

The background of the cover features a portrait of a young man with dark hair, wearing a dark blue zip-up jacket over a grey V-neck sweater. He is looking slightly to the right with a gentle smile. To his left is a green plant with long, lance-shaped leaves. The bottom of the image is framed by a blue wavy banner.

Strategic Plan 2017-2022

Saving and Improving Lives

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This summary document has been produced to share our priorities for the years ahead with our employees and stakeholders.

Front cover: *Amit, who receives regular blood transfusions as treatment for his blood disorder, Beta Thalassaemia Major.*

Focus on the future

Ian Trenholm, Chief Executive



Our ambition is to ensure that more people receive the organ transplants they desperately need, receive the right blood transfusions at the right time and get the best specialist support and products to save or improve their lives. People are still dying because of a lack of donors and it is our role to act with others to improve outcomes for patients.

Doing things better means more innovation, greater flexibility and a continued focus of living up to our values of providing a Caring, Expert and Quality service. It will also mean doing some things differently so that we can achieve even better outcomes. Our employees, donors and patients will experience change in the years ahead and we will need to work hard to explain why and how it is making things better.

Our investment in our IT and other infrastructure is all about being able to continue to deliver a safe and sustainable supply of blood, tissues, stem cells and organs to the

NHS long into the future as well as setting ourselves up to support the development of important future therapies such as regenerative medicine.

As our health system faces increasing pressures we have a duty to be as efficient as we possibly can so that the NHS has more resources to spend on frontline services to patients. Efficiency does not just mean 'cheap', it means looking to achieve value for money. We very much recognise that investing in our people, our equipment and our buildings is a necessary part of what we need to do to deliver a great experience for donors, which in turn ensures we can keep delivering for patients.

We have much to be proud of at NHS Blood and Transplant. We are a great organisation and great organisations are never complacent. By focusing on innovation and continuous improvement we can, and we will, save and improve more lives.

Our Ambition

To be the best organisation of our type in the world

Our Purpose

To save and improve lives

Our values

Caring about our donors, their families, our staff and the patients we serve.

Being **expert** in meeting the needs of our customers and patients.

Providing **quality** products, services and experiences for donors, staff and patients.

Three small words, one big difference.

Caring|Expert|Quality

Who we are:

NHS Blood and Transplant is a Special Health Authority responsible for 'saving and improving lives' by providing a safe, reliable and efficient supply of blood components, stem cells and diagnostic services to health care providers in England and Scotland, and organs and tissues across the UK.

