



Blood and Transplant

Annual Business Plan 2007/08

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1. Introduction

This is the NHSBT Annual Business Plan for 2007/08. It builds on the organisational progress made during 2006/07 and focuses on the activities planned during the 2007/08 financial year towards delivering the outcomes described in the 2006/10 NHSBT Service Strategy.

Each specific activity within this plan has been set in the context of an NHSBT strategic objective; these are described in detail within the NHSBT Service Strategy. That Strategy outlines NHSBT's plans for addressing the key challenges it faces in the period 2006/10 to enable the Authority to continue to deliver the high-quality services that NHS patients need. It represents a significant and demanding change programme for the organisation.

Fundamental to this Business Plan is the underpinning work-plan for 2007/08, which contains the detailed activities and initiatives through which this plan will be delivered.

Appended are:

1. The 2007/08 Work-Plan
2. The 2007/08 Financial Summary

This document represents a high-level description of the key 2007/08 outcomes and financials associated with the agreed work-plan activities, milestones and targets.

2. NHSBT Corporate Work-Plan and Financial Summary

In the eighteen months since it was established, NHSBT has achieved its immediate goal of managing major organisational change – the merger of previously autonomous service providers – while maintaining or improving the quality of the services delivered to patients. The task over the next year and beyond will be to continue this progress while improving efficiency and maintaining appropriate levels of quality and supply continuity. This raises many challenges, which NHSBT and its operating divisions are actively addressing.

Strategic Objective 1: Merger Synergies

Part of the rationale for the merger of the NBA and UKT was recognition that there are operational overlaps in some activities of the two organisations. Since NHSBT was created, there has been progress in the streamlining of some support services, by providing them on a 'group' basis. The merger has also facilitated the provision of additional management support and other resources to UKT and BPL and support for a DH Task Force on transplant services in the UK.

- During 2007/08 NHSBT will identify further synergies, establish a timetable for delivery and continue the consolidation of activities across its divisions.

Strategic Objective 2: NHSBT Business Model

The Service Strategy will be reviewed and updated on a regular basis. The first review will take place in 2007 and will consider the extent to which the current configuration and management arrangements within NHSBT are best suited to deliver the outcomes of the Service Strategy.

- During 2007/08 NHSBT will agree a robust business model for NHSBT and a timetable for achieving transition.

NHSBT Financial Summary - Revenue Account

Overall, this Business Plan outlines a balanced income and expenditure position in 2007/08, thereby fulfilling the statutory requirement to demonstrate a break-even position. The level of cost reduction and efficiency savings planned demonstrates that NHSBT is on track to significantly exceed the overall cost reduction objectives of the Arm's Length Bodies (ALB) review.

ALB review targets to be achieved by 2008/09 (from a baseline of the 2005/06 plan) are as follows:

- A reduction in grant in aid funding of £11.0m. £16.7m will have been achieved by the end of 2007/08 (£7.1m 2006/07 and £9.6m 2007/08)
- Total cost reduction savings of £27.0m. £50.1m will have been achieved by the end of 2007/08 (£32.3m 2006/07 and £17.8m 2007/08)
- A reduction in funded establishment of 153 WTE. 467 WTE will have been achieved by the end of 2007/08 (284 WTE 2006/07 and 183 WTE 2007/08)

In total, this Business Plan delivers a cost reduction and efficiency programme of £17.8m against operating costs. This saving has been offset by the impact of

inflation, cost pressures and the cost of NHSBT work-plans. NHSBT's baseline costs will increase by £6.1m or 1.36%.

In addition to this NHSBT's financial plan includes £29.0m of funding for the non-recurring implementation costs of the NHSBT Service Strategy – see transition funding below. This takes the overall increase in NHSBT's total expenditure costs to £35.1m from its 2006/07 budget position of £447.9m to a 2007/08 budget of £483.0m. Appendix 2 contains the NHSBT financial summary for 2007/08.

Further opportunities to deliver savings from 2008/09 onwards are reflected in the NHSBT Service Strategy.

Transition Funding

In order to deliver its strategic objectives, NHSBT will require non-recurring funds. These are prudently estimated at £9m in 2007/08 and cover the potential cost of reorganisation, change management support and other non-recurring costs associated with delivery of the strategic change programme. In 2007/08 this transition funding requirement has been funded in blood component prices as agreed with the National Commissioning Group for Blood.

In subsequent years, delivery of planned cost reduction and consolidation programmes will require further and significant levels of non-recurring funds. It is assumed at this stage that such transition funding requirements will be met from a combination of:

- Non-recurring funding in prices (working within the constraints of the red cell price target), and by
- Achieving in-year savings above plan in 2005/06 and 2006/07, and transferring (brokering) these surplus funds into the financial years in which they are required.

The 2007/08 financial plan includes £20m carried forward from 2005/06 and 2006/07. It is anticipated that this funding will be brokered into 2008/09. NHSBT will seek to minimise the level of non-recurring costs incurred in delivering the over-arching Service Strategy.

Capital Investment

During 2007/08, NHSBT is planning to deliver a capital investment programme totalling £49.0m.

These capital investment plans are largely centred on the development of the NBS' three key strategic locations (Filton, Manchester and Colindale), BPL's ongoing investment programme and specific IT system developments.

The capital expenditure plan also includes ongoing equipment replacement and renewal programmes. The appropriate level of capital charges on our fixed asset base, in the form of interest and depreciation, are included within the Income and Expenditure account of each Division.

NHSBT will be working closely with its DH partners to progress and deliver this capital programme in a timely manner, with plans being progressed in conjunction with the DH Capital Investment Branch where necessary.

3. National Blood Service Work-Plan and Operating Costs

The Service Strategy articulates the extent to which the NBS must change if it is to continue to serve patients effectively and deliver an efficient service for the NHS. Accordingly, the NBS has agreed four strategic objectives within the Service Strategy relevant to each of its key strategic issues. The 2007/08 work-plan describes the detailed activities planned to deliver progress for this financial year.

Strategic Objective 3:

Sustainable Supply and Modernising Blood Collection Arrangements

Fundamental changes to the way that NBS Donor Services are arranged and managed are necessary to achieve sustainability of supply with a smaller donor base. Blood collection sessions need to be on the right days of the week and at the right times to appeal to donors; session venues and locations need to be more convenient and more attractive to younger donors; waiting times need to be reduced further; more staff time needs to be spent in direct donor contact and away from session set-up activities; and current marketing and advertising spend needs to be targeted more effectively.

The key outcomes for 2007/08 are to ensure:

- Sufficiency and quality of products and services are maintained throughout the year, and
- Successful implementation of the important first steps to improve the robustness of blood collection arrangements.

Strategic Objective 4:

Modernising and Consolidating Blood Production Facilities

The challenge for the NBS is to provide facilities that are compliant with licensing and accreditation requirements while reducing operating costs to meet NHSBT pricing targets. The consolidation and modernisation of production facilities will provide the platform for consistent and standard products and services, ensuring more equal treatment for patients in all areas of the country and the development and implementation of common standards and procedures, through concurrent modernisation and standardisation.

