

Annual Review 2009/10

A young boy with dark curly hair, wearing a blue and white striped t-shirt, is lying in a hospital bed. He is smiling and looking towards the camera while drawing on a large sheet of paper with a red marker. His right hand is wrapped in a white medical bandage. In the background, there are medical monitors and equipment on a stand. The overall scene is brightly lit and clinical.

SAVING AND IMPROVING LIVES

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Ben Foster

Ben Foster, goalkeeper for Birmingham City Football Club, received a donated tendon in 2007 after suffering a rupture to the anterior cruciate ligament for a second time. The operation involved replacing his ligament with a donated tendon, helping to save his professional footballing career.

Ben said: "Without the donor tendon for my knee, my football career may not have lasted this long and I wouldn't have had the opportunities I've had over the last few years. Thanks to the kindness of the donor, I've been able to get back to full fitness and play Premier League football again."



About NHS Blood and Transplant

NHS Blood and Transplant (NHSBT) is a Special Health Authority, dedicated to saving and improving lives through the wide range of services we provide to the NHS.

We are responsible for ensuring the safe and secure supply of blood, stem cells, tissues, solid organs and plasma products to the NHS; and for promoting and raising awareness of donation.

We supply blood to hospitals in England and North Wales; tissues and organs across the UK; and fractionated plasma products to the NHS and the world market.

Amongst our core responsibilities we manage the National Blood Service and are responsible for the NHS Organ Donor Register, the British Bone Marrow Registry and the NHS Cord Blood Bank.

We rely entirely on the altruism and loyalty of our donors and the dedication of our staff. In 2009/10, close to two million units of blood and 4,422 organs were donated, saving and transforming countless lives.

Building on the progress made since our establishment in October 2005, we must now respond to changing economic conditions and strive to deliver an ever more efficient and effective front line service for the NHS and the patients it serves.

We are organised into three operational Directorates: Organ Donation and Transplantation, Blood Donation and Patient Services, delivering an integrated supply chain for blood, fractionated plasma products and specialist services such as stem cells for transplantation.

These operating Directorates are supported by a number of Group Services which include Human Resources, IT & Business Transformation, Clinical & Research, Communications, Estates & Logistics and Finance.

To learn more about NHSBT go to www.nhsbt.nhs.uk.

Front cover image: Michael Gasana has received many blood transfusions for anaemia.

Chief Executive's Introduction

Welcome to the NHS Blood and Transplant review of 2009/10. I hope it provides a useful snapshot of how we are progressing against our goal to deliver world class services to the NHS, underpinned by our unique clinical knowledge and experience. In looking back, it is important to say how extremely proud I am of the dedication, expertise and professionalism that has been shown by our staff throughout last year which was a period of significant change for many people. I would also like to say thank you to the many donors and families who have helped us to save and improve lives through their generous gift.



Lynda Hamlyn
Chief Executive

In 2009/10 our achievements included:

- Consolidation of blood manufacturing activities along with the transformation of some of our processes which allowed us to realise substantial savings and reduced the cost of a bag of blood from £140 to £130. The price will reduce further in 2010/11 to £125, allowing us to return around £30m each year in efficiency savings to the NHS that can be reinvested into front line patient care.
- Through a focussed effort on recruiting and retaining blood donors and good planning, we managed to secure not only a stable and sufficient supply of blood but we also successfully increased blood stocks last summer in preparation for the potential swine flu pandemic.
- We developed and implemented new initiatives to continue to improve the safety of the lifesaving and life-enhancing products and services we supply.
- We achieved our aim of transferring all the Specialist Nurses working for many different Trusts on Organ Donation into NHSBT employment, and employed extra nursing staff. As a result, there are now 190 specialist organ donation nurses working within NHS Trusts to increase organ donation.
- We also launched the first ever UK-wide organ donation public awareness campaign. I am delighted that our efforts in this area meant that 2009/10 saw the highest ever number of organ transplants carried out. However, with three people still dying every day due to the lack of a suitable organ, clearly there is more to do. We will continue to raise awareness of the importance of organ donation, dispelling myths, and encouraging more people to join the Organ Donor Register.
- Our expertise in stem cell transplantation was recognised when we were asked by Government to lead the UK Stem Cell Strategic Forum, bringing together international experts in stem cell donation and transplantation to deliver a set of recommendations for the future that will mean more patients have access to lifesaving stem cells when they need them. We were honoured to take on this role, and to work with the dedicated scientists, clinicians and third sector organisations whose mission, like ours, is to work in partnership to deliver better outcomes for patients suffering from diseases such as leukaemia.

The coming year will present further opportunities and challenges as we move forward with our ambition to deliver excellence in the work we do, 24 hours a day, 7 days a week, 365 days a year, providing products and services that help save lives. With the current state of public finances we are extremely conscious of the financial constraints that the rest of the NHS will face, and we continue to strive for new and better ways of working and outstanding performance in all areas of our responsibility. Above all, we will continue to maintain our focus on hospital customers, donors and patients, and how our people and services can better support them.

Chairman's Message

As Chairman of the Board my role is to oversee the organisation's strategic direction and ensure that we are delivering our objectives, core purpose, mission and values.



A handwritten signature in black ink that reads "Bill Fullagar".

Bill Fullagar
Chairman

I am very pleased to be able to confirm that in the last financial year, we have progressed well against the majority of our key objectives, which were to:

- Provide an efficient, safe and sustainable supply of blood, blood components and services which meet all safety, quality and compliance standards.
- Provide a range of specialist services and advice to hospitals.
- Identify and refer more potential organ donors in order to increase the number of transplants in the UK.
- Ensure NHSBT is an effective, responsive organisation, focused on the changing needs of donors, hospitals and other customers.

Our focus on safety and efficiency was recognised by an 'excellent' rating in the annual health check results announced by the Care Quality Commission, the highest standard achievable. We will continue to strive for excellence in the fast-changing regulatory and clinical environment, whilst maintaining a strong focus on demonstrating outstanding service delivery along with an excellent understanding of the needs of our customers and ultimately, the patients that rely on our lifesaving products and services.

With large scale changes planned in provision of services by the NHS, and an increasingly constrained economic environment, the challenges we face in the coming year will require a clear focus on efficiency and delivery of more with less. We will identify and deliver additional initiatives that will help us to operate more efficiently, deliver value for money and ensure that all of our activities are directly aligned with our strategy and ultimate aim to save and improve more lives.

To help deliver on this ambitious agenda, there were a number of key appointments made in 2009/10. Shaun Williams joined the Board as a Non-Executive Director, bringing an excellent background in corporate communications, and Alan McDermott was appointed as the permanent Director of Blood Donation following an initial interim period in this role. Léonie Austin joined the Executive Team as Director of Communications. We also established a Transplant Policy Review Committee to strengthen oversight and delivery in this crucial area.

I hope you will agree that the information in this review demonstrates our excellent progress in the last financial year, made possible by the support of our staff, donors, partners and stakeholders, and the strong foundations that we have established to allow NHSBT to achieve its ambition of becoming a modern, world class organisation delivering vital services to the NHS.



Strategic Direction

Our strategy and underpinning work-plans are constructed around five strategic objectives that reflect the areas of NHSBT's responsibility:

1. Blood Components

To deliver a modern, world class blood service that provides a sustainable and dependable supply of blood components that meet all safety, quality, compliance and service standards, as efficiently as possible.