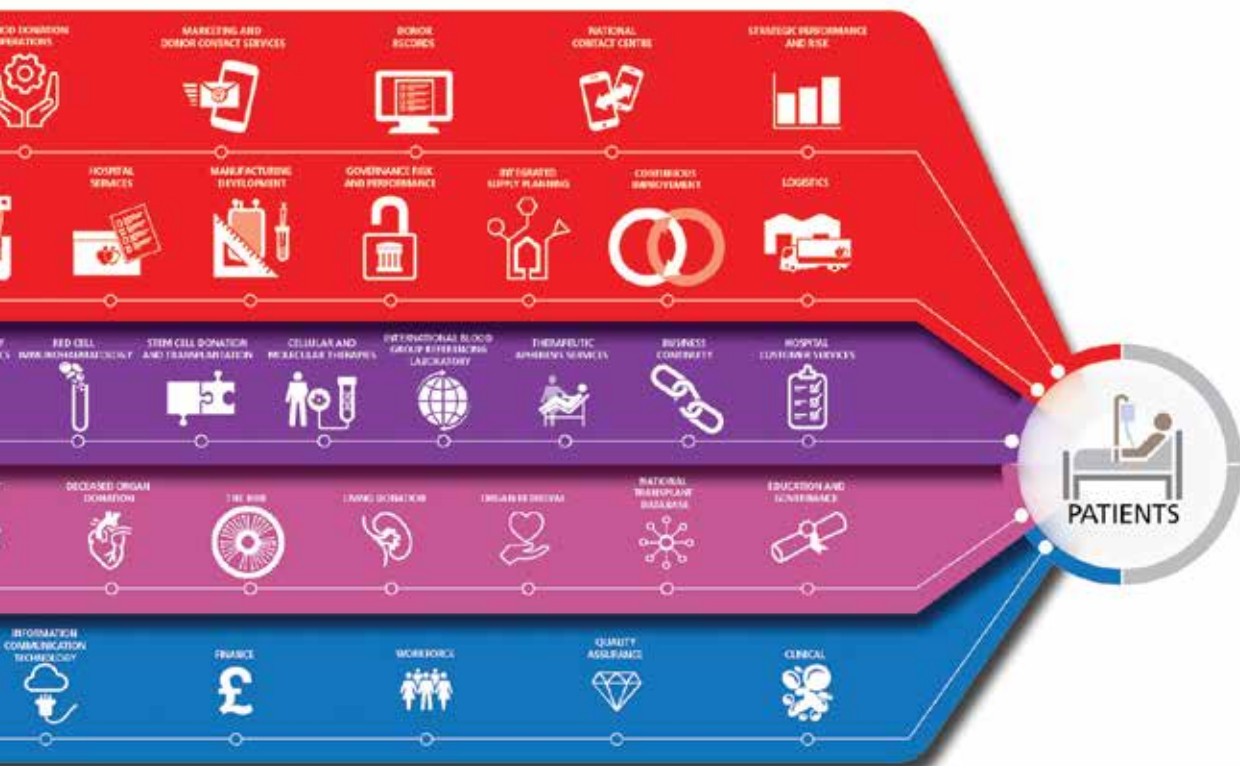


What we do and why we do it:

NHS Blood and Transplant aims to be the best donation service in the world for blood, organs, tissues and stem cells. We benchmark everything we do against similar organisations globally to make sure we are delivering the best possible service to the NHS, patients and donors.

Our services include:

- **Blood Supply** – collecting blood from our donors, using it to manufacture a range of safe blood component products and making sure it reaches the patients who need it through an effective supply chain to hospitals and other healthcare providers.
- **Organ Donation and Transplantation** – matching patients who require organ transplants with the organs they need from donors, including the difficult conversations with potential donor families when their loved one is close to death.
- **Diagnostic and Therapeutic Services** – providing a range of products and services to the NHS such as stem cell and tissue products, laboratory services to ensure blood products and organs are safe and match the patients who need them, and specialist treatments, such as therapeutic apheresis, for patients with particularly complex needs.



**NHSBT run
23,000**
blood donation
sessions across
the country
every year

Last year over
3,500
lives were saved
or improved by
organ donation,
6,500
on the waiting list,
nearly
500 died while waiting
for a transplant



Last year
3,779
people had their
sight restored
through cornea
transplants

Daniel's story

Daniel, 19, receives regular blood transfusions as treatment for Sickle Cell Disease. At just six years old Daniel had a stroke as a result of a sickle cell crisis. A year later, another stroke led to a brain haemorrhage which left him in a coma for three days.

Daniel said: "My doctors have told me I will need blood transfusions for the rest of my life. Sickle cell affects me and my family in so many ways. It is always there and many people don't understand the pain that it can cause. I'm very grateful to all who give blood, but it is vital more people understand the need for black African and Caribbean donors, so patients can get the closely matched blood they need."



Beth's story

Beth, 21, from the Midlands, died in 2013 following a brain haemorrhage. Beth donated her organs and saved or improved the lives of four people. Beth's family knew her decision to donate after having previously discussed organ donation with the family over dinner.

Beth's step-dad, Jim, said: "Without that conversation, we would have been lost. We feel we are quite strong but without knowing that's what Beth wanted, it would have been an impossible decision at a devastating time."



Challenges ahead

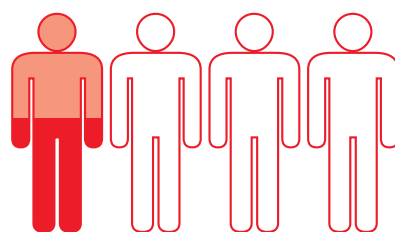
The NHS is facing increasing pressures. It is essential that all parts of the service are as efficient and productive as possible so that resources can be focussed on frontline services for patients.

We have a strong record of continuous improvement, quality and efficiency. The headline price of a unit of blood has been reduced from £140 in 2008/9 to £120 in 2016/17. Despite a slight increase this year to £122.35 as we invest to modernise our infrastructure, the overall cost of blood to the NHS has fallen from £260m in 2008/9 to £183m in 2016/17 due to the decline in demand. We remain one of the lowest cost suppliers of blood components in the world.

Four major challenges face us in the year ahead:

Demand for blood: We continue to explore ways to improve productivity and efficiency in the blood supply chain. This is not easy as many of our costs are fixed and the demand for blood is falling as medical practices improve. There is an increasing focus on those blood groups and products where demand is high and supply is short. Supporting Sickle Cell disease patients with ethnically matched blood from black donors is a particular challenge. We also need to maintain donations of the universal O negative whole blood and A negative platelets that can be used safely with patients from any blood group.

