.
- Additional sessions were put on early in the month to mitigate winter challenges and we saw over 33k attendees w/c 15th December. New Donors stood at 11,448 donors in December, up by 246 since November, but more notably up by over 700 since last December.
- The priority booking lists remained open in December, booking 1.4k appointments (up from 1.2k in November) for O-, B- and Ro donors contributing to the growth of these bases.

## Short Notice Cancellation of Appointments

2.8% / 4.5%

12-mth Actual vs Target



## Red Cells Collected

122K / 124K

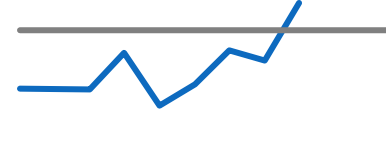
12-mth Actual vs Target



## Ro Units Collected

4,702 / 4,493

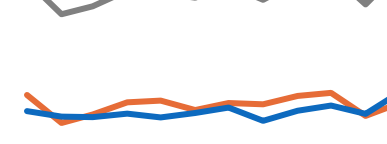
12-mth Actual vs Projected Target



## Ro Supply Demand Gap YTD

52% / 44%

12-mth Issued vs Requested vs Ro Gap



## Active Plasma Donor Base

10.8K / 13.9K

12-mth Actual vs Projected Target



## Plasma Collections Source & Recovered YTD

250K / 180K

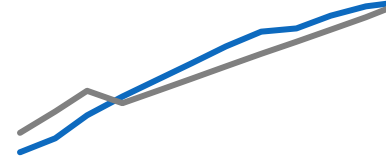
12-mth Actual vs Target



## NHS Stem Cell Donor Registry (SCDR)

137K / 137K

12-mth Actual vs Target



## %ME of New NHS SCDR Fit Panel

16.9% / 20%

12-mth Actual vs Target



## Plasma

- Supply remains ahead of schedule for FY 25/26, with 353 kilolitres dispatched across 32 shipments against the 450 kilolitre annual target. Four future shipments are validated, ready for dispatch, and an extra shipment is planned in February to complete dispatch of all remaining launch stock.
- November collection was 28,684 litres vs 20,000-litre target (+43%), strengthening medicine production and supporting patient treatment.
- The source plasma donor base decreased to 10,813 (-86) due to donor attrition, reduced capacity in Reading, and weakness in new donor numbers.

## Back to Green Plan:

A recovery plan is being implemented to increase the pool of available donors for recruitment, expand capacity at Reading, and improve re-booking and retention of regular donors. A change in appointment grids and session flow will be implemented in March 2026, which will provide more appointments at more convenient times for donors, including lunchtimes.



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

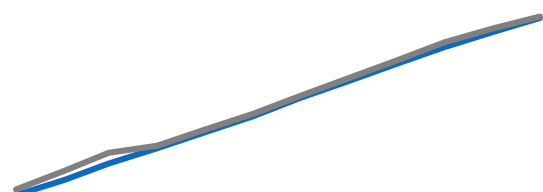


Blood and Transplant

**Organ Donor Register**  
Opt in- Total (Million)

**28.717** / **28.72**

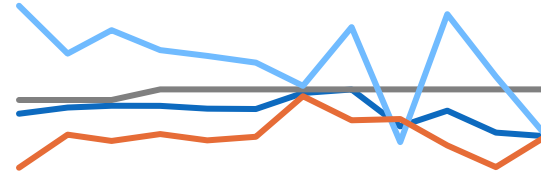
12-mth **Actual** vs Target



**Organ Consent YTD**

**58%** / **62%**

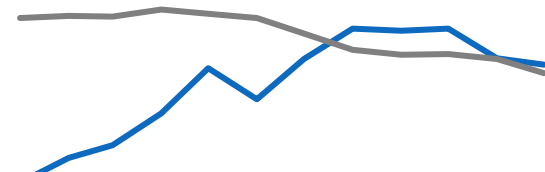
12-mth **Actual**, **DCD Consent** & **DBD Consent** vs Target



