



Department
of Health

Triennial Review of NHS Blood and Transplant (NHSBT)

A Review of NHS Blood and Transplant (NHSBT) –
Call for Evidence

August 2015

Title: Triennial Review of NHS Blood and Transplant – Call for Evidence

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Triennial review of NHS Blood and Transplant

Overview

The Health and Social Care Act 2012 and the Care Act 2014 have devolved functions and powers away from the Department of Health to local and Arm's Length Bodies.

The Department has a stewardship and assurance role in respect of arm's length bodies within the health and care system. The Department needs to ensure these organisations have appropriate functions and are performing to a high standard.

To perform this stewardship function, the Department is putting in place Triennial Reviews (TRs) of all its Arm's Length Bodies. This includes all Executive Non-Departmental Public Bodies (ENDPBs), Advisory Non-Departmental Bodies (ANDPBs), Executive Agencies (EA) and Special Health Authorities (SpHA). NHS Blood and Transplant (NHSBT), a SpHA, is subject to review in 2015/16.

The programme of reviews builds on the approach developed by the Cabinet Office as part of their work on Public Bodies Reform.

Purpose of the review

The Department of Health has developed the programme of TRs to support its stewardship and assurance function. The review will have two main stages:

1. To provide a robust challenge of the continuing need for NHS BT – both in terms of the functions it performs, and the way in which these are delivered.
2. To consider NHSBT's governance, performance and capability as well as exploring opportunities for efficiencies.

This Call for Evidence will seek views from respondents to assist DH's consideration of both of these stages. The evidence is being gathered simultaneously for stage one and stage two in the interests of timeliness and value for money only, and is not an expression of pre-judgment as to the outcome of stage one of the review. The review team will take account of previous reviews of NHSBT, and will be conscious of the altruistic nature of blood, organ, stem cell and tissue donation, in their considerations.

This Call for Evidence is taking place in the context of the separate but related Accelerated Access Review (AAR). The AAR was announced by the Minister for Life Sciences, George Freeman MP, on 20 November 2014, and is anticipated to report by the end of 2015. The AAR will consider how healthcare and regulatory systems can best respond and adapt to the new landscape of innovation. This Call for Evidence, amongst other things, seeks to test the ability of NHSBT to respond to emerging themes in the pathways for the development, assessment and adoption of innovative medicines and medical technologies.

Further details about the AAR are available at: <https://engage.dh.gov.uk/acceleratedaccess/>

Timeline

The Triennial Review of NHSBT commenced on 25 June 2015 and is expected to conclude by the end of December 2015. The conclusions of the review will be announced in both Houses of Parliament and a copy of the final report will be published on the Department of Health pages on gov.uk.

About NHS Blood and Transplant

NHS Blood and Transplant (NHSBT) is a Special Health Authority (SpHA) sponsored by the Department of Health (DH), and the Welsh Government, established in 2005 from the merger of the National Blood Authority and UK Transplant. Unlike other types of Trust, NHSBT operates nationally rather than serving a specific geographical area. For the purposes of the national accounts, the Office of National Statistics classifies NHSBT as a Public Corporation.

NHSBT is responsible for the safe and sufficient supply of blood, organs, tissues and stem cells. In 2014/15, donors donated: nearly 2.0 million units of whole blood and platelets; provided 4,450 organs for transplant, made 5,900 tissue donations; and added 2,300 cord blood units to the NHS Cord Blood Bank. NHSBT depends entirely on the donation of blood, tissues, solid organs and haemopoietic stem cells and therefore facilitates and promotes altruistic donation within England and across the UK.

NHSBT's functions in relation to blood and stem cells apply to England and North Wales only. Wales, Scotland and Northern Ireland have their own blood services. In addition, NHSBT supplies tissues to England and Wales. However, NHSBT has responsibilities across the United Kingdom with regard to organ donation and transplantation. As the UK Organ Donation Organisation, NHSBT is accountable to the four UK Health Departments, and works with each of them, and hospitals throughout the UK, in order to increase the numbers of organs available for transplantation.

NHSBT comprises three operating divisions: (1) Blood Components; (2) Organ Donation and Transplantation; and (3) Diagnostic and Therapeutic Services (DTS). This latter division (DTS) covers a range of specialist activities related to tissues, stem cells, red cell immunohaematology (RCI) including reagents, histocompatibility and immunogenetics (H&I) and therapeutic apheresis services (TAS). Each of the strategic operating units within NHSBT (i.e. Divisions (1) & (2), plus each of the specialist services within DTS), has its own distinct supply chain, which is supported by common group services.

The funding for Blood Components and DTS is mostly through recovery of costs from NHS hospitals. NHSBT is a sole supplier with regard to most Blood Components, but NHSBT operates in a competitive market (mostly other parts of the NHS) for Plasma, and for each of the specialist services offered through DTS. The National Commissioning Group for Blood sets the prices for Blood Components and the specialist services within DTS.

Funding for Organ Donation and Transplantation is through direct subsidy from DH and the three devolved Health Departments in Northern Ireland, Scotland and Wales, calculated on a population basis.