This drive for greater efficiency and more targeted blood collection so we only collect the blood the NHS needs, when it is needed, will mean changes for our donors. They are likely to experience fewer and larger blood donor sessions in fixed sites in major towns and cities, and fewer mobile sessions in more remote locations. Our donors are hugely important to us and we must explain the rationale and impact of changes with sensitivity and care.



Last year
10,000
black people
gave blood

5,000
of them for
the first time

To meet demand we
must find another
40,000

WHY WE URGENTLY NEED MORE BLOOD FROM BLACK DONORS

Advances in the treatment of sickle cell disease mean that patients with this condition are living longer and require more transfusions than ever before.

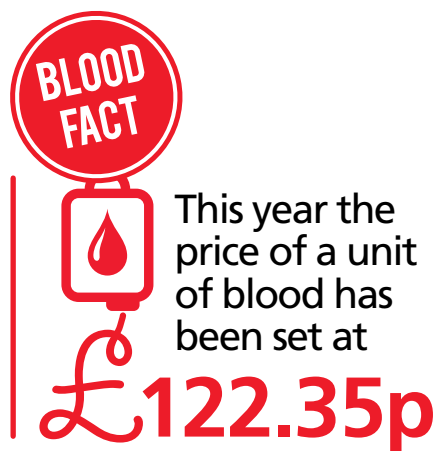
They need blood which is more closely matched to their own to get the best outcome from treatment. Black donors are more likely to have blood with the Ro sub-type which is needed by Sickle Cell patients - yet only 1% of blood donors are black. 50% of donors of black heritage have this special blood type, compared with only 2% of white donors.

Together, we can vastly improve the lives of the 15,000 people in the UK who live with Sickle Cell Disease and over 300 new babies born every year with the condition. About 10,000 donors of black heritage donated blood in the last year. We need 40,000 black donors to meet demand.

You have it in you to do something amazing. In just one hour you could save lives. Visit www.blood.co.uk

IT investment: Many of the IT systems which are central to our processes are old, close to end of life and in some cases vulnerable because they depend on a single supplier for support and maintenance. Significant investment is needed to upgrade everything from our desktop software to our core business systems. In common with many organisations of our size we are moving our systems into the 'cloud'. We are also investing in a new system to replace the system used for the coordination of organ donation and transplantation.

Any modernisation programme of this scale carries some risk. However we are minimising this risk by rolling out new systems in small steps. Taken together Core Systems Modernisation, the Organ Donation and Transplant Hub, and the Desktop Refresh represent an investment of £50m over the next five years. This investment in our infrastructure is essential if we are to maintain the safe and sustainable supply of blood and deliver more organs for transplant into the future. The cost will mean a small increase in the price of a unit of blood to our customers in the short term, although due to demand reductions, the overall cost of blood to the NHS continues to reduce as demand falls.



Opportunities to donate: We are aiming to ensure that no opportunity for organ donation and transplantation is missed. On average three people die every day in the UK because of the lack of an available organ. To reduce this number we must significantly increase the levels of organ donation and transplantation. Whilst we continue to increase the number of deceased organ donations and transplants every year we are still not on track to hit our ambitious targets for saving and improving more lives. Key to delivering this increase is influencing public behaviour so more people agree to be donors and have the conversation about their wishes with their families.

We also need to work with clinicians to improve utilisation of organs so that no opportunities for transplants are missed. Funding for Organ Donation and Transplantation is unlikely to increase in the years ahead so investment in behaviour change and new technologies will be under pressure. We must also adapt to changes in legislation in Wales where deemed consent is now in place, and be prepared for a difference in approach across the different countries in the UK.

Innovative income streams: A Triennial Review of NHS Blood and Transplant published in September 2016 was very supportive of the contribution our organisation makes to the health system in the UK. One of the recommendations was that we should challenge our Diagnostic and Therapeutic Services (DTS) to find new and innovative ways to increase income – from the £68.6m in 2016/17 to around £100m by 2021/22. Increasing income enables us to invest in improving our service, products and outcomes for patients at minimal cost to the NHS. DTS is already a world leader in many areas of its work and we will be exploring ways to capitalise on our expertise in new areas and develop new partnerships.



Only

5,000

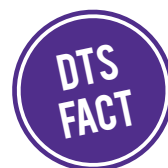
people die each year in circumstances in which donation is possible.

Last year saw the **highest ever** number of deceased donors

1,366

but the number of living donors fell to

1,075



340,000

blood donors have agreed to be potential stem cell donors yet

400



patients a year don't receive a transplant and

200

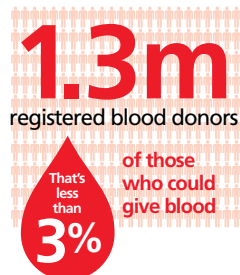


die because a matched donor can't be found

Our priorities

To save and improve more lives by getting the right blood to the right people at the right time, and making the most of every opportunity for organ and tissue transplants to take place.