The provision of adequate and flexible space will facilitate safe, effective and timely implementation of new processes and systems that may be required in the future to deal with new/emerging legislation and new blood safety interventions. It will also lead to: improved working conditions for staff providing safer and healthier environments and working practices; increased productivity through economies of scale (and reduced operating costs); while ensuring that adequate geographical coverage is provided, not only for the receipt of blood from collections, but also in the timely provision of blood for patients.

The key deliverables in 2007/08 are to ensure:

- The strategic estates programme is delivered to planned milestones and,
- The successful relocation of selected services.

Strategic Objective 5: Developing Specialist Services provision

The challenge is to continue to meet current levels of demand for specialist products, services and advice while delivering planned growth and continuous improvement at the lowest effective cost. Demand for specialist services continues to grow however,

they are currently subsidised by income from the provision of blood component products. The NBS therefore needs to achieve efficiencies that both allow growing services to develop further while reducing inappropriate cross-subsidies from blood components.

During 2007/08 the NBS will ensure:

- Sufficiency and quality of products and services are maintained throughout the year,
- Increased activity and improvements in certain specialist areas, and the
- Successful relocation of selected services.

Strategic Objective 6:

Delivering a Significant Cost Reduction and Efficiency Programme

NHSBT is committed to stabilising the price of red cells, keeping it to as low a level as possible, whilst balancing the risk profile of reducing costs against the requirement to maintain continuity of supply. The goal is to deliver cost reduction and efficiencies that achieve red cell price stability in 'real terms' after taking into account the impact of inflation. To achieve this in the context of falling demand for blood, the need to modernise blood collection arrangements and the need to invest in the estate presents a major challenge. In addition to the outcomes described above, the strategic change programme will also remove significant levels of fixed costs in order to mitigate the impact on unit prices of both recurring cost pressures and declining demand. The NBS 2007/08 financial plan incorporates:

- A cost reduction programme of £10.5m and
- A red cell price agreed with the National Commissioning Group for Blood, of £133.99. This is £4.62 ahead of target. The target price for 2007/08 (based on inflation rises from a 2005/06 baseline price of £131.80) was £138.61.

In 2007/08 the NBS will

- Achieve its financial plan and targets while maintaining sufficiency and quality of products and services.

The NBS cost reduction programme offsets the impact of agreed service developments, inflation and cost pressures. The overall net position is an increase in recurring operating costs of £1.6m (0.47%).

The 2006 meetings of the National Commissioning Group for Blood agreed that £9m of non-recurring funding could be included in 2007/08 prices, to fund the non-recurring transition costs arising from implementation of the NBS strategic change programme. Therefore, total NBS costs increase by £10.6m in 2007/08. However, as mentioned above, the NBS remains ahead of target to deliver its objective to implement a cost reduction programme that maintains the 'headline' red cell unit price at, or beneath, a ceiling price of £146.19 by the end of 2010. The total cost of providing blood and component products to customers has risen by a level below the rate of inflation (2.26% v 2.66% respectively).

4. Bio Products Laboratory Work-Plan and Operating Costs

The Service Strategy articulates the changes in the commercial environment in which BPL operates and its impact on their financial viability. In recent years BPL has had to rely on direct funding from the DH. This cannot continue indefinitely as it diverts resources away from other areas of the NHS. In addition, the plasma products that BPL produces are available from other suppliers.

Strategic Objective 7: BPL moves towards financial viability

As a result, BPL's strategic objective is to operate more efficiently and on a sustainable basis in order to progress towards financial viability.

- During 2007/08 BPL will significantly improve its financial position through the progression of activities in each of three work streams.

Increasing Sales Revenue

Growth in sales revenue in the UK will be achieved through increases in sales volume and sales price in both Intravenous Immunoglobulin (IgG) and Albumin products – making progress in aligning prices in the UK with those in Western European countries and the US.

Increases in the level of export sales will be achieved by developing partnerships with other international fractionators and seeking to secure licences for Coagulation Factor products in key European markets.

- In 2007/08 BPL total sales will increase significantly to £82.8m by the end of 2007/08.

Reducing Operating Costs and improving efficiencies

BPL will continue its programme of tight cost control via careful and focused budgetary management, reducing non-plasma operating costs and by realising the full year impact of the restructure completed in 2006/07.

- Overall total BPL costs will increase at a level less than the rate of inflation (2.48% v 2.66% respectively).

Continuing Business Development

BPL will continue its ongoing business development programme. These developments will bring additional sales income in future financial years. In 2007/08 it is forecast that BPL will:

- Achieve mutual recognition in Europe for its Factor VII and Factor IX products,
- Continue to progress clinical trials of its new IVIG (Gammaplex) product, and
- Evaluate the sales potential for the plasma proteins Thrombin and Fibrinogen.

BPL is continuing its strategic capital investment programme, predominantly to achieve current UK and international regulatory requirements, to facilitate new product and process development and to further upgrade its manufacturing plant. BPL's capital investment of £6.5m also includes minor capital investment in IT systems and ongoing works programmes.

5. UK Transplant Work-Plan and Operating Costs

UKT is one of a number of NHS organisations involved in the commissioning and provision of UK transplant services. During 2007/08, UKT will build on the considerable progress achieved over the last 5 years, and look to further improve services to transplant patients and organ donors.

Strategic Objective 8: Organ Transplants

UKT will lead the UK's organ donation and transplantation service, seeking to identify and refer increasing numbers of potential donors and to increase the number of actual donors.

- In 2007/08 UKT will increase the number of organ transplants by 100 from the 2006/07 actual position and lay the foundation for future increases.

UKT will achieve this through the progression of activity in three key work-streams.

Increasing the relatives' consent rate

Through planned investment in a further 10 in-house co-ordinator schemes (£0.5m) UKT will increase the relatives' consent rate from 59% to 61%, realising an additional 25 donors, leading to 80 additional organ transplants.

Extending programmes to support non-heart-beating and living donation

UKT will maintain the current investment in existing non-heart-beating schemes, developing proposals to expand into all neurological ICUs and other general ICUs. UKT will also extend the investment in liver donor schemes adding a further 5 schemes (£0.2m) that will realise an additional 20 donors, leading to 20 additional organ transplants.

Increasing the number of people on the Organ Donor register (ODR)

Through investment of £1.0m above baseline budgets in additional marketing campaigns, UKT will increase the numbers on the Organ Donor Register to 14.7m by March 2008.

Strategic Objective 9: Corneal Transplants

- In 2007/08 UKT will increase the number of corneal transplants by 150 from the 2006/07 actual position.