**Living & Deceased Organ Donor Transplants MAT**

**4,700** / **4,688**

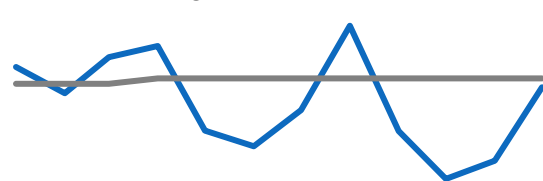
12-mth **MAT Actual** vs Target



**ME Organ Consent Rate YTD**

**27%** / **34%**

12-mth **Actual** vs Target



**ME Recipients Of Organ Transplants YTD**

**25.6%** / **26%**

12-mth **Actual** vs Target



**Corneas Issued For Transplant YTD**

**3,218** / **3,620**

12-mth **MAT Actual** vs Target



**Net Promoter Score**

**88.6** / **87.0**

12-mth **Actual** vs Target



## Pathology

- **Screen 25k blood donors for extended types and additional antigens:** Screening is behind plan YTD (16.8k v 18.8k) due to a vacancy (now filled) and prioritising urgent RCI referrals earlier in the year. Testing levels exceeded target over the last 4 months (10.8k v 8.3k) aiming to catch-up before year-end.
- **Retest 20k STRIDES (Strategies to Improve Donor Experiences) donors to enable clinical use:** Below plan with 7.5k tested YTD v plan 15k. This is due to time taken to validate new liquid handling robots and staffing levels in Molecular Diagnostics. We have reprofiled our testing volume forecast with 12k forecast this year and 11k-13k next year in 2026/27
- **NHS Stem Cell Donor Registry (SCDR)** NHSBT Fit panel volume is 0.1% above target, growing by 11.4k YTD. Volumes have stayed above plan following acceptance of female Caucasian donors, however minority ethnic recruitment is below target at 16.7% vs 20%. Stem cell provision to UK patients reached 5.6% vs 7% plan at the end of Q3, with UK-to-UK supply from the Aligned Registries at 24% vs 45% ambition, constrained by donor availability and collection capacity.

**Back to Green Plan:** Plans include recruiting ME donors at blood donation community events and buccal swab campaigns.

## Insight & Commentary

### Organs

- Organ donor metrics remain green YTD, but the gains in transplant activity experienced at the start of 25/26 have started to erode.
- The public's diminishing support for organ donation remains a huge challenge and actions continue accordingly. Despite approaching 33 more eligible donor families in Q3 than anticipated, consent was gained on 31 fewer occasions than planned.
- The DBD consent rate decreased in-month to 53%, while the DCD rate increased to 53%. Of particular concern is the volume of unsupported opt-ins for eligible donors. There were double the number of unsupported opt-in cases in Q3 than Q2
- Consent for patients meeting the deemed criteria continues to be a major challenge, with only 40% of families supporting the deemed legislation in Q3.
- The consent rate for ethnic minority patients improved to c33% in month having been c15% early in Q3. This is an ongoing challenge for DBD and DCD donation.
- Living donor transplant activity is currently lower than expected partly due to an increased number of collapses and non-proceeding transplants in the latest UK Living Kidney Sharing Scheme quarterly matching run. Work is underway with the living donor teams across the UK to determine why.
- The adult living liver proctor program continues to perform well and the liver transplant module of the Enhanced Recovery After Surgery (ERAS) program was released as planned in December; the largest module in the ERAS in transplantation program and the culmination of two years development

### Ocular

- Ocular donation rate in month was an average 8 donors a day, down from the 8.6 in November. In December ocular donors totalled 247 vs 258 in November. There were low donations over the festive period however donation rates have improved since the start of January. The daily SitRep and continuation of the iOrbit project have increased donation rates over previous months.
- Due to the continued high donation level ocular stock levels accompanied by low issues over Xmas, stock levels were at 378 (target of 300) by the end of December (up on 365 in November). The cap on the number of corneas issued a week has been lifted to 140 for the start of January and is set at 120 for the following two weeks.



## Modernise our operations to improve safety, resilience and efficiency



Blood and Transplant

### Overall Critical Infrastructure (CI) Availability

99.84%

99.95%

12-mth Actual vs Target



### Overdue Major Incidents

4

12-mth Actual



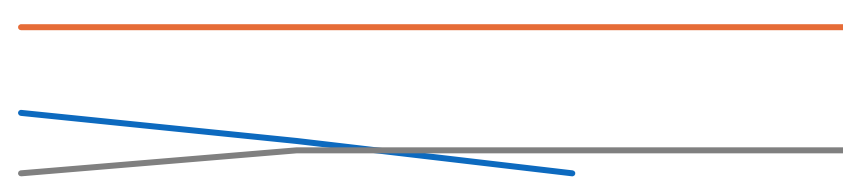
### Scope 1&2 CO<sub>2</sub> Emissions vs 2020/21 baseline tCO<sub>2</sub>

9,400

10,000

Full Year forecast at end Q2 25/26

12-mth Actual vs Target vs 2020/21 Baseline



### Patient Safety Incident Investigation (PSII)

0

12-mth Actual



### Cost Efficiency Savings Q2

16.6M

16.6M

Full Year forecast at end Q2 25/26

Next report at end of Q3 25/26

### External Major Incidents

0

12-mth Actual



### % Commercial Pipeline Savings Q3

10%

2%

Performance at end Q3 25/26

Next report at end of Q4 25/26

### Insight & Commentary

#### Quality

- There were 4 overdue major incidents in December 2025, with no incidents greater than 3 days overdue.
- The reduction over time demonstrates a sustained improvement in managing overdue incidents, using a collaborative risk-based approach with operational leads.