Our first concern will always be the safe and dependable supply of blood components to NHS hospitals, as well as providing a safe and high quality service to our donors. In line with these principles, we will continue to modernise processes and systems, driving out efficiencies at each stage of the blood supply chain.

One of our donor carers and a donor at our West End Blood Donor Centre. 65% of donors scored the overall service at 9 out of 10 or higher, compared with 63% last year.



2. Specialist Services

To develop a portfolio of high quality, financially viable specialist services and products, consistent with the objectives of NHSBT, and complementary to existing activities to build on our unique skills and capabilities.

We will develop and maintain a financially viable portfolio of specialist (diagnostic) services and products (e.g. tissues), and work in partnership with other organisations delivering these services to the NHS.

We will continue to provide related services such as the operation of the British Bone Marrow Registry and the NHS Cord Blood Bank to the highest standards of quality, focused on the needs of the broader healthcare community and patients.

3. Organ Donation and Transplantation

To maximise the number of organ donors, donated organs and registered supporters of organ donation, thereby enabling an increase in the number of lifesaving transplants.

We are committed to developing NHSBT as a UK-wide organ donation organisation and delivering our share of the recommendations of the first Organ Donation Taskforce (ODTF)¹. Those recommendations aimed to deliver a 50% increase in deceased organ donation in the UK within five years, resulting in an additional 1,200 transplants per year.

Going beyond this, we are supporting the subsequent aspiration to increase numbers on the Organ Donor Register to 25 million by 2013, and to increase the numbers of deceased organs donated by 73%. These aspirations are a shared objective of all stakeholders within the Department of Health (DH), the Devolved Health Administrations and their partners across Government. They have been incorporated into the Terms of Reference of the DH Programme Delivery Board, and have been built into the strategic targets of NHSBT.

4. Bio Products Laboratory (BPL)

To provide a secure and financially viable source of high quality plasma proteins to NHS patients. To fulfil this mission, BPL will attain the scale, efficiency and international capability that enables it to be sustainably cash generative, allowing it to self-fund its investment needs and maintain its product portfolio.

BPL will continue to supply a significant share of the UK's need for plasma proteins – immunoglobulins, albumin and clotting factors. It will underpin this mission by ensuring financial viability, as a result of increasing the output of its Elstree factory, and using this to satisfy opportunities in international sales and contract fractionation. It is anticipated that the Department of Health Arm's Length Bodies (ALB) Review will give BPL greater commercial freedom and closer integration across its plasma supply chain.

5. NHSBT Corporate

To be an effective champion and advocate for the needs of donors and customers across NHSBT, developing organisational capacity, capability and processes in support of our ambitious objectives, identifying opportunities for effective collaboration across our Operating Divisions and with partners and stakeholders, and supporting the organisation with highly efficient and effective Group Services.

In order to fulfil the ambition of our strategy, we will continue to review our organisational arrangements, making the necessary changes to our structures, systems and governance processes, and seeking to identify and deliver synergies between our operating units, underpinned by efficient and effective Group Services.

Our latest plan focuses on delivering the benefits, both operational and financial, in relation to the very challenging objectives arising from the first Organ Donation Taskforce (ODTF 1) report and the National Blood Service Strategy Review, both announced in January 2008 and reflected in our 2008-11 Strategic Plan.

We are also very aware of the current economic situation, the state of public finances and the likely constraints that our customers will be required to work within over the next few years. As such, the latest plan reflects our intent to identify and develop opportunities and initiatives that will drive out further improvements and efficiencies beyond those captured in the 2008 Strategic Plan.

We are also committed to applying the principles of Sustainable Development and will apply them to all that we do, whilst meeting the targets set by Government.

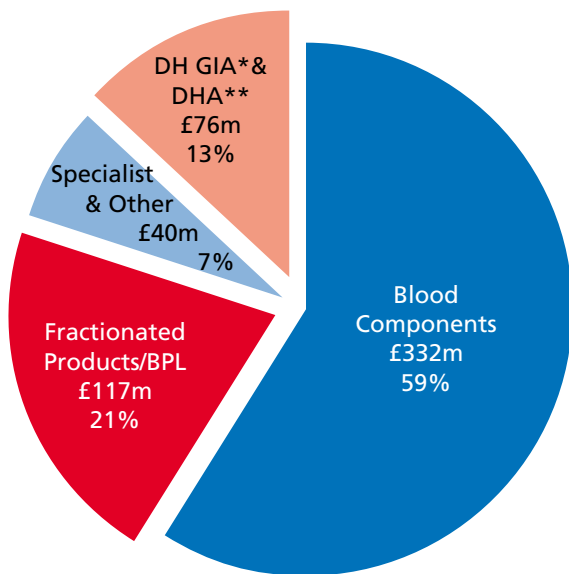
Further details of our Strategic Plan for 2010-13 can be found at www.nhsbt.nhs.uk.

1. ODTF 1 made recommendations about how the number of organ donors could be increased within the existing legislative framework: http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_082122

Financial Review

NHSBT primarily recovers its costs through charging other organisations (mainly hospitals) for our products and services. These costs mostly reflect collection, processing, testing and transportation activities as all blood, tissues and organs are freely given by our donors. We also receive funding from the Department of Health and the Devolved Health Administrations in support of our organ donation and specialist activities such as the British Bone Marrow Registry and the NHS Cord Blood Bank. Our total income for 2009/10 was £565m and is analysed in Figure 1.

Figure 1 – Total Income £m

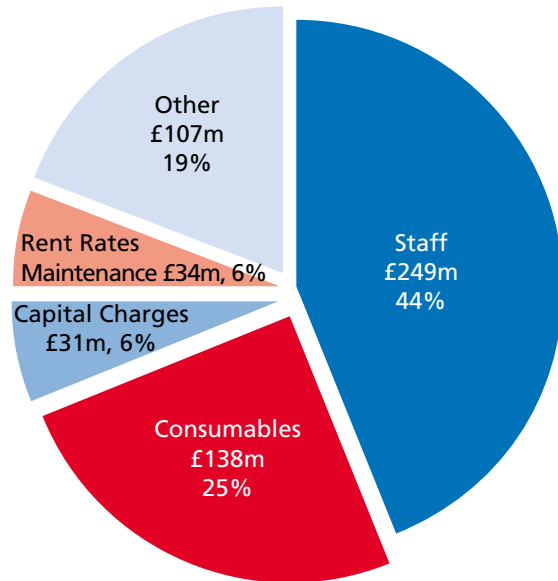


*DH GIA = Department of Health Grant In Aid funding
 **DHA = Devolved Health Administrations funding

Red cell income accounts for a significant percentage of our total blood component income. In agreement with the National Commissioning Group for Blood we set our price at £133 per unit in 2009/10 versus a price of £140 per unit in the previous year. During 2009/10 demand for red cells was greater than planned and we were able to provide customers with a significant refund which generated an effective net red cell price of £130 per unit. As a result of the financial benefits generated by our transformation programme, we have been able to further reduce the price to £125 per unit in 2010/11.

During 2009/10 our total income of £564.3m exceeded our total expenditure of £559.4m (see Figure 2) and generated a financial surplus of £4.9m. However, the greatest challenge during 2009/10 was the management of cash and the need to provide BPL with the working capital required to support the significant 90% growth in export sales.

