

ODT Performance Report

Monthly – February 2018



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1. EXECUTIVE SUMMARY FOR MARCH ODT SMT MEETING: APRIL 2017 TO FEBRUARY 2018

DECEASED DONORS

- With 1428 deceased donors at the end of February we know that 2017/18 is already another record year with one month to go, compared with the 1413 in the whole of 2016/17. 1428 donors is 11% higher than the number of deceased donors at the same point last year (1290).
- When looking at the rolling 12-month period from March 2017 to February 2018, there were 1551 deceased donors. This is a <u>92% increase</u> over the ten years from 2007/08 (the baseline year of the Organ Donation Taskforce).

DECEASED DONOR TRANSPLANTS

- There were 3648 deceased donor transplants by the end of February, and at the time of writing, 2017/18 is also another record year for transplants. 3648 transplants is 8% higher than the number of deceased donor transplants at the same point last year (3390).
- When looking at the rolling 12-month period from March 2017 to February 2018, 3973 patients received a solid organ transplant from a deceased donor. This is a 67% increase over the ten years from 2007/08.

CONSENT/AUTHORISATION RATE

- The overall consent rate YTD is 65%. This is an 8 percentage point (pp) increase on the 57% when the *Taking Organ Transplantation to 2020* Strategy was published. A further 15 pp increase is required to reach the 80% 2019/20 strategic target.
- The DBD consent rate YTD is 73%. This is a 5 pp increase on the 68% when the Strategy was published. Most of the increase occurred in 2017/18 (4 pp). Five of the twelve Organ Donation Services Teams are already achieving world class performance in DBD consent (≥ 80%) when a SNOD is present (South Wales 86%, South Central 83%, South West and Scotland 81% and North West 80%).
- The DCD consent rate YTD is 59%. This is an 8 pp increase on the 51% when the Strategy was published. However only 1 pp of that occurred in 2017/18.

MISSED OPPORTUNITIES

- YTD there have been 621 missed referral opportunities. This is a huge reduction compared with the point last year (866):
 - o DBD: 24 fewer (53% decrease); DCD: 221 fewer (27% decrease); Total: 245 fewer missed referrals (28% decrease).
- YTD there have been 303 occasions where a SNOD was not present; a great reduction compared with the same point last year (402):
 - o DBD: 16 fewer (20% decrease); DCD: 83 fewer (26% decrease); Total: 99 fewer occasions without a SNOD (25% decrease).
 - Further reducing the number of occasions without a SNOD present into 2018/19 has the potential to have a large impact on the number of patients receiving a transplant. If a SNOD had been present for the 303 occasions YTD, 133 more consents may have been achieved. This equates to approximately 100 more deceased donors and approximately 250 more transplants.

ODR

- The 1.1m opt-in registration target for 2017/18 has already been achieved.
- However, there were 96,717 opt-out registrations in February. This is currently higher than the 89,685 opt-in registrations so far recorded for February. Prior to January we typically received in the region of 2000 opt-out registrations per month.

2. ODT STRATEGIC OBJECTIVES

	Final	Final	F	Actual Pe	rformanc	е					2017/	18 Perfor	mance						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	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Chart begins from Apr-15	YTD
Consent / authorisation	80%	March 2020	59.4%	57.7%	61.9%	62.9%	62.6%	64.7%	65.0%	62.1%	64.2%	65.1%	67.8%	68.3%	63.0%	67.9%	63.5%	80% 70% 60% 50%	65.1%
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	22.5	22.7	22.7	22.8	23.4	23.7	24 22 20 18	23.7
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%	9.9%	10.3%	8.7%	9.2%	11.4%	20%	8.9%
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	59.3	59.0	58.7	59.9	60.8	50	60.8
5. Living donors pmp	26 pmp	March 2020	17.9	17.1	16.7	16.0	15.6	15.7	15.8	15.8	16.1	16.0	15.9	15.5	15.7	15.6		20 19 18 17 16 15	15.6

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

Objective 1 – Consent[^] 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)*. 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#. 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#. End of year targets for 2017/18 are 1,392 transplants and 21.0 pmp.

Note:

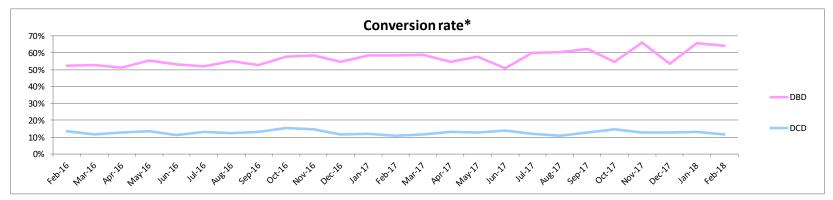
- # Based on rolling 12 month period.
- ^ Please read consent as consent/authorisation throughout the report.
- * Excluding DCDs who did not die within the timeframe to become an organ donor