There are



To invest in the infrastructure required to make NHS Blood and Transplant the best organisation of its type in the world.

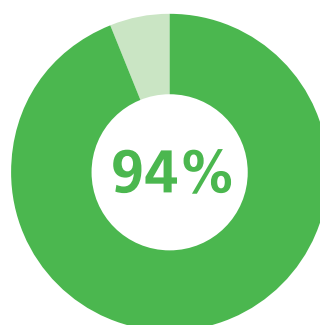


To be as efficient and productive as we possibly can to save money which the NHS can use to safeguard frontline services for patients.

By keeping costs down we have passed on

£80m
productivity savings to the NHS

To be a great employer with great people dedicated to saving and improving more lives.



of employees believe the work they do is contributing to saving and improving lives.

Amit receives regular blood transfusions as treatment for his blood disorder – Beta Thalassaemia Major.

Amit said: “Without blood transfusions, it would be game over for me. I’ve never taken the blood I receive for granted. I never turned up and there’s been no blood for me but there’s always a concern.”



Organ Donation and Transplantation

Objective

To make sure that no opportunity for an organ transplant is missed

1. To improve consent/

authorisation – we will promote a shift in behaviour to increase consent/authorisation rates, making it easy to pledge support for donation and for the wishes of the individual to be honoured.

Sarah Hanner Hopwood – Marketing and Campaigns Manager

“We want to get to the heart of the family to inspire conversations about organ donation and normalise saving lives. By encouraging multiple conversations in the home, online and between friends, we hope people will feel proud to shout about organ donation and support what their relatives want”.

2. To raise the UK deceased donor

rate – we will work with hospitals and NHS colleagues to provide excellent support for donation and ensure that each donor can give as many organs as possible.

Amanda Jayne Snape, Specialist Nurse Organ Donation – Specialist Requestor, North West team

“Our focus is on patients and their families and together with colleagues in hospitals, we provide them with the vital support they need during an extremely difficult time in their lives. In my role of specialist requestor and using specialist training I’ve received on approaching families and securing consent, I will deliver enhanced support particularly during complex circumstances, which will enable us to increase organ donation consent rates.”

3. To transplant more organs –

we will work with hospitals and surgeons to use the latest techniques and technologies to increase the number of organs that can be transplanted safely to the most appropriate recipients.

Ben Hume – Assistant Director – Transplantation Support Services

“We need better systems and processes to support our core purpose of saving and improving lives. One of the ways of meeting this challenge is by creating an Organ Donation and Transplantation (ODT) Hub. This will be at the heart of our service and will support people working across ODT.