NHSBT supplies critical biological products and related clinical services to the NHS, operating 24 hours a day, 365 days a year, within a regulated environment. The NHS Blood and Transplant (Establishment and Constitution) Order 2005/2529 is a joint England and Wales Order which provides NHSBT with a remit to:

- collect, screen, analyse, process and supply blood, blood products, plasma, stem cells and other tissues to the health services,
- prepare blood components and reagents,
- facilitate, provide and secure the provision of services to assist tissue and organ transplantation, and
- carry out any other such functions as directed.

NHSBT is also directed by the NHS Blood and Transplant (England) Directions 2005, and the NHS Blood and Transplant (Wales) Directions 2005, as amended which govern the arrangements relating to England and Wales for blood, stem cell, tissue and organ donation and transplantation services. The Directions additionally direct NHSBT to:

- conduct or commission research into the uses of, or development of, blood, stem cells and tissues,
- promote, by advertising, marketing or otherwise the donation of blood, stem cells and tissues, with a view in particular to maintaining an adequate supply of blood, stem cells and tissue,
- promote through advice and guidance, the appropriate use of blood, stem cells and tissue (having regard in particular to the need to promote the effective use of blood),
- conduct or commission research in connection with the field of organ donation and transplantation as NHSBT considers appropriate, and
- promote, by advertising, marketing or otherwise, the donation of organs and tissues with a view to maintaining an adequate number of organs and corneas for transplantation.

Useful Links

NHS Blood and Transplant

<http://www.nhsbt.nhs.uk>

NHS Blood and Transplant Strategy for 2015-20

<http://www.nhsbt.nhs.uk/who-we-are/strategy/>

Cabinet Office Triennial Review guidance

<https://www.gov.uk/government/collections/triennial-review-reports>

Responding to the Call for Evidence

In order to conduct the review in an open and transparent manner and ensure that the findings are rigorous and evidence-based, the review team is seeking views from a wide range of

stakeholders. The review team is interested in the views of individuals and organisations that engage with NHSBT or have a wider interest in its operations.

The key areas of enquiry, based on the five standard areas that apply to all Triennial Reviews, are set out in 15 questions at Annex A below.

The call for evidence is running from Thursday 6 August 2015 to Thursday 10 September 2015.

Responses can be provided by:

- i. Completing the online questionnaire, which can be accessed at: <https://consultations.dh.gov.uk/triennial-reviews/nhs-blood-and-transplant-nhs-bt-call-for-evidence>, or,
- ii. Completing a response form (which is available on gov.uk and at Annex A below), and emailing a complete form to the review team at TR-NHSBT@dh.gsi.gov.uk. (The completed document can also be posted to NHSBT Triennial Review Team, Department of Health, Room 220, Richmond House, London, SW1A 2NS).

You do not have to answer all of the questions – please feel free to answer as many or as few as you like. Your evidence should consist of objective, factual information about the impact or effect of NHSBT’s approach to health and social care. Where possible, please give specific examples. Where your evidence is relevant to other review reports, the NHSBT review team will pass your evidence over to the relevant team(s).

Only information directly relevant to the areas of investigation will be considered. Information where relevance is not demonstrable will not be taken as evidence. The NHSBT review team is unable to respond to individual cases or consider complaints relating to NHSBT’s work. Complaints should be directed to NHSBT at enquiries@nhsbt.nhs.uk or call 0300 123 23 23.

Patient identifiable information should not be submitted.

All submissions must be received by 23:59 hours on **Thursday 10 September 2015**.

Workshops

Interested stakeholders are also invited to attend a workshop to share their views on this call for evidence directly with the review team. You can book a place through the links in the box below which also gives details on the date, time and location of the workshops.

Date	Time	Location
Monday 10 August 2015	11:00-13:00 hours	Richmond House, central London
https://www.eventbrite.co.uk/e/nhs-blood-and-transplant-nhs-bt-workshop-tickets-17005676436		
Wednesday 26 August 2015	11:00-13:00 hours	Richmond House, central London
https://www.eventbrite.co.uk/e/nhs-blood-and-transplant-nhs-bt-workshop-tickets-17226025506		

Please note: places are limited and will be allocated strictly on a ‘first come first served’ basis.

Confidentiality

Information provided in response to this consultation, including personal information, may be published or disclosed in accordance with the access to information regimes (these are primarily the Freedom of Information Act 2000 (FOIA) and the Data Protection Act 1998 (DPA).

If you want the information that you provide to be treated as confidential, please be aware that, under the FOIA, there is a statutory Code of Practice with which public authorities must comply and which deals, amongst other things, with obligations of confidence. In view of this it would be helpful if you could explain to us why you regard the information you have provided as confidential. If we receive a request for disclosure of the information we will take full account of your explanation, but we cannot give an assurance that confidentiality can be maintained in all circumstances. An automatic confidentiality disclaimer generated by your IT system will not, of itself, be regarded as binding on the Ministry.

The Department will process your personal data in accordance with the DPA and in the majority of circumstances, this will mean that your personal data will not be disclosed to third parties.

