

# Corporate Plan

2021-25



Northern Ireland  
Blood Transfusion Service

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# 1 INTRODUCTION

## 1.1 Background

The Northern Ireland Blood Transfusion Service (NIBTS) was established in 1994 as an independent Special Agency of the Department of Health in Northern Ireland. It is the sole supplier of blood components and products to Health and Social Care bodies and private hospitals in Northern Ireland. All blood components are prepared from voluntary, non-remunerated donors.

The statutory duties of NIBTS are set out in The Northern Ireland Blood Transfusion Service (Special Agency) (Establishment and Constitution) Order (Northern Ireland) in 1994, and the subsequent Northern Ireland Blood Transfusion Service (Special Agency) Accounts and Financial Provision Direction (NI) 1995.

NIBTS hold a blood establishment authorisation licence from the MHRA which licences the collection, processing, storage, testing and distribution of blood components. NIBTS also retain a wholesale distributor's licence for plasma products. NIBTS is committed to retaining these licences and maintaining a state of readiness for licensing inspection visits, as required by the Blood Safety and Quality Regulations (BSQR) 2005 and the Good Practice Guidelines for Blood Establishments Required to Comply with Directive 2005/62/EC.

NIBTS has established Service Level Agreements (SLAs) with Northern Ireland hospital Trusts, and private hospitals, for the supply of whole blood and blood components. In addition, NIBTS supplies products used in the management of haemophilia patients that are funded by the HSC Board. There is also an SLA between NIBTS and the HSC Board for the provision of patient testing services including antenatal testing and specialist immunohaematology support to all hospital blood banks which are UKAS accredited to ISO 15189 standards.

NIBTS holds the Investors in People (IiP) award, which was reviewed and extended in 2022. The Investors in People standard provides a framework to engage with our staff and further improve our working practices. As with all organisations operating in Northern Ireland, NIBTS abides by all of its statutory responsibilities in relation to Equality and Human Rights as contained within Section 75 of the Northern Ireland Act

(1998). NIBTS has developed an Equality Scheme which describes how we fulfil its duties required by Section 75.

## **1.2 Facilities and Services**

NIBTS operates from our headquarters on the Belfast City Hospital site which incorporates:

- Whole blood and plateletpheresis collection unit
- Processing and testing laboratories
- Donor administration
- Medical team
- Nursing team (which provides staff for headquarters and mobile donation units that collect blood around the eastern area of Northern Ireland)
- Quality and regulatory compliance department incorporating the quality control laboratories and
- Corporate functions including Finance and HR.

Additionally, there is a satellite blood collection team based in Omagh and a purpose-built BloodMobile Unit that supports the collection of blood across Northern Ireland.

## **1.3 Our Purpose**

Saving and improving lives by providing blood and testing services.

## **1.4 Our Vision**

Through our donors and staff, provide an outstanding blood service for the people of Northern Ireland

## **1.5 Our Values**

These reflect the four values defined for all HSC organisations:

Working Together

- Compassion
- Excellence
- Openness and Honesty

These values are reflected in the five key strategic themes detailed in the Board Assurance Framework:

1. Safety / Quality
2. Continuous Improvement
3. People / Culture
4. Partnerships and Engagement
5. Resources

## 2 STRATEGIC VISION

### 2.1 Regional



At a strategic level, our objectives stem from the Northern Ireland Executive's Programme for Government (PfG) and where relevant, we develop our strategic vision accordingly.

Additionally, the recommendations and actions from **Health and Wellbeing 2026: *Delivering Together***, and the **Bengoa Report October 2016: *Systems Not Structures – Changing Health and Social Care***, influences our strategic goals and ambition. In particular, the proposals for modernising HSC Pathology Services highlighted our pivotal role and our unique regulatory environment within the HSC.

As a result, NIBTS has been engaged with the Pathology Transformation Blueprint Programme aiming to introduce a regional laboratory information management system, common analyser platforms, and a wider pathology system standardisation and transformation.