UKT will achieve this through its continued investment in eye retrieval schemes. Funding of £0.7m will be invested in 2007/08 to fund eye banks for the cost of donor referrals carried out by NBS Tissue Services. UKT will also conduct a formal review of all (8) funded eye retrieval centres and, thereafter, continue to performance manage each centre against an annual target of 450 corneas after three years of operation.

UKT Operating Costs

UKT will deliver a cost reduction programme of £0.4m in 2007/08 and its capital charges will reduce by £0.1m. These savings will be re-invested to cover the cost of inflation and other cost pressures. Overall, this leads to a slight reduction (£0.1m) in the baseline DH grant in aid funding position.

The UKT work plan identifies a total investment programme of £2.4m above baseline funding with the overall net impact for UKT being an increased cost base of £2.3m in 2007/08. This investment will deliver an increase in the number of organ and corneal transplants during 2007/08 and lay the platform for future increases.

6. Group Service Work Plan

This section outlines the key enabling activities being planned to support the achievement of NHSBT and Operating Division objectives. The financial implications of each division's funded support services has been reflected in the Operating Division sections above.

A significant factor reflected in the support function work-plan is the establishment of strategies, frameworks, systems and processes to support a challenging change agenda. This is reflected in the measures that are predominantly focused on key milestones and outputs. Future business plans will focus more on the measurement of key support service outcomes.

Strategic Objective 10: Management Capacity

The changes set out in the Service Strategy are far-reaching and complex. The organisation will need to ensure that it has the management capacity and capability in place to deliver its change plan. In addition to this, NHSBT will ensure that robust Programme Management arrangements are in place to both deploy a disciplined, standardised change management approach and also to identify, mitigate and minimise potential implementation issues associated with this significant change agenda. During 2007/08 NHSBT will:

- Ensure that NHSBT has the appropriate management capacity in place to enable delivery of the Service Strategy.

Strategic Objective 11: Workforce

Throughout a period of very significant organisational change it will be vital that NHSBT is able to maintain the commitment and motivation of a critical mass of its staff at all levels. The future organisation will require a workforce that is more flexible, well-trained and better managed.

Managing change of such complexity, while ensuring that the key organisational outputs are maintained, requires detailed change management planning. NHSBT acknowledge the impact of change on the workforce and will provide support through the change process via good management and communication. Staff and their representatives will be consulted appropriately and effectively on the changes that affect them.

By the end of 2007/08 NHSBT will ensure that the organisation has the management systems in place to:

- Support and deliver workforce change within the NHSBT Service Strategy,
- Maintain and improve operational HR Services to the Divisions and Group Services,
- Maximise the development and education of our staff, in line with service objectives,
- Maximise staff morale during organisational change,
- Respond to and embrace diversity within our workforce and our donors,
- Ensure effective internal and external communications to support the NHSBT Service Strategy.

Strategic Objective 12: Information Technology

An essential pre-requisite to the successful implementation of the Service Strategy is the continued, judicious investment in the Authority's Information Technology (IT) infrastructure, systems and services. The future IT landscape will need to be highly flexible to respond to the scale and rate of business change, however, NHSBT needs to maintain a careful balance between investments, the realisation of benefits and cost. During 2007/08 NHSBT will:

- Develop and agree an IT Strategy in support of the Service Strategy, ensuring appropriate linkages to wider NHS initiatives,
- Identify and secure IT resources to deliver the Service Strategy,
- Deliver IT solutions and services in support of Operating Division plans.

Strategic Objective 13: Finance

Essential to the successful implementation of this Service Strategy is effective financial management. As mentioned earlier, in order to deliver the objectives within the Service Strategy, NHSBT will require significant non-recurring funds. During 2007/08 NHSBT Finance will work with its key stakeholders to ensure that NHSBT:

- Delivers its financial plan, breaking even on its revenue account and retaining a strong year-end balance sheet,
- Generates sufficient non-recurring funding to enable future delivery of Service Strategy,
- Develops its business support structures, transactional systems and governance arrangements in line with the Authority's needs. In 2007/08 NHSBT will complete its implementation of an I-procurement system and the first phase of the Electronic Staff Record system (ESR).

7. Risk Management

NHSBT adopts an integrated approach to planning and the management of risk. In practice, this means that each Strategic Objective has been subject to a risk evaluation and assessment and that supporting work plans (and their respective controls) have been developed to mitigate the non-achievement of these objectives.

This work is documented within the NHSBT Assurance Framework and is subject to scrutiny by the Governance and Audit Committee (GAC) and the Authority's Internal Auditors. As part of the planning process the GAC provides an opinion on the robustness of the Assurance Framework, and its alignment with the activities within this Business Plan.

8. Summary

This Business Plan presents activities and initiatives in 2007/08 to progress the achievement of the strategic objectives detailed within the NHSBT Service Strategy.

Operational delivery of the constituent work-plan activities will be managed and adjusted on a monthly basis by Group Directors and their management teams, with progress reported to the NHSBT Board on a quarterly basis.

In the absence of significant unforeseen circumstances this Business Plan is commended to the NHSBT Board and DH Sponsors.

**Appendix 1 NHSBT Work-Plan 2007/08
NHSBT Corporate Activity**

Strategic Objective 1: To realise customer and patient benefits of consolidating relevant operational activities currently carried out within the NBS and UKT Divisions over the period of this plan.
Accountability: NHSBT Chief Executive & Director of Strategy Management

➤ **During 2007/08 NHSBT will identify further synergies, establish a timetable for delivery and continue the consolidation of activities across its divisions.**

Activity Description	Measure and or "Milestone"
<ul style="list-style-type: none"> • Review relevant services within NBS and UKT - to focus initially on the provision of Tissue Services, Histocompatibility and Immunogenetics, the British Bone Marrow Registry, Stem Cell immunotherapies and Organ / Tissue co-ordinator networks and R&D. • Following this review, develop an NHSBT benefits realisation plan for further consolidation of services. • Begin implementation of the plan. 	<p>By April 2007</p> <p>By June 2007</p> <p>Progress report March 2008</p>

Strategic Objective 2: To review, identify and implement the most effective business model for NHSBT.
Accountability: NHSBT Chief Executive & Director of Strategy Management

➤ **During 2007/08 NHSBT will agree a robust business model for NHSBT and a timetable for achieving transition.**

Activity Description	Measure and or "Milestone"
<ul style="list-style-type: none"> • Progress actions arising from the review of future partnership options for BPL. Milestones to be developed following outcome of the Ministerial review. 	TBA
<ul style="list-style-type: none"> • Progress actions arising from the review of NHSBT's business model by April 2007. Milestones to be developed following outcome of the review. 	TBA
<ul style="list-style-type: none"> • Review UKT's sources of funding and 'terms of engagement' with its UK customers making recommendations to the NHSBT Board. 	By March 2008
<ul style="list-style-type: none"> • Support and facilitate the establishment of an NHSBT virtual Institute of Transfusion and Transplantation Medicine and Science. 	By March 2008
<ul style="list-style-type: none"> • Agree an NHSBT-wide Research and Development Strategy. 	By March 2008

