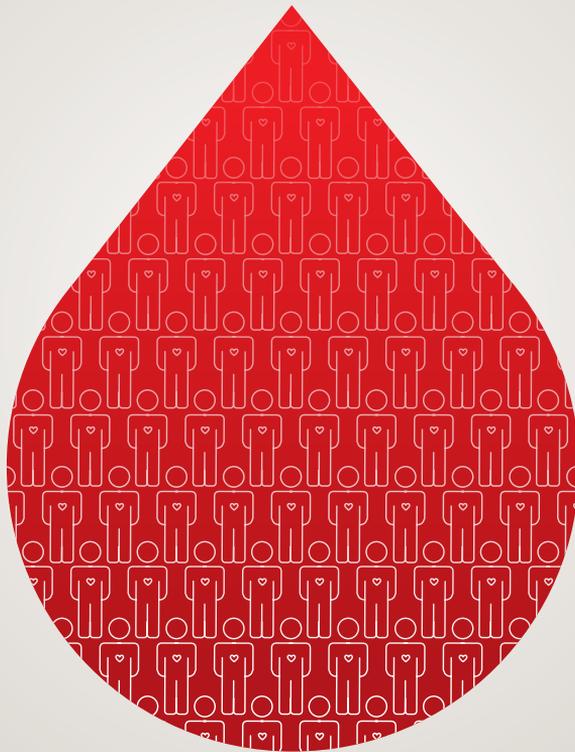


NATIONAL
BLOOD
AUTHORITY
AUSTRALIA

ANNUAL REPORT

2022–23





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Letter of transmittal



The Hon Ged Kearney MP
Assistant Minister for Health and Aged Care
Parliament House
CANBERRA ACT 2600

Dear Assistant Minister

I am pleased to present the Annual Report of the National Blood Authority (NBA) and the NBA Board for the financial year 2022–23.

This report has been prepared in accordance with section 44 of the *National Blood Authority Act 2003*, section 46 of the *Public Governance, Performance and Accountability Act 2013* (PGPA Act), and any enabling legislation that specifies additional requirements in relation to the annual report for presentation to the Parliament.

As the accountable authority of the NBA, I also present the 2022–23 annual performance statements of the NBA as required under paragraph 39(1)(a) of the PGPA Act. In my opinion, the annual performance statements are based on properly maintained financial records, accurately reflect the performance of the entity, and comply with subsection 39(2) of the PGPA Act.

The NBA has prepared fraud risk assessments and a fraud control plan and has in place appropriate fraud prevention, detection, investigation and reporting mechanisms that meet the specific needs of the agency. I have taken all reasonable measures to appropriately deal with fraud relating to the entity.

Yours sincerely

A handwritten signature in black ink, appearing to read "John Cahill".

John Cahill
Chief Executive
13 October 2023



Contents

Letter of transmittal	iii
Chief Executive review	1
Part One: Overview	7
About the NBA	10
Key events in the NBA's history	17
NBA Board	23
Managing risk	28
Part Two: Annual performance	33
Annual Performance Statements	34
Strategy 1: Provide a safe, secure and affordable supply of blood and blood related products and services	38
Strategy 2: Drive performance improvement in the Australian blood sector	57
Strategy 3: Promote a best practice model of the management and use of blood and blood related products and services	65
Strategy 4: Support a sustainable blood sector	76
Strategy 5: Be a high-performing organisation	78
Part Three: Management and accountability	85
Corporate governance	87
External scrutiny	94
Fraud control	95
Our people	96
Part Four: Financial management	103
Financial arrangements	104
Financial performance	106
Assets management	110
Purchasing	110
Financial statements	114
Part Five: Appendixes	157
Appendix 1. Committee and Board member profiles	159
Appendix 2. Workforce statistics	165
Appendix 3. Fresh blood components supplied under contract by Lifeblood in 2022–23	169
Appendix 4. Plasma and recombinant products supplied under contract in 2022–23	170
Appendix 5. Other mandatory reporting	176
Appendix 6. List of requirements	182
Appendix 7. Acronyms and abbreviations	190
Index	192

List of tables

Table 1.1	Details of accountable authority during the current report period (2022–23)	14
Table 2.1	Alignment of PBS performance measures with the Corporate Plan 2022–23 to 2025–26	36
Table 2.2	Key performance indicators: Provide a safe, secure and affordable supply of blood and blood related products and services	38
Table 2.3	Blood and blood products purchased by product category 2018–19 to 2022–23	41
Table 2.4	Fresh blood expenditure since 2013–14	43
Table 2.5	Lifeblood performance for key indicators 2022–23	47
Table 2.6	CSL Behring NaFAA performance 2022–23	49
Table 2.7	Supplier performance 2022–23: imported immunoglobulin products	50
Table 2.8	Supplier performance 2022–23: imported plasma and recombinant products	51
Table 2.9	Immunoglobulin demand growth	52
Table 2.10	Key performance indicators: Drive performance improvement in the Australian blood sector	57
Table 2.11	Key performance indicators: Promote a best practice model of the management and use of blood and blood related products and services in Australia	65
Table 2.12	Key performance indicators: Support a sustainable blood sector	76
Table 2.13	Key performance indicators: Be a high-performing organisation	78
Table 3.1	Australian Public Service Act employment arrangements as at 30 June 2023	97
Table 3.2	Australian Public Service Act employment by classification and NBA salary range as at 30 June 2023	97
Table 3.3	Executive remuneration 2022–23	98
Table 3.4	Remuneration for NBA Senior Executive Service (SES) staff 2022–23	99
Table 4.1	High-level summary: departmental and administered funding and expenditure 2022–23	104
Table 4.2	Key financial performance 2018–19 to 2022–23	106
Table 4.3	Summarised administered revenue 2018–19 to 2022–23	108
Table 4.4	Summarised administered expenses 2018–19 to 2022–23	108
Table 4.5	Expenditure on reportable consultancy contracts 2022–23	111
Table 4.6	Organisations receiving a share of reportable consultancy contract expenditure 2022–23	111
Table 4.7	Expenditure on reportable non-consultancy contracts 2022–23	112
Table 4.8	Organisations receiving a share of reportable non-consultancy contract expenditure 2022–23	112
Table 5.1	All ongoing employees 2022–23	165
Table 5.2	All non-ongoing employees 2022–23	165
Table 5.3	All ongoing employees 2021–22	165



Table 5.4	All non-ongoing employees 2021–22	165
Table 5.5	Australian Public Service Act ongoing employees 2022–23	166
Table 5.6	Australian Public Service Act non-ongoing employees 2022–23	166
Table 5.7	Australian Public Service Act ongoing employees 2021–22	166
Table 5.8	Australian Public Service Act non-ongoing employees 2021–22	167
Table 5.9	Australian Public Service Act employees by employment status 2022–23	167
Table 5.10	Australian Public Service Act employees by employment status 2021–22	167
Table 5.11	Australian Public Service Act employment type by location 2022–23	167
Table 5.12	Australian Public Service Act employment type by location 2021–22	168
Table 5.13	Australian Public Service Act Indigenous employment 2022–23	168
Table 5.14	Australian Public Service Act Indigenous employment 2021–22	168
Table 5.15	Fresh blood components supplied under contract by Lifeblood 2022–23	169
Table 5.16	Plasma and recombinant products supplied under various contracts for 2022–23	170
Table 5.17	NBA environmental performance 2022–23	177
Table 5.18	NBA greenhouse gas emissions report (location-based approach) 2022–23	178
Table 5.19	NBA greenhouse gas emissions report (market-based approach) 2022–23	178
Table 5.20	Agency resource statement	180
Table 5.21	Agency expenses by outcome	181

List of figures

Figure 1.1	NBA organisational structure as at 30 June 2023	14
Figure 2.1	Savings to government for fresh blood products 2018–19 to 2022–23	44
Figure 2.2	Red blood cells issued by Lifeblood 2018–19 to 2022–23 per '000 population	44
Figure 2.3	Platelets issued by Lifeblood 2018–19 to 2022–23 per '000 population	45
Figure 2.4	Whole blood plasma and apheresis plasma for fractionation 2018–19 to 2022–23	46
Figure 2.5	Immunoglobulin products issued 2018–19 to 2022–23 per '000 population	52
Figure 2.6	Factor VIII products issued 2018–19 to 2022–23 per '000 population	53
Figure 2.7	Factor IX products issued 2018–19 to 2022–23 per '000 population	54
Figure 2.8	Factor VIIa products issued 2018–19 to 2022–23 per '000 population	54
Figure 2.9	FEIBA issued 2018–19 to 2022–23 per '000 population	55
Figure 2.10	C1 esterase inhibitor issued 2018–19 to 2022–23 per '000 population	55
Figure 2.11	Emicizumab issued since introduction in 2020–21 per '000 population	56
Figure 3.1	Blood sector governance	87
Figure 3.2	NBA governance	88

Chief Executive review



The National Blood Authority (NBA) exists to give effect to national arrangements agreed and funded by all Australian governments that save and improve lives in Australia through a world-class blood supply. This is both a significant responsibility and a great privilege.

About one in three Australians will need blood or blood products in their lifetime. As the patient stories in this annual report underline, access to blood and blood related products means everything to those who need them. I thank Bob and Martha for sharing how donated blood has saved their lives and enabled them to live fully. Their insights remind us of the direct impact of the NBA and the many others involved in Australia's blood sector, including blood product suppliers, healthcare providers, hospitals, researchers, governments and – most of all – blood and plasma donors.

In 2022–23 we faced continued challenges in supply and demand management. The pressure on blood inventory remains a global issue; it is not unique to Australia. Through effective management of collection and supply contracts, the NBA has successfully navigated challenges in the supply chain resulting from increased demand for red blood cells, fluctuating levels of blood donations, and unusual patterns of demand during and since the COVID-19 pandemic.

Despite these challenges, the NBA has been able to maintain a safe, secure, and affordable supply of blood and blood related products to patients in Australia throughout the year.

Changes in donor panel requirements – the criteria for eligibility to donate blood – are increasing the pool of available donors.

For example, in July 2022 the Australian Red Cross Lifeblood (Lifeblood) stopped deferring blood donations from people who had resided in the United Kingdom (UK) in the 1980s and 1990s during the outbreak of variant Creutzfeldt-Jakob disease (vCJD – commonly referred to as ‘mad cow’ disease). As a direct result of this change, almost 41,000 new unique donors have subsequently donated, resulting in more than 116,000 additional collections. This is 8 per cent of all donation attendances nationally in 2022–23.

Lifeblood collects plasma for fractionation to supply to CSL Behring for the manufacture of plasma-derived products, with about 842 tonnes of plasma supplied in 2022–23. The \$3.4 billion National Fractionation Agreement for Australia between the NBA and CSL Behring that was signed in 2017 has provided a platform for CSL Behring to invest in new facilities at its manufacturing site at Broadmeadows in Victoria. This agreement provides an expanded capacity for processing Australia’s increasing domestic plasma collections, integrates Australian operations with CSL Behring’s global processes, and strengthens Australia’s supply security and self-sufficiency.

As well as securing blood supply in the short and medium terms, the NBA invests, through its small niche research program, in longer term knowledge and innovation development that has the potential to advance the blood sector through better collection, management and supply, and ultimately better outcomes for patients. Since 2015 the NBA has funded 40 research projects through five funding rounds, to a value of around \$6 million. In 2023 we commenced an evaluation of the research program to inform deliberations by the NBA and governments about future investment. The evaluation will gather qualitative and quantitative data to assess the program’s performance against measures such as value for money, capacity building, collaboration, research translation and information dissemination.

For more than 20 years the national blood arrangements have delivered an uninterrupted supply of blood, blood products and blood services in Australia. This success continued during the COVID-19 pandemic, when blood supply, supply chains, logistics and health systems more generally faced substantial challenges. Australia remains in a stronger position than many comparable countries. We have had no overall shortage of blood or blood related products, and no circumstance warranting formal activation of the National Blood Supply Contingency Plan.

The NBA operates and supports a suite of national blood sector information and communications technology (ICT) systems that enable us to undertake our work in an effective way. In 2022–23 we continued to maintain and enhance these blood sector systems. We also continued to strengthen cyber security controls to improve the security of these systems and our corporate ICT environment more generally.

During 2022–23, the NBA refurbished its physical office and substantially improved the enabling technology environment. We had occupied our office in Canberra for about 15 years; the space was insufficient, it was old and tired, the lease was expiring, and the facilities were not compliant with relevant standards. Like all organisations, the experience of the COVID-19 pandemic meant that we also had to find a different and much better and safer way of working. The refurbishment has resulted in facilities that enable modern, collaborative and flexible ways of working, with significantly upgraded technology that supports contemporary and more secure work practices.