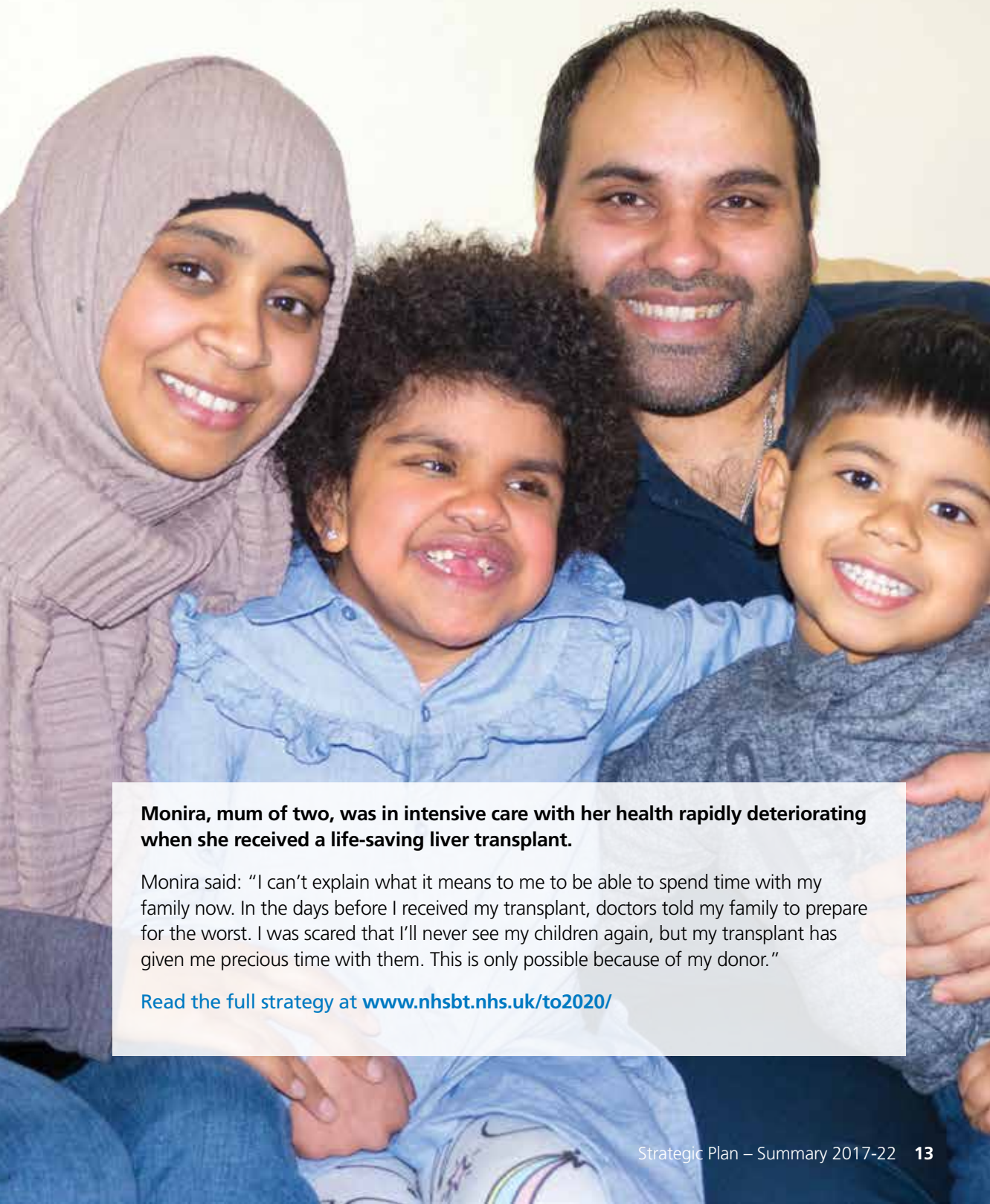
The ODT Hub will safely and efficiently support increasing numbers of potential referrals, donations and transplants. We will be engaging with the organ donation and transplantation community at each step of the change towards an ODT Hub, to ensure that we are modernising in a safe way and respond to their needs.”

4. To increase transplants – we will

provide quality support systems and processes to enable more donations and transplants to happen.

Jacki Newby – Donor Care and Coordination Team Manager

“We are developing a computerised organ matching and offering system which will provide a safe and speedy process for allocating organs to recipients. This will reduce the time the offering process takes and will enable staff to facilitate more organ donations and transplants.”



Monira, mum of two, was in intensive care with her health rapidly deteriorating when she received a life-saving liver transplant.

Monira said: "I can't explain what it means to me to be able to spend time with my family now. In the days before I received my transplant, doctors told my family to prepare for the worst. I was scared that I'll never see my children again, but my transplant has given me precious time with them. This is only possible because of my donor."

Read the full strategy at www.nhsbt.nhs.uk/to2020/

Blood Supply

Objective

To ensure that all patients, including those with complex needs, have the right blood available at the right time.

1. Donor experience – we will collect only the blood hospitals need when they need it by making sure we have the right number of donors, modernising donor sessions and improving the way we use technology to contact the right donors at the right time.

Mike Stredder – Director of Blood Donation

“We will continue to improve donor satisfaction by further investment in new technologies that will enhance the experience and reduce the time taken to donate. Targeted recruitment, specifically of black donors will also help us to better match the needs of patients.”

2. Supply chain – we will build on productivity improvements in manufacturing and testing to provide a safe, responsive and high quality service to our customers in hospitals.

Sarah Raymond – Assistant Director National Operations

“We are using continuous improvement events such as strategy deployment, rapid improvement events and other lean tools to identify improvements in productivity whilst ensuring product safety and quality.”

3. Customer service – we will use the latest technology to tailor our services and transport system to meet the changing needs of hospitals.

