

# ODT Performance Report

Monthly – September 2017



**Data production date:** October 9, 2017 **Publication date:** October 13, 2017

### 1. EXECUTIVE SUMMARY FOR OCTOBER ODT SMT MEETING: FIRST SIX MONTHS OF 2017/18

### FEWER MISSED OPPORTUNITIES

- When comparing the first six months of 2017/18 with the first six months of 2016/17, there were 79 fewer missed referral opportunities (-14 DBD, -65 DCD), equating to an overall decrease of 18%.
- There has been a 28% decrease in the number of occasions where a SNOD was not present for the organ donation discussion, with 65 fewer missed SNOD presence opportunities (-14 DBD, -51 DCD).

#### DONORS AND TRANSPLANTS

- There were 722 deceased donors in the first six months of 2017/18 (Q1=367, Q2=355); 434 were DBD (60%). In total, there has been a 9.2% increase in the number of deceased donors compared with the same period last year, with a 13.3% increase for DBD and 3.6% increase for DCD.
  - Although the number of deceased donors is currently 40 behind the goal of where we would have liked to be by this point in the year, when looking back at the last two years 53% of deceased donations happened in the second half of the year. Applying the assumption that 53% of deceased donors will also happen in the second half of 2017/18 indicates that the 1524 deceased donor target for the whole of 2017/18 is still achievable. This means that 134 deceased donors are now needed per month for the second half of this year (802 in total).
- During the first six months of 2017/18, 1891 patients benefitted from a lifesaving or life changing solid organ transplant in the UK (Q1=942, Q2=949). This equates to an increase of 8.7% compared with the same six months last year.
  - 2225 transplants are needed over the second half of the year if the 4116 deceased donor transplant target is to be achieved. This equates to 371 transplants per month for the rest of the year. An average of 2.77 transplants per donor is needed if 134 deceased donations occur each month. Although 2.77 transplants per donor does not happen very often, it has happened on several months in the past.
  - However, an average of 2.63 transplants per donor for the rest of the year (352 per month) would mean that at least 4000 transplants could occur in 2017/18 assuming the 134 deceased donors per month is achieved. Note that there were 2.62 transplants per donor in the first six months of 2017/18 (Q1=2.57, Q2=2.67).

#### **CONSENT RATES**

- Overall 64% (Q1=64%, Q2=64%). DBD 74% (Q1=71%, Q2=77%). DCD 57% (Q1=60%, Q2=53%). The DBD rate is 8 percentage points (pp) higher, the DCD rate is 1 pp lower and the overall rate is 3 pp higher than the first half of 2016/17.
- Black and Asian patients: 46% (Q1=44%, Q2=49%). 15 pp higher than the same six months last year.
- On ODR and SNOD present: 93% (Q1=93%, Q2=93%), 1 pp higher. Not on ODR and SNOD present: 57% (Q1=57%, Q2=57%), 1 pp higher.
- On ODR, SNOD not present: 63% (Q1=50%, Q2=75%), 0 pp difference. Not on ODR, SNOD not present: 10% (Q1=9%, Q2=11%), 11 pp lower.

### OTHER KEY RATES AND NUMBERS

- Brain stem death testing rate: 85% (Q1=88%, Q2=81%). 2 pp lower than the first six months last year.
- Referral rates: DBD 99% (Q1=99%, Q2=99%). DCD 88% (Q1=87%, Q2=90%). Both DBD and DCD rates are 2 pp higher than the first half of 2016/17.
- SNOD presence rates: DBD 95% (Q1=94%, Q2=96%). DCD 85% (Q1=86%, Q2=84%). The DBD rate is 3 pp higher and the DCD rate is 6 pp higher.
- The high number of ODR opt-in registrations received during September (107k) has brought this metric back on track YTD to 546k ODR opt-in registrations.

### 2. ODT STRATEGIC OBJECTIVES

	Final	Final	P	Actual Pe	rformanc	е		20	)17/18 Pe	erforman	се			2017/18
Strategic Objectives	Target	Target Date	2013/14	2014/15	2015/16	2016/17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Chart begins from Sep-15	YTD
1. Consent / authorisation	80%	March 2020	59.4%	57.7%	61.9%	62.8%	62.7%	64.6%	65.1%	62.2%	64.1%	65.9%	80% 70% 60% 50%	64.1%
2. Donors pmp	26 pmp	March 2020	20.7	20.1	21.2	21.8	21.7	21.9	22.1	22.1	22.4	22.6	22 - 20 - 18	22.6
3. % of consented 'donors' with organ(s) accepted but no organ(s) transplanted*		March 2020	5.0%	5.8%	5.9%	5.1%	9.0%	5.1%	11.3%	6.1%	6.5%	9.9%	0.2	7.9%
4. Transplants pmp	74 pmp	March 2020	55.1	52.4	54.9	57.3	56.7	57.5	57.7	57.9	58.6	59.2	60	59.2
5. Living donors pmp	26 pmp	March 2020	17.9	17.1	16.7	16.0	15.6	15.7	15.8	15.8	16.0		20 19 18 17 16 15	16.0

Objective 1 – Consent<sup>^</sup> for organ donation – aim for consent rate above 80%. End of year target for 2017/18 is 70%.

Objective 2 – Deceased organ donation – aim for 26 deceased donors per million population (pmp)<sup>#</sup>. End of year targets for 2017/18 are 1,524 deceased donors and 23.1 pmp.

Objective 3 – % of consented 'donors' with organ(s) accepted but no organ(s) transplanted. Note that the data excludes DCDs who did not die within the timeframe to become an organ donor.

Objective 4 – Patients transplanted – aim for a deceased donor transplant rate of 74 pmp<sup>#</sup>. End of year targets for 2017/18 are 4,116 transplants and 62.4 pmp.