**Appendix 1 NHSBT Work-Plan 2007/08
National Blood Service**

Strategic Objective 3: To ensure a safe and sustainable supply of blood and blood components, collecting sufficient blood to meet the needs of patients. Accountability: Managing Director NBS			
The key outcomes for 2007/08 are to ensure:			
<ul style="list-style-type: none"> ➤ Sufficiency and quality of products and services are maintained throughout the year, and the ➤ Successful implementation of the important first steps to improve the robustness of blood collection arrangements. 			
Activity Description			Measure and or “Milestone”
Core Business <ul style="list-style-type: none"> • Collect sufficient whole blood donations to meet the current forecast level of red cell demand (1.855m units). • Produce and issue platelets to meet demand of 218k adult therapeutic doses, maintaining the proportion of platelets produced by component donation (CD) at 60%, whilst scoping the requirements to deliver up to 80% in this way. 			Red cell requests met >99.98% Red cell stocks within range 40k-50k Platelet requests met >99.66% Report on expanded CD by January 2008
Blood Collection Strategic Change Programme <ul style="list-style-type: none"> • Alternative Collection Environment - move towards the provision of more collection facilities in semi/permanent locations. • DRM - introduce a Donor Relationship Management System (DRM) to enable the NBS to utilise donor information to improve donor relationships through donor base segmentation, greater personalisation and more effective communications. • Remodelled session activity - implementation of the best practice model for blood donor sessions, a review of session opening times with proposals for future years, further trials of component donation in a mobile environment, improve donor comfort during venepuncture and explore the potential for removal of the invasive haemoglobin test. • Appointments - increase the number of donations by appointment at public sessions by providing a method of electronic capture allowing donors to book their next appointment on session. • Diversity Training – for all Donor Service staff to respond better to the needs of disabled donors and those from a minority background. • Modernise IT systems - conduct a pilot to develop live-connectivity to blood donations sessions through provision of online access to donor records at collection sessions and scope the potential for elimination of paper based records. • Restructure and Consolidate - Build on the management restructure in 2006/07 reviewing the roles and responsibilities of Doctors, Nurses and Donor Carers with a view to incrementally transferring responsibilities between roles. Consolidate the Specialist Therapy Services to a three-region model and consolidate Donor Records in the South West onto Bristol Southmead. 			Sessions by ACE @ 10% by March 2008 Partial implementation by March 2008 By March 2008 Donations by Appointment from c25% to 80% by March 2008 By March 2008 Pilot report by March 2008 By March 2008
Donor satisfaction from 47% to 48%	New donor recruitment at 259k	Donor response to invitation from 28% to 29%	Cost per donation from £46.83 to £45.69

**Appendix 1 NHSBT Work-Plan 2007/08
National Blood Service**

Strategic Objective 3: To ensure a safe and sustainable supply of blood and blood components, collecting sufficient blood to meet the needs of patients. Accountability: Managing Director NBS	
The key outcomes for 2007/08 are to ensure:	
<ul style="list-style-type: none"> ➤ Sufficiency and quality of products and services are maintained throughout the year, and the ➤ Successful implementation of the important first steps to improve the robustness of blood collection arrangements. 	
Activity Description	Measure and or “Milestone”
In addition to the blood collection strategic change programme, the NBS will progress additional activity to ensure a safe and sustainable supply of blood and blood components through improved provision of products, services and advice.	
Service & Process Redesign <ul style="list-style-type: none"> • Design and develop more efficient processes for blood processing and testing, for inclusion in Colindale, Manchester and Filton. • Maintain and improve Services to customers by providing a national service that meets required standards and is responsive to local needs. • Begin the Implementation of logistics and supply chain plans for the management and distribution of products and samples for consolidated services. • Design and develop working practices to deliver routine services on a 24/7 basis, including processing, donation testing and specialist services as appropriate, laying the platform for improvement in future productivity levels. It is planned to achieve agreement through appropriate consultation on the structures and working practices required for donation testing in 2007/08. • Implement an integrated IT replacement for the Q-Pulse system. 	<p>Ongoing during 2007/08</p> <p>Overall NBS performance (“top box” customer satisfaction score) from 10% to 15%</p> <p>Ongoing during 2007/08</p> <p>By the end of 2007/08 By the end of 2007</p>
Service Restructure <ul style="list-style-type: none"> • Following the restructure of the NBS senior management team by September 2007, complete further structural developments including the development a “Sales and Commercial Business” team. • Develop and implement a centralised Customer Service function, including order receipt, for the whole of the service. 	<p>By the end of 2007</p> <p>Ongoing during 2007/08</p>
Blood Safety <ul style="list-style-type: none"> • Continue to support hospitals to use blood appropriately and improve patient safety. This strategy will be led by our Hospital Liaison Team and the Blood Stocks Management Scheme, working closely with the NHSBT Patients Clinical Team. • Continue the ongoing operational assessment and validation of Prion removal technology, bacterial screening of platelets and vCJD testing. • Continue to investigate the feasibility of importation of red cells from other countries in case of emergency or a lasting reduction in stock. 	<p>Demand reduction of 2% by the end of 2007</p> <p>Ongoing during 2007/08</p> <p>Report by March 2008</p>

**Appendix 1 NHSBT Work-Plan 2007/08
National Blood Service**

Strategic Objective 4: To modernise the Estate and provide appropriate Service infrastructure to meet all licensing, accreditation, quality and service standards, by March 2010. Accountability: Director of Estates & Facilities	
➤ The key outcome for 2007/08 is to ensure the strategic estates programme is delivered to planned milestones.	
Activity Description	Measure and or “Milestone”
Strategic Estates programme	
<ul style="list-style-type: none"> • South West Facilities – progress the Filton new build programme and be on schedule to deliver the overall programme. 	80% completion by the end of 2007/08
<ul style="list-style-type: none"> • North and South East facilities – following approval of the SOC at the end of 2006/07 complete the production of the Outline Business Case ready for submission to the DH. 	By March 2008
<ul style="list-style-type: none"> • Draft detailed accommodation proposals for ‘secondary’ sites in all three regions for consideration by the Board. 	By March 2008

Strategic Objective 4: To modernise the Estate and provide appropriate Service infrastructure to meet all licensing, accreditation, quality and service standards, by March 2010. Accountability: Managing Director NBS	
➤ The key outcome for 2007/08 is to ensure the successful relocation of selected services.	
Activity Description	Measure and or “Milestone”
Consolidation programme	
<ul style="list-style-type: none"> • Progress detailed implementation planning for the South West consolidation. 	By March 2008
<ul style="list-style-type: none"> • Consolidate routine testing and donor records activity in the South West into Bristol (Southmead site). 	By December 2007
<ul style="list-style-type: none"> • Review routine testing in the rest of the NBS and, based on the outcomes of the South West experience, plan consolidation in the rest of the country. 	Business Case for North by December 2007 and for the South East by March 2008
<ul style="list-style-type: none"> • Consolidate Tissue production onto the Liverpool site moving activity from Edgware. 	By March 2008