#### Critical Infrastructure

- Critical Infrastructure did not meet availability target in December.
- Pulse experienced a period of unavailability due to an internal processing issue. The impact to business operations was minimal, and the service was stabilised quickly.
- Separately, TMS was affected by a supplier-led outage within their cloud platform. The service was restored without internal recovery actions, and we are currently awaiting a full root cause analysis from the supplier.
- While both incidents were short in duration, they contributed to the overall availability position for the month.
- We continue to work with both suppliers and internal teams to strengthen monitoring, improve change oversight, and ensure robust follow-up through Problem Management.

#### Progress Towards Net Zero

- Q2 2025/26 performance forecasts full year scope 1&2 emissions of c.9,400 tCO<sub>2</sub>e vs target of 10,000.
  - The next emissions update will be in January 2026 reporting.
- Back to Green Plan:** A new Net Zero strategy focussed on managing Scope 1, 2 & 3 emissions is due for publication.

#### Commercial Pipeline Savings

- Year to end Q3 2025/26 contract life savings £28.4m (10%).





# Modernise our operations to improve safety, resilience and efficiency



## Blood and Transplant

### Blood Stock Stability

Average Days of Stock  
Actual Days of Stock



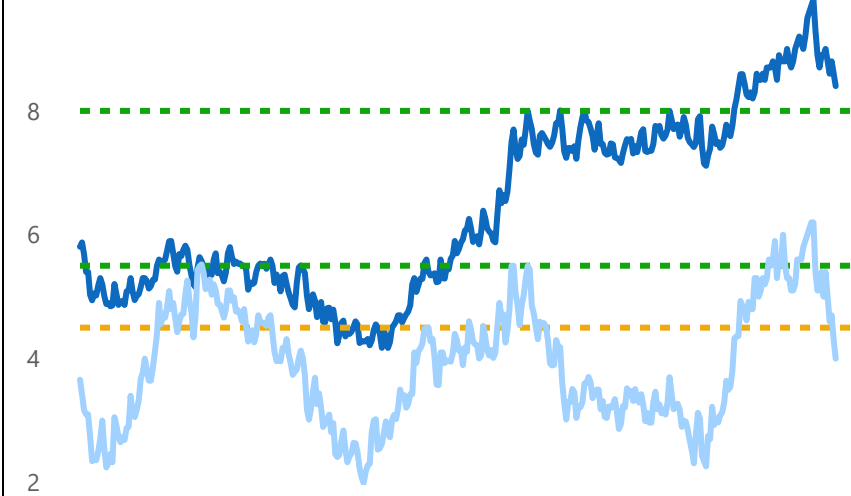
8.9

8.9

5.5

to 8.0

12-mth All Group Actual, O Neg Actual vs 4.5-day alert and 5.5-8.0 Target Range



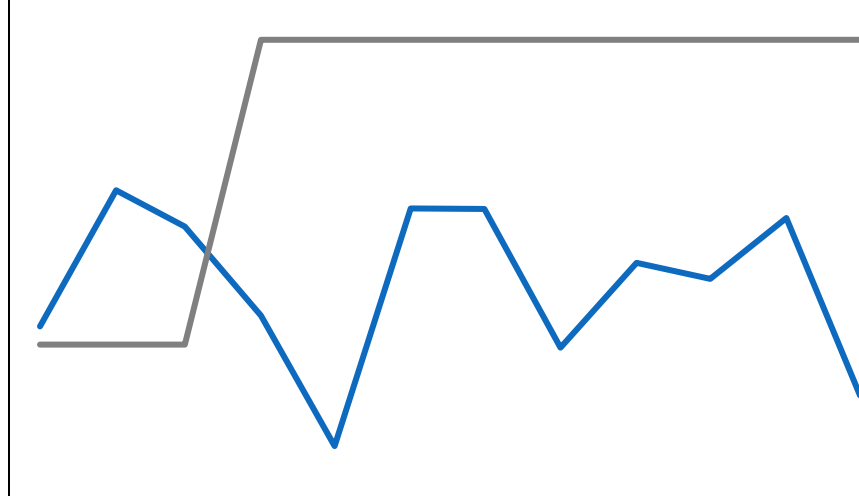
### On Time in Full incl. Ro (YTD)