3. SUMMARY OF DECEASED DONOR PATHWAY

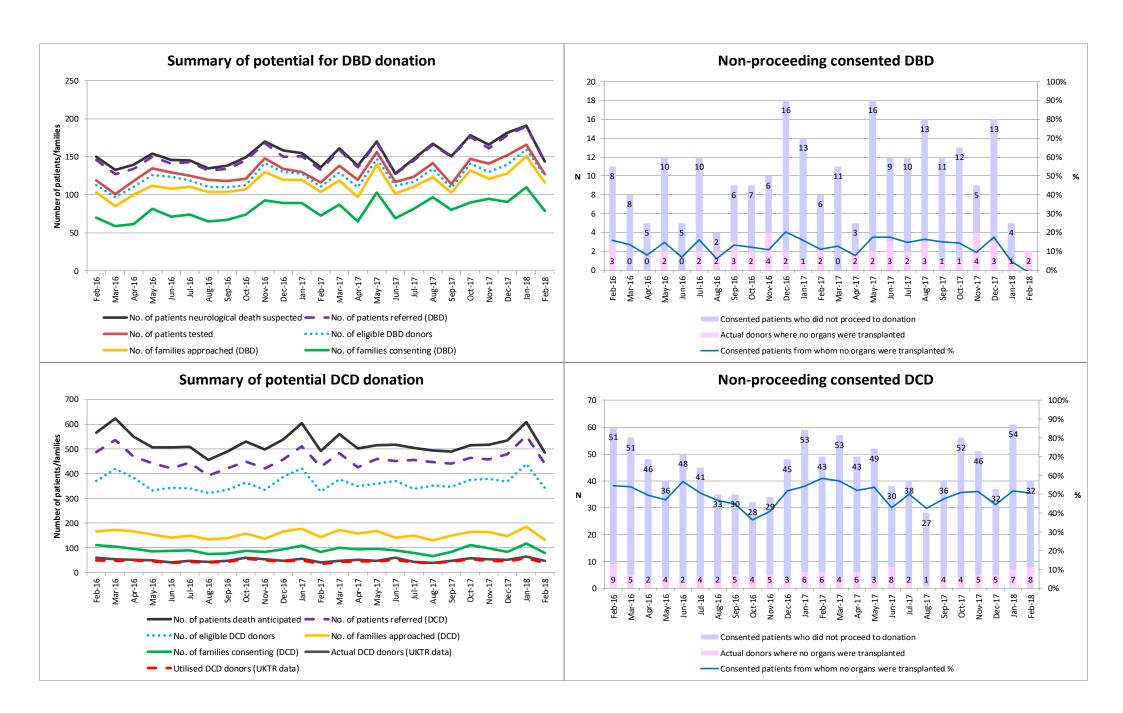
February 18												
	Potential donors	Patients referred	Eligible donors	Families approached	Families consenting^	Actual donors^	Utilised donors^	Conversion rate*	Consented patients who did not proceed to donation	Actual donors where no organs were transplanted	patients from whom no	Total consented patients from whom no organs were transplanted %
DBD	144	143	125	116	79	82	80	64%		2		
DCD	484	441	342	133	79	47	39	11%	32	8	40	51%
Total	628	584	467	249	158	129	119	25%		10		

The number of families consenting is calculated from Potential Donor Audit (PDA) data. The number of actual donors and utilised donors are calculated from UK Transplant Registry (UKTR) data. During February there appears to be more donors than families consenting. This is because the different data sources use different time points.

2	017/18 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	Total consented patients from whom no organs were transplanted	Total consented patients from whom no organs were transplanted %
	DBD	1,762	1,741	1,425	1,324	961	868	844	59%	93	24	117	12%
	DCD	5,672	5,072	4,016	1,689	999	560	507	13%	439	53	492	49%
	Total	7,434	6,813	5,441	3,013	1,960	1,428	1,351	25%	532	77	609	31%



^{*} The conversion rate represents the proportion of eligible donors from whom at least one organ was transplanted (utilised donors).



4. ODT BALANCED SCORECARD

										Balance	d Scorecar	d: ODT - as	s at the end	d of Februa	ary 2018				
	Dimension / CSFs	Measure description		2017/18 YTD		Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Commentary
		Referral rates (DBD and DCD)			DBD														The YTD DBD and DCD referral rates remain at 99% and 89%, respectively. Compared with the same 11 months last year, the DBD referral rate is 2 percentage points (pp) higher and the DCD referral rate has increased by
		100% 90% 80%																	4pp.
		80% - 70% -	97.4%	98.8%	Actual	97.8%	98.8%	98.6%	99.4%	99.2%	98.6%	99.4%	99.3%	98.9%	97.0%	97.8%	99.5%	99.3%	One of the main priorities for 2017/18 was to reduce the number of missed referral opportunities. YTD there have been 21 and 600 missed DBD and DCD referral opportunities, respectively (621 in total). This is a
		60%																	huge reduction when compared with the same 11 months last year (866): 1 * 24 fewer missed DBD referrals (53% decrease).
					DCD														* 221 fewer missed DCD referrals (27% decrease). * 245 fewer missed referrals in total (28% decrease).
																			In February all referrals to SNODs moved from the local pager service to
-	more donors		85.6%	89.4%	Actual	87.0%	86.4%	85.0%	89.3%	87.4%	90.3%	90.7%	90.4%	89.9%	88.4%	89.9%	91.1%	91.1%	the national Hub. This process has been successful so far with no regions identifying missed referrals due to the changes in-month. Several regions do have some geographical reception challenges, but these will be
Customer	nore																		addressed by the 2-way pager option. Any missed referrals will be monitored to identify any pager related issues.
ð	Deliver	Number of missed referral opportunities (DBD and DCD)			DBD														infolitored to identify any pager related issues.
		150 DBD DCD																	
		100 0	47	21	Actual	3	2	2	1	1	2	1	1	2	5	4	1	1	
		0																	
					DCD														
			897	600	Actual	64	76	75	55	65	49	46	47	52	60	54	54	43	
		etos motrio is also a stratogio target																	