Mindful of the strategic changes outlined above and the potential outcomes for NIBTS, this Corporate Plan has been developed to ensure that our aims and objectives for the next four years continue to support resilience and readiness for strategic change. This to ensure we continue to provide a safe, high quality service to patients – underpinned by regulators – and to further enhance our excellent reputation within the HSC and with the Northern Ireland public.

### 2.2 Licences and Regulations

NIBTS maintains two licences and one accreditation:

- The Medicines and Healthcare products Regulatory Agency
  - Blood Establishment Authorisation
  - Wholesale Dealers Licence

- UK Accreditation to ISO 15189 standards for NIBTS diagnostic screening laboratories.

NIBTS is also subject to inspection by the Regulation and Quality Improvement Authority (RQIA) which also assesses compliance with IRMR regulations.

NIBTS is a member of the UK Forum with the blood establishments of England, Scotland and Wales.

NIBTS also maintains post Brexit membership of the European Blood Alliance (EBA) which includes the blood establishments of EU member states as well as Iceland, Norway and Switzerland. These alliances provide opportunities to share best practice, innovations and benchmarking information to ensure that NIBTS continues to provide the best possible products and services to the population of Northern Ireland.

### 2.3 Blood Stocks and Supply to Hospital Blood Banks

Demand for red cell components has reduced in the past three years but is expected to plateau in the coming years, due to the increased elective surgery capacity to support the post-COVID recovery as well as an increasingly complex demographic.



The main reason for recent reductions in demand is the changes to clinical practice following NICE guideline NG24 which is recommending minimal transfusion at higher transfusion thresholds. There are a number of target patient groups such as haemato oncology and patients with acute upper gastrointestinal haemorrhage where further reductions in red cell transfusions might be possible.

Financial Year	Red Cell Components Issued
2021/22	39219
2022/23	39439
2023/24	39955
2024/25	40000

The situation for platelet components is more fluid. Nevertheless, it is anticipated that demand will increase by around 2.5% year on year over the next four years. Clinical practice guidelines and audit activity with action plans for continued improvement have optimised appropriate use. For example, historically, multiple unit platelet transfusions accounted for 30% of transfusion episodes but this has reduced to 10%.

The patient demographic, the increasing incidence, earlier diagnosis and more intense treatment protocols for cancer illnesses will continue to impact demand. Indications are that there will be an increase in demand and this will be closely monitored to ensure the collection strategy reflects this. With these caveats in mind, projections for the medium term are given in the table below

Financial Year	Platelet Components Issued
2021/22	7984
2022/23	8305
2023/24	8702
2024/25	8750

Estimates for frozen components issued are given in the table below.

Financial Year	Fresh Frozen Plasma Components Issued
2021/22	4129
2022/23	4290
2023/24	4157
2024/25	4500

Financial Year	Pooled Cryoprecipitate Components Issued
2021/22	742
2022/23	850
2023/24	779
2024/25	875



Ongoing liaison with Trust Transfusion Committees (TTCs) and the Northern Ireland Transfusion Committee (NITC) to focus on the appropriate use of O negative red cells and reduction of wastage across the supply chain. Both of these will be supported by the implementation of a new Blood Production and Tracking digital system which will enable visibility of blood donations from donor vein to patient vein. All of which will further support self-sufficiency of the Northern Ireland supply chain and reducing the reliance on other UK and Irish blood services for top up of supply.

The wider transformation of pathology services will enable improved logistics which, in turn, will enable the introduction of scheduled deliveries.

## **2.4 New Developments**

### **2.4.1 Plasma for Fractionation (PFF)**

Since December 2020, following the evidence provided by the Advisory Committee on the Safety of Blood, Tissues and Organs (SaBTO), it became possible to collect and use UK human plasma for the manufacture of medicinal products for UK patients; therefore, NIBTS is currently working with the Department of Health in Northern Ireland and other UK blood services to explore how this change in guidance, might affect the collection strategy for Northern Ireland.