96.4%

96.9%

12-mth Actual vs Target



### Insight & Commentary

#### Blood Supply

- Overall stock levels continued to increase during December 2025, averaging 8.9 Days of Stock (DoS) for the month (+1.1 DoS from November), and standing at 8.9 DoS at the end of the month (+0.6).
- Despite a reduced programme and lower than normal booking levels due to the Christmas bank holiday period, performance at a blood group level remained strong, with O Neg and B Neg stocks showing improved resilience. O Neg stocks averaged 5.5 DoS (+1.8) during the month, sitting at 5.1 by month-end. B Neg stocks averaged 4.5 DoS (+0.5), ending the month at 3.8 DoS and below target.
- Whole blood collection to plan was 97.9%, however collection volumes (driven by a planned pre-Christmas stock build) were 7.2pp higher than in November.
- During December, we were able to cap collections of some blood groups (O pos and A Pos) to focus appointments and collections on B Neg, O Neg and Ro donors.
- Ro collections were the strongest seen in the past year, with a 10.3% increase in collection volume compared to the previous month. Increases were seen for both new Ro donors (+8.6%) and black heritage donors (+16.6%).
- Ro demand increased by 13% (+850 units) from the previous month and whilst increased collections closed the supply/demand gap in December to ca. 47%, the proportion of Ro substitutions accounted for by O Neg and B Neg increased
- On Time In Full performance decreased from November to 96.2% (-0.3pp) as a result of both a drop in 'In Full' performance (-0.1%) and 'On Time' performance (-0.2%). The number of OTIF failures accounted for by Ro requests reduced by -1.7%, to 75.6% of all fails.
- Whilst 15 teams continued to operate at reduced capacity (resulting in a loss of c.1,600 appointments per week), Blood Donation teams were able to continue the recent trend of deploying more appointments than planned, with 224.5k appointments available through December. 3 teams reverted back to their full capacity during the month, with 3 more expected to follow in January 2026.
- Overall deferral rates were 0.7pp lower than November, averaging 11.2% across the month. Low Hb deferrals rates continued to improve as a result of Venous Hemocue implementation and stood at 3.9% (-0.3pp). Donor journey times were also slightly reduced to 36.6 mins (-0.6 mins).