In line with the Public Sector Interim Workplace Arrangements 2022 policy, NBA employees received a 3 per cent salary increase in January 2023. Along with other Australian Public Service (APS) agencies, the NBA has been engaged with the APS-wide process to negotiate new enterprise agreements that reflect common APS-wide terms and conditions and consistent and competitive remuneration arrangements. A new enterprise agreement will be considered by NBA staff in 2023–24.

I am pleased to see staff continuing to report positively about working in the NBA. The 2023 APS employee census results show that NBA staff remain engaged with their work and positive about the agency.

I remain grateful for the wisdom, guidance and advice the NBA Board again provided throughout 2022–23. The Board received regular updates and took a close and supportive interest in our programs during the year. It strongly supported the implementation of our strategic and operational plans and provided valuable advice on key strategic issues.

In late June 2023 we farewelled outgoing NBA Board member Associate Professor Alison Street AO and welcomed the appointments of Dr John Rowell and Professor Nicola Spurrier PSM to the NBA Board. I thank Professor Street for her valuable contribution as a member of the NBA Board since 2017 and for the significant additional contributions she makes to a range of important program activities such as haemovigilance, patient blood management, and the consideration of new products and treatments.

I am pleased to record that Dr Amanda Rischbieth AM was re-appointed Chair of the NBA Board in June 2023 for an additional four years. I would also like to commend Dr Rischbieth on receiving the Member of the Order of Australia (AM) and congratulate her on her significant service to public health administration and governance.

Most of all, I thank the staff of the NBA for their professionalism, collegiality, and commitment. It is because of them that we have continued to achieve our goal of delivering a safe, secure, and affordable supply of blood, blood products and blood services to all Australians who need them.

20 years of the NBA

As we celebrate the 20th year of the NBA's creation, we have paused to reflect on the vision of Commonwealth, state and territory governments who together established the national blood arrangements. Their intent was to consolidate fragmented jurisdiction arrangements and costs into a single national arrangement with formally agreed and shared costs between governments. This vision has delivered an uninterrupted, safe, secure and affordable supply of blood, blood products and blood services that has met the clinical needs of all Australians without direct cost to them. In giving effect to this, the NBA has also promoted safe, high-quality management and use of blood and blood products in Australia to ensure the most appropriate use of precious supplies that are mostly produced from the generous gift of voluntary non-remunerated donors.

The success of Australia's national blood arrangements is largely a result of good collaboration across governments and the blood sector, effective partnerships and engagement, strong procurement and contract management, and good governance. The NBA has led and coordinated much of this work, in conjunction with the Commonwealth, states and territories, Lifeblood, domestic and multinational commercial suppliers, expert clinical committees, patient groups, and other groups and specialist advisors and individuals.

The underpinning national agreement and shared funding commitment across governments, which is not evident in other countries, has been fundamental to this success. Over time, this has resulted in the development of a fully integrated system for:

- ◆ procurement and management of contracts to secure the supply of fresh blood and commercial blood products, both domestically and from overseas
- ◆ national forecasting of blood demand and supply
- ◆ access to new blood products to deliver first-world treatments in Australia at the most competitive prices
- ◆ assurance of the most appropriate clinical use of blood and blood related products.

As indicated, the national blood arrangements have worked well, but were agreed more than 20 years ago. It is important that the arrangements evolve in line with contemporary developments in health management, governance and funding, and that they remain fit for purpose.

The blood sector's clinical landscape is changing and there are many exciting new products and treatments in the pipeline, including gene therapy treatments for bleeding disorders. These developments could potentially be a whole new space for the NBA and governments in the future and will require careful consideration of policy, implementation and cost issues. A reasonably immediate challenge will be to achieve consensus on the appropriate pathway for funding and providing new and novel treatments. The NBA funds and works closely with the Australian Haemophilia Centre Directors' Organisation, which has already developed a Gene Therapy Roadmap to assist and guide future discussions on gene therapy for haemophilia in Australia.

These are interesting, challenging and exciting times for the blood sector in Australia and for patients who are adversely affected by clinical conditions that require the support of Australia's national blood arrangements. We are reminded of this critical need and the difference these arrangements make to the day-to-day lives of Australians through the stories of Martha and Bob that follow in this annual report. These stories keep the NBA and its committed staff highly focused on what is important and what a difference our work can make to the lives of Australians. We will continue to pick up this challenge and look forward to embracing the opportunities presented to ensure a world-class blood supply in Australia.

Acknowledgements

We acknowledge and thank the many stakeholders who provided us with valuable advice, guidance and support throughout this year.

We are grateful for the generous contributions of time and effort we again received from clinical experts, community and patient representatives and others.

We also acknowledge the support we received from the many professional colleges, societies and individuals who contributed to the publications, resources and tools we produced during the year.

In addition, we thank all our advisors, collaborators and partners for their commitment and dedication, which helped us to meet the objectives of the national blood arrangements. Those who provided advice on a variety of topics, including clinical issues and patient perspectives, information technology systems used by patients and clinicians, and the governance of our organisation, include the following groups and committees:

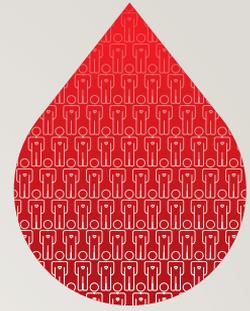
- ◆ Patient Blood Management Guidelines clinical and consumer reference groups and jurisdictions for the review and update of the Patient Blood Management Guidelines
- ◆ Expert Reference Group for the development of the *Guideline for the prophylactic use of Rh D immunoglobulin in pregnancy care*
- ◆ National Immunoglobulin Governance Advisory Committee and specialist working groups for immunology, haematology, neurology, and transplantation medicine
- ◆ National Immunoglobulin Interest Group
- ◆ Patient Blood Management Advisory Committee and working groups for their advice on patient blood management strategies
- ◆ Haemovigilance Advisory Committee and working groups for their advice on the National Haemovigilance Program to the NBA and other stakeholders
- ◆ Australian Haemophilia Centre Directors' Organisation
- ◆ Australian Bleeding Disorders Registry Steering Committee and Stakeholder Group
- ◆ Australian Bleeding Disorders Registry Data Managers Group
- ◆ National Blood Authority Board
- ◆ National Blood Authority Audit and Risk Committee.

Thank you one and all!



John Cahill
Chief Executive

PART 1



Overview

About the NBA

Key events in the NBA's history

Year at a glance

NBA Board

Managing risk



Martha's story



I have had about 1,700 bags of blood in my lifetime. That's 1,700 selfless heroes who have kept me alive, and the only reason I am blessed to be able to tell my story.

I am a blood recipient, and a very grateful one. I live in Sydney and every four weeks I attend the Prince of Wales Hospital in Randwick to receive my three bags of blood so I can get through the next four weeks of my busy life.

I have a genetic condition called thalassaemia that affects the production of haemoglobin, resulting in severe anaemia. This condition is usually diagnosed within the first six months of life.

I was born in Cyprus. Within the first couple of months, my mother noticed I was looking pale, I was whinging a lot and I had lost my appetite. My parents took me to the hospital and after some tests the doctor diagnosed me with thalassaemia major.

My parents were unaware that they were both carriers of the thalassaemia gene. With both carrying the gene, the risk was 25 per cent in each pregnancy of having a child with thalassaemia major, 50 per cent to pass on the gene (for the child to be a carrier) and 25 per cent to have a child without this blood disorder.

The doctor gave my parents three scenarios:

1. To not transfuse me and watch me die slowly
2. To transfuse me only when required (not a great quality of life)
3. To transfuse me regularly and he would be at my wedding (I never got married, so I didn't hold my end of the bargain – sorry, Doc).

Thankfully my parents chose to transfuse me regularly. When I was nine months old, war broke out and my mother couldn't get blood for my transfusions. We were displaced from our homes and we lived in a refugee camp for about a year before an amazing person sponsored our family to move to Greece. In Greece you must have someone donate blood for you in order to be able to receive blood. The hospital told my mother they couldn't take any more blood from her and she needed to find donors. My mother left the hospital and sat at the bus stop with me in her arms and cried because she didn't know how she would be able to get blood for me.

A soldier passing by saw her crying and he stopped and asked her why. My mother replied, through tears, that she needed blood in order to keep me alive. He told her to wait there. He went to his base and came back with 20 or so soldiers, and they went and donated blood so that I would have enough blood supply for a while. Our family still can't believe the amazing people in the world. We always remember these lifesavers.

We were in Greece for about a year and then we made the move to Wollongong as my mum had family there. That's where the stress of not knowing if we could get blood for my transfusion all came to an end.

I always wanted to give back to the Australian Red Cross Lifeblood for keeping not just me but all my thalassaemia friends alive. So I'm always recruiting new donors. I tell all my family, friends, strangers, anyone who will listen, to donate blood.

I wanted to give back more, so I signed up to become a donor centre volunteer. I make a mean milkshake and there's an art to heating those pies, sausage rolls and cheese and spinach rolls!

For anyone considering being a blood donor, I encourage them to just do it. My friends tell me that it's the most rewarding thing they have done. They say they get a great fuzzy feeling when they get the message that their blood has just been given to a patient at the hospital.

My message to the donors is THANK YOU! Without their generous, selfless donation, I wouldn't be here today.

Disclaimer: This story is not indicative of a measure of performance.



About the NBA

Our vision

Saving and improving Australian lives through a world-class blood supply.

Our authority

The National Blood Authority (NBA) is established by the *National Blood Authority Act 2003* (NBA Act). As a material statutory agency, the NBA has a range of corporate and compliance responsibilities under the NBA Act, the *Public Governance, Performance and Accountability Act 2013* (PGPA Act) and the *Public Service Act 1999*. In addition, it is responsible for meeting ministerial, parliamentary and financial reporting requirements.

Our outcome

The outcome of the NBA's work is **access to a secure supply of safe and affordable blood products, including through national supply arrangements and coordination of best practice standards within agreed funding policies under the national blood arrangements.**

This outcome is approved by the Commonwealth Government and included in the Commonwealth Portfolio Budget Statements as the basis of funding appropriated to the NBA by Parliament.

Our role and functions

The NBA manages and coordinates arrangements for the supply of blood, blood products and blood services on behalf of all Australian governments in accordance with the National Blood Agreement.

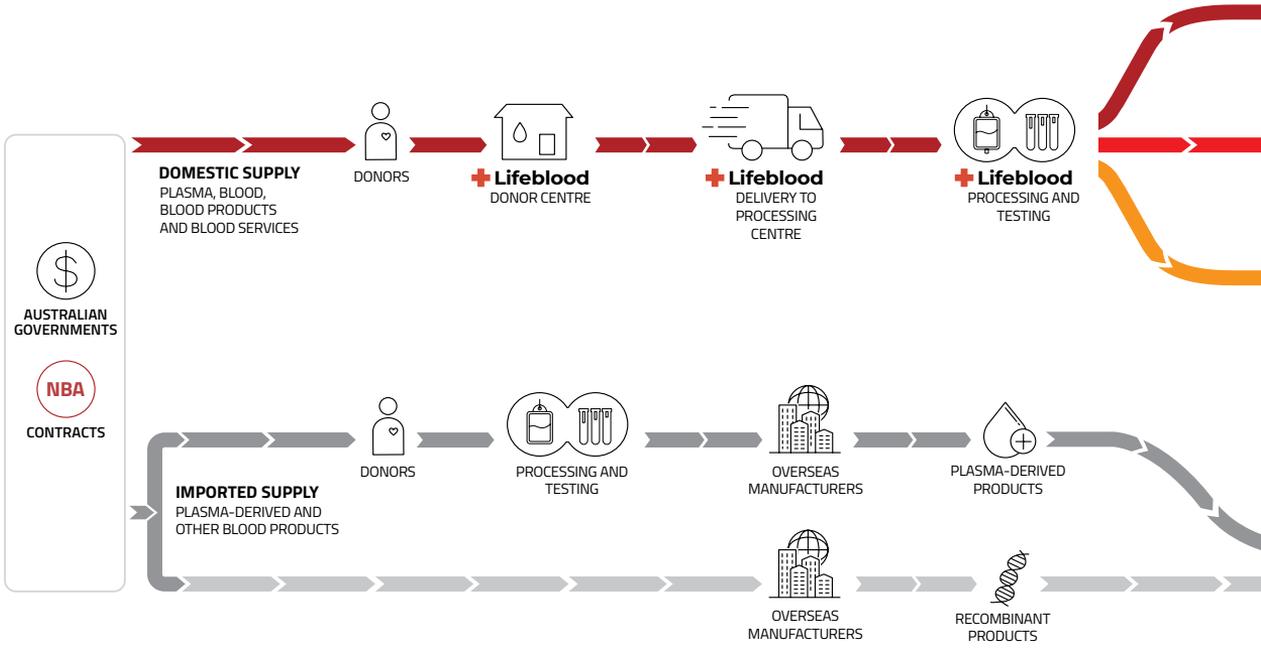
The primary policy objectives of the National Blood Agreement signed by the Commonwealth, state and territory governments are:

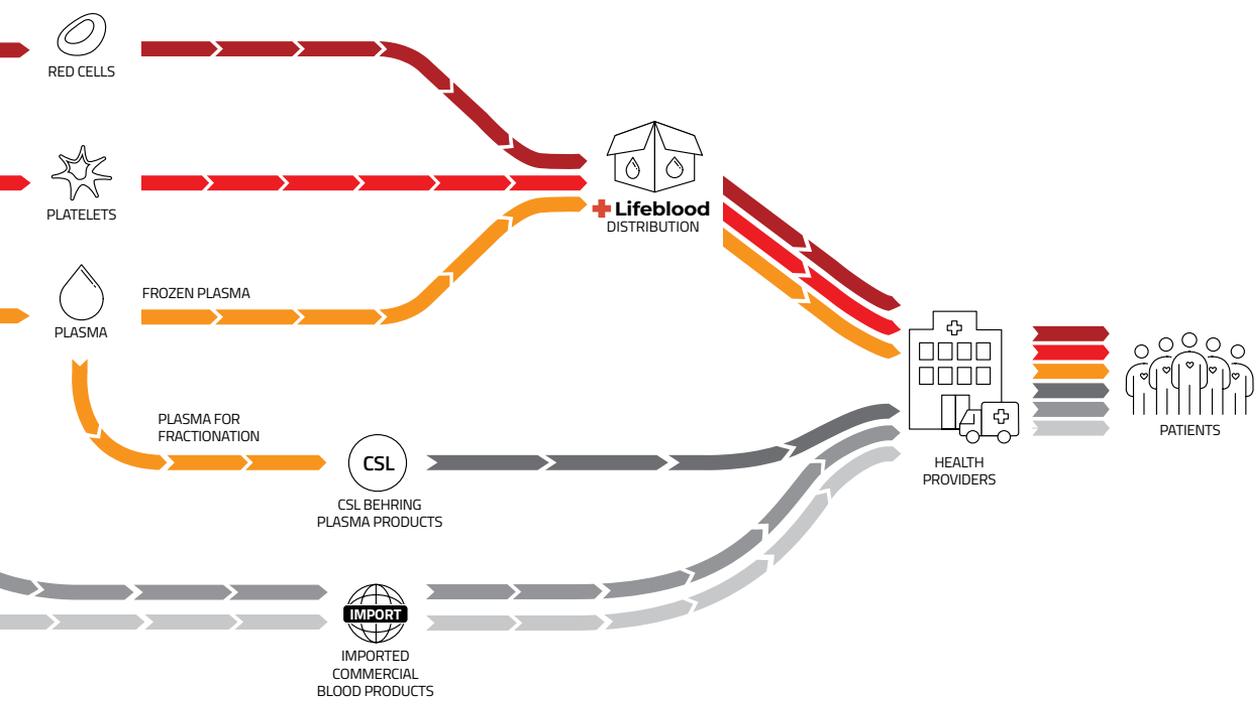
- to provide an adequate, safe, secure and affordable supply of blood products, blood related products and blood related services in Australia
- to promote the safe, high-quality management and use of blood products, blood related products and blood related services in Australia.

To achieve the policy objectives of the National Blood Agreement, the NBA:

- ◆ works with all Australian governments to determine the clinical requirements for blood and blood related products and develops and manages an annual supply plan and budget
- ◆ negotiates and manages national contracts with suppliers of blood and blood related products to obtain the products needed by patients
- ◆ assesses blood supply risk and develops commensurate contingency planning
- ◆ supports the work of all Australian governments in improving the way blood products are governed, managed and used, as well as developing and facilitating strategies and programs to improve the safety, quality and effectiveness of blood usage, particularly in the areas of national standards, criteria, guidelines and data capture and analysis
- ◆ collaborates with key stakeholders to provide expert advice to support government policy development, including the identification of emerging risks, developments, trends and opportunities
- ◆ manages the evaluation of proposals for blood sector improvements, including proposals for new products, technologies and system changes
- ◆ supports jurisdictional consideration of key issues in accordance with the National Blood Agreement.

The journey of blood





Our responsible Minister and portfolio

The NBA is within the portfolio of the Minister for Health and Aged Care. The NBA General Manager is the Chief Executive of the NBA and is a statutory officer reporting to the Commonwealth Minister for Health and Aged Care within an intergovernmental framework.

Accountable authority

Details of the NBA’s accountable authority during the 2022–23 reporting period are in Table 1.1.

Mr John Cahill was re-appointed as General Manager of the National Blood Authority for a four-year term commencing on 27 September 2020.

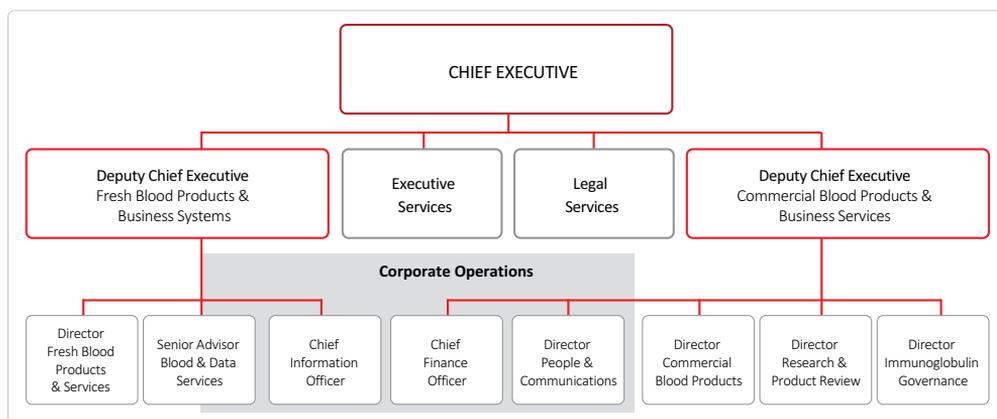
TABLE 1.1 Details of accountable authority during the current report period (2022–23)

Name	Position title/position held	Date of commencement	Date of cessation
Mr John Cahill	Chief Executive	October 2016	n/a

Our organisational structure

Our organisational structure at 30 June 2023 is shown in Figure 1.1.

FIGURE 1.1 NBA organisational structure as at 30 June 2023



Our Executive Management team

As at 30 June 2023 the NBA Executive Management team comprised the following senior executives:



Mr John Cahill

Chief Executive, National Blood Authority

Mr Cahill was appointed to the position of Chief Executive in 2016. He previously held a senior executive position in the Commonwealth Department of Health and Aged Care. He has wide-ranging policy, program and operational experience, including extensive work as a senior executive and Chief Executive with various government departments and agencies.

Before the NBA, Mr Cahill led and managed major programs and projects involving the delivery of challenging and complex services across Australia and internationally. This included the management and delivery of significant health services, infrastructure services, major procurements and substantial contracts.

Since commencing with the NBA, Mr Cahill has worked closely with the Australian Red Cross Lifeblood, commercial suppliers, partners and service providers, and a broad range of committed stakeholders within governments and the community – including patients, patient groups, clinicians and specialist advisors – as well as with the passionate and professional staff of the NBA, to ensure the NBA provides strong leadership, management and support for Australia’s world-class national blood arrangements.

Deputy Chief Executive, Commercial Blood Products and Business Services

This position was vacant at 30 June 2023.



Ms Kate McCauley

Deputy Chief Executive, Fresh Blood Products and Business Systems

Kate McCauley joined the National Blood Authority in November 2022 as Deputy Chief Executive, Fresh Blood Products and Business Systems. Kate has wide-ranging capabilities in organisational change and reform, health related policy and service delivery, which have been honed by her experiences across a number of portfolios. Her early career as a registered nurse, at the coalface of care delivery, gives her a unique understanding of the practical implications of government decision making and policy implementation.

At the NBA, Kate’s responsibilities encompass fresh blood products and services and related issues, including the coordination of national supply planning processes across Australia. She has principal NBA executive responsibility for the contract with the Australian Red Cross Lifeblood. She also has executive responsibility for the Chief Information Officer group and the NBA’s ICT and data management activities, as well as the coordination of the NBA’s corporate risk management work.

Kate is an experienced Senior Executive Service officer who has worked in several areas of government including the health and education portfolios, as well as with central agencies. She is a capable leader with extensive experience in outcomes-driven negotiations, and has successfully led significant operational and structural reforms, delivering enhanced outcomes and improved team cohesion.

In her most recent role as Assistant Secretary Medical Devices Surveillance Branch with the Therapeutic Goods Administration, she led the establishment of a new organisational structure and the implementation of a critical suite of regulatory reforms.

Kate holds a Bachelor of Nursing and a Master of Health Administration.

Key events in the NBA's history

2003

Established by the *National Blood Authority Act 2003* following the signing of the National Blood Agreement by all Commonwealth, state and territory health ministers in November 2002.

2003–04

Commenced national supply arrangements for imported intravenous immunoglobulin (IVIg) to ensure sufficiency of supply in all jurisdictions.

2004–05

Commenced an adequate supply of recombinant factors VIII and IX to fully meet demand.

2005–06

Executed a Deed of Agreement with the Australian Red Cross Society for the provision of fresh blood products and plasma for fractionation.

Won the Prime Minister's Silver Award for Excellence in Public Sector Management for procurement of recombinant (manufactured) products.

2006–07

Approved the first edition of the Criteria for the Clinical Use of Intravenous Immunoglobulin in Australia.

2007–08

Implemented the National Blood Supply Contingency Plan (NBSCP) to provide governance for the management of blood shortages.

Launched the redeveloped Australian Bleeding Disorders Registry (ABDR) to better support planning and clinical management of people with bleeding disorders.

2008–09

Established the Australian National Haemovigilance Program for reporting on serious transfusion related adverse events.

Received the Australian Government Comcover Award for Excellence in Risk Management for the NBSCP.

2009–10

Commenced a new CSL Australian Fractionation Agreement.

Won a United Nations Public Service Award in the Advancing Knowledge Management in Government category.

2010–11

National rollout of the online blood ordering system BloodNet, allowing health facilities to order blood and blood products quickly, securely and in a standardised way.

Released the first module (Critical Bleeding/Massive Transfusion) of the Patient Blood Management (PBM) Guidelines.

2011–12

Released PBM Guidelines Module 2 Perioperative and Module 3 Medical.

Published the second edition of the Criteria for the Clinical Use of Intravenous Immunoglobulin in Australia.

2012–13

Released PBM Guidelines Module 4 Critical Care.

2013–14

National rollout of the MyABDR app.

Established the National Immunoglobulin Governance Program.

2014–15

Released PBM Guidelines Module 5 Obstetrics and Maternity.

Won ACT iAwards in three categories for innovation in the development of BloodNet interfaces with health provider laboratory information systems.

2015–16

Released PBM Guidelines Module 6 Neonatal and Paediatrics.

Released the National Haemophilia Guidelines, developed with the Australian Haemophilia Centre Directors' Organisation.

Conducted the first National Blood Sector Research and Development Program grant round.

2016–17

Launched the BloodSTAR online system to manage access to the supply of government-funded immunoglobulin (Ig) products across Australia.

Commenced a new Deed of Agreement with the Red Cross Society for Lifeblood services.

2017–18

Commenced the National Fractionation Agreement for Australia with CSL Behring.

Celebrated the 10th anniversary of BloodSafe eLearning and the delivery of more than 1 million courses.

2018–19

Completed the national implementation of BloodSTAR.

Released revised Criteria for the Clinical Use of Intravenous Immunoglobulin in Australia.

2019–20

Implemented supply arrangements for standard half-life and extended half-life recombinant factor VIII and factor IX products.

Commenced the first pilot Health Technology Assessment for Ig.

Dealt with the COVID-19 pandemic and its evolving impacts on NBA responsibilities and operations.

Received the Prime Minister's Silver Award for Excellence in Public Sector Management.

2020–21

Hemlibra approved under the national supply arrangements to prevent or reduce the frequency of bleeding in severe or moderate haemophilia A patients.

Issued *Guideline for the prophylactic use of Rh D immunoglobulin in pregnancy care*.

Modified Ig access criteria to enable supply of intravenous Ig under the national blood arrangements for COVID-19 vaccine-induced immune thrombotic thrombocytopenia.

Improved Australia's domestic supply of plasma-derived products by overseeing approval for Lifeblood to increase domestic plasma collection by approximately 10 per cent annually.

Increased the supply diversity of Ig products by securing new arrangements for additional Ig products.

2021–22

Negotiated an Output Based Funding Model with Lifeblood, delivering savings of \$160 million to governments.