Objective 5 – Living Donation – aim for 26 living donors pmp<sup>#</sup>. End of year targets for 2017/18 are 1,392 transplants and 21.0 pmp.

### Note:

<sup>&</sup>lt;sup>#</sup> Based on rolling 12 month period.

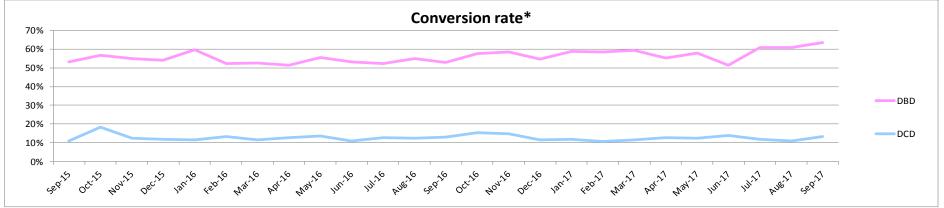
<sup>^</sup> Please read consent as consent/authorisation throughout the report.

<sup>\*</sup> Excluding DCDs who did not die within the timeframe to become an organ donor

### 3. SUMMARY OF DECEASED DONOR PATHWAY

Septe	mber 17												
		Potential donors	Patients referred	Eligible donors	Families approached	Families consenting	Actual donors	Utilised donors	Conversion rate*	Consented patients who did not proceed to donation	organs were transplanted	patients from whom no	Total consented patients from whom no organs were transplanted %
	OBD	152	150	107	101	80	69	68	64%	11	1	12	15%
С	OCD	472	420	330	145	82	49	44	13%	33	5	38	46%
Т	otal	624	570	437	246	162	118	112	26%	44	6	50	31%

2017/18 YTD												
	Potential donors	Patients referred	Eligible donors	Families approached	Families consenting	Actual donors	Utilised donors	Conversion rate*	Consented patients who did not proceed to donation	Actual donors where no organs were transplanted	patients from whom no	organs were
DBD	905	895	722	669	495	434	421	58%	61	13	74	15%
DCD	3,017	2,657	2,101	894	507	288	263	13%	219	25	244	48%
Total	3,922	3,552	2,823	1,563	1,002	722	684	24%	280	38	318	32%



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

### **Changes over time**

Figures 1 to 7 show changes in the key rates when comparing the 12 month period from October 2016 to September 2017 with the equivalent 12 month period from October 2015 to September 2016. Caution should be taken when interpreting these figures given the different size populations of the 12 regions, but these charts give an indication of which regions have made sizeable improvements, even if they still have some way to go to rank highest, and indicate which regions have seen a sizeable decrease in these key rates between the periods.

- Neurological death testing rate: South Wales, South West, London, Northern Ireland and Midlands stand out as having made improvements in this area. Yorkshire, Northern, Scotland, North West and Eastern stand out as slipping in this area.
- Northern and Yorkshire have maintained 100% DBD referral rate and all other teams have achieved an increase in this rate.
- Northern maintained the highest DCD referral rate and Yorkshire, South West, North West, Scotland and South Central stand out as achieving improvements in this area.
- DBD SNOD presence rate: North West, Eastern, South West, London, South Central, South East, Scotland
  and Midlands stand out as achieving sizeable improvements in this area. Northern, South Wales and Northern
  Ireland stand out as slipping in this area.
- DCD SNOD presence rate: Northern Ireland, North West, Yorkshire, South West and Midlands stand out as achieving sizeable improvements in this area. South Wales and Scotland stand out as slipping in this area.
- South Wales, South West, North West, South Central, Eastern, Northern Ireland, Midlands, South East and London stand out as achieving sizeable improvements in the DBD consent/authorisation rate. Northern stands out as slipping in this area.
- Northern Ireland and South Wales stand out as achieving sizeable improvements in the DCD consent/authorisation rate. Northern, Eastern and Scotland stand out as slipping in this area.

The dashboard at the end of the report shows these key rates for the latest six month period from April to September 2017 for the 12 regions.