Balanced Scorecard: ODT - as at the end of February 2018 2016/17 2017/18 Mar-17 Apr-17 May-17 Jun-17 Sep-17 Oct-17 Nov-17 Dec-17 Jan-18 Feb-18 Measure description Commentary YTD Number of eligible donors The number of eligible donors fluctuates and is provided for information. Target There were 231 more eligible donors YTD than the same 11 months last year (+100 DBD, +131 DCD). 550 5,715 5,441 439 459 483 484 467 Actual 505 507 456 455 516 509 507 598 Number of new opt-in registrants on the Cumulative opt-in registrations for 2017/18 now stand at 1,129,327 with 1.600 1.008 Target 0.130 0.130 0.092 0.092 0.092 0.092 0.092 0.092 0.092 0.092 0.092 0.092 0.092 ODR (million) * one month left in the financial year. During February we continued our social paid 'registration driving activity' targeting over 50s and lookalikes. The Government consultation continued and there was a significant 0.250 Deliver more donors amount of media noise, driving opt-in and opt-out traffic around the 2nd 0.200 reading of the Private Members Bill. 0.150 0.090 0.102 0.090 1.129 Actual 0.099 0.108 0.102 0.107 0.104 0.137 0.111 0.098 0.080 0.109 More than half (52%) of new registrations were generated by 0.100 comms/marketing activity this month. Also, 49% of new registrations 0.050 came through digital channels. Both of these are the highest proportions YTD, and are reflective of the increased media noise as well as a lower number of DVLA registrations. Number of new opt-out registrants on the In February we saw more opt-out than opt-in registrations (96,717 v Target ODR 89,685). These opt-outs look to be disproportionately high among black and Asian people. 100.000 80.000 It is important to note that one ODR data feed is currently inactive: Scottish GP Service. The issue is now fully understood and NHSBT are working with 60.000 the third party provider to restore this service. 40,000 96,717 24,663 134,162 1,813 1,954 2,378 1,768 1,345 1,700 1,248 1,861 3,121 1,952 2,858 19,214 20,000 The de-duplication process has been inactive since June 2015. This may result in significant numbers of duplicate registrations on the live ODR, ie over-reporting the number of registrants.

Note: * denotes metric is also a strategic target.

Chart begins from Apr-15

Balanced Scorecard: ODT - as at the end of February 2018 2016/17 2017/18 Measure description Apr-17 May-17 Sep-17 Oct-17 Nov-17 Dec-17 Commentary Actual YTD SNOD presence rate (DBD and DCD) The YTD DBD and DCD SNOD presence rates remain at 95% and 86%, DBD respectively. Compared with the same 11 months last year, the DBD SNOD presence rate is 2pp higher and the DCD SNOD presence rate has 100.0% increased by 5pp. 90.0% In February, the DCD SNOD presence rate was higher than the DBD rate. One of the main priorities for 2017/18 was to reduce the number of 60.0% occasions where a SNOD was not present for the formal organ donation 95.0% 91.3% 90.8% 90.7% 96.1% 96.4% 95.9% 96.1% 93.2% 96.7% 96.7% 92.2% Actual 93.6% 96.9% discussion. YTD there have been 66 and 237 DBD and DCD occasions, 50.0% respectively (303 in total). This is a great reduction when compared with the same 11 months last year (402): * 16 fewer DBD occasions (20% decrease). Deliver more donors * 83 fewer DCD occasions (26% decrease). * 99 fewer occasions in total (25% decrease). There were 19 occasions where a SNOD was not present in February, with DCD reasons reported from the regions as follows: • 5 Cases where the SNOD had made a plan with the ICU, however this was not followed - Consultants approached while SNOD en route, or changing the plan without the SNOD being updated. • 8 Cases where the SNOD was present on the ICU/hospital and consultant refused SNOD involvement or approached without the SNOD being aware. 3 cases where there was no referral to the SNOD. · 2 cases where there were insufficient SNOD resources due to the volume 84.7% 80.6% 86.0% Actual 80.3% 79.1% 90.5% 84.4% 78.7% 87.8% 85.9% 86.5% 84.0% 84.5% 86.5% 92.5% of referrals. TM coached local staff to approach (both during core hours but towards the end of the working day – Mids and NW) 1 PDA incorrect entry All of these cases are being followed up with the CLODs via a missed opportunities letter or with direct conversations with the RCLOD. Regions are reporting positive feedback and action plans/outputs from previous

months missed opportunities letters/conversations.