Figure 2 – Total Expenditure £m



NHSBT receives capital expenditure funding on an annual basis from the Department of Health. This mostly goes towards supporting the manufacturing and diagnostic processes that take place within our factories, processing centres and laboratories and is often driven by regulatory requirements. During 2009/10, £12.9m of capital funding was spent with approximately 50% of this directed towards maintenance and improvement of the BPL factory in Elstree.

The summary of our financial performance above reflects our consistent track record of sound financial control and we will continue to exercise robust financial management as we enter what will be a very challenging period for public sector finances. Driving improvement in value for money and improving the productivity of our operations is a fundamental element of our Strategic Plan 2010-13. We are proud of our record in reducing the price of red cells to hospitals over the last two years and of our contribution to maximising the funds available for the treatment of patients at the front line.

Rob Bradburn
 Finance Director

Clinical and Research Update

Our clinical team works across NHS Blood and Transplant to provide clinical leadership to NHSBT's strategy for donor selection and care, and to the delivery of products and services for patients. The clinical team also provides advice to hospital colleagues, oversees the clinical governance framework, and provides specialist input to organisational changes. The Medical Director also leads a major research programme and the safety programme across NHSBT.

Our key objective is to strive to deliver the most up-to-date products and services, through proactive research and product development, delivering the best possible outcomes for patients.

In 2009/10:

Clinical:

- New Clinical Governance arrangements were established within Blood Donation, Patient Services, and in Organ Donation and Transplantation to support donor referral and consent, commissioning of organ retrieval and the transplant process itself. An Assistant Director, Clinical Operations and Governance was appointed to provide cohesion of clinical governance matters across NHSBT.
- To develop the next generation of leaders in Transfusion and Transplantation, we created Clinical Fellowships and obtained funding from the National Institute for Health Research (NIHR) to appoint two Academic Clinical Fellows and one Academic Clinical Lecturer each year for the next three years.

Research and Development

- We successfully bid for renewal of our research funding from the NIHR, and have been awarded £11.9 million over five years to undertake programmes of research in cellular engineering, platelet biology, clinical use of stem cells and erythropoiesis (red cell production).
- We appointed two new Principal Investigators: Dr Simon Stanworth in Oxford to lead clinical trials, and Dr Cedric Ghaevert in Cambridge to research how platelets are synthesised.
- Safety trials of a new granulocyte product to treat infections in patients with bone marrow failure successfully concluded.
- Our clinical trials are now recruiting internationally, with the TOPPS trial of prophylactic vs. therapeutic platelets open in Australia, and the TAPS trial of transfusion in sickle patients having surgery is open in Canada, Ireland and Netherlands.

Safety Programme

- Production of Fresh Frozen Plasma (FFP) from male donors is now at >99%, with overall reports of transfusion related acute lung injury (TRALI) running at 2-3 per year.
- NHSBT's Board approved a business case for bacterial screening of platelets, due for implementation by March 2011.
- We contributed to the work of the Government's independent Advisory Committee for the Safety of Blood, Tissues and Organs (SaBTO) in considering pathogen inactivation of platelets, importation of FFP for all recipients, and strategies to reduce further the vCJD risk from red cells.
- Over 100 patients were successfully transfused with blood filtered to remove infectious prions.

Laboratory red cell production

A research group within NHSBT has developed a tissue culture model of human erythropoiesis (red cell production). The long-term aim of this work is to use our understanding of erythropoiesis to produce red blood cells for clinical use. Challenges remain but over the next three years, funded by a Translation Award from the Wellcome Trust, the team will join a consortium of experts in stem cell biology and haematopoiesis to scale up cultures under Good Manufacturing Practice (GMP) to provide sufficient red cells for a clinical trial in humans.

To view the annual SHOT report (Serious Hazards of Transfusion) please visit www.shotuk.org/shot-reports/report-and-summary-2009/



Progress in 2009/10

Performance Highlights

In 2009/10 our strategic objectives were focused on the efficient provision of a safe and sustainable supply of blood and its components, the identification and referral of more organ donors and the establishment of NHSBT as an effective and responsive organisation, focused on the needs of donors and patients.

The year saw a record high in organ donation and transplantation together with an increase in the number of people signing up to donate blood.

Blood Supply

- We met more than 99.9% of all product requests and stayed above the three-day alert level for total stocks, a key performance indicator.
- 65% of donors scored the overall service at 9 out of 10 or higher, compared with 63% last year.
- We implemented efficiencies which helped us to reduce the cost of a unit of red cells from £140 to £130.

Organ Donation & Transplantation

- The number of deceased organ donors increased by 7% across the UK, a 19% increase since 2007/08 rising from 809 in 2007/08 to 959 in 2009/10.
- We increased the number of people joining the Organ Donor Register by 6%, rising from 16.1 million to 17.1 million by the end of March 2010.
- 3,706 organ transplants were carried out across the UK, 14% above the 2007/08 baseline and a 5% increase on the previous 12 months.

Fractionated Products – Bio Products Laboratory

- BPL sales increased by 28%.

Specialist Services

- We maintained the British Bone Marrow Registry at above target levels for the number of donors registered (>300,000).
- The NHS Cord Blood Bank reached 15,000 stored units.

Tissue Services

- 8,500 tissue products were provided for lifesaving and life-enhancing surgery.

Awards

- Our Give and Let Live website, an interactive educational resource which allows teachers to incorporate donation awareness into their lessons with 14-16 year olds, was awarded Best Website at the 2009 International Visual Communications Association Clarion Awards in September.
- Our Electronic Offering System, which speeds up donor registration and organ offering, won a top Information Technology award at the Computerworld Honours Programme Gala Awards in the United States.
- An NHSBT team in collaboration with the John Radcliffe Hospital in Oxford won the Improving Care with Technology award at the Health Services Journal Awards for the Blood Track Electronic Blood Transfusion Management System.
- Dr Heidi Doughty, a Consultant Haematologist in Transfusion medicine at NHSBT, won the Healthcare Reservist of the Year Award at the 2009 Military and Civilian Health Partnership Awards for her work with the armed forces in Afghanistan and Iraq.
- Our fractionated products division, BPL, won the prestigious Queen's Award for Enterprise, recognising its significant growth in export sales.



Shohanna Newman-Kidd

Shohanna was born in 1998 without a bile duct, a condition called biliary atresia, which meant her liver couldn't work properly and poisons were building up in her system. When Shohanna was two-and-a-half, her health deteriorated and she joined the transplant waiting list. She was lucky enough to receive the smaller lobe of a liver through a split liver transplant about a week later. She is now happy and healthy.



Blood Components

Our Blood Donation and Patient Services directorates work in partnership to maintain a safe and sufficient supply of blood and its components for hospitals and patients.

Blood Donation

At present, we have around 1.4 million registered blood donors who donate close to two million units of whole blood and 200,000 units of platelets every year. Our aim is to provide them with an efficient service, allowing them to give blood and platelets as part of a busy life. To help achieve this, we have 24 blood donation centres across England and North Wales, with more than 100 mobile blood collection teams running sessions in local venues throughout the community.