### Figure 2. DBD referral rate

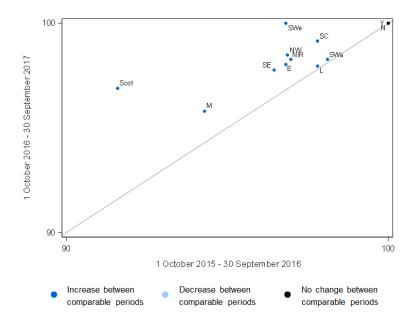


Figure 1. Neurological death testing rate

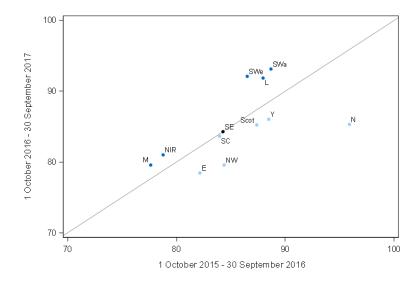


Figure 3. DCD referral rate

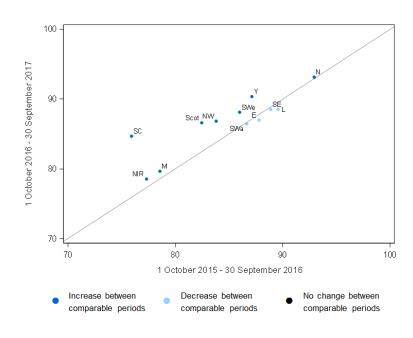


Figure 4. DBD SNOD presence rate

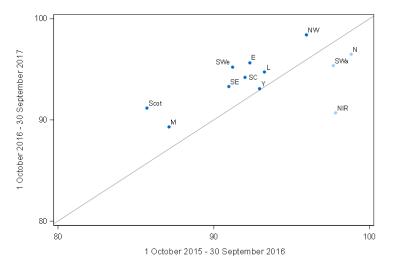


Figure 6. DBD consent/authorisation rate

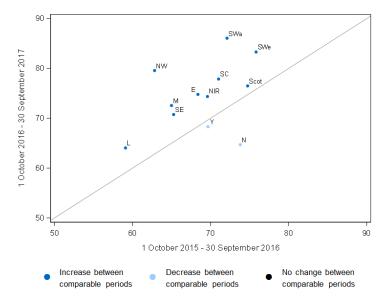


Figure 5. DCD SNOD presence rate

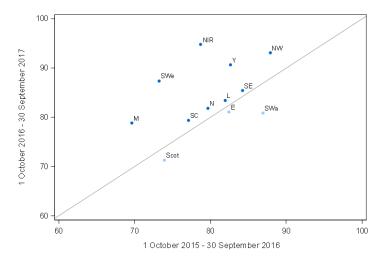
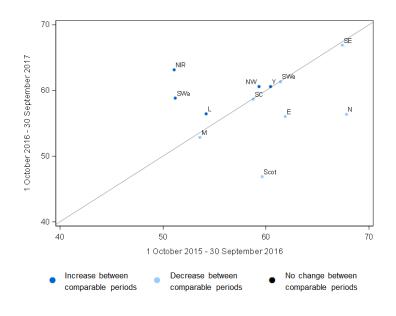


Figure 7. DCD consent/authorisation rate



### 4. ODT BALANCED SCORECARD

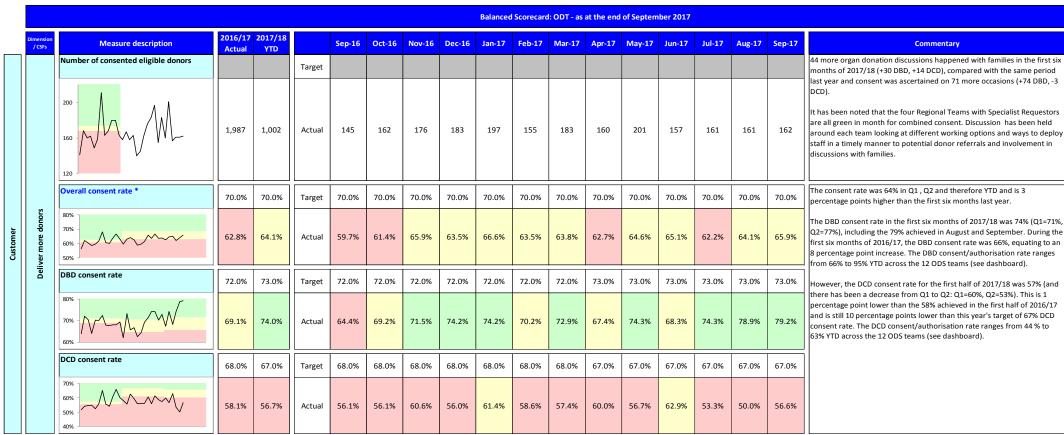
										Balanced	Scorecard	: ODT - as	at the end	of Septem	ber 2017				
	Dimension /CSFs	Measure description	2016/17 Actual	2017/18 YTD		Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Commentary
		Referral rates (DBD and DCD)			DBD														In the first six months of 2017/18 there were just 10 missed DBD referrals, equating to a 99% DBD referral rate YTD. Five of the 12 ODS teams have
		100% DED DCD 100% S0% S0% S0% S0% S0% S0% S0% S0% S0%	97.4%	98.9%	Actual	97.1%	97.3%	98.8%	94.9%	97.4%	97.8%	98.7%	98.6%	98.3%	99.2%	98.6%	100.0%	98.7%	had 100% DBD referrals YTD and the lowest is 95% due to just one missed referral in April (see dashboard). The DBD referral rate YTD is 2 percentage points higher than the same period last year and was 99% in Q1 and Q2. There has been 14 fewer missed DBD referrals compared with the same period last year, equating to a decrease of 58%.  In the same period there were 360 missed DCD referrals, equating to an
					DCD														88% DCD referral rate. The DCD referral rate ranges from 80% to 96% across the 12 teams (see dashboard). The DCD referral rate YTD is 2
mer	more donors		85.6%	88.1%	Actual	86.1%	84.5%	84.7%	85.0%	84.6%	86.9%	86.3%	84.1%	88.3%	87.6%	89.9%	89.6%	89.0%	percentage points higher than the same period last year and has increased over the quarters (Q1=87%, Q2=90%). There were 65 fewer missed DCD referrals than the same period last year, equating to a decrease of 15%.  In total, when comparing the first six months of 2017/18 with the first six months of 2016/17, there were 79 fewer missed referral opportunities, equating to an overall decrease of 18%.
Customer	Deliver mo	Number of missed referral opportunities (DBD and DCD)			DBD														
	Del	150 DBD DCD	47	10	Actual	4	4	2	8	4	3	2	2	3	1	2	0	2	
					DCD														
		too matric is also a stratogic target	897	360	Actual	68	82	76	81	93	64	76	81	61	64	51	51	52	