**Appendix 1 NHSBT Work-Plan 2007/08
National Blood Service**

<p>Strategic Objective 5: To continue to meet current levels of demand for specialist products, services and advice while delivering planned growth and continuous improvement at lowest effective cost. Accountability: Managing Director NBS</p>	
<p>The key outcomes for 2007/08 are to ensure:</p> <ul style="list-style-type: none"> ➤ Sufficiency and quality of products and services are maintained throughout the year, ➤ Increased activity and improvements in certain specialist areas, and the ➤ Successful relocation of selected services. 	
<p>Activity Description</p>	<p>Measure and or “Milestone”</p>
<p>Meeting Demand</p> <ul style="list-style-type: none"> • Develop NBS diagnostic services to meet anticipated demand maintaining customer satisfaction levels. • No of Ante Natal tests performed 305,300. • No of H&I referrals 53,000 (up from 50,000). • No of RCI referrals maintained at 54,000. • Stem Cells – paper on proposed future direction and configuration to NBS SMT. • Maintain the British Bone Marrow Registry (BBMR) through the annual registration of 16,600 donors that will include increased numbers of Black, Minority and Ethnic donors. • Increase the number of cord blood units banked and increase ethnic representation for the benefit of patients. • Develop a standard process to review the current portfolio of services provided by the NBS and any future services. 	<p>Customer satisfaction at 18%</p> <p>90% results provided within agreed SLA 80% results provided within agreed SLA 95% results provided within agreed SLA By September 2007 Maintain BBMR at 250,000</p> <p>Implement additional cord collection site by July 2007 Report to NBS SMT by September 2007</p>
<p>Consolidation and Restructure Programme</p> <ul style="list-style-type: none"> • Progress planning for the consolidation of Antenatal testing onto 1 site by September 2009. • Move the Birmingham reagent production facility to Liverpool. • Integrate the Cambridge Platelet Immunology (PI) & the Bristol Platelet & Granulocyte Immunology laboratories into the H&I function. • Transfer the Manchester Red Cell Immunohaematology (RCI) Reference laboratory to Liverpool. • Transfer the Southampton RCI laboratory to Bristol Southmead. • Complete a strategic review of the H&I laboratory in Sheffield and the Stem Cells and Immunotherapies laboratories in Leeds and Sheffield - taking into account the Pathology Modernisation programme, as well as productivity and costs. • Complete the implementation of the new standardised Laboratory Information Management System (Hematos). 	<p>Business case by December 2007 By March 2008 By September 2007</p> <p>By December 2007 By March 2008 Report by June 2007</p> <p>Dates TBC following Business Case by March 2007</p>
<p>Costing & Pricing</p> <ul style="list-style-type: none"> • Develop productivity, growth and pricing strategies to be incorporated into the 2007 Commissioning round for 2008/09 prices. 	<p>Initial proposals by Summer NCG meeting Final Proposals by Winter NCG meeting Meeting dates TBA</p>

**Appendix 1 NHSBT Work-Plan 2007/08
National Blood Service**

<p>Strategic Objective 6: To deliver a cost reduction programme of c£67m that maintains the ‘headline’ red cell unit price at, or beneath, a ceiling price of c£146 by the end of the four-year period.</p> <p>This plan represents red cell price stability in ‘real terms’ after taking into account the impact of inflation in each year over the four-year planning period.</p> <p>Accountability: Managing Director NBS</p>	
<p>➤ In 2007/08 the NBS will achieve its financial plan and targets while maintaining sufficiency and quality of products and services.</p>	
Activity Description	Measure and or “Milestone”
<p>To deliver a cost reduction programme of £10.5m in 2007/08, consisting of:</p> <ul style="list-style-type: none"> • Reduced activity related costs, and other supply chain savings, associated with lower demand for red cells £2.4m. This predominantly relates to planned reductions in blood collection management resource. • Procurement savings £1.9m. The level of procurement savings planned predominantly reflects the full year effect relating to the award of the blood collection systems contract that will be phased in during 2006/07. This includes blood packs and component donation harnesses. • Blood Safety programme £4.7m. This predominantly relates to the decision not to progress the implementation of platelet suspension media and bacterial testing of platelets. • Consolidation programme and general cost reduction £1.5m This includes efficiency savings generated through consolidation programmes greater management control, management restructure and reduced discretionary expenditure. 	<p>The NBS cost reduction programme is reflected in the NBS financial plan</p> <p>The income and expenditure position will be monitored monthly and progress against plan reported to the Board</p> <p>Total income = £351.7m</p> <p>Total Expenditure = £351.7m</p>
<p>Red Cell Price</p> <ul style="list-style-type: none"> • To agree a Red Cell Price in line with NHSBT Board targets. • <i>Red cell prices are agreed annually at the National Commissioning group for blood. The 2007/08 cost reduction programme has enabled a red cell price better than the target price.</i> 	<p>Target price £138.61</p> <p>Agreed price £133.99</p>
<p>Cost Reduction Planning</p> <ul style="list-style-type: none"> • Review and agree with NHSBT Group Services the support required to achieve the NBS strategic objectives in the most cost-effective way. • Review activities across the whole of the NBS with a view to identifying opportunities to improve efficiencies. 	<p>Draft SLAs developed by June 2007</p> <p>Report by December 2007</p>

**Appendix 1 NHSBT Work-Plan 2007/08
Bio Products Laboratory**

Strategic Objective 7: To move BPL toward financial viability while continuing to meet all quality, service level and compliance standards. Accountability: Managing Director BPL	
<p>➤ During 2007/08 BPL will significantly improve its financial position.</p>	
Activity Description	Measure and or “Milestone”
Increasing Sales Revenues <ul style="list-style-type: none"> • To increase sales revenue through increases in sales volume and sales price in both Intravenous Immunoglobulin (IgG) and Albumin products – making progress in aligning prices in the UK with those in Western European countries and the US. • To increase the level of export sales by developing partnerships with other international fractionators and seeking to secure licences for Coagulation Factor products in key European markets. 	<p>Total sales revenue from £68.2m for 2006/07 plan to £82.8m in 2007/08</p> <p>Home sales from £48.2m for 2006/07 to £60.0m in 2007/08</p> <p>Export sales growth is forecast to rise from £18.8m in 2006/07 to £21.6m in 2007/08</p>
Reducing Operating Costs and improving efficiencies <ul style="list-style-type: none"> • To deliver a cost reduction programme of £6.9m during 2007/08 through tighter controls on expenditure, reductions in non-plasma operating costs and by realising £2.0m per annum in savings from the full year impact of the restructure completed in 2006/07. 	<p>Expenditure variance against plan</p>
Continuing Business Development <ul style="list-style-type: none"> • To develop and deploy new products, bringing added benefit to the financial position in the future: <ul style="list-style-type: none"> - IVIG (Gammalex) - Factor VIII/IX - Thrombin and Fibrinogen 	<p>Clinical trials will continue in 2007/08</p> <p>Mutual recognition planned in 2007/08</p> <p>Explore marketing opportunities and evaluate sales potential during 2007/08</p>