Impact evaluation of the National Immunoglobulin Governance Program forecast savings to governments of \$2.2 billion over 11 years.

Completed ICT modernisation consisting of migration to Microsoft 365, rollout of new laptops and move to the cloud.

Conducted a major review of processes to optimise the way the annual National Supply Plan and Budget is developed.

Released the National Blood Research and Development Strategic Priorities 2022–27.

Completed the final pilot Health Technology Assessment for Ig.

2022–23

Provided support for Lifeblood to increase the number of blood donors and achieve plasma growth.

Completed the NBA office refurbishment to provide a modern, collaborative and flexible work environment with significantly upgraded modern technology that supports contemporary and more secure work practices.

Year at a glance

Snapshot of the blood sector in 2022–23

Donating



592,291
donors

217,744
plasma donors

1,607,824
blood donations

Collecting and processing

842.4

tonnes of plasma collected

78

fixed collection sites

5

manufacturing and testing centres

18

contracts managed by the NBA for the supply of products



Ordering (BloodNet)



215,499
BloodNet orders

590
(average) orders per day

2,620,863
units received by BloodNet facilities

177
laboratories interfaced with BloodNet

100 per cent
national uptake of BloodNet fate module

Supplying

\$685.8m
fresh blood components

\$4.7m
diagnostic reagents

\$880.4m
plasma-derived and recombinant products



Issuing



687,752
units of red blood cells issued

148,407
units of platelets issued

4,065,335
grams of domestic Ig issued

4,618,395
grams of imported Ig issued

Managing

7,646 patients registered in ABDR

4.8 days average age of red blood cells at issue

7,920
discards of red blood cells

2,180
guideline publications distributed

809,924
registered users of BloodSafe eLearning



Transfusing



1,883
patients receiving products for bleeding disorders

25,151
patients receiving Ig products

1,162
facilities issued blood in BloodNet

407,481
unique visitors to NBA website

60
product groups provided under the national blood arrangements

Budgeting

\$1,547.5m
government funding for product supply

\$9.8m
operational funding

\$25.7m
savings to governments

\$738.1m
funding returned to governments over the past 10 years



Key achievements in 2022–23

- ◆ Delivered an uninterrupted supply of blood and blood products that met clinical demand with no activation of the National Blood Supply Contingency Plan required.

- ◆ Maintained governance arrangements for immunoglobulin that kept demand growth at 7.9 per cent.

- ◆ Red blood cell wastage reduced to 1.2 per cent from 1.4 per cent in 2021–22.

- ◆ Continued strong and effective partnerships with suppliers of blood and blood products to manage blood arrangements.

- ◆ Completed a property redevelopment program to modernise the NBA's office, technology and facilities.

- ◆ Published the National Statement for the Emergency Use of Group O Red Blood Cells.

- ◆ Implemented improvements to the National Supply Plan and Budget processes, including associated reports.

- ◆ Introduced the Rh D Ig BloodSafe eLearning Australia course on the *Guideline for the prophylactic use of Rh D immunoglobulin in pregnancy care*.

- ◆ Collaborated with the International Haemovigilance Network, the International Society of Blood Transfusion and the Australian and New Zealand Society of Blood Transfusion to deliver a series of four free, open-access online forums where scientists, haematologists, transfusion nurses, regulatory authorities and consumers came together to discuss safety and quality through data, the care and wellbeing of donors, and improving consumer engagement.

NBA Board

The NBA Board is established under the NBA Act with functions that mainly involve consideration of strategic blood sector issues, and advice to the NBA Chief Executive about the discharge of the NBA's functions. The Board is not a decision-making body and has no formal or direct role in the governance or day-to-day management of the NBA.

The Board usually meets quarterly to consider, as appropriate, key issues facing the blood sector and the NBA.

Board members also engage with stakeholders to strengthen relationships, promote the role of the NBA and contribute generally to the agency. Some Board members also participate in other NBA committees to contribute on specific issues related to their expertise.

Board members are appointed by the Commonwealth Health Minister following consultation with the states and territories. The Board's functions are:

- ◆ to consult with the Minister about the appointment of the Chief Executive
- ◆ to advise the Chief Executive about the performance of the NBA's functions
- ◆ to liaise with governments, suppliers and others about matters relating to the NBA's functions
- ◆ such other functions (if any) as are specified in a written notice given by the Minister to the Chair.

Board membership

Chairing the Board of an organisation that makes a significant impact on people's lives is an absolute privilege. It was my pleasure to be re-appointed in June 2023 as Chair of the NBA Advisory Board for the forthcoming four years. Heartfelt congratulations are in order for my fellow member Ms Penny Shakespeare on her re-appointment.

We had the privilege of welcoming two new members, Professor Nicola Spurrier PSM and Dr John Rowell, to our Board in late June 2023. We are immensely grateful for the wealth of experience and knowledge they bring to our Board membership.

The Board and I bid a warm farewell to a longstanding member, Associate Professor Alison Street AO, and express our deep gratitude for her advice, knowledge and expertise as a public health expert since her 2017 appointment. Professor Street's extensive wise counsel and deep experience have proven invaluable in progressing key matters across the blood sector, both at committee level and on the Board, together with her personal drive, collegiality and commitment, which will without doubt leave a strong legacy. Professor Street is highly esteemed by the Board, by NBA staff, and within the blood sector. She continues to offer expert guidance and leadership as Chair of the NBA's Haemovigilance Advisory Committee.

As at 30 June 2023, the NBA Board membership comprised:

- ◆ Dr Amanda Rischbieth AM – Chair
- ◆ Mr Geoffrey Bartle – Community Representative
- ◆ Professor Nicola Spurrier PSM – Public Health Expert
- ◆ Professor Lyn Beazley AO – State and Territory Representative (Small Jurisdiction)
- ◆ Mr Paul Bedbrook – Financial Expert
- ◆ Dr John Rowell – State and Territory Representative (Large Jurisdiction)
- ◆ Ms Penny Shakespeare – Australian Government Representative.

Profiles of the Board members can be found in Appendix 1.

Outgoing member

- ◆ Associate Professor Alison Street AO – Public Health Expert

Report of the Board's operations

Despite the lingering challenges brought about by the COVID-19 pandemic, I am proud to report that the NBA successfully maintained an uninterrupted national supply of blood and blood related products throughout 2022–23.

This achievement is a testament to the professionalism of all staff and their dedication to delivering the NBA's core business: ensuring Australia's supply of blood, blood products and blood services remains safe, secure, sustainable and affordable.

This success would not have been possible without the strong partnerships and collaboration we have cultivated with the Australian Red Cross Lifeblood (Lifeblood), our commercial partners, suppliers, governments, clinicians, patients and other experts in the field.

The Board had three meetings in 2022–23, discussing a variety of subjects including:

- ◆ blood inventory issues
- ◆ review of the national blood arrangements
- ◆ the assessment pathway for new high-cost specialised therapies
- ◆ issues and complexities relating to the Commercial Blood Products Program
- ◆ the National Blood Sector Research and Development Program.

Pressure on the supply of and demand for blood, plasma, and blood related products continued during 2022–23 both in Australia and globally. Throughout the year, the Board continued to discuss and monitor the issues and pressures affecting blood inventory, supply management across domestic and imported products, and measures in place to ensure the stability of these essential resources in the face of ongoing challenges.

The Board has considered and provided advice on the Department of Health and Aged Care commissioned independent review of the national blood arrangements and administrative processes. The Board strongly supports the review of the governance arrangements and frameworks underpinning the national blood arrangements to ensure they are consistent, modern and fit for purpose. The review of the key governance documents, including the National Blood Agreement, the *National Blood Authority Act 2003*, and advisory structures, will ensure the arrangements are aligned with current legislative requirements and national blood sector policy priorities.

At its December 2022 meeting the Board received an excellent presentation on new treatments for haemophilia and other bleeding disorders. Professor Huyen Tran, Director of the Ronald Sawers Haemophilia Treatment Centre and the Clinical Thrombosis Service, and Chair of the Australian Haemophilia Centre Directors' Organisation, delivered the presentation. Professor Tran shared his experience with gene therapy use in haematology and provided an opportunity to discuss the exciting and complex work being undertaken in the field.

The NBA continues to demonstrate its collaborative relationship with Lifeblood. The resumption of the annual joint meeting of the NBA Board and Lifeblood Board was an opportunity to discuss issues and strategies regarding donor engagement and retention as we aim to return donor activities to pre-pandemic levels and strive for further improvements. The NBA Board continues to support initiatives by Lifeblood to increase, diversify and improve blood inventory levels and increase plasma collections.

The Board has contributed strategic insights regarding the NBA's organisational and corporate arrangements, the prioritisation of its work programs, and risk management strategies. This advice included input on:

- ◆ the 2022–23 Corporate Plan and Business Plan, including future strategic priorities
- ◆ ICT systems and infrastructure, and cyber security
- ◆ employee health, safety and wellbeing management
- ◆ the response to the 2022 APS employee census.

As we enter a phase where bespoke blood sector systems and the NBA's contract management and supply planning tool are at or approaching end of life, the Board strongly supports the NBA's proposed ICT strategy to steer initiatives and investments over the next five years. This forward-thinking strategy will involve investing in, and securing long-term funding from governments for, the next generation of critical blood systems to bring about improvements in services to the blood sector. The Board is also pleased by efforts undertaken over the past year that have greatly improved the resilience of our critical digital systems, our infrastructure and, importantly, our cyber resilience.

I sincerely thank my fellow members of the Board for their support, valuable advice, and contributions on all matters considered over the year. In particular, I would like to thank Professor Alison Street AO for her outstanding six years of board service. Her guidance and expertise has been invaluable. Members have contributed their time to committees and specialist working groups; participated in various reviews and consultation panels; and advised the NBA on other issues pertinent to their expertise. Members' stakeholder engagement has fortified relationships, promoted the NBA's role, and contributed to the agency's achievements. I look forward to the contributions and insights each member will bring to the Board as we work together to provide guidance and support to the NBA and the blood sector community.

The Board is also most appreciative of the interest in the work of the NBA by Assistant Minister Ged Kearney.

In closing, the Board and I express our gratitude to the Chief Executive, John Cahill and all our NBA staff, who continue to be deeply committed individually and collectively to saving and improving Australian lives by providing a world-class blood supply. We recognise the dedication and hard work of the team, and we are grateful for their incredible contributions every day.



Amanda Rischbieth AM

Chair

National Blood Authority Board

Expansion of the blood donor panel

In February 2023, NBA Board Chair Dr Amanda Rischbieth AM was able to donate blood for the first time in over 20 years when Lifeblood became able to accept donations from people who lived in the UK during the 1980s and 1990s.

The indefinite deferral of donations from people in this category had been implemented in Australia in December 2000 in response to the outbreak of variant Creutzfeldt-Jakob disease (vCJD) in the UK. It prevented anyone who had spent a total of six months or more in the UK between January 1980 and 31 December 1996 from donating blood.

On 25 July 2022, the Australian Red Cross Lifeblood, with approval from the Therapeutic Goods Administration, removed the deferral. Since then, almost 41,000 unique donors in the previously excluded category have attended more than 131,600 donation appointments, resulting in more than 116,000 additional collections. This is a very significant number and represents some 8 per cent of all attendances nationally.

Dr Rischbieth donated at the Garran Donor Centre in Canberra. She left wearing a stylish arm bandage designed by Australian fashion designer and breast cancer survivor



Dr Amanda Rischbieth AM

Camilla Franks as part of Lifeblood's 'True Colours' campaign series. Camilla's bandage is to raise awareness of the importance of blood donation for cancer treatment and to support those living with cancer. It was released in donor centres to align with World Cancer Day on 4 February 2023.

Managing risk

The NBA is responsible for ensuring the adequate, safe, secure and affordable supply of blood, blood products and blood services. To facilitate this, the NBA has contingency and risk mitigation measures in place to ensure the continuity of blood supply, as well as operational preparedness through business continuity planning.

In 2022–23 we continued to focus on strengthening risk management arrangements. To this end, we:

- ◆ initiated a review of the NBA’s risk management framework in response to our COVID-19 related experiences and to the 2023 Commonwealth Risk Management Policy and supporting documentation
- ◆ reinvigorated the review of the National Blood Supply Contingency Plan; this includes examining the plan’s relationship to Commonwealth emergency management activities and state and territory contingency planning
- ◆ commenced a review of the Business Continuity Framework and Plan, ICT Disaster Recovery Plan, fraud risk management, and cyber security risk assessments and mitigations
- ◆ continued to review and update the supply risk mitigation measures for the supply of blood and blood products
- ◆ conducted a full review of the agency’s corporate risk register
- ◆ completed the 2023 Comcover Benchmarking Survey in March 2023 and reviewed the results of the benchmark report made available to the NBA in May 2023.