Balanced Scorecard: ODT - as at the end of February 2018 2016/17 2017/18 Measure description Apr-17 May-17 Jun-17 Aug-17 Sep-17 Oct-17 Nov-17 Dec-17 Jan-18 Feb-18 Commentary Actual YTD Number of consented eligible donors YTD 131 more formal organ donation discussions have taken place (+104 Target DBD, +27 DCD) and consent has been ascertained on 152 more occasions (+122 DBD, +30 DCD) when compared with the same 11 months last year. 1,960 1.995 157 158 228 Actual 187 159 200 162 163 164 200 194 174 158 Overall consent rate * The overall consent rate YTD remains at 65% and the DBD and DCD 70.0% 70.0% 70.0% 70.0% 70.0% 70.0% 70.0% 70.0% 70.0% 70.0% 70.0% 70.0% 70.0% 70.0% 70.0% Target consent rates remain at 73% and 59%, respectively. Compared with the same 11 months last year, the overall consent rate is 2pp higher and the 80% DBD and DCD consent rates are 4pp and 1pp higher, respectively. Overall regional breakdown: Six of the 12 regions are green YTD for the overall consent rate (South Wales 72%, North West 70%, NI and Yorkshire 69%, Eastern and South East 68%). 65.1% 67.9% 63.5% Actual 63.8% 64.3% 62.6% 64.7% 65.0% 62.1% 64.2% 65.1% 67.8% 68.3% 63.0% Two regions are amber (South Central and South West 66%), although South Central has the highest overall consent rate of all the teams when a SNOD is present (77.5%) Four regions are red (Midlands 63%, Northern 61%, London 58% consent rate and Scotland 55% authorisation rate). DBD regional breakdown: donors Ten of the 12 regions are green YTD for the DBD consent rate, including South Wales and North West with DBD consent rates of at least 80% DBD consent rate 72.0% 73.0% Target 72.0% 72.0% 73.0% 73.0% 73.0% 73.0% 73.0% 73.0% 73.0% 73.0% 73.0% 73.0% 73.0% more (South Wales 83% and North West 80%). Five of the teams have DBD consent rates of at least 80% when a SNOD is present: South Wales 86%, 80% South Central 83%, South West and Scotland 81% and North West 80%. Of the remaining two regions: Yorkshire is amber with a 68% DBD consent rate (69% when SNOD present), although see below for the impressive DCD consent rate achieved by this team. 69.2% 72.6% Actual 70.2% 73.1% 67.0% 73.6% 67.6% 73.9% 78.9% 77.7% 68.2% 78.5% 71.1% 72.8% 68.1% London is red with a 61% DBD consent rate (64% when SNOD present). 60% DCD regional breakdown: Three of the 12 regions are green YTD for the DCD consent rate (Yorkshire 70%, NI 66% and South Wales 65%). Yorkshire's DCD consent rate is higher than their DBD consent rate (70% vs 68% for all approaches and 74% vs 69% when a SNOD is present). This pattern is very different to all the other DCD consent rate regional teams. The Yorkshire team have reported this is due to the high 67.0% 67.0% Target 68.0% 68.0% 67.0% 67.0% 67.0% 67.0% 67.0% 67.0% 67.0% 67.0% 67.0% number of DCD approaches (70 extra referrals compared with this time last year) and 2-3 months where there were difficult DBD approaches with low consent rates.

59.1%

58.3%

59.2%

Actual

59.9%

58.1%

63.1%

57.4%

53.3%

50.4%

56.4%

67.5%

60.7%

56.1%

63.8%

59.4%

withdrawal.

See dashboard for further information.

50%

Three regions are amber and six regions are red, with Scotland considerably lower than the other regions with a DCD authorisation rate of 44% (54% when a SNOD is present). Scotland have a low DCD

authorisation rate despite a DCD SNOD presence rate of 81% YTD. The

team have reported that they have had a high number of family refusals due to length of process, known wishes or families wish for immediate

										Balance	d Scorecar	d: ODT - as	s at the en	d of Februa	ary 2018				
	Dimension /CSFs	Measure description	2016/17 Actual	2017/18 YTD		Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Commentary
		Number of families overruling patient consent			Target														There has been one more ODR override than the same period last year (80 in total). On 18 occasions a SNOD was not present.
		15 10 5 0	91	80	Actual	6	12	6	14	4	9	6	6	5	5	8	12	5	The consent rate for patients on the ODR YTD is 93% when a SNOD is present. Although the consent rate in this circumstance has not changed from last year, 150 more families with loved ones on the ODR have been approached by a SNOD and 143 more families supported the decision, when compared with the same 11 months last year.
		Consent rate when patient on ODR *			Target														For families approached without a SNOD when their loved one was on the
Customer	more donors	90%	90.4%	91.9%	Actual	91.9%	87.5%	92.2%	87.8%	95.0%	89.8%	92.5%	92.6%	94.5%	94.4%	91.9%	88.9%	93.7%	ODR, the consent rate YTD is 65%. Eleven fewer families have been approached in this circumstance compared with the same period last year, but this still leaves 52 occasions where best practice was not followed. Fourteen more families may have supported their loved ones' decision if a SNOD had been present.
Cust	Deliver m	Consent rate when patient not on ODR *			Target														There has been little change in the consent rate for patients not on the ODR when a SNOD is present (58% YTD compared with 57% in the same
	De	70% 60% 50% 40%	51.2%	52.0%	Actual	51.7%	52.8%	49.7%	51.0%	50.3%	48.0%	51.1%	52.0%	55.9%	56.4%	46.9%	57.9%	49.4%	period last year). However as SNOD presence has increased, 80 more families have been approached by a SNOD in this circumstance and consent was ascertained on 53 more occasions, compared with the same period last year. For families approached without a SNOD when their loved one had not opted-in on the ODR or this was not known at the time, the consent rate is 11% YTD. Although 88 fewer families have been approached YTD without a SNOD in this circumstance, this still leaves 251 occasions where best practice was not followed. With such a low consent rate, following best practice here could have made a huge difference. If a SNOD was present and 58% consent rate was achieved then consent may have been ascertained on 146 occasions rather than just 27 (ie 119 more consents).