In 2009/10:

- In preparation for the potential swine flu pandemic, we successfully increased our stock of red cells (from a norm of c. 45,000 units) to 65,000 units during July to September 2009. Following the severe, adverse weather experienced across the UK in December and early January, stocks fell significantly. However, they quickly recovered and were maintained at safe levels throughout the year. This was achieved through the fantastic response from our donors, the great efforts of our staff and effective, closely targeted marketing campaigns.
- The flagship Blood Donor Centre in London's West End was reopened with new opening hours following major refurbishment. This has created a more streamlined, comfortable and convenient service for donors.
- New channels of communication, particularly email and online, were successfully trialled with groups of donors during the year. These channels will be extended as a more cost-effective way of maintaining effective relationships with donors.
- Donor satisfaction² increased by 2% to 65%. We were able to achieve this by reducing waiting times and improving the operation of the appointments system. We will continue to identify and implement changes to our operations that will enhance the experience of donors.
- Donor complaints³ fell to 0.54% from 0.63% in 2008/09, reflecting a strong focus on the on-session experience for donors and prompt and effective responses to complaints when made.

Public Interest

The exclusion of men who have sex with men from blood donation continued to be an area of public interest in 2009/10, and we ensured that our information on the development of UK policy was kept up-to-date. For more information on the current review of evidence for exclusion and deferral policies, please visit the website of the Department of Health Independent Advisory Committee on the Safety of Blood, Tissues and Organs (SaBTO): http://www.dh.gov.uk/ab/SaBTO/DH_088830

2. Donor satisfaction is measured as the percentage of donors scoring 9 out of 10 or higher for overall service.
3. Donor complaints are measured as the percentage of donor complaints received per million donations.

Patient Services

Patient Services is responsible for the safe processing and delivery of blood collected by our Blood Donation directorate.

Each year we process, test and issue in excess of 1.9m blood donations and ensure the blood is properly screened and is safe for patients. We manage delivery of blood, blood components, blood products and tissues to hospitals in England and North Wales. We also provide specialist medical advice and clinical support to hospitals and educate and train Transfusion Medicine Specialists.

In 2009/10:

- We achieved our aim of increasing the proportion of platelets issued to hospitals via component donation (apheresis) and will continue to focus our efforts on achieving this throughout 2010/11.
- Significant progress was made against our plans to remove excess capacity in the blood supply chain and increase overall efficiency. We completed the consolidation of processing and testing in both the South West and South East of England and are on course to complete the consolidation in the North by July 2010.
- Along with the benefits of other changes and efficiencies in Blood Donation, this consolidation has allowed NHSBT to reduce the price of red cells to NHS hospitals from c. £140 per unit in 2008/09 to £125 per unit in 2010/11. This will save NHS hospitals around £30m per annum.
- Through successful partnership working with unions we were able to minimise the impact of the consolidation programme on our staff via natural turnover, voluntary redundancy and redeployment both within NHSBT and the wider NHS.

- We continued to work with hospitals to improve customer satisfaction and successfully completed a trial of a new Online Blood Ordering System (OBOS), which is due to be rolled out nationally from August 2010. This will create a more efficient and streamlined ordering process for hospitals.

2009/10 at a glance

In the last financial year we issued to our NHS customers:

- c. 1.9m units of red cells
- c. 240,000 units of platelets
- c. 376,000 units of frozen components (e.g. Fresh Frozen Plasma)

Jane Firth

On 21st December 2006 Jane gave birth to a beautiful baby daughter. After a successful delivery Jane started haemorrhaging and was rushed into theatre for lifesaving surgery. During this time she received 14 units of blood to keep her alive. Thanks to the generosity of donors she has shared a fantastic first three years with her daughter, Ella, and looks forward to many more.



Specialist Services

We provide essential specialist support to the supply of blood, stem cells, tissues and organs in the UK. Demand for our specialist services continues to grow.

Activity in Specialist Services has historically been funded through charging for specialist products and services, by Grant In Aid funding, and through a cross-subsidy from blood prices charged to our NHS customers. Efforts in the last financial year have been focused on reducing the cross-subsidy through growth in charged services and increased efficiency.

In 2009/10 all of the planned consolidations – Red Cell Immunohaematology laboratories in the North West and South East; relocation of stem cell services in the North West and relocation of the NHS Cord Blood Bank to our state-of-the-art facilities in Filton – were completed. We continue to work on the planned divestment of routine antenatal screening services and this will be completed by the end of 2010/11.

Stem Cell Transplantation

We manage the NHS Cord Blood Bank and the British Bone Marrow Registry. We also support stem cell transplantation through our operations at seven specialist facilities for bone marrow processing and storage and six Histocompatibility and Immunogenetics laboratories. Through this national network of therapeutic and diagnostic facilities, NHSBT supports over 50% of all stem cell transplants in the UK, around 3-5 every day.

In 2009/10:

- The British Bone Marrow Registry was maintained at above target levels for the number of donors registered.
- The NHS Cord Blood Bank reached 15,000 stored units and is now the fourth largest internationally accredited cord blood bank with the second largest number of rare tissue types.
- We were asked by UK Health Ministers to lead a review of stem cell transplantation in the UK. Following three months of intensive effort by over 40 scientists, clinicians, economists, and patients representatives, a set of recommendations will be submitted to Ministers this summer.

2009/10 at a glance

- We provided stem cells to over 1,300 patients with leukaemia.
- We ensured the suitability of over 550 kidneys and hearts for transplantation.
- We performed over 40,000 investigations to ensure the safety of red cell and platelet transfusions.
- We investigated and advised on over 7,500 pregnancies at risk of foetal disorders.
- We treated over 1,500 patients through plasma exchange.

Rebecca and Leah

Rebecca Khan donated her cord blood following the birth of daughter Leah. Rebecca and husband Kyle's diverse ethnic heritage of Greek and English; and Trinidadian and Scottish parents meant her donation was unique. The NHS Cord Blood Bank has the world's second highest number of rare tissue types.



Tissue Services

Tissue Services is a multi-tissue bank based at our state-of-the-art facility in Liverpool. The service takes consent from donor families, retrieves, processes and stores skin, bone, tendons, heart valves, arteries, stem cells and amnion for use in a range of different surgical specialties. We also have a Tissue Development Laboratory which researches and develops new tissue products to improve patient outcomes.

In 2009/10:

- There was an increase in deceased tissue donations by 15% from 2008/09.
- There was an increase of over 30% in surgical bone donations from 2008/09.
- 29 members of Tissue Services completed the NVQ Level 2 in Performing Manufacturing Operations.
- Tissue Services also provided over 8,500 tissue products for lifesaving and life-enhancing surgery.



John Kearney, Assistant Director - Clinical Science & Head of Tissue Services and members of Tissue Services Research and Development Team.



Organ Donation and Transplantation

NHSBT is the UK organ donation and transplantation organisation, responsible for all aspects of the donation process and for matching and allocating solid organs and corneas for transplantation throughout the United Kingdom. We also manage and promote awareness of the NHS Organ Donor Register.

The last financial year saw significant progress against our aim to deliver our part of the recommendations of the 2008 Organ Donation Task Force (ODTF), all aimed at increasing organ donation rates in the UK.