NHS Blood and Transplant (NHSBT) Triennial Review – Call for Evidence Response Form – Annex A

The review team are particularly interested in evidence in support of responses to the 15 questions set out in this Call for Evidence. Wherever possible, please provide evidence in support of your response.

*** For all options, you do not have to answer all of the questions – please feel free to answer as many or as few as you like. Where possible, please give specific examples. ***

About you

Name:
Organisation:
Work Role:
Email/postal address: (This is optional, but if you enter your email/postal address then you will receive an acknowledgement email when you complete the consultation)
Would you categorise your response as from: <ul style="list-style-type: none">• Individual• Public Sector• Charitable/voluntary sector healthcare organisation• Private sector• None of the above. Please state:
Which area do you work in? <ul style="list-style-type: none">• The NHS• Private Healthcare• Social Care• Local Government• Public Healthcare• Education/Research• None of the above please state:
If your response is from an umbrella organisation representing a wider membership, please indicate the number of members consulted and the number of responses received:
Please indicate what interactions you have with NHSBT and/or which functions you use:

Questions:

The questions that follow are intended to frame the NHSBT Triennial Review Call for Evidence. The questions presume an understanding of the functions, form and purpose of NHSBT.

Function

This section seeks to assess whether there is a continuing need for the functions of NHSBT and, if this need exists, to assess whether the current form is the most effective and efficient way of delivering these functions.

Question 1: Is there an ongoing need for the current function of NHSBT?

Yes/No/Don't know [please delete as appropriate]

Please give reasons for your answer:

Question 2: Which NHSBT functions, if any, could be stopped? What would be the consequences of doing so?

Please give reasons for your answer:

Question 3: Is there an overlap with the functions performed by any other UK body?

Yes/No/Don't know [please delete as appropriate]

Please give reasons for your answer:

Question 4: Does the current composition of the NHSBT Board membership best support NHSBT's functions?

Yes/No/Don't know [please delete as appropriate]

Please give reasons for your answer:

Question 5: Are there any functions delivered elsewhere in the health and care system that could be more efficiently delivered by NHSBT?

Yes/No/Don't know [please delete as appropriate]

Please give reasons for your answer:

Form

This section seeks to assess the appropriate organisational form of NHSBT.

Question 6: Are there barriers to the delivery of NHSBT's objectives related to its status as a Special Health Authority?

Yes/No/Don't know [please delete as appropriate]

Please give reasons for your answer:

Question 7: Is the current funding model the best way to ensure the efficient provision of NHSBT's services?

Yes/No/Don't know [please delete as appropriate]

Please give reasons for your answer:

Performance and Efficiency

This section seeks views on how well NHSBT performs in delivering its services.

Question 8: Are there other organisations which could be used as a benchmark for the performance of NHSBT?

Yes/No/Don't know [please delete as appropriate]

Please give reasons for your answer:

Question 9: Are there ways in which NHSBT's assets and expertise could be exploited to improve system wide efficiency, deliver greater innovation in the health and care sector or to drive economic growth? For example, through the development of digital diagnostics, regenerative medicine, cell therapy, genomics, and stratified medicine in the UK.

Yes/No [please delete as appropriate]

Please give reasons for your answer:

Question 10: Are there barriers to improved collaboration between NHSBT and others in the health and care system? For example, in terms of diagnostic and therapeutic services, and integrated transfusion services.

Yes/No/Don't know [please delete as appropriate]

Please give reasons for your answer:

Question 11: Does the current regulatory framework governing NHSBT operations conform to better regulation principles (proportionate; accountable; consistent; transparent; and, targeted on the greatest risks), or are there potential improvements/efficiencies that can be made?

Yes/No/Don't know [please delete as appropriate]

Please give reasons for your answer:

Question 12: Does NHSBT have the necessary capability and capacity in terms of horizon scanning and strategic planning to respond effectively to changing demands, a changing regulatory/policy environment, and/or emerging innovative medicines and medical technologies?

Yes/No/Don't know [please delete as appropriate]

Please give reasons for your answer:

Question 13: How well does NHSBT drive innovation and what more could be done? Examples might include developing innovative types of product, exploiting stratified medicine, new diagnostics, and digital health technologies, and facilitating use of such products in the wider health and care system.

Please give reasons for your answer:

Question 14: How easy is it for donors and service users to engage with NHSBT about the products and services that NHSBT offers?

Very easy/Easy/Average/Difficult/Very difficult [please delete as appropriate]

Please give reasons for your answer:

Governance

This section explores the governance of NHSBT and whether there is good governance and effective accountability structures in place.

Question 15: Is there an appropriate level of transparency in the NHSBT's end to end processes and decision making?

Yes/No/Don't know [please delete as appropriate]

Please give reasons for your answer:

Other Comments:

Are there any other issues or evidence you think the review team should take into account?

Please submit your answer here:

Thank you for taking time to respond to this Call for Evidence

Please return completed forms by 2359hrs on Thursday 10 September 2015:

Email to: TR-NHSBT@dh.gsi.gov.uk

Or

**Write to:
NHSBT Triennial Review Team
Department of Health
Richmond House
79 Whitehall
Room 220
London
SW1A 2NS**