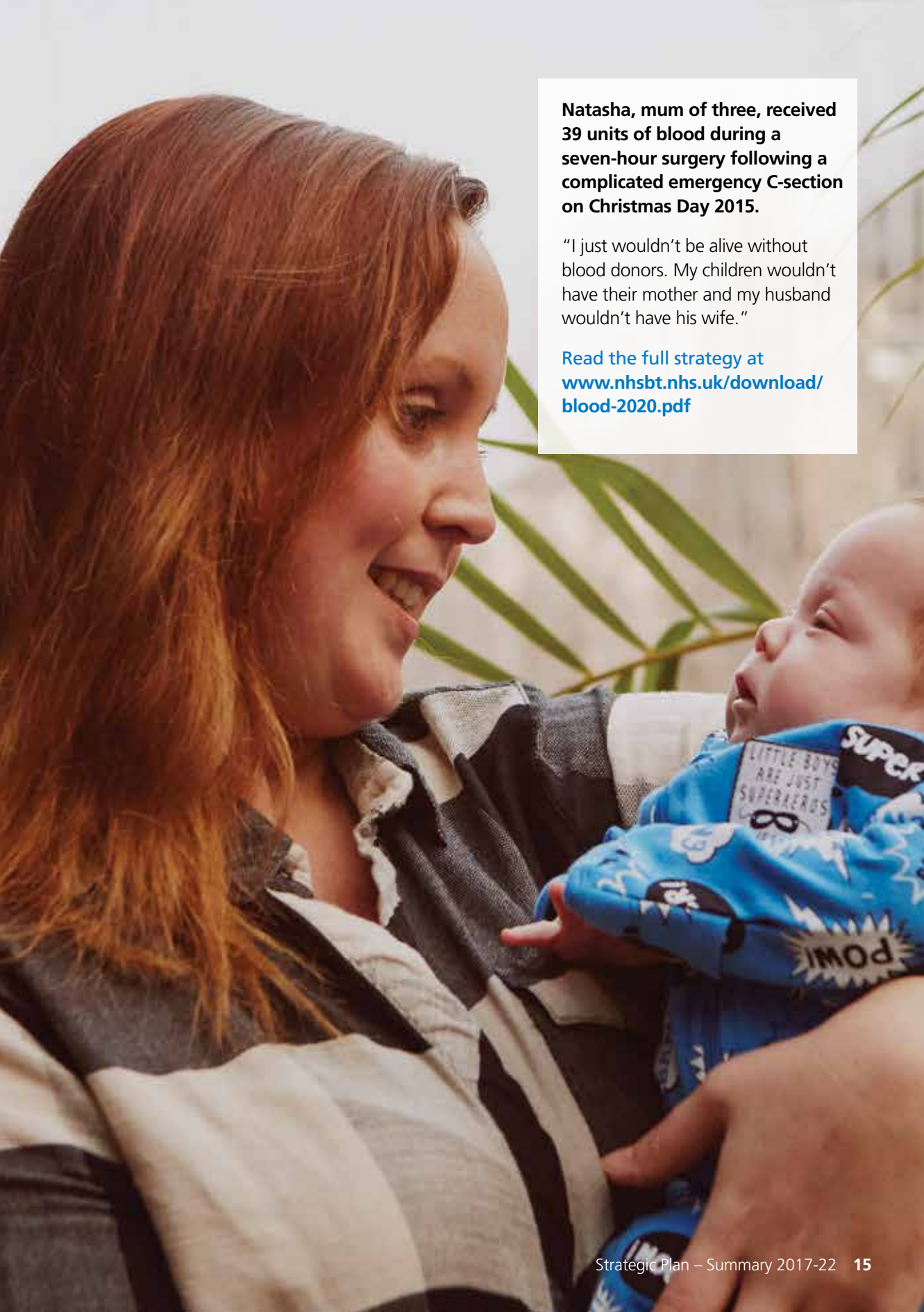
Chris Philips – Head of Hospital Customer Service

“Our online blood ordering system (OBOS) is now available on multiple devices and our partnership with hospitals continues to drive development. We are using data from our Transport Management System to work with hospitals to optimise the timing and frequency of deliveries.”

4. Hospital integration – we will work more closely with hospitals to help them manage blood stocks, testing and supply.

Lucy Frith – Process Improvement Manager

“We are working with Hospital IT providers and hospital transfusion laboratories to increase the number of hospitals using our stock management service from eight to 20. This work will see the development of solutions by hospital IT providers which will then enable the service to be offered to a wider number of hospitals.”



Natasha, mum of three, received 39 units of blood during a seven-hour surgery following a complicated emergency C-section on Christmas Day 2015.

"I just wouldn't be alive without blood donors. My children wouldn't have their mother and my husband wouldn't have his wife."

Read the full strategy at
www.nhsbt.nhs.uk/download/blood-2020.pdf

Diagnostic and Therapeutic Services

Objective

To be a trusted brand built on compassion for donor families and an ethical supply of products and services from within the NHS.

1. Supplier of choice – to be the supplier of choice to the NHS for tissue and eye services, stem cell therapies, therapeutic apheresis, specialist blood diagnostic (Red Cell Immunohaematology) and organ testing (Histocompatibility and Immunogenetic) services.

Catherine Howell – Chief Nurse Diagnostic and Therapeutic Services

“We pride ourselves on the consistently high standards of care we give to patients. Our patient satisfaction survey scores are world class.”