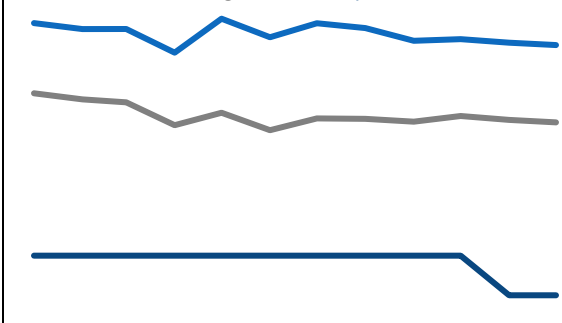
### Manufacturing Productivity

Annualised YTD

10,460

9,609

Ann.YTD Actual vs Target vs EBA Top Quartile



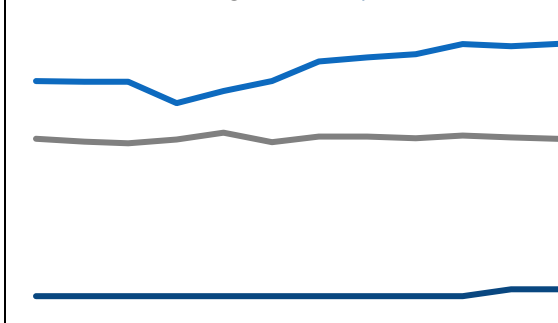
### Testing Productivity

Annualised YTD

31,988

26,017

Ann.YTD Actual vs Target vs EBA Top Quartile



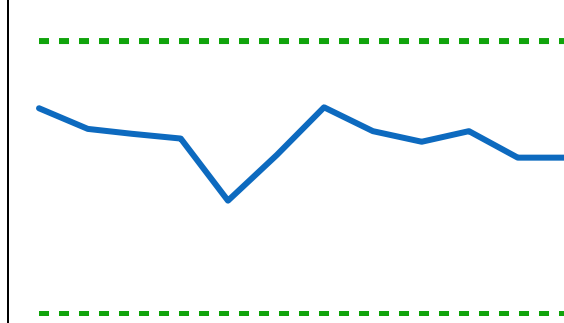
### Collection Productivity

Annualised YTD

1,139

1,080  
to 1,183

Ann.YTD Actual vs EBA 75% Quartile Limits





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



Blood and Transplant

## Time to Offer Weeks

7.6 / 11.0

12-mth Actual vs Target



## ME Employees % Band 8A-8C

16.0% / --

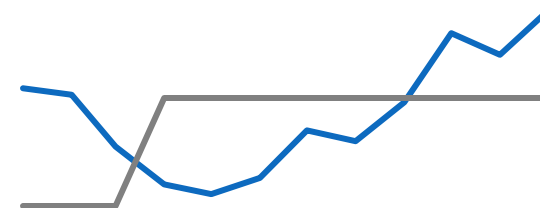
12-mth Actual vs Target



## Sickness Absence

5.8% / 5.0%

12-mth Actual vs Target



## Vacancy Fill Rate %

92% / 88%

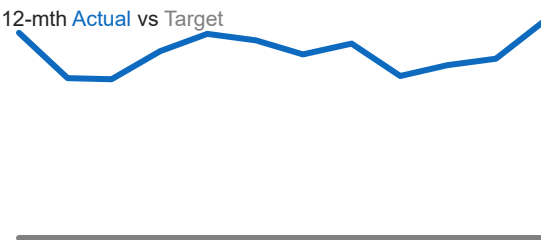
12-mth Actual vs Target



## Mandatory Training Compliance

97% / 95%

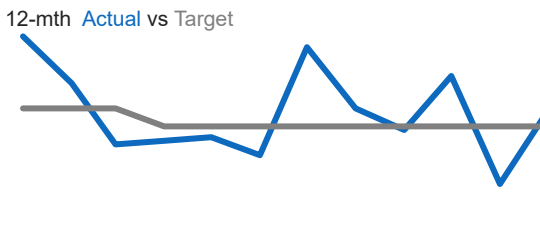
12-mth Actual vs Target



## Harm Incident Rate NHSBT

7.5 / 7.1

12-mth Actual vs Target



## Employee Turnover %

10.4% / 12%

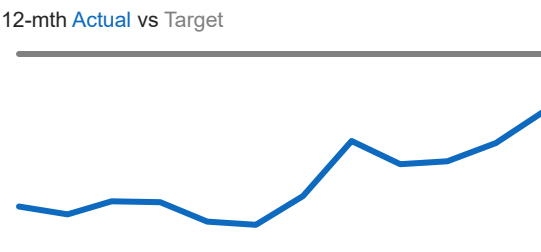
12-mth Actual vs Target



## PDPR Completion

93% / 95%

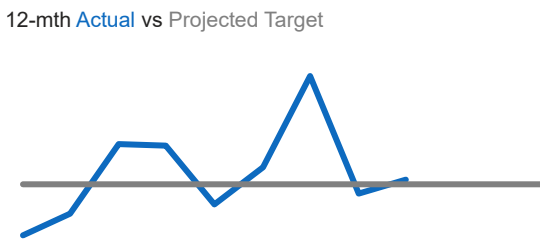
12-mth Actual vs Target



## Near Miss Incident Rate

15.0 / 14.7

12-mth Actual vs Projected Target



## Insight & Commentary

- Recruitment: Time to offer achieved its lowest lowest recorded level to date, with 9 consecutive months below 11 weeks target. Vacancy fill rate also improved in month, exceeding the KPI target of 88% for 11 consecutive months.
- To support longer-term operational resilience, Talent & Recruitment (TAR) continues to focus on improving vacancy demand planning, ensuring sufficient resource and resilience to deliver the service and identifying opportunities to enhance productivity.
- Employee Turnover decreased by 0.3pp to 10.4% in December, its lowest level since before the Covid-19 pandemic. This overall percentage masks directorate 'hot spots' where employee turnover exceeds KPI target.
- PDPR Compliance improved this month to 93% (+1pp), its highest recorded level, however remains below the 95% target.

**Back to Green Plan:** We are continuing to see a steady increase in PDPR compliance, however, it is still below the organisational target. We have now commenced a review to evaluate our new approach to PDPRs considering both the impact it has on PDPR compliance as well as the overall experience and quality of conversations. Through this we are looking to identify other factors that may be affecting PDPR compliance and look to make recommendations for further improvements where possible.

- Sickness absence across NHSBT increased by 0.4pp to 5.8% and above 5% target. The main reasons for sickness absence remain anxiety, stress and seasonal illness, with Cold, Cough and Flu absences increasing +5.1pp in December. 56.3% of all absence was long term (and 43.7% short term, a 4.8pp shift towards long term absence).

**Back to Green Plan:** With 56.3% of absence being long term (+4.8pp), activity to reduce absence is focused on active management of long-term sickness on a case-by-case basis.

- Decembers harm incident rate increased to 7.5 incident reports per 1000 employees from 5.5 in November, with Blood Supply, OTDT and Group Services missing target. Near Miss reporting improved to above target nationally but remained below target in all directorates except OTDT and Group Services.

**Back to Green Plan:** Fluctuations in Harm incidence rate between months are to be expected. HSW monitor activity for at least four months to distinguish clear trends from normal fluctuations.



## Component Development Clinical Trials

Whole Blood Use In Trauma Status (SWIFT) - Complete

Universal Plasma and Universal Platelets Status

Freeze Dried Plasma (MOD) Status

RESTORE Clinical Trial

No. of Organ Donor Transplants

Deceased Donors YTD

2,725

2,736

12-mth MAT Actual vs Target



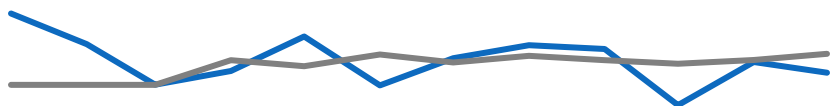
No. of Organ Transplants  
Per Deceased Donor

YTD

2.53

2.56

12-mth Actual vs Target



## Health Inequality & Patient Outcome Datasets

Health Inequality Reporting

Serum Eyedrop- Post Treatment Data Follow Up

Support The Implementation of Enhanced Recovery  
After Surgery (ERAS) in Transplantation  
for Living Donors

No. of Sickle Cell & Thalassemia  
Patients Genotyped

7,514

---

Target: 17,000 patients genotyped  
To Date: 12,343 samples received (excluding duplicates)  
8,933 samples accepted (43% of cohort)  
7,514 samples genotyped  
1,750 results issued

## TES Product Development

Alternative Amnion Product

Irradiated amnion is amber due to limited access to whole  
amnions for non-clinical use

Rectus Fascia Product

Fascial covering of external oblique, internal oblique and transverse  
abdominal muscles. Tendon validation commenced.