										Balance	d Scorecar	d: ODT - as	at the end	l of Februa	ry 2018				
	Dimension / CSFs	Measure description	2016/17 Actual	2017/18 YTD		Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Commentary
		Number of deceased donors (DBD/DCD) *	1,440	1,397	Target	120	120	127	127	127	127	127	127	127	127	127	127	127	At the end of February there were more deceased donors YTD than the whole of 2016/17. There were 129 deceased donors in February, bringing
	more donors	180 160 140 120 100 80	1,413	1,428	Actual	108	123	113	135	119	114	123	117	136	143	129	170	129	the YTD total to 1428 (11% higher than the same 11 months last year). 2017/18 is already another record year for deceased donors with one month to go. When looking at the rolling 12-month period from March 2017 to February 2018, there were 1551 deceased donors. This is a 92% increase over the
	Deliver m	Deceased donors pmp *	22.0	23.1	Target	22.0	22.0	21.9	22.0	22.3	22.6	22.8	22.9	23.0	23.0	23.0	23.0	23.1	ten years from 2007/08 (the baseline year of the Organ Donation Taskforce).
ner	De	26 24 22 20 18	21.8	23.7	Actual	21.5	21.8	21.7	21.9	22.1	22.1	22.4	22.5	22.7	22.7	22.8	23.4	23.7	
Customer	donors	Number of deceased donors where at least one organ was transplanted			Target														In February, the % of actual donors where at least one organ was transplanted was lower than usual (92%).
	Deliver more do	180 160 140 120 100 80 60	1,346	1,351	Actual	100	119	105	130	108	110	119	112	131	134	121	162	119	YTD=95%.
	flect	Consent rate for patients from black and Asian communities	50.0%	45.0%	Target	50.0%	50.0%	55.0%	55.0%	55.0%	55.0%	45.0%	45.0%	45.0%	45.0%	45.0%	45.0%	45.0%	The consent rate for patients from black and Asian communities was 45% in February (14/31) and 43.5% (138/317) YTD. This is a great improvement
		30% - 10% -	35.1%	43.5%	Actual	42.9%	46.4%	45.5%	48.6%	36.7%	36.0%	51.7%	58.8%	35.3%	40.0%	34.6%	51.9%	45.2%	on the same 11 months last year (92/271=34%).

Balanced Scorecard: ODT - as at the end of February 2018 2016/17 2017/18 Measure description Mar-17 Apr-17 May-17 Jun-17 Sep-17 Oct-17 Nov-17 Dec-17 Jan-18 Feb-18 YTD Actual % of consented 'donors' with organ(s) February was another high month for the % of consented donors with at Target accepted but no organ(s) transplanted^ least one organ accepted but no organs transplanted (11%). YTD=9%. 20% The 'ideal' kidney donor project continues. In addition, declines are now 15% reviewed for high priority recipients (standard criteria kidney donors). Plans for 2018 include the introduction of an 'ideal' pancreas donor project (donor offer declines/ donor discards). Consideration to the 'ideal' liver 9.2% 11.4% donor project will be given after the commencement of the revised liver 8.9% 8.6% 4.8% 9.0% 5.1% 11.3% 6.1% 6.5% 9.9% 9.9% 10.3% 8.7% Actual allocation system. Monthly lung utilisation telecoms have commenced January 2018. A working group to operationalise the actions from the Increasing the Number of Organs Available for Research has met and is due to report to RINTAG May and SMT June. Number of deceased donor transplants * During February 335 patients received a solid organ transplant from a 3.900 3.773 Target 325 325 343 343 343 343 343 343 343 343 343 343 343 deceased donor, bringing the YTD total to 3648 (8% higher than the same 11 months last year). 500 products patients need When looking at the rolling 12-month period from March 2017 to February 2018, 3973 patients received a solid organ transplant from a deceased donor. This is a 67% increase over the ten years from 2007/08 (the 3,715 3,648 425 Actual 279 325 276 372 294 334 313 362 335 301 334 302 baseline year of the Organ Donation Taskforce). The 'Taking Organ Utilisation to 2020' activities and initiatives continue. A Research Fellow will commence in post March 2018 to support the organ Deliver utilisation strategy. Research pertaining to Evidence based Organ Deceased donor transplants pmp * Utilisation – UK to be uploaded onto the ODT website. Communication risk 62.4 Target 59.1 60.0 57.7 58.1 59.0 59.9 60.6 61.3 61.9 62.0 62.1 62.3 62.4 and consent in transplantation work continues with organ specific working groups agreeing the content of tools. Collaboration continues with the Winton centre to devise Risk Communication Tools and the Freeman 60 Hospital Newcastle to develop best practice videos re Communication. Organ Utilisation metrics have been devised to measure the impact of 57.3 60.8 Actual 56.2 57.3 56.7 57.5 57.7 57.9 58.6 59.2 59.3 59.0 58.7 59.9 60.8 'Taking Organ Utilisation to 2020' and will be presented at March SMT. The NHSBT symposium at the BTS will include an update pertaining to organ utilisation. At the end of February there were 204 fewer patients on the transplant list Growth in total (active and suspended) Target (-119 active, -85 suspended) when compared with the end of March 2017. transplant list (^at end of month) At the end of February there were 9542 people on the transplant list (6270 active, 3272 suspended). -182 -204 Growth +13 +12 -12 -45 -7 +4 -4 +88 -109 +81 +93 -283 -10

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

										Balance	d Scorecar	d: ODT - as	at the en	d of Februa	ary 2018				
	Dimension / CSFs	Measure description	2016/17 Actual	2017/18 YTD		Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Commentary
	r VFM HS	Cost per transplant (£000s) - Annual forecast *	17.90	16.25	Target	17.90	17.90	16.25	16.25	16.25	16.25	16.25	16.25	16.25	16.25	16.25	16.25	16.25	See separate finance report.
	Deliver better VFM for the NHS	20 0	18.12	16.19	Actual	18.01	18.12	16.25	16.25	16.33	16.37	16.36	16.44	16.50	16.40	16.55	16.05	16.19	
		Quarterly average number of organs retrieved per abdominal team (Qtrly in arrears)			Target														The metric is reported quarterly, now two months in arrears.
	Reduce net tax-payer burden	180 160 140 120			Actual		156			151			150			167			
Se	e net tax	Quarterly average number of organs retrieved per cardiothoracic team (Qtrly in arrears)			Target														
Resources	Reduce	60 40 20			Actual		42			57			55			50			
		% of days abdominal teams attended >=1 potential donor when on call (Qtrly in arrears)		70%	Target			70%	70%	70%	70%	70%	70%	70%	70%	70%	70%	70%	The metric is reported quarterly, now two months in arrears.
	-payer burden	80% 60% - 40%	56%		Actual		61%			57%			53%			62%			
	net tax-payer	% of days cardiothoracic teams attended >=1 potential donor when on call (Qtrly in arrears)		70%	Target			70%	70%	70%	70%	70%	70%	70%	70%	70%	70%	70%	
	Reduce	80% - 60% - 40% - 20% - 0% -	43%		Actual		49%			45%			45%			43%			