2. More stem cell treatments – to increase the number of patients benefiting from curative stem cell transplants.

Guy Parkes – Head of Stem Cell Donation and Transplant

“In Stem Cell Donation and Transplantation, we are constantly seeking to recruit the best donors to the British Bone Marrow Registry and bank the best cord blood units in our NHS Cord Blood Bank, so that we can continue to provide more stem cell transplants, ensuring better outcomes for more patients. We are striving to ensure that no patient should miss out on a lifesaving transplant due to the lack of a well matched stem cell donation.”

3. Increase product sales in all areas – to develop products and innovative techniques that have the potential to deliver an income surplus that can be reinvested into services and further research.

Helen Gillan – General Manager Tissue Services

“The demand for cornea transplants is relentless; we rely heavily on our communication department to keep awareness high to meet the target of 10 eye donors per day.”

4. Leading the way on regenerative medicine – To establish NHS Blood and Transplant as the preferred provider of established cell therapies to the NHS, and of innovative cellular and DNA based therapies for academic and commercial organisations.

Dr Jon Smythe – Head of Cellular and Molecular Therapies

“Advanced cellular and molecular therapies offer the promise of new treatments and potential cures for many diseases and disorders. We will keep pace with these developments by investing in our manufacturing capacity and training more scientists to equip them with the highly specialised skills that are required. NHS Blood and Transplant is uniquely positioned to support the exciting developments that are taking place in this field. Our experience in the manufacture of clinical grade advanced cellular and molecular therapies, combined with our strong links to clinicians means we can help researchers translate their groundbreaking work to the bedside.”

Alison's story

Alison from Manchester, gave the gift of sight to two people when she donated her corneas in 2010. Alison died aged 28, just six short weeks following a bowel cancer diagnosis.

Alison's mum Ann said:

"I am so proud of Alison, and we now know that her eye donation helped two people to see again. I love to think that there is a very small but beautiful part of Alison living on. But I am also proud that we, her family, had the strength and courage to agree to her request despite our terrible grief."



More than **400** patients each year in the UK fail to get access to the stem cell transplant they need.

200 lives are lost due to
– a lack of matched stem cell donor.

There is a disproportionate impact on BAME patients, where we need more donors.

Group Services

The vital supply of blood and organs to the health service could not happen without the support services which underpin NHS Blood and Transplant.

- ICT – modernising our IT infrastructure through the Organ Donation and Transplantation Hub, Core System Modernisation and Desktop Refresh
- Estates – reducing the size of our estate so that it is in the right shape for the future – including exploring locations for possible new blood donor centres for example in Leicester and South London, a new manufacturing and testing centre to replace our Leeds and Sheffield centres, and a major expansion at Filton
- Workforce – supporting change and staff learning and development
- Quality – ensuring we meet our legal and regulatory requirements
- Marketing and Communications – making donation matter to people so they donate if and when they can
- Clinical and Research – delivering a world leading research and development programme
- Finance and Business Transformation – ensuring we deliver highly effective services to the NHS at the lowest possible cost.

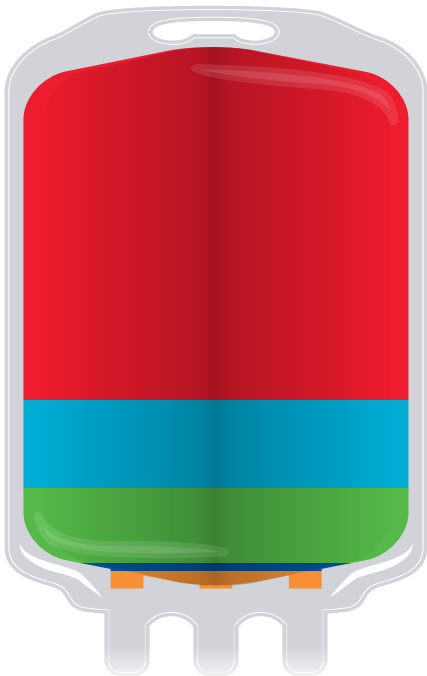
Money Matters

How do things look for us in 2017/18?

We are in a strong position thanks to the efficiencies and productivity improvements we continue to make. We have made a small increase to the unit price of blood to help fund an essential investment in our IT infrastructure to secure the safe supply of blood into the future. However, as the demand for blood continues to fall the overall cost of blood to the NHS continues to reduce. Grant funding for organ donation and transplant is expected to remain at the same level requiring us to reprioritise to ensure that we can deliver IT modernisation. Our Diagnostic and Therapeutic Services continue to innovate and develop new products to improve the service to patients such as establishing Therapeutic Apheresis Services closer to patients as we have done with our new centre in Birmingham.

