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Introduction

The IBTS is a national organisation responsible for collecting, processing, testing and distributing blood and blood products in Ireland. It relies completely on the generosity of voluntary non-remunerated donors to provide sufficient donations to ensure a consistent supply of blood and blood components to patients. It is a critical part of modern health care and provides blood, blood components and blood products for patients. It is funded through the charging of hospitals for its products and services at a price agreed with the Department of Health.

As a Non – Commercial State Agency its governance arrangements are set out in the revised Code of Practice for the Governance of State Agencies. The responsibility for governance of the IBTS falls on the Board which is appointed by the Minister for Health and comprises twelve members. To assist the Board in carrying out its functions there are a number of Sub-Committees which deal with specific aspects of the business of the organisation, namely, Medical Advisory Committee, Finance Committee, Audit and Compliance Committee, Remuneration Committee and Research Development Committee. There is a clear delineation of roles and responsibilities between the Board and the Executive.

Statutory Instrument 78 of 1965 sets out the functions of the IBTS as follows:

- (a) to take over the property (including chosesin-action), assets, rights and liabilities of the Company:
- (b) to organise and administer a blood transfusion service (hereinafter referred to as "the Service") including the processing or supply of blood derivatives or other blood products and also including blood group and other tests in relation to specimens of blood received by the Board;
- (c) to make available, blood and blood products;
- (d) to make available equipment or re-agents suitable for use in relation to the service;
- (e) to make such charges (if any) as the Board thinks fit, for the services referred to at (b), (c) and (d) above and, where the Minister gives any direction in relation to such charges, to comply with such direction;

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"IBTS relies completely on the generosity of voluntary non-remunerated donors to provide sufficient donations to ensure a consistent supply of blood and blood components to patients"

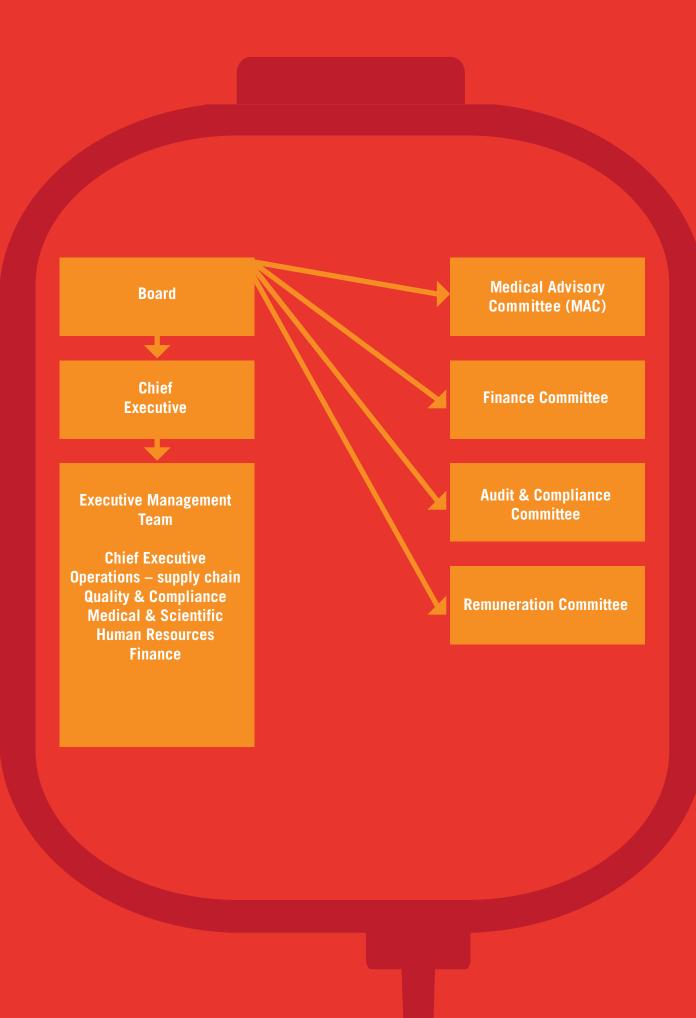


- to furnish advice, information and assistance in relation to any aspect of the service to the Minister, any health authority or any hospital authority;
- (g) to make any necessary provision for publicity in relation to the service;
- (h) to organise, provide, assist or encourage research and the training and teaching of persons in matters relating to blood transfusion and the preparation of blood products and
- (i) to cooperate with other bodies with analogous scientific functions.