#### Balanced Scorecard: ODT - as at the end of September 2017 2016/17 2017/18 Nov-16 Dec-16 Feb-17 Mar-17 Apr-17 May-17 Jul-17 Aug-17 Sep-17 Measure description Jun-17 Commentary Actual YTD Number of eligible donors The number of eligible donors fluctuates and is provided for information. Target There were 72 more eligible donors in the first six months of 2017/18 compared with the same period last year (+21 DBD, +51 DCD). 5.707 2,823 Actual 443 477 475 519 547 437 501 463 511 477 454 481 437 Number of new opt-in registrants on There were 107,156 new ODR registrations during September, the best 1.600 0.550 0.165 0.155 0.165 0.195 0.135 0.130 0.130 0.092 0.092 0.092 0.092 0.092 0.092 Target performing month so far this financial year, and a reflection of the massive the ODR (million) \* amount of publicity secured during Organ Donation Week (ODW). 51% of 0.250 these registrations in September were a result of comms/marketing 0.200 activity, compared to levels usually around 30-40%. 52% of the registrations 0.150 came through digital channels. YTD the number of new registrations is 546,166 – this means we are now on target YTD. 35% of people surveyed 0.100 after ODW were spontaneously aware of news, adverts or publicity about 0.050 organ donation in the previous month. 18% of campaign surveyed and 0.546 Actual 0.119 0.100 0.089 0.078 0.113 0.096 0.100 0.080 0.090 0.088 0.094 0.087 0.107 more donors recognising publicity from the campaign had a conversation with a family member in which they specifically told them their wishes regarding organ donation. Over the next month, we will be continuing paid for social media activity to Deliver drive conversations among the key target audiences (DE, over 50 and BAME) and will be keeping low level registration driving activity running on social media targeting the best performing audiences for paid social. We Number of new opt-out registrants on Target are also continuing to pursue HMRC and NHS Digital about transaction the ODR 80.000 It is important to note that two ODR data feeds are currently inactive: 60,000 - Scottish GP Service inactive. There is an error in the source data that is 40.000 currently being investigated by the third party provider. - England/Wales GP Service inactive with a back-log dating back to 1 April 20,000 2017. December 2016 to 31 March 2017 back-log was loaded in July 2017. 24,563 10,012 Actual 2,403 2,154 1,735 1,957 2,481 1,783 1,905 2,345 1,721 1,319 1,656 1,203 1,768 The NHS Tracing Service & De-Duplication Process have been inactive since May 2015. This may result in significant numbers of duplicate registrations on the live ODR i.e. over-reporting the number of registrants.

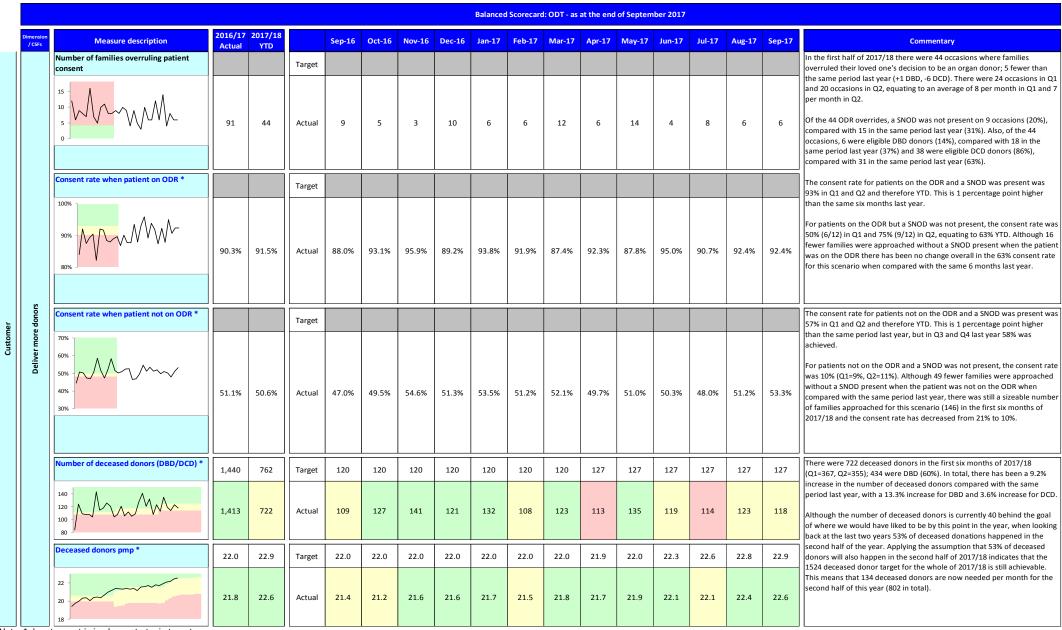
Note: \* denotes metric is also a strategic target.

#### Balanced Scorecard: ODT - as at the end of September 2017

	Dimension / CSFs	Measure description	2016/17 Actual	2017/18 YTD		Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Commentary
		SNOD presence rate (DBD and DCD)			DBD														In the first six months of 2017/18 the DBD SNOD presence rate was 95% (Q1=94%, Q2=96%), compared with 92% in the same period last year. There
			93%	95%	Actual	93%	93%	97%	94%	95%	91%	91%	93%	93%	97%	96%	95%	96%	were 34 occasions where a SNOD was not present for the organ donation discussion with the family compared with 48 in the same period last year (29% decrease). The DBD SNOD presence rate ranges from 91% to 100% YTD across the 12 ODS teams, with 3 teams at 100% (see dashboard).  The DCD SNOD presence rate was 85% (but has seen a decrease from Q1 to Q2: Q1=86%, Q2=84%), compared with 79% in the same six months last year. There were 136 occasions where a SNOD was not present compared
Customer	more donors	90% DCD DCD DCD DCD DCD																	with 187 in the same period last year (27% decrease). The DCD SNOD presence rate ranges from 76% to 94% YTD across the 12 ODS teams (see dashboard).  Overall, there has been a 28% decrease in the number of occasions where a
Cust		70% -			DCD														SNOD was not present for the organ donation discussion.
	Deliv	50%	81%	85%	Actual	79%	81%	87%	78%	89%	80%	79%	83%	90%	84%	79%	88%		There has been a shift in focus for regional teams in regards to non SNOD involvement, looking at a more proactive approach to share practice in what has gone when in those approaches resulting in a consent and also looking in real time as to why the SNOD was not involved and completing a RCA around this.



