

# NHSBT OLYMPIC PLANNING

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77  
days  
to go...

## PURPOSE OF THE SESSION

- Business as Usual (BAU) plans
- Emergency (EP) plans
- Use of FFP for HUS
- Early release of platelets
- Substitution of Opos instead of Oneg in men

## **NHSBT OLYMPIC OBJECTIVE**

**Provide an operational framework to support the critical functions of NHSBT ensuring the continued provision of blood products and organs during Gametime**

- develop effective 2 way engagement plan between NHSBT and customers
- understand, and respond to, customer needs
- build appropriate stock levels and resilience
- minimise impact upon staffing
- post-Olympics debrief for lessons learnt to inform other event planning

# NHSBT HOSPITAL ENGAGEMENT PLAN

- 3 hospital Group Days  
GD1: 2/19 March; GD2: 11 May; GD3: 22 June
- 1-2-1 meeting with all Olympic hospitals and key private hospitals
  - Hospital: TLMs and EPOs
  - NHSBT: Transport, Stock, Planning, Customer Services, RCI/H&I, Hospital Services
- Ongoing contact during the Olympics to monitor, and amend, delivery of plans

# BUSINESS AS “USUAL”



*Blood and Transplant*

## INSIDE OLYMPICS AREA

Darent Valley Hospital

Kingston Hospital

Guy's Hospital

St. Thomas Hospital

Lewisham Hospital

Queen Elizabeth Hospital

Kings College Hospital

St. George's Hospital

Royal Marsden (Fulham)

Royal London

Whipps Cross

Newham General

Homerton

St. Bartholomew's

North Middlesex

University College

Royal Free Hospital

Chelsea & Westminster

Royal Brompton

Hammersmith Hospital

St. Mary's

Charing Cross Hospital

Great Ormond Street

Private hospitals

## APPROPRIATE STOCK LEVELS

- Build stocks to meet hospitals' BAU requirements
- Recognise potential changes in collection activity; where necessary, move stocks of specialist products into L&SE
- Understand any potential changes in usage patterns/product demand patterns



## CHALLENGES

Main Games - 27<sup>th</sup> Jul to 12<sup>th</sup> Aug (ORN: 25<sup>th</sup> Jul – 15<sup>th</sup> Aug)

**RED (Severe disruption to operations)**

Change over - 13<sup>th</sup> Aug to 28<sup>th</sup> Aug

**Green (Little or no disruption to summer BAU)**

Paralympics - 29<sup>th</sup> Aug to 9<sup>th</sup> Sept (PRN: 27<sup>th</sup> Aug – 11<sup>th</sup> Sep)

**Amber (Minor disruption to Summertime BAU)**

## RESPONSE

- Rescheduling routine deliveries to less busy times of the day (overnight/afternoon)
- Changes to NHSBT and Hospital processes and activity to support
  - More effective utilisation of planned (routine) deliveries
  - Significant reduction in unplanned (reactive) deliveries

## **ADAPTING *NHSBT* PROCESSES**

- Presumption to issue platelets as irradiated
- Supporting hospitals who wish to increase platelet and/or frozen stockholding
- NHSBT transport resources: ability to escalate to blue light/ORN
- Support onward movement of product between hospitals
- Move stock to L&SE where necessary
- Reprovisioning some hospitals to avoid cross-London travel
- Establishment of *ad hoc co-ordinators* during Olympics
- Ongoing understanding of changes to operational requirements

## **ADAPTING *HOSPITAL* PROCESSES**

- Increased stockholding of platelets and frozen products?
- Increase notice given to hospital blood banks of (potential) product requirements?
- Blood banks have sight of blood counts to allow pre-emptive ordering?
- Elongate notice period/lead-in times given to NHSBT
- Decrease reliance on 3rd party transport providers; maximise utilisation of NHSBT routine deliveries
- TLMs “vetting” requests for ad hoc deliveries

## OUTSIDE OF OLYMPICS AREA

- NHSBT plans to carry on as normal, subject to unpredictable travel patterns/disruption
- General message to reduce ad hoc deliveries

# EMERGENCY PLANNING

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- Olympic Resilience Planning Assumptions (ORPA)
- Command & Control structures
- Existing Business Continuity arrangements

## NHSBT RESPONSE

- Appropriate stockbuilding to meet ORPA (and BAU)
- Tabletop exercise (22<sup>nd</sup> May); hospitals invited as SMEs
- Resilience measures – facilitate increased platelet collection, manufacture and issue (eg reversion to 5-day platelets)



## CHALLENGES

- NHSBT will achieve stock builds to meet BAU, ORPA and post-incident reversion to BAU
- Challenges exist with post-incident reversion to Cryo BAU
- Public Health incident - potential new product to give escalation capacity for plasma
- Age of issue as a result of ORPA stockbuilding

## RTC QUERIES

- Use of FFP for HUS
- Early release of platelets
- Substitution of Opos instead of Oneg in men

## **FURTHER QUERIES**

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