National blood supply contingency plan

In 2019 the NBA reviewed the National Blood Supply Contingency Plan (NBSCP), consulting extensively with suppliers and stakeholders. The review found that the NBSCP is well established within the Australian blood sector but would benefit from a structured testing and exercise program, as well as closer integration with other contingency planning arrangements at both the Commonwealth and state and territory levels.

During 2020–21 the NBA worked with a consultant and a working group of representatives from jurisdictions to further develop the NBSCP, including planning a testing and simulation program. The NBA did not progress development of this program in 2021–22 and 2022–23, as key stakeholders needed to prioritise the immediate risks associated with COVID-19 pandemic management.

The NBA is currently developing a work plan for the next stages of this project and will continue working with jurisdictions to review the NBSCP and develop a plan of exercises for the simulation program to ensure the NBSCP provides the highest level of operational preparedness for a safe and secure blood supply for Australian patients.

Business continuity framework

The NBA continues to maintain contingency and continuity measures of the highest standard to ensure:

- ◆ continuity of supply of blood and blood related products and services
- ◆ business operational preparedness to meet the requirements for the continuation of NBA services
- ◆ information and communication.

Information and communications technology disaster recovery plan

The NBA's ICT Disaster Recovery Plan contains detailed instructions to return critical ICT services to use should a major disruption occur.

The NBA's systems are designed to be resilient and can be run from either of the organisation's two data centres if necessary. In 2022–23 the NBA continued to demonstrate its ability to work from locations other than the main office as the need arose, as has been required throughout the COVID-19 pandemic.

The NBA's continuous review of the ICT Disaster Recovery Plan is ongoing. In 2022–23 we delivered a new cloud-based backup solution and conducted a thorough test of our backup and restore capabilities to ensure the recovery objectives of the agency can be met.

Blood supply continuum

While 2022–23 saw a move into a recovery phase following the COVID-19 pandemic, the year presented challenges with supply that we had never seen before. The pressure on blood inventory remains a global issue and is not unique to Australia.

Through efficient management of collection and supply contracts, the NBA has successfully navigated several challenges in the supply chain resulting from increased demand for red blood cells, coupled with reduced donor attendance and unusual patterns of demand during and after the COVID-19 pandemic. Despite these challenges, the NBA has been able to maintain a safe, secure and affordable supply of blood and blood related products to patients in Australia.

Alongside an increased demand for red blood cells, plasma collection during 2022–23 was significantly below targets. This led to decreased production of domestic immunoglobulin. Through a combination of analysing data from the NBA's own sources and drawing on established relationships with stakeholders and suppliers, we were able to review detailed information that allowed intensive monitoring of supply, demand and inventory trends to effectively respond to changing patterns. Utilising its arrangements with domestic and imported immunoglobulin suppliers, the NBA has carefully managed the allocation of products to new patients and, where appropriate and necessary, successfully switched existing patients to equivalent products to ensure uninterrupted clinical treatment.

The NBA has focused on supporting the implementation of several measures to increase both whole blood and plasma donations. These measures include opening new Lifeblood donor centres, major Lifeblood advertising and marketing campaigns, donor retention initiatives such as the Lifeblood Gifts trial, and the removal of the indefinite deferral for donors who lived in the UK in the 1980s and 1990s.

The NBA's response to the challenges facing the blood sector this year has demonstrated that effective data monitoring and contract management, alongside good working relationships, is key to ensuring Australia continues to maintain a world-class supply of blood products. This experience is also a good reminder that early activation of risk mitigation measures when unusual supply or demand patterns are observed allows for the uninterrupted supply of life-saving treatment to patients.



Left to right: Adjunct Professor Stephen Cornelissen AM, Lifeblood CEO, with the Hon Ged Kearney, Assistant Minister for Health and Aged Care, and Dr Anna Peatt, former NBA Deputy Chief Executive, at the official opening of the new Lifeblood Donor Centre in Brunswick, Victoria, on 20 December 2022.



Left to right: NBA Chief Executive John Cahill with the NSW Governor, Her Excellency the Hon Margaret Beazley, at the official opening of the new Lifeblood Donor Centre at Marrickville, NSW, January 2023.

Gifting of retired blood equipment

In 2023 the NBA supported Lifeblood to gift four obsolete blood mixer units to two separate veterinarian services.

These units are designed to weigh blood during a donation and to rock the blood to ensure it is mixed with anti-coagulation product. The veterinarian services identified to receive them are Animal Emergency Services, Tanawha (Queensland) and Veterinary Specialist Services, Carrara (Queensland).

The recipients will use the blood mixer units to improve their processes for blood extraction from animals in their care for the purpose of producing animal blood transfusion products.

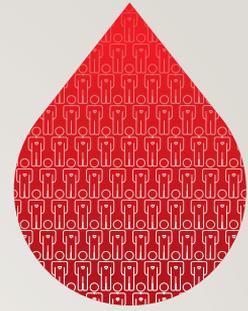
Lifeblood is funded by all Australian governments, and the NBA has a responsibility on behalf of the governments to ensure the appropriate disposal of assets. The gifting of these retired assets was consistent with the requirements of the *Public Governance, Performance and Accountability Act 2013* and with relevant government policy objectives.

The units had reached end of life for use by Lifeblood and had been replaced under a planned replacement program. The gifting of the units had no negative impact on Lifeblood. The gift enables their continued use for worthwhile purposes and is a great outcome for all parties.



Left to right: Danielle McLeod (Lifeblood Session Leader), Kimberley Weir (Veterinary Specialist Services, Carrara) and Baden Mendes (Lifeblood Session Leader).

PART 2



Annual performance

Annual Performance Statements

Strategy 1: Provide a safe, secure and affordable supply of blood and blood related products and services

Strategy 2: Drive performance improvement in the Australian blood sector

Strategy 3: Promote a best practice model of the management and use of blood and blood related products and services

Strategy 4: Support a sustainable blood sector

Strategy 5: Be a high-performing organisation



Annual Performance Statements

The performance reporting format for the National Blood Authority (NBA) for 2022–23 reflects the annual performance statement structure set out in the relevant Department of Finance guidelines (Resource Management Guide No. 135 *Annual reports for non-corporate Commonwealth entities*).

Accountable authority statement

As the accountable authority of the National Blood Authority, I present the 2022–23 Annual Performance Statements of the National Blood Authority, as required under paragraph 39(1)(a) of the *Public Governance, Performance and Accountability Act 2013* (PGPA Act). In my opinion, these annual performance statements are based on properly maintained records, accurately reflect the performance of the entity and comply with subsection 39(2) of the PGPA Act.



John Cahill
Chief Executive
National Blood Authority

Introductory statement

As required under the PGPA Act, this part of the annual report outlines the NBA’s actual performance results against the planned performance criteria set out in the Health Portfolio Budget Statements 2022–23 (PBS) and the NBA’s Corporate Plan for 2022–23.

In accordance with paragraph 17(2)(b) of the Public Governance, Performance and Accountability Rule 2014 (PGPA Rule), the National Blood Authority Audit and Risk Committee has reviewed the National Blood Authority’s performance reporting as part of its functions and considers the reporting appropriate.

Performance framework

In pursuing its vision in 2022–23, the NBA worked to deliver against the outcome, program and performance measures outlined in the 2022–23 PBS. The NBA did this through the three objectives and five strategies articulated in our Corporate Plan 2022–23 to 2025–26.

Outcome

Access to a secure supply of safe and affordable blood products, including through national supply arrangements and coordination of best practice standards within agreed funding policies under the national blood arrangements.

Program contributing to the outcome

Program 1.1: National Blood Agreement Management

The NBA works to save and improve Australian lives through a world-class blood supply that is safe, secure, affordable and well-managed.

Objectives

- ◆ Secure the supply of blood and blood products
- ◆ Improve risk management and blood sector performance
- ◆ Promote the safe and efficient use of blood and blood products

Strategies

1. Provide a safe, secure affordable supply of blood and blood related products and services
2. Drive performance improvements in the Australian blood sector
3. Promote a best practice model of the management and use of blood and blood related products and services in Australia
4. Support a sustainable blood sector
5. Be a high-performing organisation

These strategies align with the performance measures in the PBS as shown in Table 2.1.



TABLE 2.1 Alignment of PBS performance measures with the Corporate Plan 2022–23 to 2025–26

PBS Outcome 1: Access to a secure supply of safe and affordable blood products, including through national supply arrangements and coordination of best practice standards within agreed funding policies under the national blood arrangements		
Performance measures (PBS)	2022–23 Targets (PBS)	Strategies (Corporate Plan)
A safe, secure and affordable supply of blood and blood related products for Australia	Blood and blood related products are available to meet clinical requirements. Events that activate the National Blood Supply Contingency Plan, if any, are managed effectively and efficiently by the NBA. Multiple contracts from diverse sources for relevant blood products are in place and managed to ensure security of supply.	Strategy 1: Provide a safe, secure affordable supply of blood and blood related products and services
The supply outcome is within 5% of the National Supply Plan & Budget approved by governments	<5% variation	Strategy 1: Provide a safe, secure affordable supply of blood and blood related products and services
Appropriate access and use of immunoglobulin (Ig), as indicated by clinical demand against approved access criteria	<9% growth in Ig demand under approved criteria	Strategy 1: Provide a safe, secure affordable supply of blood and blood related products and services
National performance reporting and benchmarking across the Australian blood sector	Publish performance reporting and benchmarking information on the NBA website for the blood sector community	Strategy 2: Drive performance improvements in the Australian blood sector
		Strategy 3: Promote a best practice model of the management and use of blood and blood related products and services
		Strategy 4: Support a sustainable blood sector
		Strategy 5: Be a high-performing organisation

Summary of overall performance

The NBA manages and coordinates arrangements for the supply of blood, blood products and blood services on behalf of all Australian governments in accordance with the National Blood Agreement.

The primary policy objectives of the National Blood Agreement signed by the Commonwealth, state and territory governments are:

- ◆ to provide an adequate, safe, secure and affordable supply of blood products, blood related products and blood related services
- ◆ to promote the safe and high-quality management and use of blood products, blood related products and blood related services in Australia.

Tables 2.2 and 2.10 to 2.13 summarise the NBA's performance results for 2022–23. The performance criteria in these tables are the key performance indicators (KPIs) from the 2022–23 Corporate Plan. For KPIs that have associated performance targets in the 2022–23 PBS, the PBS target is also specified.

Strategy 1:

Provide a safe, secure and affordable supply of blood and blood related products and services

The primary source of Australia’s blood supply is domestic collection – that is, collection from Australian donors. The Australian Red Cross Lifeblood undertakes the collection process under contract with the NBA. As there is a shortfall between the amounts of blood and blood products we can source domestically and the amounts we need, Australia also imports some blood products. We do this through multiple contracts managed by the NBA.

The NBA manages the national blood supply to ensure healthcare providers have sustainable, reliable and efficient access to blood and blood products needed for patient care. We ensure the security of blood supply by working with all Australian governments to set and manage an annual supply plan and budget, and by negotiating and managing blood supply contracts and arrangements with domestic and overseas suppliers. Blood supply needs to operate as a continuum, without interruption or oversupply, as blood must be available when it is needed and the usable life of blood and of many blood related products is short.

Ensuring a continuously adequate, safe, secure and affordable supply of blood and blood products requires the NBA to closely monitor and manage key issues, anticipate challenges and recognise and pursue opportunities. This includes issues relating to the clinical environment and its impact on the demand for blood and blood products, supply dynamics, the development of new products and services, the evolution of existing products and services, variability in product usage, the state of clinical knowledge, and associated research and development.

TABLE 2.2 Key performance indicators: Provide a safe, secure and affordable supply of blood and blood related products and services

Summary of results against 2022–23 key performance indicators	
<p>Availability of blood and blood related products meets clinical requirements</p> <p>(PBS target: Blood and blood related products are available to meet clinical requirements. Events that activate the National Blood Supply Contingency Plan, if any, are managed effectively and efficiently by the NBA. Multiple contracts from diverse sources for relevant blood products are in place and managed to ensure security of supply)</p>	<p>Met</p> <p>Blood and blood products were available to meet clinical demand.</p> <p>There were no events that activated the National Blood Supply Contingency Plan.</p>
<p>Multiple contracts from diverse sources for blood products are in place and well-managed</p> <p>(PBS target: <5% variation)</p>	<p>Met</p> <p>In 2022–23 the NBA managed 18 blood and blood product supply contracts and arrangements.</p>

Summary of results against 2022–23 key performance indicators

<p>Provision and use of Ig is consistent with access criteria</p> <p>(PBS target: <9% growth in Ig demand under approved criteria)</p>	<p>Met</p> <p>In 2022–23 the rate of growth of immunoglobulin (Ig) use was 7.9%.</p> <p>The growth rate of Ig use has decreased with implementation and operation of the governance framework, including criteria for access, from an average of 11% between 2006–07 and 2017–18.</p>
<p>Collection and production yield for domestic Ig is maximised</p>	<p>Met</p>
<p>Discards as a percentage of net issues of red blood cells are less than 2.5%</p>	<p>Met</p> <p>Discards as a percentage of net issues of red blood cells were 1.2%.</p>
<p>Supply outcome is within 5% of the National Supply Plan and Budget approved by governments</p> <p>(PBS target: <5% variation)</p>	<p>Met</p> <p>Actual results were 1.6% (\$25.7 million) below the National Supply Plan and Budget.</p> <p>There were no contingency events during the reporting period that required the National Blood Supply Contingency Plan to be activated.</p> <p>The NBA continued to closely monitor the supply of blood and blood products to Australia and mitigated risk issues in response to COVID-19.</p>

Performance criteria source: Health Portfolio Budget Statements 2022–23, pp. 314–316; NBA Corporate Plan 2022–23 to 2025–26, p. 26.