## Insight & Commentary

### Component development clinical trials

- SWIFT:** 10 trial sites (air ambulances) were opened, with recruitment of 900 patients completed in September 2024. The project has now completed, 15 months after the original end date and is now in the write-up and dissemination stage
- Universal Plasma & Platelets:** A £1.6M R&D investment approved in February 2023 is progressing toward a future clinical trial, despite initial delays due to supplier withdrawal (driver of Amber status). The new technology has been selected and meetings with the supplier are ongoing. Path to Green is dependent on a contract being agreed, with talks at an advanced stage.
- Dried Plasma:** Project/lab assessment is ongoing; one-year TAT storage units have been rehydrated and testing is underway; the next stage of cryoprecipitate validation has commenced.
- RESTORE:** Recruitment complete with 22 IMP doses administered. A 2-month no-cost extension to February 2026 approved for study completion. Participant follow up ongoing.

### Genomics Programme

- Overall RAG status Green, HaemMatch study remains Amber as preparation for clinical study continues. Ethics documentation submitted to Research Ethics Committee
- Our Future Health (OFH) recruitment:** 102,833 blood donors have consented to participate with 73,050 samples provided to date.
- HLA matched red cells pilot for kidney transplant patients:** Live in 3/24 hospital sites; 631 HLA selected red cells issued; 325 patients referred; 238 named patients transfused. Next hospital site agreed with roll-out continuing across 2026/27 (+12) and 2027/28 (+7).
- NHSE funded project to genotype all sickle cell and thalassemia patients:** MHRA EUA extension approved to Feb 2026. Free of charge testing to hospitals in place until end March 2026. Contract extension in progress with NHSE to end December 2026.

### Organ Transplant & Utilisation

- Organ utilisation fell in December to 2.49 transplants per donor (2.53 YTD) against the 2.56 target.



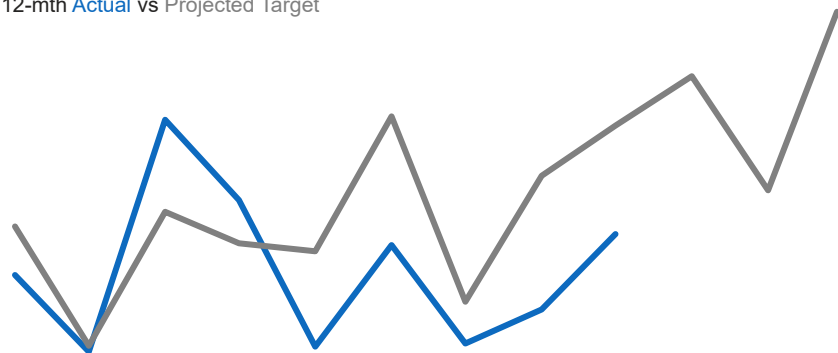
### Transfusion Transformation Programme Status