In 2009/10:

- Deceased organ donation increased by 19%⁴. With 959 donors saving and improving the lives of countless patients, this was the most successful year ever. We also had our highest number of living donors, meeting the target with a total of 1,026 donors.
 - As a result, the total number of organ transplants carried out in the period April 2009 to March 2010 was the highest ever seen.
 - We transferred all existing Specialist Nurses into NHSBT employment, in new teams, in new offices, with new IT equipment and newly resident in hospitals across the UK. We appointed new staff so that we now have 190 Specialist Nurses for Organ Donation (SN-ODs). This work will deliver consistency in ways of working and a clear emphasis on organ donation for all NHS Trusts.
 - We worked with the NHS to ensure the appointment of 174 Clinical Leads for Organ Donation, the establishment of 138 Donation Committees and the appointment of 122 Chairs. We started work to provide them with the tools they need with an innovative Professional Development Programme.
 - We commissioned 13 organ retrieval teams across the UK working to agreed specifications and standards.
 - We completed the roll-out of our Electronic Offering System (EOS) to almost all transplant centres to speed up donor registration and organ offering, and further developed the electronic Potential Donor Audit.⁵
- We launched the first UK-wide public awareness campaign to encourage more people to join the Organ Donor Register and discuss their donation wishes with their families. As a result there are now over 17 million people on the Organ Donor Register.
 - We established a new clinical governance system within our Organ Donation and Transplantation (ODT) directorate and a new Transplant Policy Review Committee was established by the NHSBT Board to oversee our policies and standards.

Organ Donor Register

In 2009/10 we also faced some challenges, having discovered an error in the recording of some registrants' preferences for organ donation on the Organ Donor Register.

This related to records that had been added to the Register through a scheme with one of our partners, and where people had registered preferences to donate specific organs. Most regrettably, the problem affected the donations of 25 people that had joined the Register and went on to donate organs. We have apologised to the families of these individuals.

The error has now been corrected and we have contacted all those whose records were affected to ensure that their registrations are now correct.

An independent review is underway which will report in the autumn. This will ensure that lessons are learned to improve the Register so that similar problems cannot occur again.

4. From 809 donors in the baseline year 2007/08.

5. The Potential Donor Audit examines all deaths in Intensive Care Units to determine if the person had the potential to be an organ donor.



Nearly 4,000 people signed up to the NHS Organ Donor Register during NHSBT's Prove It roadshow tour, which was launched as a part of our 2009/10 UK-wide public awareness campaign.

Organ donation: facts and figures

- Three people die in the UK every day due to the lack of a suitable organ.
- 8,000 people in the UK are still on the transplant waiting list despite the significant effort being made to increase the number of donors.
- In addition to those people on the 'active' waiting list, a further 2,000 people are on the 'suspended' list because they are too ill or unable to receive a transplant at present. This brings the total number needing an organ transplant in the UK to above 10,000.

Fractionated Products – Bio Products Laboratory (BPL)

BPL provides a continuous and competitive supply of high quality plasma derived products to a growing global market. Through investment in the latest research, technology and manufacturing methods, BPL provides ongoing support to health professionals throughout the world.



BPL's mission is to provide a safe and secure source of plasma proteins to the NHS. In order to meet its mission it needs to be financially sustainable in the longer term and is focused on increasing manufacturing output from its Elstree facility and income from export sales.

In 2009/10:

- BPL increased total sales by 28% over the previous year through growing our export sales by 88%. As a result, and building on growth in previous years, it was announced that BPL had won the prestigious Queen's Award for Enterprise: International Trade 2010.
- A license was granted in September by the US Federal Drugs Agency (FDA) to sell Gammplex (our new generation immunoglobulin) in the USA. This followed a highly successful inspection by the FDA and further confirmed the ongoing improvement in BPL's regulatory performance.
- BPL was profitable, although it needed a net cash investment to fund the growth in working capital required to support the significant increase in export sales activity.
- The global plasma proteins market started to enter into a cyclical downturn in the latter part of the year. This is likely to make 2010/11 a very challenging year and will require closer working with DCI Biologicals Inc, the US-based Department of Health owned supplier of the bulk of our plasma requirements. It is anticipated that the Arm's Length Bodies Review will give BPL greater commercial freedom and closer integration across its plasma supply chain.

Highlights from 2009/10

April to June 2009

- We launched a single 24-hour Donor Line (0300 123 23 23) to make it easier for members of the public to find out about donating blood, organs, bone marrow or tissue.
- We were recognised as Laureate & Health category finalist by the Computerworld Honours Program, Global Information Technology Awards Foundation for the Electronic Offering System (EOS) for organ donation, which speeds up the matching of donated organs to would-be transplant patients.
- We designed an Online Blood Ordering system (OBOS) to replace current manual and paper based fax order processes for use by hospitals when ordering blood and blood components. It was successfully piloted with five key hospitals and the service is now being rolled out to all hospitals.

July to September 2009

- We successfully prepared for the potential swine flu pandemic by increasing red cell stocks from a norm of c. 45,000 units to 65,000 units through targeted communication and advertising campaigns. Through effective stock management we were able to minimise wastage, despite swine flu not having reached the pandemic levels that were anticipated.
- Liver allocation guidelines were drawn up and issued by the NHSBT Liver Advisory Group, after discussion with healthcare professionals and the public, to assist clinicians and ensure transparency and fairness in organ allocation.

October to December 2009

- We received an "excellent" rating in the annual health check results announced by the Care Quality Commission. This is the highest standard achievable. We stepped up from a "good" rating in our first health check during 2007-08, demonstrating improvements in infection control and medicines management to become compliant in 38 out of a possible 40 categories.
- We launched a major public awareness campaign to encourage more people to join the Organ Donor Register and discuss their donation wishes with their families.
- We established secure connection to our IT resources in over 265 hospitals. This played a key role in the transfer of all specialist nurses for organ donation into NHSBT employment.

January to March 2010

- We launched a Professional Development Programme to support a UK-wide network of Clinical Leads for Organ Donation and the Donation Committee Chairs who work alongside them in hospitals to help increase organ donation rates.
- UK Health Ministers asked us to lead the UK Stem Cell Strategic Forum, bringing together a team of experts and partner organisations to examine the current and future UK requirements, and make recommendations for the future provision of stem cells, including those from cord blood, to fight leukaemias and other blood disorders.
- Refurbishment of the West End Blood Donor Centre was completed, providing a more efficient, comfortable and convenient service for donors.
- We gained Level 2 accreditation against the NHSLA Risk Management Standards, achieving a pass in 45 out of the 50 standards.

The West End Blood Donor Centre was refurbished to provide a more comfortable and streamlined environment





Developing our people

We continue to develop a high-performing workforce focused on delivering outstanding services and improved patient safety.

Our Organisational Development Plan helps to build on the current skills and talents of our staff while identifying and developing future capability. We encourage a culture of openness and honesty where discussions about performance and development happen regularly. There are a number of ways staff can feedback their views, but the main opportunity comes in the form of the annual staff survey which helps track progress and identify areas for future development to help make NHSBT a great place to work.

Learning and Development

Our Learning and Development team provides access to an extensive range of learning, education and development opportunities for staff across NHSBT, enabling them to improve their knowledge and skills in support of both their working practice and the furthering of their career.

As an Accredited Centre for various awarding bodies we support our staff to achieve nationally recognised work-based qualifications and we celebrate their success at our annual 'National Award Ceremony'. During 2009/10, over 200 members of staff gained a NVQ Level 2 and above, ranging from Customer Services to Clinical Laboratory Support.