Delivery of Strategy 1

The NBA manages the national blood supply to ensure healthcare providers have sustainable, reliable and efficient access to blood and blood products needed for patient care. The NBA ensures blood supply security by working with all Australian governments to set and manage an annual supply plan and budget, and by negotiating and managing blood supply contracts and arrangements with domestic and overseas suppliers.

The NBA was able to meet all 2022–23 key performance indicators.

National Supply Plan and Budget

A key element of the NBA's role in ensuring security of supply is to develop, coordinate and monitor the annual National Supply Plan and Budget (NSP&B), including obtaining annual approval from Health Ministers.

This is achieved by:

- ◆ developing a national estimate of product demand for the year
- ◆ liaising with states and territories to refine the estimated demand for products
- ◆ collecting and distributing data on products issued and reporting to jurisdictions on variations to the approved supply plan
- ◆ intensively managing products to meet clinical demand if they are in short supply.

Performance against the 2022–23 NSP&B

Throughout 2022–23, products were supplied to meet clinical demand, and supply risks were effectively managed.

The approved budget for 2022–23, covering supply and management of blood and blood products and services under contract, was \$1,594 million. Of this, \$741.3 million was allocated for fresh blood products and plasma collection, and \$831.1 million for plasma-derived and recombinant products. A budget of \$21.8 million was provided for activities supporting the appropriate use and management of blood, blood products and blood related services. This included:

- ◆ printing and distribution of the Patient Blood Management Guidelines
- ◆ administering the Australian Bleeding Disorders Registry (ABDR)
- ◆ maintaining the Australian Haemophilia Centre Directors' Organisation (ACHDO)
- ◆ funding BloodSafe eLearning Australia
- ◆ managing lg governance arrangements
- ◆ maintaining and enhancing blood sector ICT systems
- ◆ conducting assessment and review of blood products
- ◆ maintaining the day-to-day operations of the NBA.

Table 2.3 shows actual expenditure on blood and blood products from 2018–19 to 2022–23, by product type and by supplier.

TABLE 2.3 Blood and blood products purchased by product category 2018–19 to 2022–23

Supplier	Products purchased	2018–19 (\$m)	2019–20 (\$m)	2020–21 (\$m)	2021–22 (\$m)	2022–23 (\$m)
Australian Red Cross Lifeblood	Fresh blood products	667.94	651.50	698.46	708.83	685.83
CSL Behring (Australia) Pty Ltd	Domestic plasma products	263.02	269.56	302.73	325.92	311.83
	Imported plasma and recombinant products	17.52	23.11	44.48	47.71	28.79
	Imported Ig	116.91	134.42	155.93	176.39	270.96
Takeda Pharmaceuticals Australia Pty Ltd (formerly Shire Australia Pty Limited)	Imported plasma and recombinant products	39.11	37.09	18.70	11.10	12.65
	Imported Ig	0.00	0.00	2.93	3.30	19.20
Roche Products Pty Ltd	Emicizumab (bifunctional monoclonal antibody)	0.00	0.00	25.74	59.05	67.20
Pfizer Australia Pty Ltd	Imported plasma and recombinant products	37.56	36.60	13.58	10.27	8.87
Novo Nordisk Pharmaceuticals Pty Ltd	Imported plasma and recombinant products	35.57	36.73	32.91	28.37	26.69
Sanofi-Aventis Australia Pty Ltd	Imported plasma and recombinant products	19.72	21.28	21.00	22.67	25.10
Octapharma Pty Ltd	Imported Ig	0.00	0.00	2.98	34.07	40.79
Grifols Australia	Imported Ig	38.70	44.87	46.80	43.29	68.28
	Diagnostic reagent products	0.38	0.36	0.40	0.47	0.39
Paragon Care Group Australia Pty Ltd (formerly Immulab Pty Ltd)	Diagnostic reagent products	3.00	2.98	3.04	2.98	2.87
Ortho-Clinical Diagnostics (Johnson & Johnson Medical Pty Ltd)	Diagnostic reagent products	0.79	0.81	0.71	0.62	0.53
Bio-Rad Laboratories Pty Ltd	Diagnostic reagent products	0.54	0.58	0.58	0.66	0.96
Total purchases of blood and blood products		1,240.77	1,259.89	1,370.98	1,475.70	1,570.95

* Ig = immunoglobulin

Contract management to secure supply

Effective contract management is essential to the NBA's success in securing supply of blood, blood related products and blood related services.

Contracts are developed in accordance with the Commonwealth Procurement Rules and are managed in accordance with best practice guidance for contract management, including the Department of Finance guideline on developing and managing contracts.

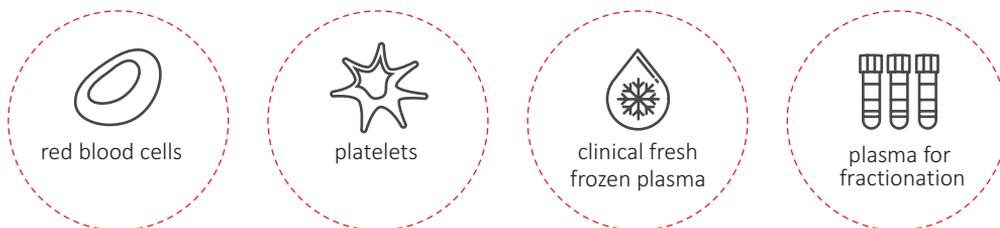
In 2022–23 the NBA managed 18 blood and blood product supply contracts and arrangements.

To secure the supply of fresh blood products nationally, the NBA manages a Deed of Agreement between the Australian Red Cross Society, represented by the Australian Red Cross Lifeblood, and the Commonwealth of Australia represented by the NBA.

To secure Australia's supply of plasma and recombinant products, the NBA managed 17 contracts with commercial suppliers in 2022–23 (see Table 2.3).

Fresh blood products

The fresh blood products supplied in 2022–23 are summarised in Appendix 3. The four main products were:



The Deed of Agreement that covers Lifeblood's operations ensures Lifeblood is funded for all reasonable costs incurred in the collection, processing and supply of blood and services covered by the Deed. The trend in fresh blood expenditure summarised in Table 2.4 reflects changes in the demand for some fresh blood products over time, together with the effect of the agreed funding model that underpins the operations and sustainability of Lifeblood.

Key factors that influenced changes in 2022–23 were:

- ◆ increased demand for red blood cells
- ◆ annual price indexation of 2.22 per cent
- ◆ decrease in the collection of plasma for fractionation by 78.9 per cent against a target of 1,068.2 tonnes.

TABLE 2.4 Fresh blood expenditure since 2013–14

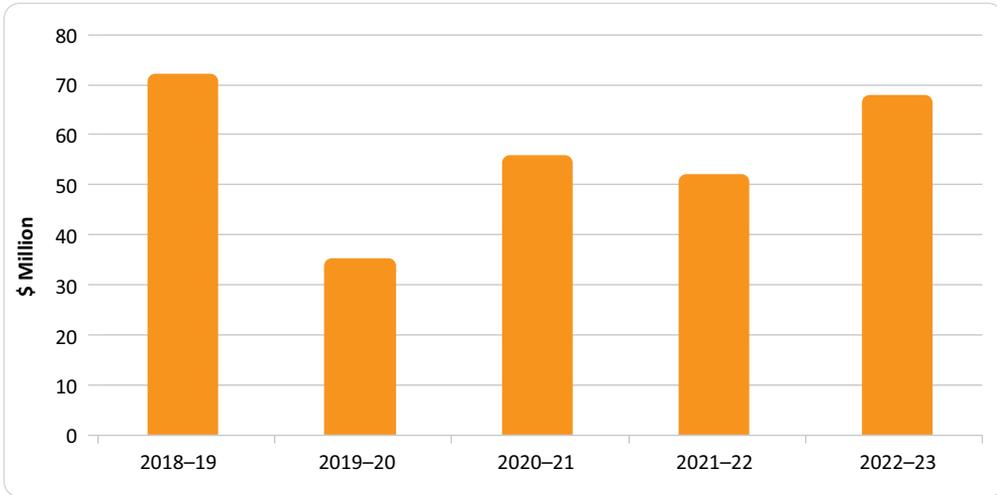
Year	Amount (\$m)	Growth (%)
2013–14	583.1	6.2
2014–15	547.1	-6.2
2015–16	588.4	7.5
2016–17	582.4	-1.0
2017–18	620.7	6.6
2018–19	667.9	7.6
2019–20	651.5	-2.5
2020–21	698.5	7.2
2021–22	708.8	1.5
2022–23	685.8	-3.2
Total	6,883.5	2.4% average

The expenditure growth summarised in Table 2.4 has been absorbed within the annual budget funding approved by governments. Continuous improvements and efficiencies in Lifeblood’s operations have enabled Lifeblood to return operating savings to governments. The cost of fresh blood products issued under NBA arrangements in 2022–23 totalled \$683.1 million, against a budget of \$741.3 million. The savings to governments in 2022–23 totalled \$58.2 million. The key reasons for this are:

- ◆ The collection of plasma for fractionation fell short of the 2022–23 target – 842.4 tonnes were supplied during the year, against a target of 1,068.2 tonnes. This shortfall is primarily due to the ongoing impacts of COVID-19 and increased demand for red blood cells, which resulted in Lifeblood needing to switch plasma donations to whole blood donations on occasion.
- ◆ Demand for red blood cells, platelets and clinical fresh frozen plasma was lower than budget.
- ◆ Lifeblood returned an operating surplus of \$9.2 million to government, as highlighted in Figure 2.1. This was the result of continuous improvements and efficiencies in Lifeblood’s operations. The total surplus for 2022–23 was \$11.2 million. However, the NBA approved a proposal under the funding arrangements to retain \$2 million of the surplus to support various activities focused on growing the donor panel.



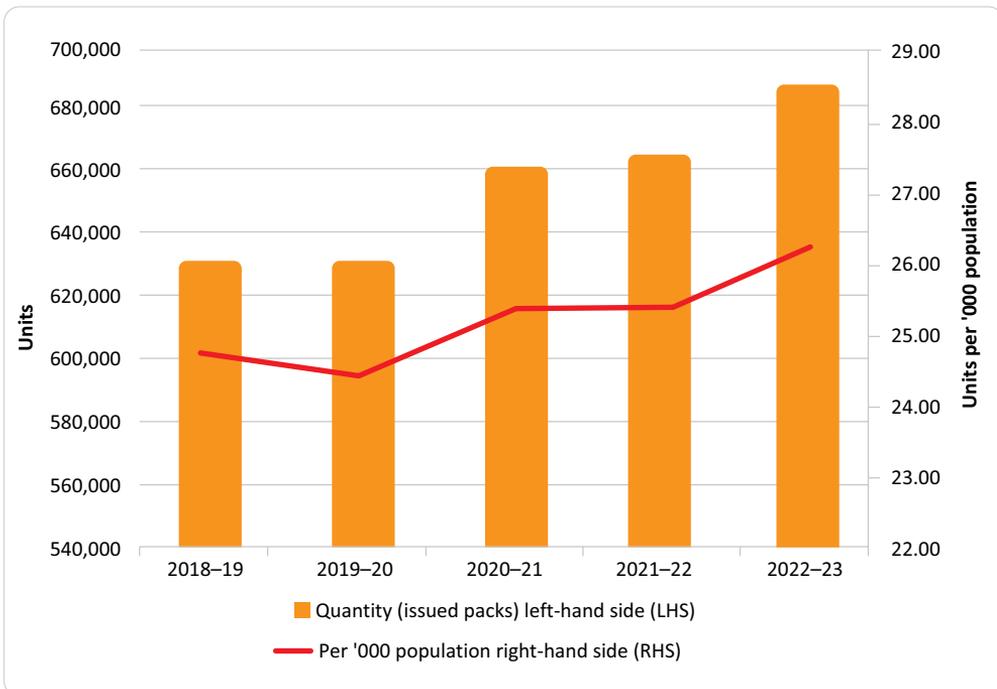
FIGURE 2.1 Savings to government for fresh blood products 2018–19 to 2022–23



Red blood cells

Red blood cells comprise approximately 15.8 per cent of total blood and blood product expenditure and are the second largest item in the total cost of fresh products, after plasma for fractionation. Figure 2.2 illustrates an increase of 3.5 per cent in red blood cells issued compared with 2021–22. This increase appears to be driven by the ongoing effects of COVID-19 and associated increases in the overall demand for health care generally.