**Clinical Biotechnology Centre (CBC) Income YTD £m**

2.10M

3.3M

12-mth Actual vs Projected Target

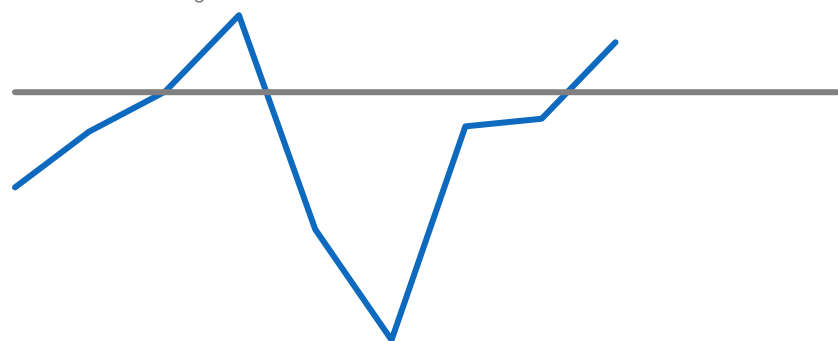


**NHSBT Provided UK Stem Cell Donors YTD (at end of Q2 25/26)**

5.6%

7%

12-mth Actual vs Target

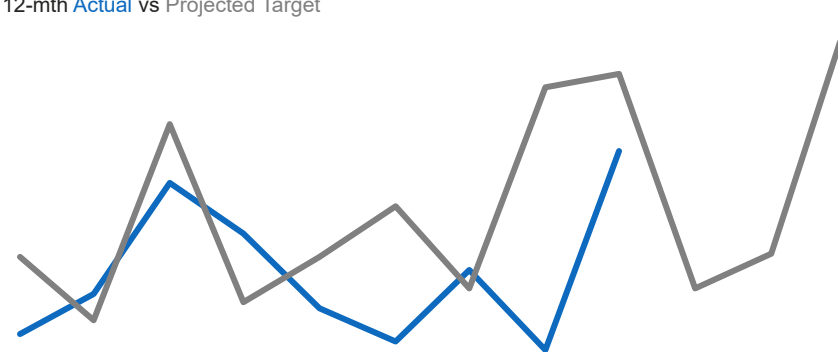


**Advanced Therapies Unit Income YTD £m**

0.97M

1.74M

12-mth Actual vs Projected Target

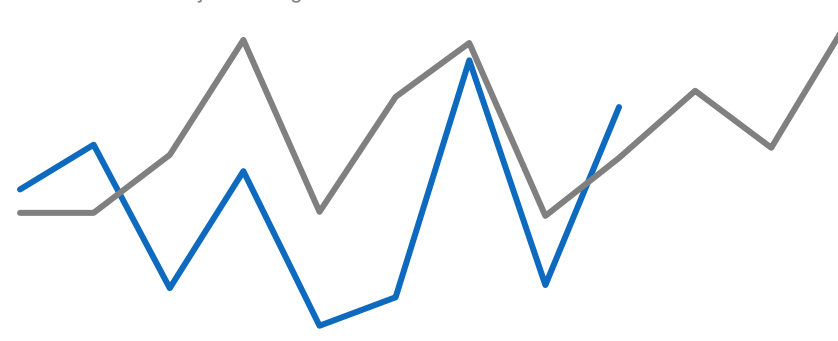


**Therapeutic Apheresis Services No. of Procedures YTD**

10,171

10,685

12-mth Actual vs Projected Target



### Insight & Commentary

#### Transfusion Transformation

Overall, the programme remains at Green RAG status.

- RCI Assist system now embedded in routine use with >4,000 accesses and 500 hospital users since launch in May. A Project closure report has been approved.
- Fetal RHD electronic requesting now deployed at 77 hospitals with 43 actively referring (15% of samples). Further configuration and testing is being carried out with several hospitals, Pathology has a target of reaching 4% of Hospital orders ordered/referred electronically by the end of 2025/26, with the actual at 2.69% (November 2025 data).
- Connection to the National Haemoglobinopathy Register remains Amber, with Phase 3 behind plan, pending developments to allow appropriate NHSBT staff access to NIHR patient clinical details.

#### Cellular Apheresis and Gene Therapies (CAGT)

- Therapeutic Apheresis Service (TAS):** Procedure volumes are 4.8% below plan YTD but 5.3% ahead of last year. Forecast is 13.7k versus 14.4k plan (+5.3% year-on-year). Red cell exchange activity is ahead of target and up on last year, with good progress made in delivery of new services supported by the Med Tech funding initiative. Cell collections are below plan due to hospitals using new treatments for Myeloma and Lymphoma. Plasma exchanges behind plan, being subject to a higher level of variation due to fluctuation in emergency referrals. Overall trends remain consistent with 2022 strategy estimates.
- Clinical Biotechnology Centre (CBC) Income** is £1.2m behind plan YTD; forecast £3.1m versus £5.5m plan and below last year £3.18m. The reduction reflects several prospects not materialising in year, including a viral vector project and associated plasmid work. The BCG review advised against focusing on viral vector manufacture given market competitiveness and NHSBT lack of track record. CBC continuing to pursue opportunities and has secured £2.1m from a UCL-led grant for viral vector and plasmid manufacturing from 2026/27.
- Advanced Therapy Unit (ATU) Income** is £0.77m behind plan; forecast £1.47m vs £2.40m plan, comparable with last year. Due to supplier (Galapagos) restructuring timing of validation runs to later in year, income received is later than planned, impacting full year forecasts. Galapagos has recently announced plans to close cell therapy side of their business, impacting plans for clinical trial manufacturing and a longer-term relationship.

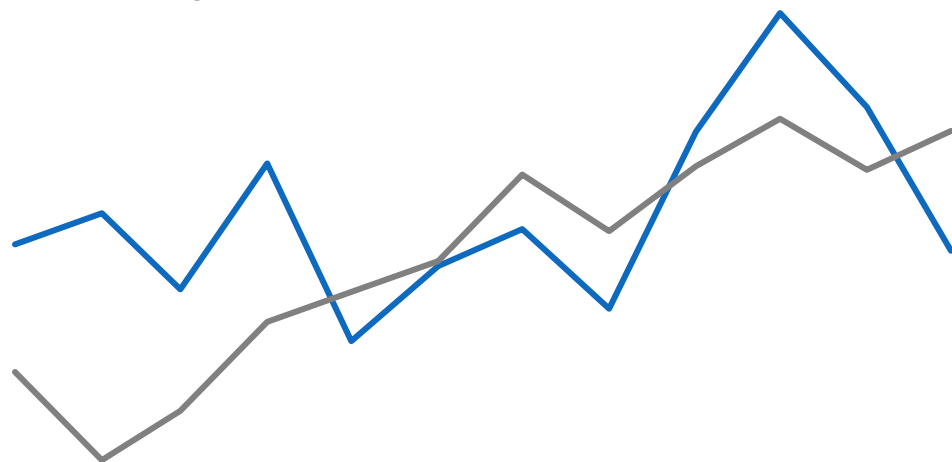


### Tissue & Eye Services (TES) Income YTD £m

19.5M

19.4M

12-mth Actual vs Target



### Insight & Commentary

#### TES Income

- The overall income position for December was 6% (£134k) behind target. The combined sales position was negative to plan by 6.3% with only Serum Eyedrop income ahead of target.