These functions were amended in 1988, 2000 and 2003, with the addition of functions as follows:

- To organise and administer an eye banking service.
- To organise and administer a service for obtaining and assessing reports of unexpected or undesirable effects of transfusion of blood or blood components made available by the Board including the furnishing to the Irish Medicines Board of reports of any unexpected or undesirable effects of any transfusion of such blood or blood components.
- The Statutory Instrument was amended in 2012 to transfer the responsibility for the provision of clotting factor concentrates which do not contain blood or blood products, and other biological medicinal agents including recombinant protein preparations, used for the treatment of coagulation disorders and

other congenital or acquired disorders that are characterised by diminished levels of, or dysfunctional forms of, plasma proteins to St James's Hospital.



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Governance Structure

Operational Management

The organisation of work is carried out through a number of functions organised on a national basis, i.e. Operations, Medical, Quality and Compliance, Human Resources and Finance. The primary decision making body is the Executive Management Team, which has a devolved budgetary system. The chart showing the current Executive Management Team is attached. The headquarters is located in Dublin with the main testing and processing centre. There is also a processing centre in Cork and collection teams in Dublin, Cork, Carlow, Limerick, Ardee and Tuam with fixed donation clinics in Dublin (2) and Cork.

Business Environment

The IBTS operates within a highly regulated environment. The conditions applying are similar to those that operate in the pharmaceutical industry. A safe transfusion service is assured by close collaboration between the IBTS and clinicians in managing the aspects of the transfusion process for which they are responsible. Only blood, which has been donated by appropriately selected donors and has been tested for transfusion transmissible infectious agents, can be issued for transfusion.

The inherent and inevitable problem is that blood transfusion is highly prone to attack from viruses and other infectious forms by its very nature. Potentially the greatest threat to the provision of a safe blood supply is the emergence of a new virus or an infectious disease where the scientific / epidemiological origins are not very clear and for which no test has been developed. By definition once it is known that a virus/infectious disease is transmissible it has already caused harm or even fatalities. This threat will never go away, and a formal scientific approach is needed to deal with that reality rather than simply reacting to each threat as it becomes known. There are certain measures that can be implemented to limit the exposure should transmissibility be proven. The IBTS adopted this policy in the manner it has dealt particularly with the threat from vCJD and bacterial contamination in platelets. This will continue to be our approach despite the challenging economic environment.

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Who we are

Our Purpose

The core purpose of the IBTS is to meet the transfusion needs of patients in Ireland.

Our Mission

The IBTS is committed to excellence in meeting patient's needs through the professionalism of our staff and the generosity of our donors.

Our Vision

The IBTS vision is of a blood transfusion service that delivers excellent transfusion healthcare to the people of Ireland.