### **2.4.2 Collection Strategy**

COVID 19 presented significant challenges for the collection of blood and platelets. These led to the introduction of a new online appointments system, triage and increased distancing between donation couches requiring larger venues for sessions.

### **2.4.3 Clinical Transfusion Practice and Haemovigilance**

Our medical team continues to work collaboratively with the Northern Ireland Transfusion Committee and other key stakeholders in haemovigilance, hospital blood banks and medical specialties.

We are part of the Northern Ireland Transfusion Committee (NITC) which has developed a work stream to implement NICE guideline NG24. These recommendations have the potential to assist in the appropriate management of red cell and platelet component demand.

The next four years will see a number of new developments in transfusion practice, including plans for an updated digital blood production and tracking system that will enable donor vein to patient vein tracking of donations through a single system as well as the potential to implement foetal RHD screening to support maternity services across Northern Ireland.

We will continue to support hospital colleagues with transfusion advice and intend developing this support as additional medical staff are recruited.

We will also continue to work with Medical colleagues across the UK through the UK Forum of blood establishments as well as active participation in the Joint Professional Advisory Committee (JPAC).

#### **2.4.4 Infrastructure**

In order to continue to deliver a transfusion service that meets the regulatory compliance requirements of BSQR (2005), it is essential that the physical infrastructure for NIBTS meets the requisite standards. The existing NIBTS headquarters building was commissioned in 1995 and is now the oldest blood centre in the UK and Ireland. As the building and infrastructure ages, it is becoming increasingly difficult to meet compliance standards. As a result, we will evaluate options for upgrading and providing laboratory and collection facilities for Northern Ireland.

#### **2.4.5 Laboratories**

The technology supporting safe transfusions continues to evolve. NIBTS continues to evaluate emerging technologies – including molecular - that support automated serology, reference, microbiology and quality laboratories to ensure that the platforms we use meet the required standards.

Together with colleagues in hospitals, we support training programme for staff in hospital blood banks that will reduce reliance on the regional reference laboratory.

We will also continue to support the Harvey's Gang charity providing opportunities for young people and their families to see behind the scenes what happens in our laboratories and testing facilities.

## 3 STRATEGIC OBJECTIVES

This section sets out the key developments and improvements expected by us over the next four years against each of the five strategic themes. The financial context for the next four years is also referenced.

### **Safety & Quality**

- Ensure blood and component supply meets the needs of the population of Northern Ireland
- Provide a safe, high quality service to our Donors and Patients
- Deliver our services in line with relevant legislation including blood safety, quality and legislation
- Provide a safe, high quality working environment for staff

### **Continuous Improvement**

- Innovate and collaborate to develop the service to meet current and emerging patient needs
- Ensuring services are monitored and delivered in line with international best practice
- Modernise the physical infrastructure to ensure it meets the needs of the relevant legislation and facilitates the delivery of world class practice
- Ensure the digital systems in place support the delivery of a safe, high quality service

### **Partnership & Engagement**

- Work collaboratively with clinical colleagues, patients and other key stakeholders to improve service delivery
- Engage with relevant partners to deliver local and regional transformation programmes.
- Work collaboratively with UK and International Partners to ensure the delivery of best practice

## People & Culture

- Foster an open, just and learning culture where staff feel safe, recognised and engaged.
- Support and develop our people to enable them to deliver high-quality services to our donors and patients
- Foster an environment where staff wellbeing is a priority and their contribution valued

## Resources

- Ensure the performance objective of breakeven is achieved and delivers value for money
- Ensure the environmentally sustainable use of our resources

## 4 Glossary

**Foetal genotyping:** Blood test to predict the blood group status of foetuses at risk from haemolytic disease of the foetus and newborn (HDFN).

**NICE guideline NG24:** National Institute for Health and Care Excellence is an executive non-departmental public body of the Department of Health in the United Kingdom. This guideline (NG 24) covers the assessment for and management of blood transfusions in adults, young people and children over 1 year old.