The Hubhub Talent Management Programme

Working in collaboration with six other Arm's Length Bodies (ALBs), this 12-month programme is designed to help identify, assess, develop and maximise the potential of our most talented individuals. Ten of the 30 individuals accepted onto the programme were from NHSBT.

Staff Survey

The annual staff survey measures how staff feel about the organisation, the environment in which they work and helps identify areas where improvements can be made.

The 2009 survey was sent to a randomly selected sample of employees. The 63% response rate meant the results could be acted on with confidence.

The results showed an overall increase in job satisfaction, more staff receiving training to help them do their jobs, more staff feeling encouraged to work as a team and more staff feeling the organisation is committed to helping them balance their work and home life.

However, there are still clear areas where we need to continue to focus our efforts to bring performance into line with or ahead of the wider NHS. Areas of improvement are around ensuring increasing numbers of staff have regular and effective feedback on their performance and a discussion about their development. We are finding new and innovative ways to recognise the hard work of staff, raise awareness of the range of benefits and services available to staff to help improve their work-life balance and continuing our focus on improving communication at all levels in the organisation. Solid progress was made in all these areas in 2009/10, but there is more to be done in 2010/11 and beyond.

NHS Constitution

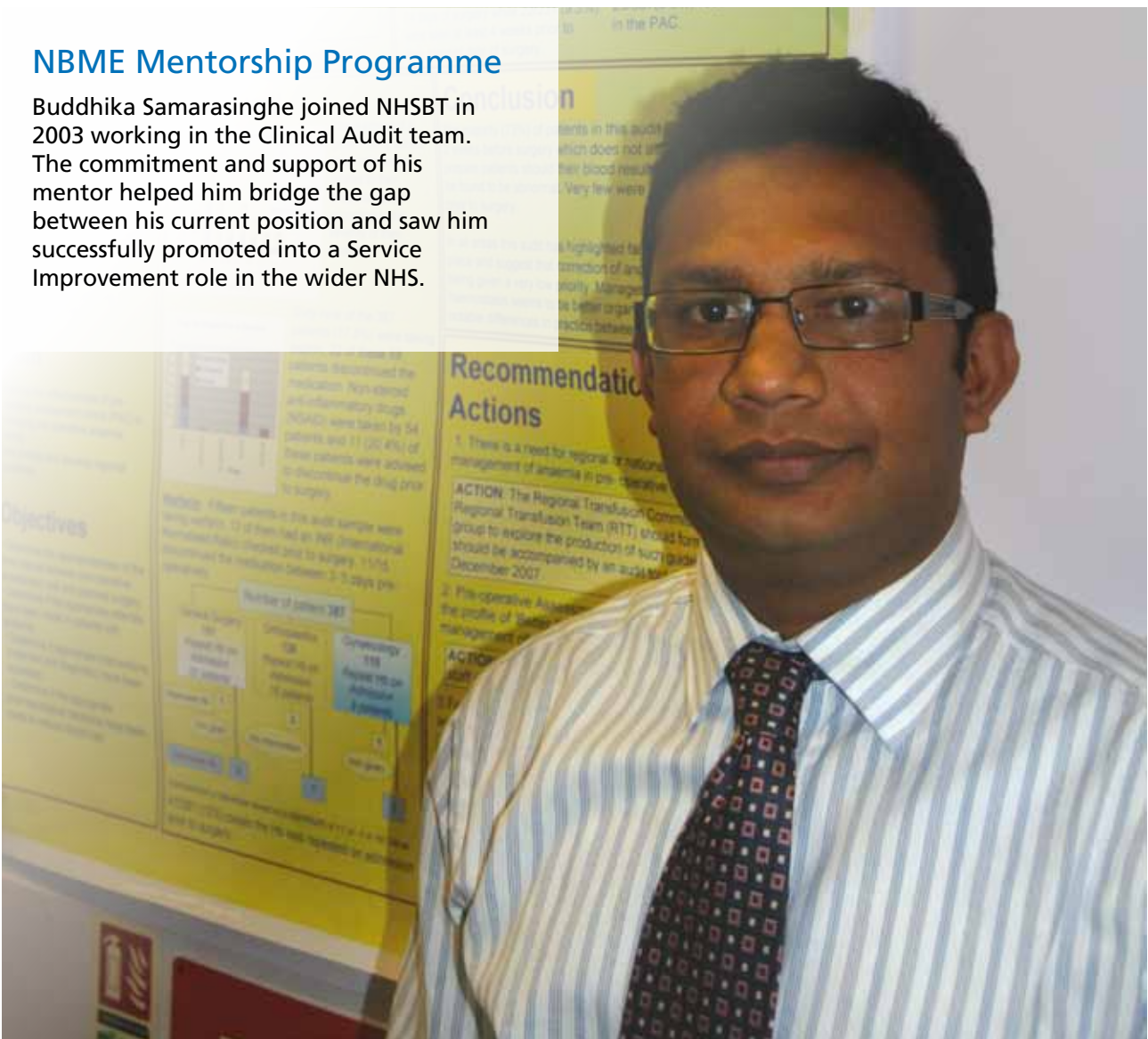
The NHS Constitution sets out the principles and values that guide how the NHS should act and make decisions. It also explains the rights and responsibilities of staff, patients and the public, and the NHS's pledges to them.

NHSBT is committed to embedding the Constitution in the way we operate. In 2009 we:

- Brought the staff survey into line with the wider NHS timetable, using the consistent core NHS question set – including those questions relating to the essence of the Constitution.
- Developed the NHSBT Leadership Charter and Leadership Qualities Framework to be consistent with the values of the Constitution.
- Launched *Shine* – a structured talent and leadership system, which will ensure we develop the right leadership capability working to the values and behaviours consistent with the Constitution.
- Developed a short video for use in induction and internal meetings so that new and current staff are aware of the values by which NHSBT staff are expected to carry out their duties consistent with the Constitution.

NBME Mentorship Programme

Buddhika Samarasinghe joined NHSBT in 2003 working in the Clinical Audit team. The commitment and support of his mentor helped him bridge the gap between his current position and saw him successfully promoted into a Service Improvement role in the wider NHS.



Sustainable Development

The NHS is one of the world's largest employers with a significant carbon footprint of over 18 million tonnes of CO₂ every year. This represents 3% of UK and 30% of public sector emissions. As an NHS organisation, we have a responsibility to integrate sustainable development ideas and initiatives into our strategic plans, and are committed to meeting the sustainable development aspirations of the Department of Health; for the NHS to be *"the most visible and effective public sector exemplar in sustainable development in general and carbon reduction in particular."*

In 2009/10, significant progress was made in our programme of work and preparations were made for registration to the Environment Agency's Carbon Reduction Commitment Energy Efficiency Scheme (CRC). Key highlights include:

- A successful application to the Carbon Trust's Collaborative Carbon Management Programme.
- Launch of an initiative to assess the organisation's waste and how it is managed. Other environmental initiatives included conversions from steam to gas for heating and hot water at some sites, introduction of low energy lighting, auto light switching trials and adjustments to optimise our electrical supplies.
- Review of transport policies and introduction of new upper limits for CO₂ emissions. Additional measures such as a Cycle to Work scheme were introduced at some centres.
- Launch of a staff engagement plan including a dedicated intranet site to keep all staff informed of NHSBT performance in this area, the projects that are being undertaken and what they can do as individuals both at work and at home.
- Excellent progress was made against the Sustainable Procurement Flexible Framework and we are on target to achieve the top level in all categories by 2012, well in advance of the suggested Sustainable Development in Government (SDiG) target of 2015. The initial assessment of suppliers has been carried out and analysis of contracts is ongoing, to establish those with both the highest carbon concentration and the largest impact on the environment.