Note: \* denotes metric is also a strategic target.



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#### Balanced Scorecard: ODT - as at the end of September 2017 2016/17 2017/18 Jul-17 Aug-17 Sep-17 Measure description Oct-16 Nov-16 Dec-16 Jan-17 Feb-17 Mar-17 Apr-17 May-17 YTD Number of deceased donors where at 95% of actual donors resulted in at least one organ being transplanted in Target Deliver more donors the first six months of 2017/18 (Q1=93%, Q2=96%), compared with 96% in least one organ was transplanted the same six months last year. 120 100 1,346 684 101 132 125 119 105 130 108 112 Actual 121 116 100 110 119 Consent rate for patients from black and The consent rate for patients from black and Asian communities was 46% 45.0% 50.0% 50.0% 50.0% 50.0% 50.0% 50.0% 50.0% 55.0% 55.0% 55.0% 55.0% 45.0% 45.0% Target in the first half of this year (Q1: 43/98=44%, Q2: 34/69=49%), compared Asian communities with 31% in the same six months last year. When comparing with the same six months last year there were 17 more organ donation discussions with families and consent was ascertained on 30 more occasions. London always mobilise requestors to any potential BAME approaches which has proved successful, also the pool of potential approaches made 46.1% 17.4% 57.1% 24.0% 34.6% 37.1% 42.9% 46.4% 45.5% 36.7% 37.5% 51.7% 62.5% Actual 48.6% to BAME donor families is considerably higher in London. Ongoing work around sharing practice with teams that have a lower BAME consent.

Note: \* denotes metric is also a strategic target.

										Balanced	l Scorecard	l: ODT - as	at the end	of Septen	nber 2017				
D	mension / CSFs	Measure description	2016/17 Actual	2017/18 YTD		Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Commentary
		% of consented 'donors' with organ(s) accepted but no organ(s) transplanted^			Target														10% of consented donors had organs accepted but no organs transplanted in September bringing the YTD total to 8%. The equivalent rate was 4% at
		20% 15% 10% 5% 0%	5.1%	7.9%	Actual	4.8%	5.1%	5.8%	5.3%	4.8%	8.6%	4.8%	9.0%	5.1%	11.3%	6.1%	6.5%	9.9%	the same point last year. Note that this metric excludes DCDs who did not die within the timeframe to become an organ donor.
		Number of deceased donor transplants *	3,900	2,058	Target	325	325	325	325	325	325	325	343	343	343	343	343	343	During the first six months of 2017/18, 1891 patients benefitted from a lifesaving or life changing solid organ transplant in the UK (Q1=942, Q2=949). This equates to an increase of 8.7% compared with the same six
mer	patients need	400 350 250 200	3,715	1,891	Actual	275	326	379	322	345	279	325	276	372	294	302	335	312	months last year.  2225 transplants are needed over the second half of the year if the 4116 deceased donor transplant target is to be achieved. This equates to 371 transplants per month for the rest of the year. An average of 2.77 transplants per donor is needed if 134 deceased donations occur each month. Although 2.77 transplants per donor does not happen very often, it has happened on several months in the past.  However, an average of 2.63 transplants per donor for the rest of the year (352 per month) would mean that at least 4000 transplants could occur in 2017/18 assuming the 134 deceased donors per month is achieved. Note
Customer	products	Deceased donor transplants pmp *	60.0	61.3	Target	58.2	58.3	58.5	58.6	58.7	59.1	60.0	57.7	58.1	59.0	59.9	60.6	61.3	that there were 2.62 transplants per donor in the first six months of 2017/18 (Q1=2.57, Q2=2.67).
	Deliver p	60 58 56 54 52 50	57.3	59.2	Actual	55.8	55.1	56.1	56.2	56.3	56.2	57.3	56.7	57.5	57.7	57.9	58.6	59.2	The work to implement the organ utilisation strategy is addressing the number of transplants in a number of ways, including increased dissemination of data to transplant units. A new initiative will commence in November, looking at challenging Transplant Units regarding discarded kidneys from 'ideal donors'. If successful, this approach will be rolled out to other organ types. A similar project is underway for CT, where all lung transplant units join a teleconference every month to discuss the decline of lungs from 'ideal donors'.
		Growth in total (active and suspended) transplant waiting list (^at end of month)			Target														There were 9770 patients on the transplant waiting list at the end of September (6505 active and 3265 suspended). There were 88 more patients
		+200	-182	+24	Growth	+58	-119	-41	-25	-87	+13	+12	-12	-45	-7	+4	-4	+88	on the list at the end of September compared with the end of August (+133 active, -45 suspended).

Note: \* denotes metric is also a strategic target.