**Appendix 1 NHSBT Work-Plan 2007/08
UK Transplant**

Strategic Objective 8: To increase the number of annual organ transplants from 2,700 to 3,150 by 2009/10.	
Accountability: Managing and Transplant Director UK Transplant	
➤ In 2007/08 UKT will increase the number of organ transplants by 100 from the 2006/07 actual position and lay the foundation for future increases.	
Activity Description	Measure and or “Milestone”
Increase the relatives’ consent rate <ul style="list-style-type: none"> Maintain the current investment (£0.6m) in 12 existing in-house co-ordinator teams. Invest in a further 10 in-house co-ordinator schemes in neurological ICUs and other ICUs at a cost of £0.5m in 2007/08. 	Relative’s consent rate up from 59% to 61% An additional 25 donors will be realised Increasing the number of transplants by 80
Extend programmes to support non-heart beating and living donation <ul style="list-style-type: none"> Maintain the current investment (£1.3m) in the existing (25) living donor schemes. Extend the funding of live-donor transplant co-ordinators to those non-transplant renal units with 400 or more patients with end stage renal disease at a cost of £0.2m in 5 additional schemes during 2007/08. Maintain the current investment (£1.8m) in the existing non-heart beating schemes in 14 renal transplant units. Develop proposals for expanding the non-heart beating programme to all neurological ICUs and other general ICUs that in total contribute the majority of deceased donors. 	An additional 20 donors will be realised Increasing the number of transplants by 20 Proposals due by July 2007
Increase the number of people on the Organ Donor register (ODR) <ul style="list-style-type: none"> Implement additional campaign initiatives requiring investment over and above existing advertising and marketing budgets of approximately £1.0m in 2007/08. 	Increase to 14.7m by March 2008
Raise Profile of Organ Donation <ul style="list-style-type: none"> To raise the profile of organ donation and transplantation within the wider NHS by establishing links with all Strategic Health Authorities; gaining support for promoting organ donation and for the establishment of robust and appropriately resourced organ retrieval arrangements in the light of the DH Task Force report. 	By March 2008
UKT efficiency <ul style="list-style-type: none"> To deliver a cost reduction programme of £0.4m. This cost reduction programme is reflected in the UKT financial plan. 	The income and expenditure position will be monitored monthly and progress against plan reported to the Board

**Appendix 1 NHSBT Work-Plan 2007/08
UK Transplant**

Strategic Objective 8: To increase the number of annual organ transplants from 2,700 to 3,150 by 2009/10. Accountability: Managing and Transplant Director UK Transplant	
➤ In 2007/08 UKT will increase the number of organ transplants by 100 from the 2006/07 actual position and lay the foundation for future increases.	
Activity Description	Measure and or “Milestone”
<p>Review the equity of access to, safety and quality of transplantation by:</p> <ul style="list-style-type: none"> • Reviewing the operation of the 2006 kidney allocation scheme. • Developing and implementing a new liver allocation scheme. • Continuing to develop collaborative working arrangements with the UK renal registry to investigate equity of access to renal transplantation and to quantify the benefit of transplantation relative to dialysis. • Review access to transplantation for sensitised cardiothoracic and pancreas patients. • Continue with the development and implementation of revised data sets. • Improve continuous monitoring of transplant outcomes following kidney, liver and cardiothoracic transplantation. • Review the operation of the paired and altruistic allocation scheme. • Introduce national data collection and monitoring mechanisms for patients given a ventricular assist device (VAD) as a bridge to transplant. 	<p>Review every 6 months Implement by December 2007 Ongoing</p> <p>By September 2007 Ongoing – reviewed monthly Ongoing</p> <p>Every 6 months By June 2007</p>

Strategic Objective 9: To increase the number of corneal transplants from 2,500 to 3,000 by 2009/10. Accountability: Managing and Transplant Director UK Transplant	
➤ In 2007/08 UKT will increase the number of corneal transplants by 150 from the 2006/07 actual position.	
Activity Description	Measure and or “Milestone”
<p>Continue investment in eye retrieval schemes</p> <ul style="list-style-type: none"> • To conduct a formal review of all (8) funded eye retrieval centres and, thereafter, continue to performance manage each centre against an annual target of 450 corneas after three year’s operation. Funding of £0.7m will be invested in 2007/08 to fund eye banks for the cost of donor referrals carried out by NBS Tissue Services. 	<p>By March 2008</p>

**Appendix 1 NHSBT Work-Plan 2007/08
Group Services**

Strategic Objective 10: To ensure that the organisation has the management capacity, infrastructure and systems to deliver the Service Strategy successfully. Accountability: Director of Human Resources	
➤ Key outcome in 2007/08 is to ensure that NHSBT has the appropriate management capacity in place to enable delivery of the Service Strategy.	
Activity Description	Measure and or “Milestone”
<ul style="list-style-type: none"> • Management Development - design and implement targeted management development programmes to improve management skills within NHSBT’s existing management cohort. Continue to progress the NHSBT Board development programme. • Management Capacity – facilitate the recruitment of further management capacity (on a permanent or contracted out basis) to support the successful delivery of the 2007/08 Business Plan and future Service Strategy activities. • Restructure – facilitate the (potential) restructure of existing management and organisational structures arising from the review of the NHSBT business model (strategic objective 2). 	<p>Management development programmes implemented from April, review progress by March 2008</p> <p>By March 2008</p> <p>By March 2008</p>

Strategic Objective 11: To support the corporate changes set out in this plan and to deliver the workforce changes that are integral to it. Accountability: Director of Communications and Corporate Affairs	
➤ During 2007/08 NHSBT will ensure effective internal and external communications to support the NHSBT Service Strategy.	
Activity Description	Measure and or “Milestone”
<p>NHSBT Communications</p> <ul style="list-style-type: none"> • To implement the communications plan in support of the NHSBT Service Strategy and change programme, proactively managing communications through the ongoing development of relationships with key stakeholders. • Develop NHSBT internal communications by piloting phase 2 of Connect and implementing a content management system (CMS) for the intranet. 	<p>Ongoing monthly review at the Communications Planning Group</p> <p>Start pilot phase 2 by May 2007 Implement CMS by March 2008</p>

**Appendix 1 NHSBT Work-Plan 2007/08
Group Services**

**Strategic Objective 11: To support the corporate changes set out in this plan and to deliver the workforce changes that are integral to it.
Accountability: Director of Human Resources**