New monitors for carbon saving

All 15 and 17-inch flat panel monitors previously in use by NHSBT staff have been replaced with larger, more energy efficient 19-inch screens.

The replacement will result in increased screen workspace for staff and a reduced impact on the environment.

The carbon saving expected for replacing the 2,300 15-inch monitors previously used is 25%; for replacing the 900 17-inch screens, the potential saving is even higher at 54%. Electricity consumption costs will be reduced by £4,538 per year and 33,404kg of carbon will be saved annually.



NHSBT Governance and Structures

NHSBT Board

The Board oversees the organisation's strategic direction and delivery of planned results. It ensures NHSBT successfully upholds its core purpose, mission and values.

Led by the Chairman, the Board is comprised of Non- Executive Directors and Executive Directors, including the Chief Executive. It establishes the organisation's annual corporate business plan, budget and long term financial strategy; this ensures NHSBT complies with its legal requirements and guidance for the use of public funds. The Board meets six times a year on a bi-monthly basis.

Non-Executive Directors

The Non-Executive Directors work alongside the Chairman, Chief Executive and Executive Directors to direct the work of the organisation. As members of the Board, they provide an independent perspective on issues such as strategy and performance.

Using their knowledge, skills and experience, the Non-Executive Directors are able to contribute to the strategic development of the organisation alongside the Chairman and Executive Directors. They are expected to uphold the values of the organisation and ensure NHSBT promotes equality and diversity for all patients and staff.

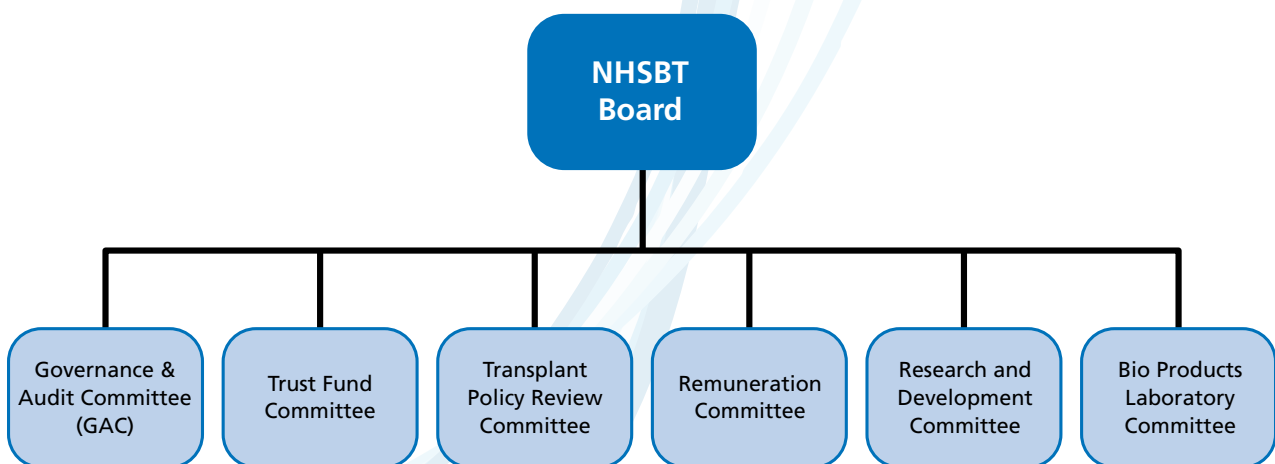
Executive Team

The Executive Directors ensure the organisation's values are actively portrayed and promoted across the directorates. They are committed to providing excellent leadership and direction, enabling staff to achieve their best.

The role of each Executive involves a high-level of experience in planning, problem-solving, delivering operational services and business strategies. They are required to use financial resources efficiently, set annual objectives and monitor performance against targets.

The Executive team meets every two weeks to discuss and review business priorities.

Board Committee Structure





Board Members

NHSBT Board



Bill Fullagar – Chairman

Bill has wide experience at director/chairman level in the industrial field. He was International Marketing Director for Sandoz Pharmaceuticals in Switzerland before becoming President of its group of healthcare, food and agrochemical companies in the USA, and subsequently heading the Novartis Group in the UK. From 2001-2003 he was President of the Association of the British Pharmaceutical Industry.

Chair of Research & Development Committee and also BPL Committee.



Lynda Hamlyn – Chief Executive

Lynda joined the organisation in January 2008 from Westminster Primary Care Trust, where she had been Chief Executive since its inception in 2002. She joined the NHS in 1986 as Director of Services for North Hertfordshire Health Authority. In a career in the NHS spanning over 20 years, she was Chief Executive first of Northamptonshire and then Hertfordshire Health Authority, and a member of the National Specialist Commissioning Advisory Group. She was a non-executive director of Stonham Housing Association from 2003 to 2008.

Non Executive Directors



Andrew Blakeman

Andrew Blakeman is a chartered accountant and Head of Control for Refining & Marketing at BP p.l.c. He joined the BP Group in 1996 following eight years with Touche Ross & Co.

Chair of Trust Fund Committee.



Della Burnside

Della Burnside, a solicitor, is General Counsel & Company Secretary of McDonald's Restaurants Limited & Division Counsel, Northern Europe. She joined McDonald's in 2007, having previously worked for easyGroup (UK) Ltd and following a number of years as a Partner in private practice.

Chair of Transplant Policy Review Committee.



Dr Christine Costello

Dr Christine Costello is a Consultant Haematologist. She is also a member of the General Medical Council's Fitness to Practise Panel and a GMC Examiner in the clinical examination for international graduates. She is a Justice of the Peace and has previously been a member of the Independent Monitoring Board of Wandsworth Prison.



John Forsythe

John Forsythe is a Consultant Transplant Surgeon at the Royal Infirmary of Edinburgh. He is the Lead Clinician for Organ Donation and Transplantation in Scotland, Chair of the Scottish Transplant Group and Secretary General for the European Society for Organ Transplantation.



David Greggains

David Greggains is a management accountant and director of a private company. He has experience of working in both the public and private sector and is a member of the Independent Monitoring Board for Harmondsworth Immigration Removal Centre.

Chair of Remuneration Committee.



George Jenkins OBE

George Jenkins OBE, is Vice Chair of NHSBT. He has held many non-executive and executive director roles in both the public and private sectors.

Deputy Chair of the Board and Chair of Governance and Audit Committee.



Shaun Williams

Shaun Williams is a former Board-level Director of Corporate Affairs for two national media companies, was Chief Executive of the TV and feature film trade body PACT, and is a former journalist, BBC Director and ITV Producer. He has served on a number of public and private sector boards, and has been an invited member of several industry and government committees.