Chart begins from Apr-15

^ Excluding DCDs who did not die within the timeframe to become an organ donor

										Balanced	Scorecard	: ODT - as	at the end	of Septem	ber 2017				
	Dimension /CSFs	Measure description	2016/17 Actual	2017/18 YTD		Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Commentary
	r VFM IS	Cost per transplant (£000s) - Annual forecast *	17.90	16.25	Target	17.90	17.90	17.90	17.90	17.90	17.90	17.90	16.25	16.25	16.25	16.25	16.25	16.25	See separate finance report.
	Deliver better VFM for the NHS	20 ]	18.12	16.44	Actual	18.99	18.26	18.28	18.21	17.90	18.01	18.12	16.25	16.25	16.33	16.37	16.36	16.44	
		Quarterly average number of organs retrieved per abdominal team (Qtrly in arrears)			Target														These metrics are reported quarterly, a month in arrears.
	Reduce net tax-payer burden	180 160 140 120			Actual	138			164			156			151				
Š	net tax	Quarterly average number of organs retrieved per cardiothoracic team (Qtrly in arrears)			Target														
Resources	Reduce	60 40 20			Actual	38			53			42			58				
		% of days abdominal teams attended >=1 potential donor when on call (Qtrly in arrears)		70%	Target								70%	70%	70%	70%	70%	70%	These metrics are reported quarterly, a month in arrears.
	tax-payer burden	80% - 40%	56%		Actual	52%			58%			61%			56%				
	net	% of days cardiothoracic teams attended >=1 potential donor when on call (Qtrly in arrears)		70%	Target								70%	70%	70%	70%	70%	70%	
	Reduce	80% - 60% - 40% - 20% - 0% - 1	43%		Actual	36%			44%			47%			37%				

										Balanced	l Scorecard	d: ODT - as	at the end	of Septem	ber 2017				
	Dimension / CSFs	Measure description	2016/17 Actual	2017/18 YTD		Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Commentary
		Number of occasions where ODT did not offer organs in accordance with allocation policy	0	0	Target	0	0	0	0	0	0	0	0	0	0	0	0	0	There were no occasions where organs were offered outside of the allocation policy in September; the YTD total remains at 2.
	ness		6	2	Actual	1	0	2	1	0	0	0	0	0	1	0	1	0	
	1/7 busi	Total hour(s) of unplanned IT system disruption		<7	Target								<7	<7	<7	<7	<7	<7	Some users were unable to access the CRM platform which hosts the Super Urgent Liver List. This was due to a new subscription becoming live.
	ate a single 24/7 business	24 18 12 6 6			Actual											17.1	1.2	1.6	No incidents were reported from ODT.
us Su	Operate	Total hour(s) of planned IT system maintenance/upgrade			Target														Planned Releases including ODT Hub 3.1, ODT Hub 3.1.1 and CSM TS0.1 hotfix (7.6 hours). Scheduled maintenance including Voice Recording
Operations		24 18 12 6 0			Actual											2.0	2.8	12.6	Service reboot and BPMS platform upgrades (5 hours).
	fely	Number of serious incidents	0	0	Target	0	0	0	0	0	0	0	0	0	0	0	0	0	There were 60 incidents reported in-month, none of which met criteria for reporting to the regulator.
	Operate safely	3 2 1 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0 1	2	1	Actual	0	0	0	0	0	1	0	0	1	0	0	0	0	
	nplete	Number of ODR registrations with an unknown NHS/CHI number			Target														The NHS Tracing Service has not been operational since June 2015. The ODR Team are currently working with Northgate Public Services to re-
	Maintain a con and accurate da	5,000,000 4,000,000 3,000,000 2,000,000 1,000,000 0		4,737,508	Actual									4,335,877	4,448,887	4,524,429	4,616,003	4,737,508	introduce this service.

#### Balanced Scorecard: ODT - as at the end of September 2017 2016/17 2017/18 Measure description Oct-16 Feb-17 Mar-17 Sep-17 Sep-16 Nov-16 Dec-16 Jan-17 Apr-17 May-17 Jun-17 Jul-17 Aug-17 Commentary YTD The level of absence across the directorate has further increased slightly this Sickness absence 4.0% 4.0% Target 4.0% 4.0% 4.0% 4.0% 4.0% 4.0% 4.0% 4.0% 4.0% 4.0% 4.0% 4.0% 4.0% month from 2.42% to 2.77% but still remains within target. Absence has remained less than 3% for the last 8 months and a maximum of 3.64% absence in the past 12 month period. The absence breakdown for ODT is: Short term absence 1.65% - increase from 1.06%; Long term absence: 2.9% 2.4% 4.1% 2.8% 3.6% 3.3% 2.2% 2.2% 2.5% 2.5% 2.0% 2.3% 2.8% Actual 3.2% 2.4% 2% 1.12% - decrease from 1.37%. 0% % annual turnover Turnover overall in ODT continues to be a concern with an increase from 10.0% 10.0% 10.0% 10.0% 10.0% 10.0% 10.0% 10.0% 10.0% 10.0% 10.0% 10.0% 10.0% 10.0% 10.0% Target 12.85% to 13.23% for the directorate. Hot spots are in Organ Donation which has increased from 11.03% last month to 12.56%. TSS and Clinical 18% 16% remain high with significant turnover at 17.46% and 25.71% respectively. 14% 15.4% 13.5% 13.1% 12.1% 12.8% 13.1% 13.2% Actual 14.9% 14.3% 14.7% 13.0% 13.0% 13.2% 13.1% 13.2% 10% Lead motivated employees % mandatory training compliance Mandatory training compliance has decreased overall by 0.3% this month 95.0% 95.0% 95.0% 95.0% 95.0% 95.0% 95.0% 95.0% 95.0% 95.0% 95.0% 95.0% 95.0% 95.0% 95.0% Target with compliance ranging from 87.9% to 97.1% across the functions and a (Qtrly) 12-months rolling period range of 66.7% to 100% compliance across the directorate teams. Specific 100% interventions are continuing to be discussed, explored and implemented to increase compliance in this area. In addition to mandatory training recorded through Shine Academy: Consent training (SPPC) is now fully booked to reach 100% compliance by 84.1% 89.3% Actual 83.3% 85.4% 90.7% March 2018. As per last month, changeover from previous Annual Consent Course to the new course has meant that individuals will be trained after their previous annual compliance date. Cohort 6 completed their Consent training this month. PDPR PDPR compliance overall has further increased this month from 91.5% to 95.0% 95.0% Target 95.0% 95.0% 95.0% 95.0% 95.0% 95.0% 95.0% 95.0% 95.0% 95.0% 95.0% 95.0% 95.0% 92.8% compliance across the directorate. ODT Clinical, Commissioning and (Qtrly) 12-months rolling period Transplantation Support Services have had increases in compliance. 14 of the functional teams have compliance at 100%; remaining teams have 90% compliance within the range of 69.6% to 94.7%. 80% 90.5% 92.8% Actual 87.2% 89.2% 90.5% 86.8% 92.8% 70%

Note: \* denotes metric is also a strategic target.