Key outcomes in 2007/08 are to ensure that the organisation has HR management systems in place to:

- **Support and deliver workforce change within the NHSBT Service Strategy,**
- **Maintain and improve operational HR Services to the Divisions and Group Services,**
- **Maximise the development and education of our staff, in line with service objectives,**
- **Maximise staff morale during organisational change,**
- **Respond to and embrace diversity within our workforce and our donors.**

Activity Description

Measure and or “Milestone”

NHSBT Workforce

- To develop and implement an over-arching HR strategy for NHSBT incorporating a workforce plan, which supports the strategic future for the organisation, providing support to the Divisional and Group Service change programme boards.
- To develop effective change management processes to support the implementation of the Service Strategy. Effective and flexible systems, linked to the strategy implementation timetable will be developed and appropriately resourced. In partnership with staff representatives, an effective Employee Relations framework will be developed, which is able to deliver workforce change whilst fully respecting the organisation’s responsibilities to its staff. NHSBT consultative structures will be in place.
- Facilitate the co-ordinated Learning, Education and Development Strategy for NHSBT, ensuring that the provision of learning meets the needs of the organisation’s strategic objectives.
- Produce and implement a comprehensive action plan to address the key outcomes of the staff attitude survey from March 2007.
- Recruit to a new post to lead on Diversity and Equity Issues across NHSBT and review the NHSBT Race Equality Scheme. Implement better monitoring of the workforce to improve the position of under-represented groups at senior levels and ensure equality of access for all to training and development opportunities.

Strategy by April 2007, implementation ongoing throughout 2007/08

By September 2007

Initial strategy developed by April 2007, implementation ongoing during 2007/08

Action Plan by July 2007, implemented by December 2007

New post recruited April 2007, review complete October 2007, improved monitoring systems in place March 2008

**Appendix 1 NHSBT Work-Plan 2007/08
Group Services**

Strategic Objective 12: To align and prioritise IT resources to support the delivery of the NHSBT Service Strategy in a cost-effective manner.	
Accountability: Director of Information Technology	
During 2007/08 NHSBT will:	
➤ Develop and agree an IT Strategy in support of the Service Strategy ensuring appropriate linkages to wider NHS initiatives	➤ Identify and secure IT resources to deliver the Service Strategy ➤ Deliver IT solutions and services in support of Operating Division's plans
Activity Description	Measure and or "Milestone"
Business demand planning for IT services and support • Develop an outline IT Strategy and agree a process by which business demand for IT services and support can be determined, prioritised and managed, allowing for cross NHSBT resource dependencies and capacity, ensuring that appropriate linkages are made to wider NHS initiatives such as Connecting for Health.	By May 2007
Programme Management Capacity • Provide Programme and Project management resources required by the Operating Divisions to support the delivery of the NHSBT Service Strategy from both internal and external sources.	By July 2007
NHSBT wide IT synergies • Create and maintain a cross division IT forum to develop commonality of standards across NHSBT's Operating Divisions, and to identify ongoing opportunities for synergies. • Design a common IT directory architecture covering NBS, UKT and BPL to operate on Microsoft's Active Directory services.	Ongoing review of synergy opportunities Design completed by May 2007
NHSBT IT infrastructure modernisation, including upgrade and replacement • Develop an Outline Business Case for the replacement of the NBS legacy voice telephony service consistent with the telecommunications strategy, leading into the production of a Full Business Case, obtaining DH approval. • Commence re-engineering and upgrade of the core data network, server configurations and data storage systems in the two central NHSBT data centres. • Replace the Microsoft Office '97 Desktop applications and operating systems used across the organisation with the up-to-date Microsoft Office applications and operating systems. • Implement a comprehensive programme of IT client device management, providing remote configuration management, security and support, together with detailed hardware and software asset management.	OBC completed by July 2007 FBC completed by December 2007 4th quarter 2007/8 March 2008 October 2007
IT Support for NBS – Core business • Pulse Renewal - re-writing of the core NBS Pulse blood supply chain management software to provide improved business functionality and increased flexibility. Completion planned for 2009. • Develop a business case for the consolidation of the three databases underpinning the Pulse system into a single national database supporting all NBS functions. • Develop and implement an interim Business Intelligence and data warehousing infrastructure that replaces the legacy PULSE data access for reporting purposes with Business Objects and Oracle. • Determine a high level IT solutions architecture for the NBS. • Improve systems for electronic exchange of information with NHS hospitals and other customers through implementation of: - EDI systems for transfer of information relating to laboratory test requests and laboratory test results. - Standard protocols for electronic exchange of information with NHS hospitals relating to end use of blood products as part of the Bloodstocks Management System.	Progress report March 2008 Business case available by June 2007 June 2007 July 2007 December 2007 Pilot implementation planned by October 2007
IT Support for NBS and Group strategic change programmes • Provide IT staff and system resource to enable and support the delivery of the NBS and Group strategic change programmes as detailed in the NHSBT work-plan.	Ongoing through programme governance arrangements

**Appendix 1 NHSBT Work-Plan 2007/08
Group Services**

Strategic Objective 13: To ensure that plans are financed from within prices and central funding limits as agreed by the DH.	
Accountability: NHSBT Finance Director	
<p>During 2007/08 key outcomes are:</p> <ul style="list-style-type: none"> ➤ Delivery of the financial plan, breaking even on the revenue account and retaining a strong year-end balance sheet, ➤ Generate sufficient non-recurring funding to enable future delivery of Service Strategy, ➤ Develop business support structures, transactional systems and governance arrangements in line with the Authority's needs. In 2007/08 NHSBT will complete its implementation of an I-procurement system and the first phase of ESR. 	
Activity Description	Measure and or "Milestone"
<p>Funding requirements</p> <ul style="list-style-type: none"> • Engage all relevant stakeholders to ensure that sufficient transition and capital funding is generated, effectively managed through brokerage and made available in line with planned requirements. 	<p>Income and Expenditure forecast position Progress on planned capital expenditure</p>
<p>Business Development Support</p> <ul style="list-style-type: none"> • Continue to provide ongoing financial planning support and management information to existing performance levels. • Continue implementation of ABC within NHSBT completing NBS iteration 3 and the roll out to UKT. • Implement revised Finance structures to more effectively align resource to key processes and strategic change programmes. • Implement revised Procurement strategy to provide more effective support to key processes and change programmes. • Continue to support and influence benchmarking initiatives through collaboration with other blood services & service providers. 	<p>Budget reports by 8th working day NBS iteration 3 - April, UKT September May 2007 (review impact October 2007) December 2007 Ongoing during 2007</p>
<p>Finance Transactional Services</p> <ul style="list-style-type: none"> • Continue to provide existing finance transaction services maintaining current performance levels whilst developing the platform for the delivery of improvement and efficiency plans in the future. • Complete the roll out of I-procurement across NBS and UKT. • Identify and facilitate improved processes and procedures for the monitoring and control of telephone expenditure and the recovery of income relating to personal mobile telephone calls. • Complete a feasibility study on the use of intelligent invoice processing and on the further scope to directly integrate PULSE, Hematos and other systems into our billing processes. • Implement a new capital asset register system. • Complete a review of payroll resource/location requirements following the implementation of ESR. • Review the scope for EDI with key suppliers developing plans for implementation in 2008/09. 	<p>BPPC > 92% by value and volume Debtor days below 20 June 2007 June 2007</p> <p>August 2007 September 2007 December 2007 December 2007 March 2008</p>
<p>Financial Governance</p> <ul style="list-style-type: none"> • Complete an annual review of existing financial governance arrangements in line with evolving organisational structure's. • Raise counter-fraud awareness across the authority via the annual review and publication of a counter-fraud plan, and the addition of another trained counter-fraud specialist. 	<p>March 2008 March 2008</p>
<p>Implementing ESR</p> <ul style="list-style-type: none"> • Implement the NHS Electronic Staff Record system. Following this complete a review of the basic system implementation and develop an action plan for the implementation of user self-service functionality and full benefits realisation from ESR. 	<p>Basic implementation by August 2007 Action plan by March 2008</p>