Executive Team



Léonie Austin – Director of Communications

Léonie joined NHSBT in April 2010 having previously been Director of Communications at the Royal Institution of Chartered Surveyors (RICS). Léonie has extensive Communications experience across a number of Central Government and Whitehall departments including the Cabinet Office, the Food Standards Agency and the then Department of Trade and Industry.



Rob Bradburn – Director of Finance

With more than 20 years' experience of senior financial management, Rob joined NHSBT in April 2008 from Premier Foods, where he was interim Head of Finance, Group Procurement. Having qualified as a Chartered Accountant at Ernst & Young, he began a long career at ICI in 1985, culminating in the role of Global Vice-President Finance & Planning, Foods at Quest International in the Netherlands. From 2004-2006, he was Group Finance Director of ABF Ingredients at Associated British Foods PLC.



Dougie Dryburgh – Director of Estates and Logistics

Dougie's responsibilities encompass infrastructure, transport and warehousing. Prior to joining NHSBT in August 2006 Dougie spent 16 years in the RAF, operating mainly within the infrastructure environment.



David Evans – Director of Human Resources

David has wide experience of HR in the public sector. Before joining NHSBT in June 2006 he was Director of HR and Organisational Development at Barking, Havering and Redbridge NHS Trust.



Sally Johnson – Director of Organ Donation and Transplantation

Sally joined NHSBT in September 2008. Previously a Programme Director responsible for achieving clinical reconfiguration, Sally was also Chief Executive of a Primary Care Trust for six years.



Alan McDermott – Director of Blood Donation

Alan joined NHSBT in August 2006. Prior to this, he held a number of senior IT executive roles in private sector manufacturing, services and financial organisations in Ireland, Australia and the UK, and more recently in UK Government. Alan was also Director of Business Transformation Services during 2009/10 and he continued to oversee the role pending the appointment of a permanent replacement.



Dr Clive Ronaldson – Director of Patient Services

Clive's previous experience includes 17 years with Baxter Healthcare, where he was factory manager in the UK. He joined BPL in 1993, becoming Managing Director BPL in September 2005. Having led the National Blood Service as interim Managing Director from July 2007, he was appointed Director of Patient Services in June 2008.



Dr Lorna Williamson – Medical and Research Director

Lorna joined the National Blood Service in 1991. She currently chairs several working medical groups and is a founder of the Serious Hazards of Transfusion (SHOT) scheme for UK haemovigilance. A co-founder of the National Blood Service and Medical Research Council Clinical Studies Unit, Lorna is a Fellow of Lucy Cavendish College, Cambridge.

Directors' Remuneration

Name and title	Year to 31 March 2010		
	Salary in £5k bands £000	Other remuner. in £5k bands £000	Benefits in kind (rounded to the nearest £000) £000
Mr B Fullagar (Chairman)	60-65	–	–
Mr A Blakeman (NED)	5-10	–	–
Ms D Burnside (NED)	5-10	–	–
Dr C Costello (NED)	5-10	–	–
Mr J Forsythe (NED)	5-10	–	–
Mr D Greggains (NED)	5-10	–	–
Mr G Jenkins (NED)	10-15	–	–
Dr D Walford CBE (NED) (Period 01/04/2009 to 30/09/2009)	0-5	–	–
Mr S Williams (NED) (Commenced 04/03/2010)	0-5	–	–
Ms L Hamlyn (Chief Executive)	190-195	–	0.7
Mr R Bradburn (Finance Director)	130-135	–	–
Mr D Dryburgh (Group Director of Estates and Logistics)	110-115	–	5.1
Mr D Evans (Group Director of Human Resources)	120-125	–	4.6
Mr P Garwood (Director of Specialist Services) (Period 01/04/2009 to 30/09/2009)	60-65	70-75	–
Ms S Johnson (Director of Organ Donation and Transplantation)	120-125	–	–
Ms H Joy (Director of Communications and Public Affairs) (Period 01/04/2009 to 11/12/2009)	70-75	–	–
Mr A McDermott (Director of Business Transformation Services)	120-125	–	9.3
Mr T Male (Director of Strategy Management) (Period 01/04/2009 to 06/04/2009)	0-5	–	–
Dr C Ronaldson (Director of Patient Services)	130-135	–	4.3
Dr L Williamson (Medical Director) Commenced 01/07/2009	155-160	–	–
Mr A Young (Director of Blood Donation) (Period 01/04/2009 to 21/07/2009)	35-40	–	–

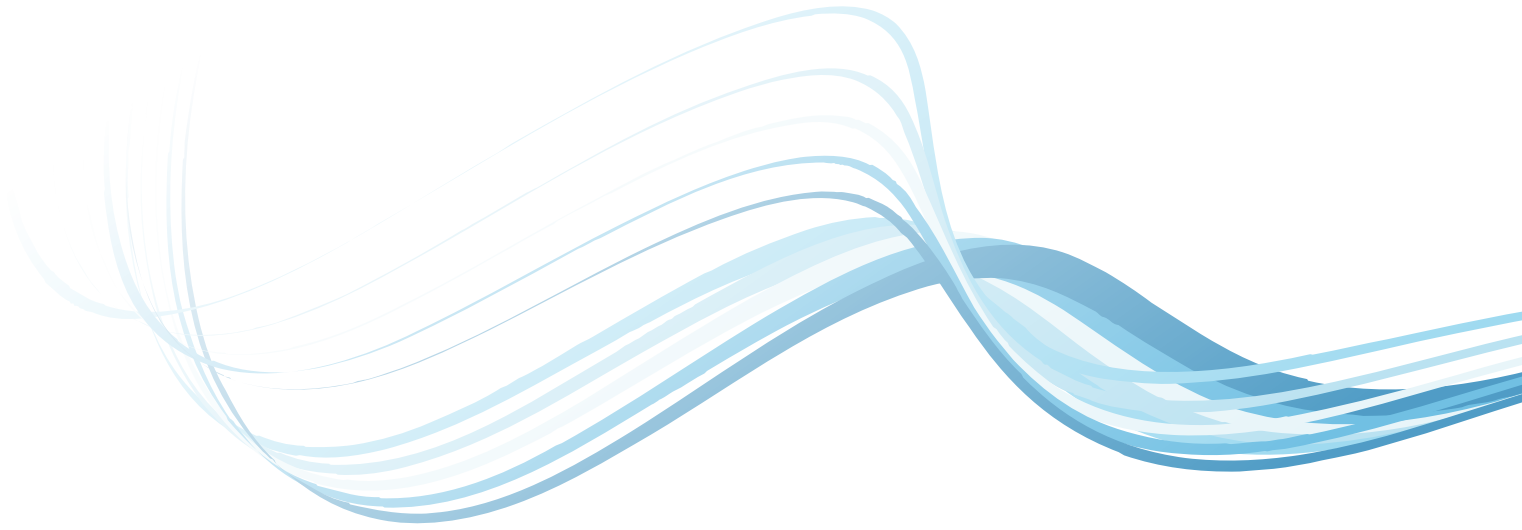
The sum of £62k was paid to the University of Cambridge in salary recharges for Dr L Williamson (Medical Director) for the period 01/04/2009 to 30/06/2009.

The position of Director of Communications and Public Affairs was filled by an agency staff member on an interim basis from 16/11/2009.

For the period 16/11/2009 to 31/03/2010 agency costs amounted to £85k.

NED = Non-Executive Director.

Benefits in kind were in relation to the provision of cars.





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