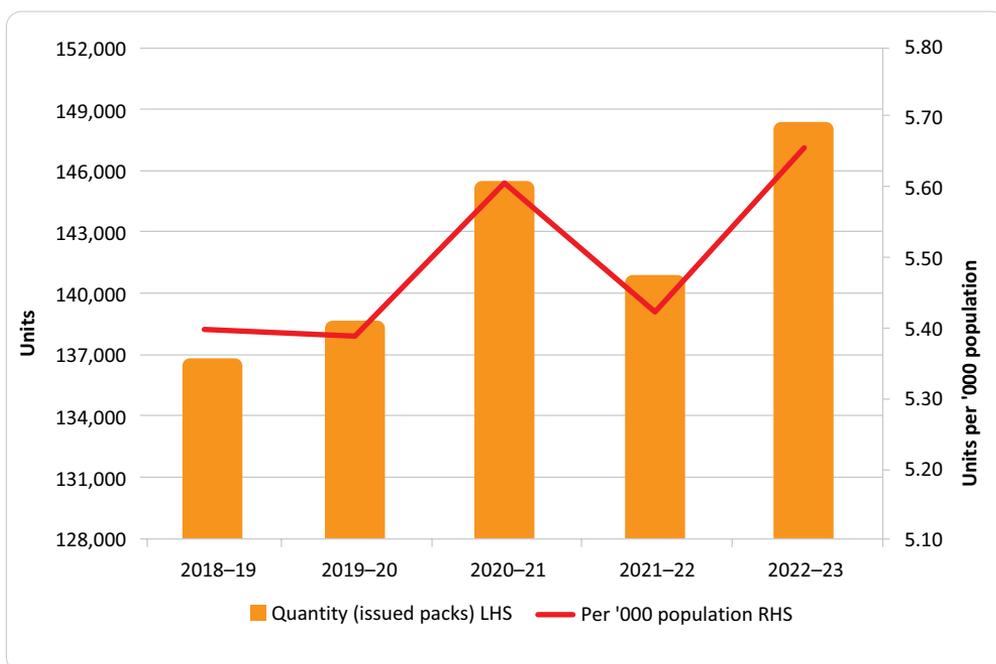
FIGURE 2.2 Red blood cells issued by Lifeblood 2018–19 to 2022–23 per '000 population



Platelets

Platelets make up 3.2 per cent of total blood and blood product expenditure. Figure 2.3 illustrates a 5.3 per cent increase in platelets issued compared with 2021–22. Platelets are derived from both apheresis and whole blood collections. In 2022–23, platelets issued comprised 32.5 per cent from apheresis (30.5 per cent in 2021–22) and 67.5 per cent from whole blood (69.5 per cent in 2021–22).

FIGURE 2.3 Platelets issued by Lifeblood 2018–19 to 2022–23 per '000 population



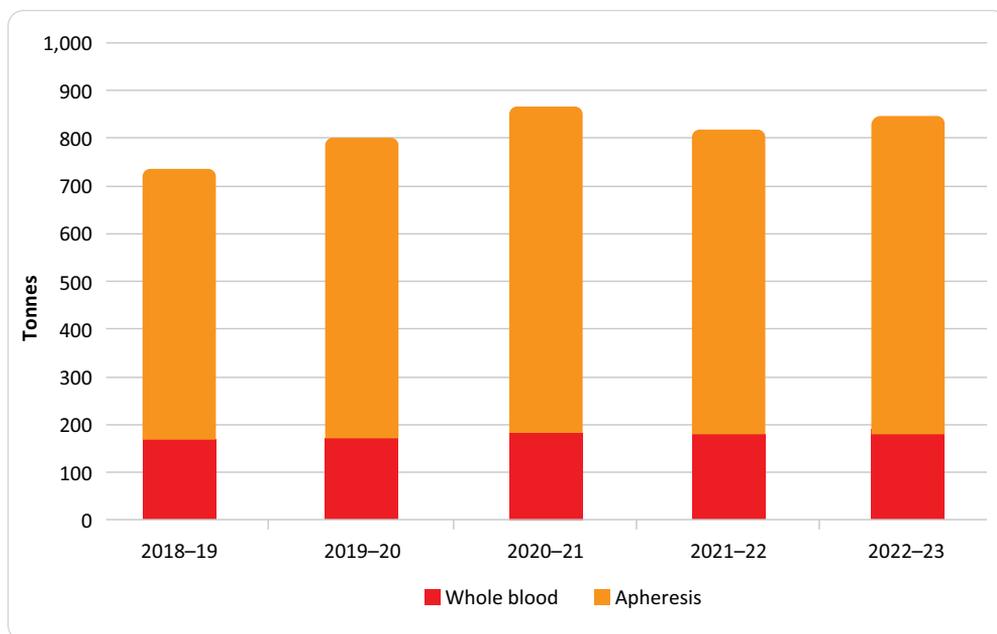
Plasma collection

Lifeblood collects plasma for fractionation to supply to CSL Behring for the manufacture of plasma-derived products. Plasma for fractionation is the largest item in the total cost of blood, representing 18.0 per cent of total expenditure on blood and blood products. The supply of plasma for fractionation for the last five years is shown in Figure 2.4.

In 2022–23, Lifeblood supplied 842.4 tonnes of plasma, against a target of 1,068.2 tonnes. This comprised 187.8 tonnes of plasma from whole blood and 654.6 tonnes of plasma-derived from apheresis. As was the case in 2021–22, plasma collections during 2022–23 were significantly affected by increased demand for red blood cells and fluctuating donor attendance, which required Lifeblood to shift its efforts from plasma to whole blood donations at various times during the year.

The effect of this can be seen in the ratio of the supply of whole blood plasma to the supply of apheresis plasma for fractionation.

FIGURE 2.4 Whole blood plasma and apheresis plasma for fractionation 2018–19 to 2022–23



Contract with Lifeblood

A Deed of Agreement is in place between the NBA (representing all Australian governments) and the Australian Red Cross Society. The collection, processing and supply of fresh blood products and services and plasma for fractionation under the Deed are performed by Australian Red Cross Lifeblood (Lifeblood), which is an operating division of the Australian Red Cross Society.

Under the national blood arrangements, Australian governments support Lifeblood as the sole supplier of fresh blood products in Australia. The provision of fresh blood products under the Deed is an essential clinical service that saves and improves lives every day. This Deed is one of the most important and the largest of the contracts managed by the NBA. Accordingly, the NBA has a continuous program of interaction and reporting with Lifeblood to ensure its performance and accountability under the Deed.

The Deed commenced on 1 July 2016 and continues for nine years, to 30 June 2025. It includes a cyclical three-year funding and services agreement. Funding is determined using an Output Based Funding Model (OBFM). Funding for Lifeblood in 2022–23 was \$685.8 million, a decrease of \$22.9 million from 2021–22.

Performance

The performance of Lifeblood is a key element in meeting blood sector objectives. The requirements of Lifeblood are articulated in the provisions of the Deed and in a Statement of Expectations. Lifeblood’s performance against selected indicators is shown in Table 2.5.

TABLE 2.5 Lifeblood performance for key indicators 2022–23

Domain	Indicator		2021–22 result	2022–23 Lifeblood target	2022–23 result
Donor management	New donors	Whole blood and apheresis (combined)	93,530	125,000	116,951
Supply chain management	Number of days within inventory bands		278	365	208
	Red cell yield (proportion of collections converted to supply)		92.4%	≥90%	92.3%
	Age of red cells at issue (days)		5.1	≥8.0	4.7
	Order fulfilment red cells		95%	≥95%	95.0%
Quality and level of service	Health provider satisfaction with Lifeblood (mean score out of 10)		9.3	9.2 ≥8/10	9.3
Finance	Main operating program financial result		\$25.3m surplus	\$1.7m	\$11.2m*

* Result unlikely to change but subject to audit clearance.

Activities progressed under the Deed during 2022–23 include:

- ◆ reporting by Lifeblood against the Statement of Expectations for 2022–23 to 2024–25, including specific Lifeblood key performance indicators
- ◆ adherence to the third Funding and Services Agreement, covering the period 2022–23 to 2024–25
- ◆ adherence to the fifth cycle of the OBFM for the period 2022–23 to 2024–25.

Plasma and recombinant products

The cost of plasma-derived and recombinant blood products issued under NBA arrangements in 2022–23 totalled \$864.4 million, an increase of \$76.40 million (9.7 per cent) from 2021–22. The main reason for this increase was a 1 per cent increase in demand for Ig (\$105.8 million). This was \$61.7 million different from the NSP&B forecast.

Management of the National Fractionation Agreement

The National Fractionation Agreement for Australia (NaFAA) governs the fractionation of human blood products by CSL Behring using plasma collected by Lifeblood from Australian donors. The NaFAA commenced on 1 January 2018 and has an expiry date of 31 December 2026.

The contract terms provide for a mid-point review to ensure the performance requirements are being met, performance indicators remain relevant, and the products being supplied under the arrangements meet the clinical needs of patients in Australia. This review was finalised in April 2023 and found that the agreement continues to perform. The review confirmed that the contract arrangements should remain in place for the original term of the contract.

Under the NaFAA in 2022–23:

- ◆ 842.4 tonnes of Australian plasma was pooled for fractionation
- ◆ expenditure on products totalled \$311.8 million.

CSL Behring is expanding its manufacturing facility to align with global manufacturing processes. This will support the processing of Australia’s growing plasma collections and allow increased capacity to ensure that supply of domestically produced plasma products remains safe and secure into the future. As a result, five of Australia’s plasma products are changing between calendar years 2023 and 2024. The transition of the first two products under this process started in 2022–23 and involved albumin 20 per cent (Albumex 20 to Alburex 20 AU) and intravenous Ig 10 per cent (Intragam 10 to Privigen AU). The NBA has been working with CSL Behring and the Lifeblood to implement the transitions of these products and to ensure that Australian patients receive uninterrupted access to life-saving treatments throughout the period in which the new products are introduced.

Performance

The performance of CSL Behring against the NaFAA KPIs in 2022–23 is shown in Table 2.6. Sufficient supply of all products was maintained throughout 2022–23 despite some deviations from performance targets. The causes of these deviations were largely beyond CSL Behring’s control.

TABLE 2.6 CSL Behring NaFAA performance 2022–23

Description of performance measure	Target	Results				
KPI1 Plasma stewardship – ability to minimise loss of plasma during the manufacturing process or through loss or expiry of product	Target	Q1	Q2	Q3	Q4	
	Starting plasma (Ig)	≤2000kg	0kg	0kg	0kg	0kg
	Starting plasma (hyperimmune)	≤200kg	0kg	0kg	0kg	0kg
	Failed production batches (Ig)	0kg	0kg	0kg	0kg	0kg
	Failed production batches (hyperimmune)	0kg	0kg	411.144kg	0kg	0kg
	Low-yielding production batches (Ig)	0kg	0kg	880.437kg	25.155kg	15.867kg
	Loss or expiry of products (Ig)	0kg	0kg	0kg	0kg	0kg
	Loss or expiry of products (hyperimmune)	0kg	0kg	0kg	0kg	0kg
KPI2 Production yield – average production yield for IVIg and SCIg	Not published					
KPI3 Management of required inventory levels – the maintenance of agreed inventory levels to ensure the continuity of supply	Target	Q1	Q2	Q3	Q4	
	Minimum starting plasma inventory	Not active in 2022–23				
	Products in inventory	100%	Not achieved ¹	Not achieved ¹	Not achieved ¹	Not achieved ¹
	Products in the national reserve	100%	Achieved	Achieved	Achieved	Achieved
KPI4 Fulfilment of orders – the fulfilment of orders on time, as ordered and in accordance with contract requirements	Target	Q1	Q2	Q3	Q4	
	Orders by distributor (Lifeblood) and non-distributor	98%–100%	99%	98%	99%	98%
	KPI5 Shelf life of national reserve products – the maintenance of minimum shelf life requirements for all products in the national reserve	Target	Q1	Q2	Q3	Q4
	100%	Not achieved ²	Not achieved ²	Not achieved ²	Achieved	

IVIg = intravenous immunoglobulin; SCIg = subcutaneous immunoglobulin

¹ Some contract deviation was required mainly due to circumstances beyond the reasonable control of CSL Behring.