Blood and Transplant

PLAN 2007/08 CONSOLIDATED REVENUE STATEMENT

	Plan 06/07 £k	Forecast 06/07 £k	Plan 07/08 £k
Income			
Revenue Cash Limit	43,357	42,718	33,732
Inter Year Flexibility	10,500	(9,500)	20,000
Divisional Income	402,792	404,803	427,456
Contribution from devolved administrations	1,705	1,704	1,815
Total Income	458,354	439,725	483,003
Expenditure			
NBS Operating Division	231,245	230,676	235,932
BPL Operating Division	88,931	93,576	91,277
UKT operating Division	8,442	8,022	10,554
Total Operating Division	328,618	332,274	337,763
Chief Executive and Board	766	616	753
Communication & Corporate Affairs	7,880	8,454	7,874
Estates & Facilities	51,914	53,117	53,873
Finance	6,734	6,572	6,874
Human Resources	6,964	6,935	6,972
Information Technology	18,139	18,209	18,735
Clinical Directorate	11,405	10,771	10,767
Directorate of Strategy Management	748	751	749
Reserves & Other	5,186	2,026	9,643
Transition Fund	20,000		29,000
Total Group Support Services	129,736	107,451	145,240
Surplus/(Deficit)	0	0	0



PLAN 2007/08
CONSOLIDATED BALANCE SHEET

	Forecast 06/07 £k	Plan 07/08 £k
<u>Fixed Assets</u>	303,407	356,945
<u>Current Assets</u>		
Stocks	51,119	55,298
Trade Debtors	23,227	22,299
Prepayments	6,213	6,219
Other Debtors	3,151	2,993
Bank and Cash	70	70
	83,780	86,879
Less:-		
<u>Current Liabilities</u>		
Trade Creditors	13,143	17,189
Accruals	13,356	12,544
Inter Authority Loan	0	0
Others	1,808	2,289
	28,307	32,021
Net Current Assets	55,473	54,857
Provisions	3,704	3,088
Total Net Assets	355,176	408,714
Represented by:-		
<u>Department of Health Funding</u>		
Revenue	51,769	51,769
Capital	303,407	356,945
Total Dept of Health Funding	355,176	408,714



Blood and Transplant

PLAN 2007/08 CONSOLIDATED CASH FLOW FORECAST

	Apr-07 £k	May-07 £k	Jun-07 £k	Jul-07 £k	Aug-07 £k	Sep-07 £k	Oct-07 £k	Nov-07 £k	Dec-07 £k	Jan-08 £k	Feb-08 £k	Mar-08 £k	Total £k
Opening bank balance	70	8,299	10,740	13,181	15,622	18,063	3,131	5,571	8,011	10,451	12,891	15,331	70
Income													
Debtors & Other Receipts	35,773	35,773	35,773	35,773	35,773	35,773	35,773	35,773	35,773	35,773	35,773	35,724	429,227
Revenue Cash Limit	9,755	3,967	3,967	3,967	3,967	4,137	3,967	3,967	3,967	3,967	3,967	4,137	53,732
Capital Cash Limit	2,752	2,752	3,520	3,652	3,652	3,650	3,876	3,876	5,976	4,758	5,258	5,256	48,978
Total income	48,280	42,492	43,260	43,392	43,392	43,560	43,616	43,616	45,716	44,498	44,998	45,117	531,937
Expenditure													
Staff Expenses	16,323	16,323	16,323	16,323	16,323	16,323	16,323	16,323	16,323	16,323	16,323	16,392	195,945
Other Revenue costs	20,976	20,976	20,976	20,976	20,976	20,976	20,977	20,977	20,977	20,977	20,977	21,188	251,929
Capital Charges	0	0	0	0	0	17,543	0	0	0	0	0	17,542	35,085
Capital costs	2,752	2,752	3,520	3,652	3,652	3,650	3,876	3,876	5,976	4,758	5,258	5,256	48,978
Total costs	40,051	40,051	40,819	40,951	40,951	58,492	41,176	41,176	43,276	42,058	42,558	60,378	531,937
Closing bank balance	8,299	10,740	13,181	15,622	18,063	3,131	5,571	8,011	10,451	12,891	15,331	70	70



PLAN 2007/08
CONSOLIDATED FUNDS FLOW STATEMENT

	Forecast 06/07 £k	Plan 07/08 £k
Surplus/(Deficit)	0	0
(Increase)/Decrease in stocks	(51,119)	(4,179)
(Increase)/Decrease in trade debtors	(23,227)	928
(Increase)/Decrease in prepayments and other debtors	(9,364)	152
Increase/(Decrease) in trade creditors & accruals	26,499	3,234
Increase/(Decrease) in other creditors	1,808	481
Increase/(Decrease) in Inter Auth Loan	0	0
Increase/(Decrease) in provisions	3,704	(616)
	<u>(51,699)</u>	<u>(0)</u>
Increase/(Decrease) in cash	(51,699)	(0)
Opening cashbook balance	70	70
Closing cashbook balance	<u>70</u>	<u>70</u>
Increase/(Decrease) in cash	<u>0</u>	<u>0</u>



Blood and Transplant

**PLAN 2007/08
CAPITAL EXPENDITURE**

NBS & UKT Capital Programme

South West Regional Restructuring - Bristol Filton New Build
South West Regional Restructuring - other sites
South East Regional Restructuring
Northern Regional Restructuring
Specialist services system replacement
Donor Relationships management system
Document control system replacement
NBS & UKT Minor Capital Programme

Sub-total NBS / UKT Capital programme

BPL Capital Programme

Total NHSBT

2007/08

£k

25,993
200
4,000
2,000
768
1,000
500
8,017

42,478

6,500

48,978