We want

Patients

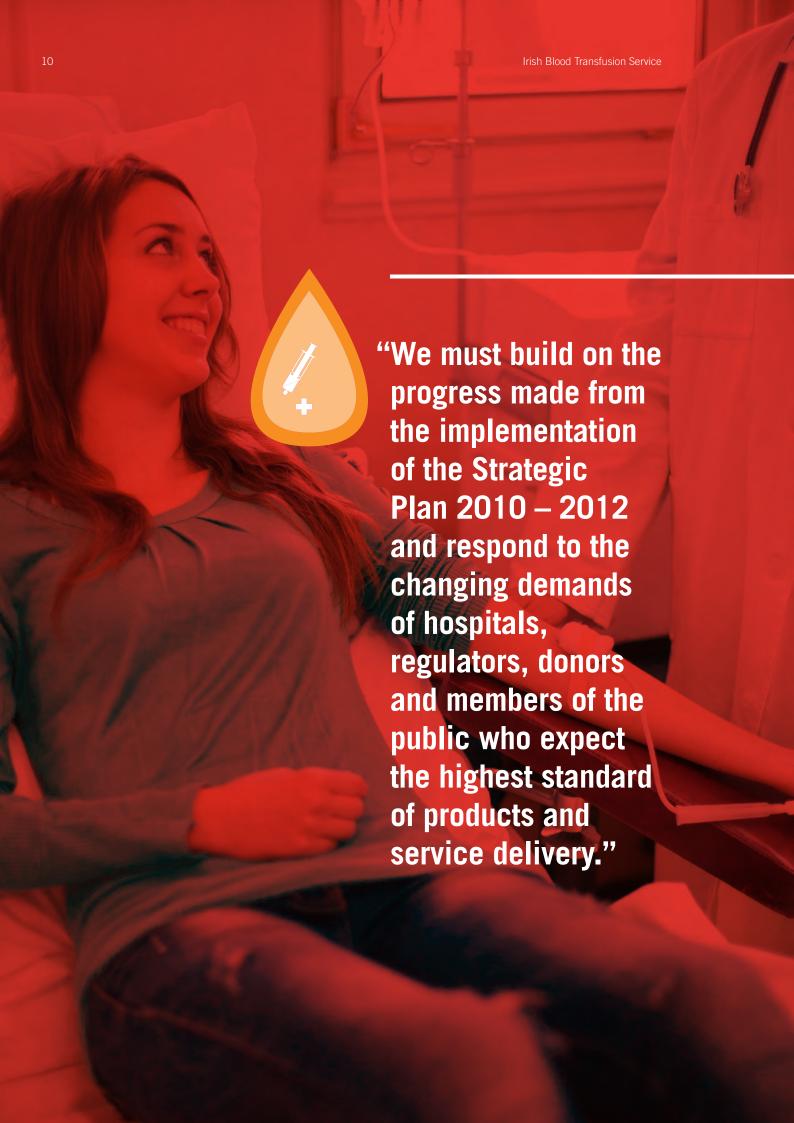
to know that the blood they will receive will be as safe as possible.

Donors

to feel appreciated, respected, and satisfied with their experience.

The healthcare community

to recognise that the product and services that we provide meet the best international standards, essential for them to deliver their goals, and good value for the resources deployed.



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Context for the Strategic Plan 2013 – 2016

The IBTS has undergone significant change over the past decade in all aspects of its business. There has been increased sophistication in the technologies used and a change in how we carry out our business.

The environment in which the IBTS operates is ever changing and for the IBTS to remain at the "State of the Art" with constrained resources will require a new way of doing business and a more effective and efficient organisation that is flexible, agile and has the capacity to respond to the many challenges we will face in the period 2013 – 2016. This must be achieved within a framework of delivering better value for money in an ever changing economic environment.

We must build on the progress made from the implementation of the Strategic Plan 2010 – 2012 and respond to the changing demands of hospitals, regulators, donors and members of the public who expect the highest standard of products and service delivery.

The IBTS has come to the end of the term of its current strategic plan and to develop a new Strategic Plan it is essential that the Environment in which the IBTS operates is analysed to inform the new Strategic Plan. This has been carried out using the PESTEL model and the salient points are outlined below.

PESTEL Analysis

Political factors

The IBTS remains accountable to the Department of Health, while the HSE is our main customer. Managing and growing relationships with the Department and the HSE remains a priority for the IBTS. The change that will take place in the organisation of the delivery of healthcare during the lifetime of this Strategic Plan could have a significant impact on how the IBTS delivers its services. Therefore, it will be necessary to engage fully with the new leadership team to ensure that the IBTS continues to deliver on its purpose and mission. Introducing further operational and service efficiencies over the duration of this strategic plan will be achieved against a background of a changing national industrial relations environment and recruitment constraints.