Where does our money come from?

Income



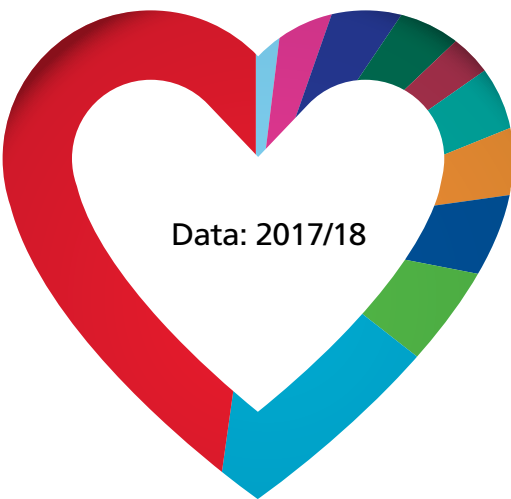
Compared to 2016/17	Increase	Equal	Decrease
	▲	▶	▼

Red Cells, Platelets and Plasma	£257.1 million	▼
Organ Donation	£74 million	▲
Specialist Services	£72.7 million	▲
Research and Development	£1.1 million	▼
Other	£7 million	▼

▶ Total **£411.9 million**

How we allocate our budget

Expenditure



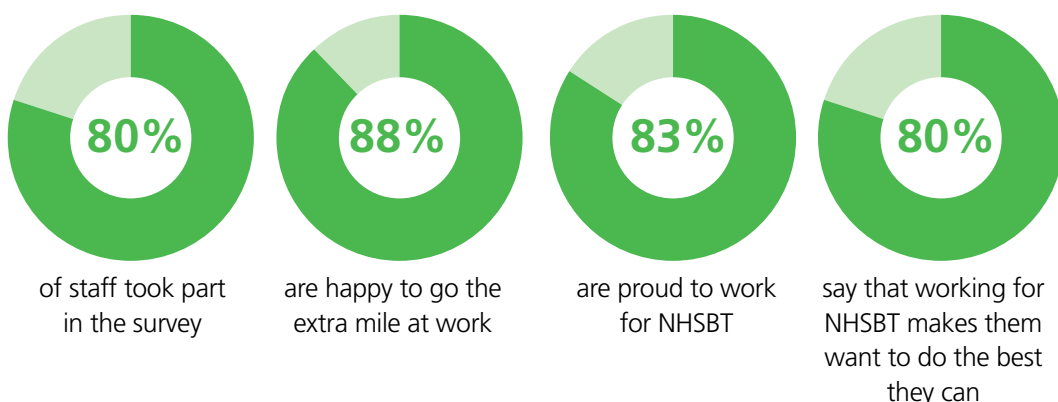
Compared to 2016/17	Increase	Equal	Decrease
	▲	▶	▼

Wages	£200.6 million	▲
Marketing	£9.2 million	▼
IT	£13.8 million	▲
Other consumables	£21.7 million	▼
Transport	£17.2 million	▼
Rent, Rates and Utilities	£12.7 million	▲
Capital charges	£17.9 million	▼
Microbiology Test Kits	£14.2 million	▼
Blood and Platelet Packs	£22.3 million	▼
ODT contracts and other	£19.5 million	▼
Other (inc hall hire, equipment and maintenance)	£76.5 million	▲

▶ Total **£425.6 million**

Your Voice

We have regular conversations with our employees to check how they are feeling about working at NHS Blood and Transplant. Our latest Your Voice survey shows high levels of engagement and a commitment to saving and improving lives.



We still have things to work on. Every directorate has their own action plan to ensure that actions are meaningful at a local level and these are monitored. Corporately we are focusing on areas that we will continue with (e.g. Communication), areas to continue, but adapt (e.g. management capability) and areas which are new (e.g. increased senior leadership visibility). We will ask our employees again in 2018 to tell us what it is like to work at NHSBT.

Caring, Expert, Quality. Being the best in all we do.

We are NHS Blood and Transplant. We stand for hope. We stand for life. We stand for helping people do something extraordinary, saving and improving the lives of others. As an essential part of the NHS we take pride in playing our part to make the most of absolutely every donation – from blood and organs to tissues and stem cells. Every day we bring the values of caring, expertise and quality to our roles. When we break new scientific ground, when we connect with donors and families, when we help to save a life – it's because of each and every one of us. The donors who make our work possible do so selflessly, giving life and changing life for the better. It is because of them, and the people who need their life-saving and life-enhancing donations, that we strive to be the best in all we do.