Chart begins from Apr-15

60%

										Balanced	d Scorecard	l: ODT - as	at the end	of Septem	ber 2017				
Dim /	ension CSFs	Measure description	2016/17 Actual	2017/18 YTD		Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Commentary
ovo	2	Proportion of SNOD establishment competent on the rota	85.0%	85.0%	Target	85.0%	85.0%	85.0%	85.0%	85.0%	85.0%	85.0%	85.0%	85.0%	85.0%	85.0%	85.0%	85.0%	The proportion of SNOD establishment competent on the rota is now 82.5%. This ranges from 70% to 97% across the 12 ODS teams (see dashboard).
Create Flexible Employe	Base	80%	69.1%	82.5%	Actual	66.5%	68.3%	67.4%	67.4%	69.7%	68.7%	69.1%	75.2%	78.2%	78.0%	80.8%	81.6%	82.5%	There are 6 remaining cohort 5 trainees (classed as over 6 months) but al are progressing as anticipated with exposure to specific areas of the process being the main factor for delay in getting onto the rota - all expected to be independent on the rota in October. There is also 1 sickness return and 5 maternity leave returners.
		H&S near misses (month in arrears)			Target														This metric is reported a month in arrears. August was consistent with th pattern of 1 per month, bringing the total number of reported near miss
adoa	Employees	2 0	0	5	Actual							0	1	1	1	1	1		from April to August to 5.
	Caring Em	Number of BAME managers	1	1	Target							≥1							The number of BAME staff increased in Q2 from 19 to 20. Note that this was not a SNOD post.
	Expert,	2 0	1	1	Actual	2			1			1			1			1	The Lead Nurse for Diversity and a recent graduate management placement student have been working on the development of a dedicate Diversity Action Plan to support the increase in the diversity of the workforce.  Actions taken to date include:
	Recruit and Retain	Number of BAME staff	20	22	Target	19	19	19	19	19	19	20	20	20	21	21	21	22	- Networking to have shared learning via other organisations and universities.
	Recr	20 -	19	20	Actual	20			18			19			19			20	- Exploration of interventions with the recruitment team - includes the development of a leaflet to attract nurses into the role Widening of the Person Specification for the SNOD role Research to look into why Black & Asian nurses are not attracted to the SNOD role.

## 5. OD KEY PERFORMANCE MEASURES: MONTHLY AND YTD SUMMARIES OD Regional Performance Dashboard IN-MONTH

OD Regional D	ashboard ( <u>in</u>	-month)	Mont	Reported:	September :	2017	Date Produ	uction Date:	09/10/2017	
					Deceased Do	onor Pathway				
Septemb	er 2017	Donors	Approx* donor target	Difference*	Utilised donors	BSD testing	Referral	SNOD Present	Consent / Authorisation	Competent SNODs on the rota
	Combined								70.0%	85.0%
Targets	DBD								73.0%	
Ü	DCD								67.0%	
	Combined	12	13	-1	11				67.9%	86.1%
Eastern	DBD	5			5	54.5%	100.0%	83.3%	100.0%	
	DCD	7			6		91.4%	77.3%	59.1%	
	Combined	16	14	2	15				68.6%	72.7%
London	DBD	14			13	78.1%	96.9%	100.0%	77.3%	
	DCD	2			2		86.1%	76.9%	53.8%	
	Combined	17	15	2	16				78.6%	80.8%
Midlands	DBD	9			9	65.0%	100.0%	100.0%	92.3%	
	DCD	8			7	00.070	84.6%	86.7%	66.7%	
	Combined	15	15	0	14				68.0%	97.0%
North West	DBD	10	,0		10	80.0%	100.0%	93.3%	80.0%	01.070
	DCD	5			4	00.070	87.7%	100.0%	50.0%	
	Combined	7	8	-1	6		01.1.70	100.070	52.4%	78.3%
Northern	DBD	5	J	,	5	54.5%	100.0%	100.0%	83.3%	10.070
11011110111	DCD	2			1	34.370	94.6%	93.3%	40.0%	
	Combined	2	4	-2	2		34.076	93.376	57.1%	70.0%
Northern Ireland		0	4	-2	0	66.7%	100.0%	100.0%	0.0%	10.076
Northern metand	DCD	2			2	00.778	94.1%	100.0%	66.7%	
	Combined	5	11	-6	5		94.176	100.0%	64.3%	93.3%
Scotland	DBD	3	11	-0	3	62.5%	100.0%	100.0%	100.0%	93.3%
Scotianu	DCD	2			2	62.5%	96.9%	81.8%	54.5%	
	Combined	6	10	-4	6		90.9%	01.0%	60.0%	83.1%
South Central			10	-4		00.00/	00.00/	07.50/		83.1%
South Central	DBD	2			2	80.0%	90.0%	87.5%	75.0%	
			40	0			85.7%	71.4%	42.9%	74.40/
South East	Combined	13	13	0	13	0.4.00/	400.00/	07.50/	62.5%	71.1%
South East	DBD	6			6	84.6%	100.0%	87.5%	50.0%	
	DCD	7	_		7		86.7%	81.3%	68.8%	
South Wales	Combined	2	5	-3	2				44.4%	85.0%
South wales	DBD	1			1	75.0%	100.0%	100.0%	66.7%	
	DCD	1			1		87.0%	66.7%	33.3%	
	Combined	9	8	1	8				62.5%	71.8%
South West	DBD	3			3	85.7%	100.0%	100.0%	66.7%	
	DCD	6			5		87.0%	80.0%	60.0%	
	Combined	14	10	4	14				75.0%	94.4%
Yorkshire	DBD	9			9	84.6%	100.0%	100.0%	90.0%	
	DCD	5			5		89.5%	100.0%	64.3%	
	Combined	118	127	-9	112				65.9%	82.5%
National	DBD	69	74	-5	68	73.7%	98.7%	96.0%	79.2%	
	DCD nearest integer	49	53	-4	44		89.0%	84.8%	56.6%	