										Balance	d Scorecar	d: ODT - as	at the end	d of Februa	ary 2018				
	Dimension /CSFs	Measure description	2016/17 Actual	2017/18 YTD		Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	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 in February where organs were offered outside of the allocation policy.
	ness	5 0	6	5	Actual	0	0	0	0	1	0	1	0	1	2	0	0	0	
	1/7 busine	Total hour(s) of unplanned IT system disruption		<7	Target			<7	<7	<7	<7	<7	<7	<7	<7	<7	<7	<7	There were 4.2 hours in February related to performance issues where some users experienced problems trying to submit data on DonorPath.
	ate a single 24/7	250 200 - 150 - 100 - 50 - 0			Actual						17.1	1.2	1.6	0.0	7.0	52.1	240.4	4.2	Suppliers have suggested making changes to how the changes are tracked within the application to improve performance but this will need to be scheduled in following HEP E and MaSH changes. Server has been temporarily upgraded and is being monitored.
Su	Oper	Total hour(s) of planned IT system maintenance/upgrade			Target														1 hour outage on BPMS whilst security changes were made to network links for compliance to NHSBT POL10.
Operations		24 18 12 6 0			Actual						2.0	2.8	12.6	14.0	5.0	15.4	3.7	1.0	
	fely	Number of serious incidents	0	0	Target	0	0	0	0	0	0	0	0	0	0	0	0	0	64 incidents were reported in February; of those 64 incidents, 2 SARs were reported but under the same incident. One incident reported to Health
	Operate safely	3 2 1 0	2	2	Actual	1	0	0	1	0	0	0	0	1	0	0	0	0	Products Regulatory Authority in Ireland.
	mplete atabase	Number of ODR registrations with an unknown NHS/CHI number			Target														Since June 2015 and until recently the NHS Tracing Service has been inactive. This service has now been 'partially' restored and the number of
	Maintain a cor and accurate da	5,000,000 4,000,000 3,000,000 2,000,000 1,000,000 0		4,385,797	Actual				4,335,877	4,448,887	4,524,429	4,616,003	4,737,508	4,821,524	4,900,290	4,955,488	4,461,532	4,385,797	unknown NHS/CHI numbers are now shown to be reducing.

										Balance	d Scorecar	d: ODT - as	at the end	d of Februa	ary 2018				
	Dimension / CSFs	Measure description	2016/17 Actual	2017/18 YTD		Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Commentary
		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%	There has been a reduction in sickness absence from 3.9% in January to 3.2% in February, and the YTD total remains at 3%.
		6% 4% 2% 0%	2.9%	3.0%	Actual	2.2%	2.2%	2.5%	2.5%	2.0%	2.3%	2.4%	2.8%	3.8%	3.9%	3.7%	3.9%	3.2%	Absence rates have decreased across ODN with overall absence at 2.89%. Two ODST have absence above 4%: London 5.46% (STS) and Yorkshire 5.32% with majority at 4.28% (LTS). ODT Clinical (Support Services) 14.43% and ODT Commissioning 15.53% due to LTS. HR working with management teams to manage the LTS cases.
		% annual turnover	10.0%	12.0%	Target	10.0%	10.0%	12.0%	12.0%	12.0%	12.0%	12.0%	12.0%	12.0%	12.0%	12.0%	12.0%	12.0%	There has been a slight increase in % annual turnover, from 13.1% to 13.5%.
People	motivated employees	20% - 16% - 12% -	13.1%	13.5%	Actual	13.5%	13.1%	13.0%	13.2%	13.1%	12.1%	12.8%	13.2%	13.4%	13.6%	13.4%	13.1%	13.5%	Whilst overall turnover remains out of target, the voluntary turnover for the ODT Directorate is within range at 11.78%. Organ Donation has voluntary turnover of 13.53% but all other functions are below 12%. Five OD teams have turnover above 12%: South Wales, S East, London, Eastern and Northern. Some of these are attributable to non-voluntary turnover. Proposals for the SR implementation may support retention in these teams.
	Lead moti	% mandatory training compliance (Qtrly) 12-months rolling period	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%	From the drop in January to 87% mandatory training compliance, this has increased to 89% in February. This ranges within functions from 87 - 100%
	Le	100% 90% 80% 70%	85.4%	89.1%	Actual		85.4%			90.7%			89.3%			91.3%			compliance. The ODT National Hub, London, Eastern and Yorkshire ODST are below 85% compliant despite specific interventions from the team managers last month. HR and Education Team colleagues are meeting this month to review the specific MT 1-2-1 courses to explore any options for improving compliance.
		PDPR (Qtrly) 12-months rolling period	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%	From the drop in January to 92% PDPR compliance, this has increased to 95% in February, and is green for the first time in more than three years
		100% 90% 80% 70% 60%	90.5%	95.0%	Actual		90.5%			86.8%			92.8%			94.8%			(December 2014). Compliance ranges from 83 - 100% across functions. 28 of the 38 functional departmental teams (74%) have compliance at 95% or above. There are 17 non-reported PDPRs across the following teams working towards 95%: ODST Eastern, London, S East, National Hub, Commissioning, ODR, Support Services, DRD and Organ Donation Services.