Economic factors

There continues to be significant cuts in healthcare spending in this country. During this plan it is intended to introduce a system of Universal Health Insurance in Ireland and the model of the money following the patient is also an integral part of Government policy in reforming the health service. All of these initiatives will impact on the IBTS.

In 2012 we have seen a significant decrease in the use of platelets and the activity levels in hospitals is reducing due to budgetary constraints. This reduction is likely to continue as is the model of service delivery. The combination of all these changes has the potential to reduce the income received by the IBTS by approx €3.2m in the next 2/3 years. In addition there are other income streams that will be lost or reduced to

Context for the Strategic Plan 2013 – 2016

IBTS which could take the loss in revenue to approx €6.7m. This poses a major challenge and the IBTS must reduce its cost base to achieve a balanced budget in this period.

The drive to achieve efficiencies and effect savings will continue to absorb much of the effort over the next few years, as the use of scarce resources to deliver health care comes under increased scrutiny. However, this must not compromise the quality of our products and services which we deliver to patients and donors.

Sociological factors

The 2011 census shows that the population of Ireland had increased by 122,028, that is 2.6% over a 5 year period. The population estimate in July 2011 was 4.72 million people. The number of persons aged 65 and over has increased at every census since 1961 from 315,000 in that year to 541,404 in 2011. This category now represents 11.6% of the population. The change in this age cohort is not expected to result in an increase in demand for blood over the lifetime of this Plan.

In 2011 there were 766,770 non-Irish nationals living in Ireland from 188 different countries. While this number has diminished with the recession it remains an important consideration in delivering services in the future. An example of this is the growing number of patients with sickle cell disease.

Technological factors

Technological advances in blood banking over the past decade have contributed to enhanced safety for patients. The IBTS, as an early adopter of new technologies has been to the forefront of many of

these developments. Continuing to deliver blood as safe as it can be, remains our imperative and new and innovative ways of benefiting from developments in technology that do not absorb significant resources, through partnerships and alliances with other blood banking establishments, will help to achieve this. We will have the opportunity to review many of our processes with the implementation of a new Blood Establishment Control System. The greatest challenge will be for the IBTS to remain current in technological advances, while dealing with financial constraints.

Environmental

There is an increased emphasis on the Green Agenda and this has and will continue to impact on the IBTS. The manner is which we dispose of clinical waste will continue to evolve. In addition, the IBTS needs to review its carbon footprint specifically at the National Blood Centre (NBC) and take appropriate measures to reduce it.

Legal

The regulatory environment for blood and tissue continues to get more demanding with the standards required to be met increasing. Changes to employment law will continue to impact on how IBTS manages its staff. There are constant changes emanating from Europe which necessitate changes to our policies and procedures. The question of governance of the National Haemovigilance Office (NHO) will be resolved so that there are appropriate governance arrangements in place in this area.

Strategic Plan 2013 - 2016

Strategic Direction

Our Strategy is based on 6 broad themes. In developing the Strategic Plan for 2013 to 2016 the IBTS has used the Balanced Scorecard method and this has proven to be a very valuable experience. Therefore, we have developed a Strategy Map which is based on the four central pillars of the Balanced Scorecard methodology. These pillars are Shareholder /Government, Customer, Internal Process and Learning and Growth.

From this we have developed five themes which are as follows:

- Excellent Donor Services
- Safe and Sustainable Supply
- High Quality Hospital Services
- Effective Relationships
- Learning and Growth

1. Excellent Donor Services

We will continue to review and adapt our supply chain through better use of our donor base and forecasting at blood group level; we will provide donation opportunities for donors that are efficient and cost effective and we will have an appropriate programme which will manage donor wellness.

2. Safe and Sustainable Supply

A safe and Sustainable supply begins with an understanding of local and international epidemiology which allows the IBTS to prepare for emerging trends in existing viruses and to monitor emerging threats. In addition we must track developments in new testing and processing technologies and analyse these so that an informed decision can be taken on whether to implement or not. We will continue to ensure that all of our products are produced to the highest standards of quality and efficacy.