#### Tissue Income

- Tissue product income was negative to target by -£88k in month, with only Amnion (£4k), and Skin products (£24k) ahead of target in December.
- Bone donations remain behind target with only 25% being retrieved in month (10 donations in December vs target of 40).

#### Ocular income

- Ocular income was behind financial target by 18.3% in month (-£155k), due to the impact of the doctors' strike and low hospital demand for corneas through Xmas and New Year. Supply side, the ocular donation rate in month was an average 8 donors a day, down from the 8.6 in November, and the number of ocular donors totalled 247 (494 corneas donated). Despite lower donation rates through the Xmas holiday period, the daily SitRep and continuation of the iOrbit project have generated an overall improvement in donation rates over previous months, with donation rates rebounding since the start of January 2026.

**Back to Green Plan:** A workshop was held in September 2025 and a plan created to improve rates of ocular donation at pace, which included, implementing a daily SitRep call to resolve operational issues in real-time and re- scoping the iOrbit project. This work had an immediate impact. Challenging all blockers to donation and improving the cross departmental working for the cornea pathway, has resulted in an increase in corneas donated, improved stock levels with the cap on the number of corneas issued per week being relaxed through December and lifted to 140 for the start of January.

#### Heart Valves

- Cardiovascular sales were behind target by -£41k in month. The ruling requiring HHV8 (Testing) results on organ donors will mean a 12 month delay before certain valves can be sold. This may be having an impact on available valves for transplantation. There were 18 donations in December (target of 35), with only four pulmonary valves in stock and available for issue as of early January.

#### Serum Eyedrops

- Serum Eyedrops income was ahead of target by £103k in month. The programme issued 62 batches ahead of target (523 vs target of 461). The waiting list for new Serum Eyedrop patients has grown since November from 174 to 234 in December and is expected to grow further as there is no capacity to increase supply.



# Risk Summary (1/3)

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 23 / 23 Dec 2025	Clinical / Minimal	●																								
				1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25
P-02	Service Disruption / Director of Quality	19 Sept 2025 / 05 Jan 2026	Disruption / Minimal	●																								
				1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25
P-03	Service Disruption (Interruption of critical ICT) Chief Digital Officer	05 July 2024 / 09 Dec 2025	Disruption / Minimal	●																								
				1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25
P-04	Donor Numbers & Diversity / Director of Donor Experience	05 Sept 2025 / 12 Jan 2026	Operational / Minimal	●																								
				1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25
P-05	Finance/Chief Finance Officer	21 Aug 2024 / 08 Jan 2026	Finance / Open	●																								
				1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25

# Risk Summary (2/3)

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	People Staffing/ Chief People Officer	28 May 2024 / 12 Jan 2026	People / Open	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div> <div>●</div>																								
P-09	Regulatory Compliance / Director of Quality	10 Oct 2025 / 09 Jan 2026	Legal, Regulatory & Compliance / Cautious	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div> <div>●</div>																								
P-10	Pace & Scale of Transformational Change / Chief Finance Officer	07 Mar 2025 / 22 Dec 2025	Programme / Open	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div> <div>○</div> <div>●</div>																								
P-11	Corporate Governance / Director of Quality	25 June 2025 / 05 Jan 2026	Governance / Minimal	<div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div><div></div></div> <div>●</div>																								

## Risk Summary (3/3)

### Risk Summary - December 2025

#### Risk Limit

One Principal Risk remains recorded at the risk limit:

Principal Risk P-03, Loss of Critical IT:

- The residual score of this risk continues at  $5 \times 4 = 20$ . The contributory risk influencing this risk score is DDTS-08 Cyber Security. DDTS-08 was last assessed 13 January 2026.

#### Risk Movement

Principal risk P-10, Scale and Pace of Transformational Change has seen an increase to the residual risk score.

The residual risk score has increased from  $4 \times 3 = 12$  to  $3 \times 5 = 15$ , while remaining within the defined tolerance zone. This change reflects a shift in the risk profile: likelihood has increased, while impact has decreased. The adjustment is in recognition that the urgency on the type and pace of transformation delivery has increased.

#### Appetite Ranges

- 1 x Principal Risk recorded at the Risk Limit.
- 5 x Principal Risks recorded in the Judgement Zone.
- 3 x Principle Risks recorded in the Tolerance Range.
- 0 x Principal Risks recorded at Optimal Level.