										Balance	d Scorecar	d: ODT - a	s at the en	d of Februa	ary 2018				
	Dimension / CSFs	Measure description	2016/17 Actual	2017/18 YTD		Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Commentary
	oloyee	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 budgeted establishment who are unsupervised on the rota returned to green in February (snapshot of last whole week of the
	Create Flexible Employee Base	80%	69.1%	83.3%	Actual	68.7%	69.1%	75.2%	78.2%	78.0%	80.8%	81.6%	82.5%	83.8%	83.0%	82.4%	82.9%	83.3%	month). 27 SNODs were supervised on the rota during February: * 20 Cohort 7 in-training * 3 trainees remaining from Cohort 6 * 4 returning to work from maternity/sickness absence.
		H&S near misses (month in arrears)			Target														This metric is reported a month in arrears. There was one near miss reported in January, bringing the YTD total to nine.
People	Caring Employees	4 2 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0	9	Actual		0	1	1	1	1	1	1	1	0	1	1		
4	Caring E	Number of BAME managers	1	1	Target							≥1							This metric is reported quarterly.
	Recruit and Retain Expert,	2 0	1	1	Actual		1			1			1			1			
	ruit and	Number of BAME staff	20	23	Target	19	20	20	20	21	21	21	22	22	22	23	23	23	
	Reci	20 -	19	21	Actual		19			19			20			20			

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

OD Regional D	ashboard (<u>in-</u>	-month)	Mont	h Reported:	February 20)18	Date Prod	uction Date:	08/03/2018	
					Deceased D	onor Pathway				
Februar	y 2018	Donors	Approx* donor target	Difference*	Utilised donors	BSD testing	Referral	SNOD Present	Consent / Authorisation	Competent SNODs or the rota
	Combined								70.0%	85.0%
Targets	DBD								73.0%	
	DCD								67.0%	
	Combined	21	13	8	20				69.7%	72.2%
Eastern	DBD	13			13	95.0%	100.0%	100.0%	70.6%	
	DCD	8			7		98.3%	100.0%	68.8%	
	Combined	14	14	0	14				50.0%	58.3%
London	DBD	12			12	96.2%	100.0%	100.0%	52.4%	
	DCD	2			2		82.1%	88.9%	44.4%	
	Combined	15	15	0	14				64.7%	76.2%
Midlands	DBD	9			8	100.0%	100.0%	85.7%	64.3%	
	DCD	6			6		85.2%	80.0%	65.0%	
	Combined	15	15	0	14				67.7%	97.0%
North West	DBD	12			12	73.9%	100.0%	93.8%	81.3%	
	DCD	3			2		92.4%	93.3%	53.3%	
	Combined	8	8	0	5				78.6%	76.7%
Northern	DBD	2			1	100.0%	100.0%	100.0%	100.0%	
	DCD	6			4		90.5%	100.0%	75.0%	
	Combined	2	4	-2	1				66.7%	92.5%
Northern Ireland	DBD	1			1	100.0%	100.0%	100.0%	66.7%	
	DCD	1			0		93.8%	100.0%	66.7%	
	Combined	10	11	-1	8				55.0%	87.8%
Scotland	DBD	6			6	90.0%	100.0%	88.9%	66.7%	
	DCD	4			2		92.9%	81.8%	45.5%	
	Combined	6	10	-4	6				53.3%	91.9%
South Central	DBD	5			5	75.0%	100.0%	83.3%	83.3%	
	DCD	1			1		95.3%	100.0%	33.3%	
	Combined	8	13	-5	8				62.5%	102.2%
South East	DBD	8			8	71.4%	92.9%	100.0%	80.0%	
	DCD	0			0		85.1%	100.0%	33.3%	
	Combined	4	5	-1	4				66.7%	93.3%
South Wales	DBD	2			2	100.0%	100.0%	60.0%	40.0%	
	DCD	2			2		85.7%	100.0%	85.7%	
	Combined	9	8	1	8				64.3%	80.8%
South West	DBD	5			5	83.3%	100.0%	60.0%	80.0%	
	DCD	4			3		91.7%	77.8%	55.6%	
	Combined	17	10	7	17				66.7%	88.9%
Yorkshire	DBD	7			7	88.9%	100.0%	100.0%	62.5%	
	DCD	10			10		95.8%	100.0%	68.8%	
	Combined	129	127	2	119				63.5%	83.3%
National	DBD	82	74	8	80	88.2%	99.3%	92.2%	68.1%	
	DCD	47	53	-6	39		91.1%	92.5%	59.4%	