3. High Quality Hospital Services

Ensuring that the correct unit of red cells and/ or platelets is available for a patient when he/ she needs it is the primary function of Hospital Services. The available blood supply must be transparent between the IBTS and the hospitals so that the donor's gift is maximised. This will require an integrated supply chain underpinned by technology which will involve greater collaboration between the IBTS and the HSE. The provision of specific patients' services and expert advice will also fall within the remit of this theme.

4. Effective Relationships

The IBTS can be isolated because it stands outside the core structures of the Health Service. Therefore, there is a greater need for the IBTS to build effective relationships with key stakeholders. This includes the Department of Health, the current and evolving leadership

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Strategic Direction

teams in the health service, clinicians and academic institutions. There is also a need to continue to work with our international colleagues and relevant Committees to ensure that we get the international perspective. We must also work closely with our suppliers and maximise value for money and to reduce risks.

5. Learning and Growth

This is about building a high performance organisation so that the IBTS has the capacity to deliver on its mission and meet the transfusion needs of patients in Ireland. This will involve having staff with the appropriate skills and expertise across the organisation. We must continue to build a culture of trust, performance and teamwork. This can only be achieved by improving the people management skills of our managers and by building on the learning gained from the Quantum Leap programme. We must also ensure that our information systems not only streamline our processes but provide timely information for decision making. The resolution of key issues such as pension provision is important in providing an environment where change can be implemented more readily.

Balanced scorecard

Translating Strategy into Action

The objectives set out under Shareholder/ Government and Customer have measures and key outcomes associated with each one. These are then developed further into a series of actions.

In the case of the five themes, these are implemented through Internal Process proposals and are subdivided into:

- Measures
- Key Actions
- and Strategic Initiatives.

Each of these has an owner whose responsibility it is to deliver on the action to achieve the measures identified.

The Strategy Map reflects the Strategic Priorities for the IBTS in the period 2013 – 2016.



IBTS Strategy Map: 2013-16

Provide State-of-the-Art National Blood & Tissue Services

Shareholder A

- **S1.** Provide an adequate, safe & sustainable blood supply
- **S2.** Meet legal & regulatory requirements
- **S3.** Provide appropriate tissue & cell services

Satisfy Our Customers

Customer

Donors

C1. "I want the opportunity to donate when I can"

Hospitals, doctors & patients

C2. "I want the IBTS to provide specific products, services and the expertise I need for the best care

Internal Process

Excellent Donor Services

- IP01. Maintain adequate donor base
- **IP02.** Provide donation opportunities efficiently & effectively
- **IP03.** Forecast accurately & maintain blood supply
- **IP04.** Manage donor wellness

Safe & Sustainable Supply

- **IP05.** Understand local &
 - international epidemiology
- IP06. Track developments in testing &
 - components processing
- **IP07.** Implement approved testing & processing
 - protocols in an efficient manner
- IP08. Maintain &/or improve product quality
- **IP09.** Provide patient services & expert advice

Build a High Performance Organisation

Learning & Growth LG1. Ensure availability of needed skills & competencies

LG2. Build culture of trust, performance, co-operation & teamwork

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S4. Provide input into policy development for transfusion

\$5. Manage reputation & related risks

S6. Provide value for money

of patients requirements in blood transfusion and related areas, promptly, safely, reliably and at reasonable cost."

HSE

C3. "We want you to build a more effective relationship"

High Quality Hospital Services

IP10. Integrate supply chain with hospitals

IP11. Enhance hospital services

Effective Relationships

- **IP12.** Build relationships with evolving hospital structures
- IP13. Build relationships with Dept of Health
- **IP14.** Reduce supplier cost & risks
- **IP15.** Develop our relationships with other key stakeholders

LG3. Increase people management skills

LG4. Improve mgmt information flow & information systems

LG5. Resolve pension issue



National Blood Centre

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