<sup>\*</sup> Rounded to the nearest integer

### **OD Regional Performance Dashboard**

OD Regional Da	ashboard ( <u>Y</u>	<u>[D)</u>	Mont	h Reported:	September 2	2017		Date Prod	uction Date:	09/10/2017	
						Deceased D	onor Pathway	,			
2017/18	ΥΤΟ	Deceased donors pmp	Donors	Approx* donor target	Difference*	Utilised donors	BSD testing	Referral	SNOD Present	Consent / Authorisation	Competent SNODs or the rota
	Combined	22.9								70.0%	85.0%
Targets	DBD									73.0%	
	DCD									67.0%	
	Combined		78	78	1	72				63.9%	86.1%
Eastern	DBD		38			37	82.1%	98.7%	95.0%	75.0%	
	DCD		40			35		89.2%	80.7%	57.8%	
	Combined		101	85	16	93				61.6%	72.7%
London	DBD		80			77	92.3%	98.2%	93.4%	66.2%	
	DCD		21			16		90.5%	80.7%	54.2%	
	Combined		84	90	-6	82				61.1%	80.8%
Midlands	DBD		41			41	82.8%	98.9%	91.0%	73.1%	
	DCD		43			41		80.1%	81.3%	54.5%	
	Combined		102	93	10	99			0.1070	69.4%	97.0%
North West	DBD		67			66	82.4%	98.4%	97.8%	80.6%	
	DCD		35			33	4=1.77	88.4%	94.0%	59.0%	
	Combined		38	48	-10	36		00.170	01.070	60.0%	78.3%
Northern	DBD		22	.0	,,,	22	76.4%	100.0%	100.0%	72.2%	70.070
Hortinerii	DCD		16			14	70.470	95.7%	87.5%	53.1%	
	Combined		18	25	-7	18		33.1 /6	07.576	71.9%	70.0%
Northern Ireland			11	20	-/	11	68.2%	95.5%	92.9%	85.7%	70.078
Northernineland	DCD		7			7	00.276	86.2%	94.4%	61.1%	
	Combined		38	68	-30	37		00.276	94.476	53.6%	93.3%
Scotland	DBD		24	08	-30	24	76.4%	98.2%	91.9%	73.0%	93.3%
Scotland	DCD		14			13	70.4%	90.8%	78.7%	44.0%	
				50	40			90.6%	10.176		00.40/
South Central	Combined		46	58	-12	44	00.00/	00.00/	00.00/	65.5%	83.1%
South Central	DBD		26			25	80.0%	98.2%	92.3%	79.5%	
	DCD		20	04	40	19		85.7%	76.1%	57.7%	74.40/
South East	Combined DBD		69 47	81	-12	63 42	86.8%	100.00/	06.40/	66.4%	71.1%
Journ East	DCD		22				80.8%	100.0%	96.1%		
				00	_	21		89.1%	88.1%	62.7%	05.00/
Caush Maria	Combined		24	30	-6	22	00.001	400.007	400 001	72.9%	85.0%
South Wales	DBD		15			15	96.0%	100.0%	100.0%	95.0%	
	DCD		9	-	7-	7		85.5%	85.7%	57.1%	
0	Combined		59	47	12	56				69.6%	71.8%
South West	DBD		33			33	91.1%	100.0%	100.0%	83.0%	
	DCD		26			23		87.8%	86.2%	60.0%	
	Combined		65	62	4	62				63.7%	94.4%
Yorkshire	DBD		30			28	83.6%	100.0%	90.9%	65.9%	
	DCD		35			34		89.8%	92.3%	62.6%	
	Combined	22.6	722	762	-40	684				64.1%	82.5%
National	DBD	13.5	434	444	-10	421	84.5%	98.9%	94.9%	74.0%	
	DCD	9.1	288	318	-30	263		88.1%	84.8%	56.7%	

<sup>\*</sup> Rounded to the nearest integer

### LIVING DONATION ACTIVITY - FOR INFORMATION

	Balanced Scorecard: ODT - as at the end of September 2017																		
	Dimension /CSFs	Measure description	2016/17 Actual	2017/18 YTD		Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Commentary
Customer	er more donors	Number of living donors * (month in arrears)	1,260	580	Target	105	105	105	105	105	105	105	116	116	116	116	116		This metric is provided for information, a month in arrears.
		120 100 80 60	1,039	431	Actual	91	92	115	68	83	77	88	70	89	93	91	88		
		Living donors pmp (month in arrears)	19.5	18.3	Target	18.0	18.3	18.4	18.6	18.8	19.3	19.5	16.3	16.8	17.3	17.6	18.3		
		20 19 18 17 16 15	16.0	16.0	Actual	16.3	16.3	16.3	16.2	16.1	16.1	16.0	15.6	15.7	15.8	15.8	16.0		