^{*} Rounded to the nearest integer

OD Regional Performance Dashboard

OD Regional D	ashboard (<u>Y</u>	<u>ΓD</u>)	Month Reported: February 2018 Date Production Date: 08/03/2018											
2017/18 YTD		Deceased Donor Pathway												
		Deceased donors pmp	Donors	Approx* donor target	Difference*	Utilised donors	BSD testing	Referral	SNOD Present	Consent / Authorisation	Competent SNODs on the rota			
	Combined	23.1								70.0%	85.0%			
Targets	DBD									73.0%				
	DCD									67.0%				
	Combined		164	142	22	153				68.4%	72.2%			
Eastern	DBD		89			86	83.9%	99.4%	95.3%	77.2%				
	DCD		75			67		90.7%	85.8%	63.2%				
	Combined		182	156	26	171				58.1%	58.3%			
London	DBD		141			136	92.0%	99.0%	94.5%	61.3%				
	DCD		41			35		88.8%	83.1%	53.1%				
	Combined		156	165	-9	151				62.5%	76.2%			
Midlands North West	DBD		78			77	78.4%	97.8%	91.9%	71.0%				
	DCD		78			74		80.1%	81.8%	57.7%				
	Combined		211	170	41	200				70.3%	97.0%			
	DBD		138			137	82.8%	97.3%	97.9%	80.1%				
	DCD		73			63		88.4%	91.6%	61.1%				
Northern	Combined		67	87	-20	60			0.1070	61.2%	76.7%			
	DBD		38	<u>.</u>		35	78.7%	100.0%	98.4%	70.5%				
	DCD		29			25	101170	94.8%	87.2%	56.0%				
Northern Ireland	Combined		37	46	-9	36		0 1.070	07.270	69.1%	92.5%			
			23	7.0		23	73.6%	96.2%	94.4%	72.2%	02.070			
	DCD		14			13	70.070	89.2%	93.8%	65.6%				
	Combined		88	125	-37	83		03.270	33.070	54.7%	87.8%			
Scotland	DBD		54	120	0,	54	82.7%	99.0%	93.6%	75.6%	01.070			
Coonana	DCD		34			29	UZ.170	91.4%	81.0%	43.5%				
	Combined		99	105	-6	97		31.470	01.076	66.4%	91.9%			
South Central	DBD		56	103	-0	55	92.0%	99.0%	94.0%	78.3%	91.976			
	DCD		43			42	92.078	88.9%	79.4%	58.8%				
	Combined		135	148	-13	125		00.976	79.4%	68.3%	102.2%			
South East	DBD		91	140	-13	85	83.2%	98.9%	97.1%	73.5%	102.278			
South Last	DCD		44			40	03.276	90.1%	89.7%	62.7%				
	Combined		58	55	3	53		90.176	09.7 %	72.2%	93.3%			
South Wales	DBD			55	3		98.3%	100.0%	93.5%		93.3%			
	DCD		34			32	98.3%	89.4%		82.6%				
South West			24	86	- 11	21		89.4%	87.0%	65.2%	00.00/			
	Combined		100	80	14	96	00.40/	400.00/	00.00/	66.3%	80.8%			
	DBD		59			59	93.1%	100.0%	90.8%	77.0%				
Yorkshire	DCD		41	440	40	37		93.7%	82.6%	58.3%	00.051			
	Combined		131	113	18	126				68.9%	88.9%			
	DBD		67			65	85.4%	100.0%	96.1%	67.6%				
	DCD		64			61		93.8%	93.9%	69.7%				
	Combined	23.7	1428	1397	31	1351				65.1%	83.3%			
National	DBD	14.4	868	814	54	844	85.5%	98.8%	95.0%	72.6%				
	DCD nearest integer	9.3	560	583	-23	507		89.4%	86.0%	59.1%				

^{*} Rounded to the nearest integer

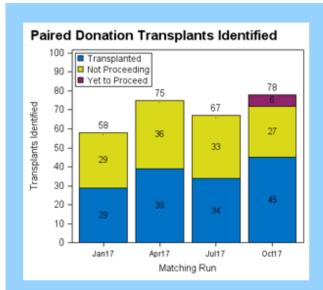
LIVING DONATION ACTIVITY - FOR INFORMATION

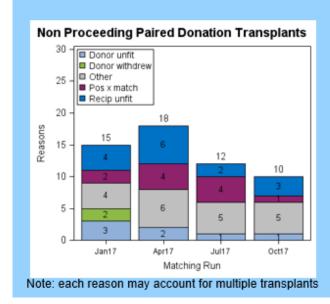
	Balanced Scorecard: ODT - as at the end of February 2018																		
	Dimension /CSFs	Measure description	2016/17 Actual	2017/18 YTD		Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Commentary
		Number of living donors * (month in arrears)	1,260	1,160	Target	105	105	116	116	116	116	116	116	116	116	116	116		This metric is provided for information a month in arrears and commentary is provided on a quarterly basis.
omer	0 5	120 100 80 60	1,039	852	Actual	77	88	70	89	94	92	91	89	81	89	82	75		
Custr		Living donors pmp (month in arrears)	19.5	20.3	Target	19.3	19.5	16.3	16.8	17.3	17.6	18.3	18.7	19.0	19.1	19.8	20.3		
		20 19 18 17 16 15	16.0	15.6	Actual	16.1	16.0	15.6	15.7	15.8	15.8	16.1	16.0	15.9	15.5	15.7	15.6		

Note: * denotes metric is also a strategic target.

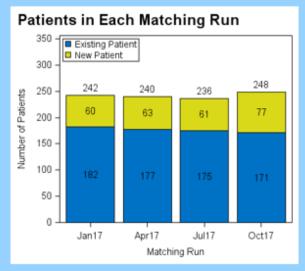
Chart begins from Apr-15

UK LIVING KIDNEY SHARING SCHEMES – FOR INFORMATION





	Total May 2007- October 2017
Pairs Registered	2004
Patients Registered	1814
Altruistic Donors in Paired Donation Matching Runs	200
Compatible Pairs Registered	95
Transplants	805



UKLKSS Records	In a Matching Run
Pairs Included	284 (Jul 2016)
Patients Included	256 (Jul 2016)
Altruistic Donors Included	15 (Oct 2013)
Transplants Identified	78 (Oct 2017)
Transplants Proceeded	57 (Oct 2015)