² This contract deviation did not adversely impact overall supply.

Imported immunoglobulin products

To ensure security of supply, the NBA supplements domestically manufactured products with Ig products imported from overseas through a diverse set of suppliers.

There are now four contracts in place for the supply of imported Ig under the national blood arrangements. These contracts commenced progressively from 1 January 2021 and will continue for up to five years, with extension options available. The suppliers are CSL Behring, Grifols Australia Pty Ltd (Grifols), Takeda Pharmaceuticals Australia Pty Limited (Takeda) and Octapharma Pty Ltd (Octapharma). In 2022–23 the NBA expended a total of \$399.2 million under these contracts.

Product and supplier diversity is an important factor in ensuring that Australian health providers have adequate, safe and secure access to blood products needed for patient care. To increase product diversity in the Australian market, in May 2023 an additional IVIg product, Kiovig, supplied by Takeda, was introduced for supply under the national blood arrangements. This addition has been positively received by Australian health providers.

Performance

The performance of imported Ig suppliers against the contractual KPIs for 2022–23 is shown in Table 2.7. Sufficient supply of products was maintained to meet demand during the year, and supply was not adversely affected by deviations in KPIs.

TABLE 2.7 Supplier performance 2022–23: imported immunoglobulin products

KPI	Performance	CSL Behring (Australia) Pty Ltd	Grifols Australia Pty Ltd	Octapharma Pty Ltd	Takeda Pharmaceuticals Australia Pty Ltd
KPI1	In-country reserve	Achieved	Achieved	Achieved	Achieved
KPI2	Shelf life on products delivered	Achieved	Achieved	Achieved	Achieved
KPI3	Delivery performance	Achieved	Achieved	Achieved	Achieved
KPI4	Reporting accuracy and timeliness	Achieved	Achieved	Achieved	Achieved

Imported plasma-derived and recombinant blood products

The NBA has contracts with suppliers for the importation of certain plasma-derived and recombinant blood products (referred to as the IPRP Deeds) to augment domestic supply where these products are not manufactured in Australia or domestic production cannot meet demand.

To manage the challenges that have emerged as a result of the COVID-19 pandemic and increase supply security, the NBA has worked even more closely with these commercial suppliers to ensure clinical demand is being met. This work includes diversifying and more actively managing emerging pressures through closer engagement with suppliers and health providers.

In 2022–23 the NBA managed IPRP Deeds with the following companies:

- ◆ CSL Behring (Australia) Pty Limited
- ◆ Novo Nordisk Pharmaceuticals Pty Limited
- ◆ Pfizer Australia Pty Limited
- ◆ Sanofi-Aventis Australia Pty Limited
- ◆ Takeda Pharmaceuticals Australia Pty Limited
- ◆ Roche Products Pty Limited.

In 2022–23 the NBA extended contracts for periods of up to three years with Takeda (FEIBA and Ceprotin) and Novo Nordisk (NovoSeven and NovoThirteen). Contracts with CSL Behring (Berinert, RiaSTAP, Fibrogammin, Rhophylac and BPL factor XI) were extended for up to five years.

The NBA also exercised the extension option for recombinant clotting factor VIII and IX product contracts with Takeda (Advate and Adynovate) and Pfizer (BeneFIX and Xyntha) for another year.

Expenditure under these contracts in 2022–23 totalled \$169.3 million.

Performance

The performance of suppliers under the IPRP Deeds in 2022–23 for each performance measure is summarised in Table 2.8. All suppliers attained a rating of achieved against the required performance levels, and sufficient supply of products was maintained to meet demand during the year.

TABLE 2.8 Supplier performance 2022–23: imported plasma and recombinant products

Performance measure	KPI1	KPI2	KPI3	KPI4
Sanofi-Aventis Australia Pty Ltd (Alprolix, Elocate)	Achieved	Achieved	Achieved	Achieved
Roche Products Pty Ltd (Hemlibra)	Achieved	Achieved	Achieved*	Achieved
CSL Behring (Australia) Pty Ltd (Rhophylac, RiaSTAP, Fibrogammin, Berinert)	Achieved	Achieved	Achieved	Achieved
CSL Behring (Australia) Pty Ltd (factor XI concentrate)	Achieved	Achieved	Achieved	Achieved
Novo Nordisk Pharmaceuticals Pty Ltd (NovoSeven, NovoThirteen)	Achieved	Achieved	Achieved	Achieved
Pfizer Australia Pty Ltd (Xyntha, BeneFIX)	Achieved	Achieved	Achieved	Achieved
Takeda Pharmaceuticals Australia Pty Ltd (FEIBA, Ceprotin)	Achieved	Achieved	Achieved	Achieved
Takeda Pharmaceuticals Australia Pty Ltd (Advate, Adynovate)	Achieved	Achieved	Achieved	Achieved

*In some instances, supplier performance deviated from the contracted requirements without material effect and was managed by the NBA.

Immunoglobulin supply and demand

Demand for Ig was growing at an annual rate of around 11 per cent up to and including 2017–18. This growth in demand slowed to 6.9 per cent in 2021–22 and increased to 7.9 per cent in 2022–23. The growth rates since 2018–19 have been the lowest annual rates of increase since 2004–05, when Australia first secured supply sufficiency through the importation of Ig by the NBA.

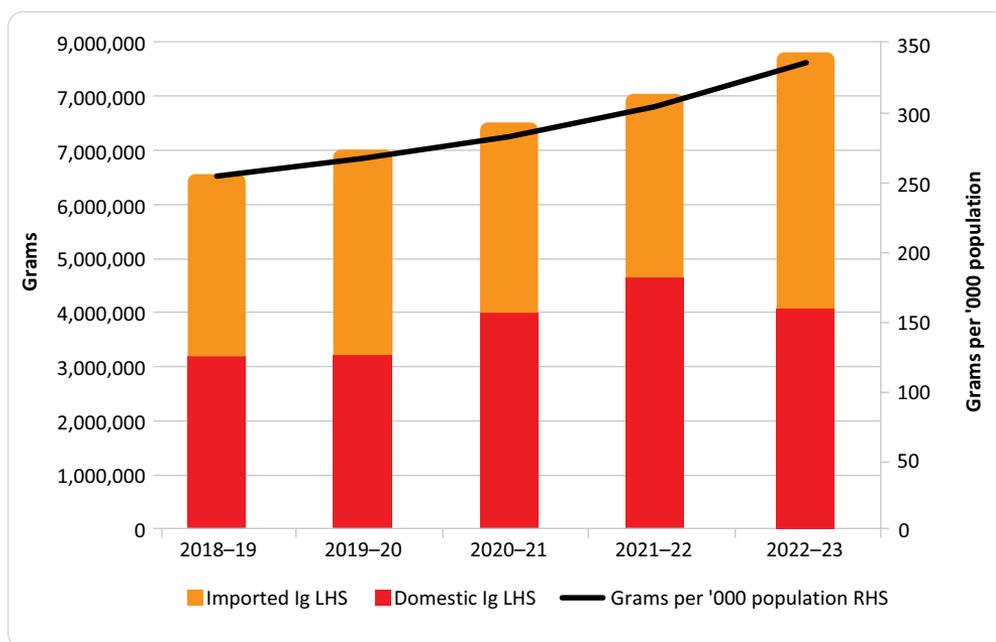
Growth in demand since 2018–19 is shown in Table 2.9.

TABLE 2.9 Immunoglobulin demand growth

2018–19	2019–20	2020–21	2021–22	2022–23
7.2%	6.7%	7.4%	6.9%	7.9%

In 2022–23, a total of 8.68 million grams of Ig was issued nationally at a cost of \$891.7 million (including the cost of plasma for fractionation). This equates to 56.9 per cent of total blood and blood product issues in Australia. Of this amount, 46.8 per cent was Ig produced in Australia and 53.2 per cent was imported. Figure 2.5 shows the annual growth in volume of Ig issued each year and the proportions of imported and domestic Ig.

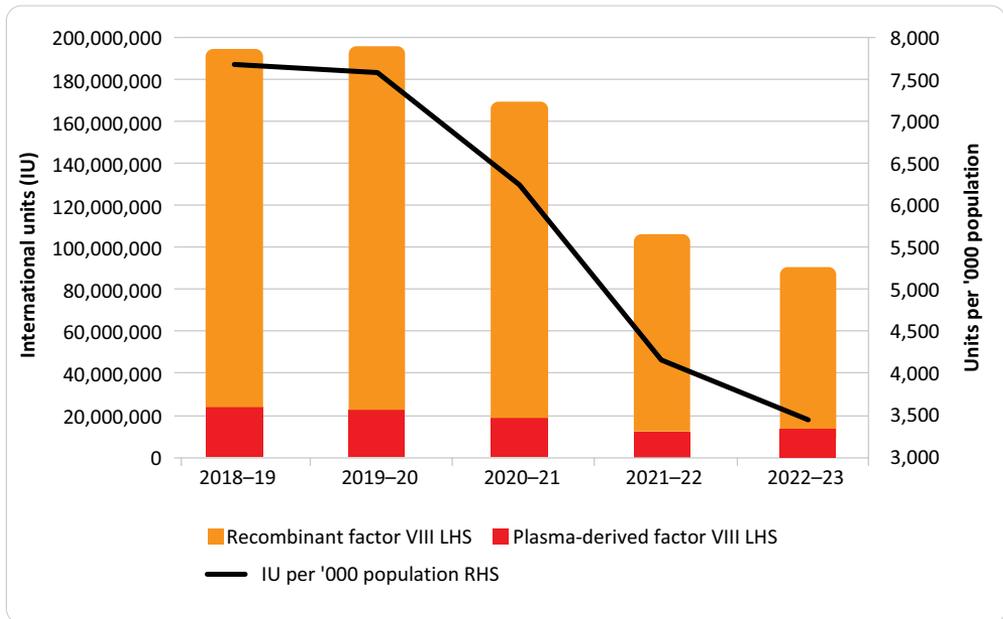
FIGURE 2.5 Immunoglobulin products issued 2018–19 to 2022–23 per '000 population



Clotting factors supply and demand

In 2022–23, clotting factors made up 12.7 per cent of total blood and blood product expenditure. As shown in Figure 2.6, the demand for factor VIII products decreased by 14.1 per cent in 2022–23 compared with demand in 2021–22, which saw a decrease of 37.3 per cent due to the continued effect of the introduction of emicizumab (Hemlibra). The demand for recombinant factor VIII decreased by 17.1 per cent and the demand for plasma-derived factor VIII increased by 8.8 per cent.

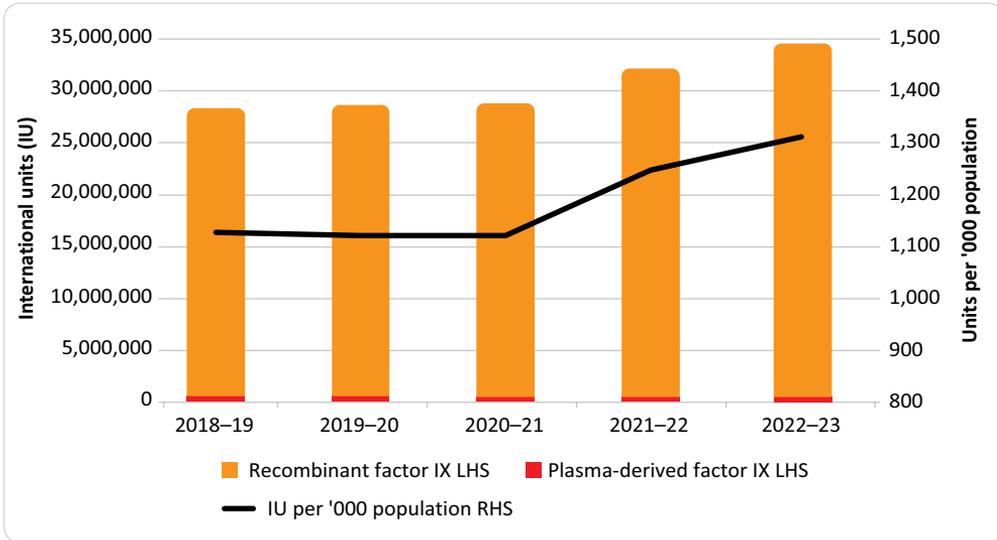
FIGURE 2.6 Factor VIII products issued 2018–19 to 2022–23 per '000 population



The demand for factor IX products increased by 7.0 per cent in 2022–23 compared with 2021–22 (Figure 2.7). Plasma-derived factor IX demand decreased by 14.4 per cent, due to specific patient requirements; and demand for recombinant factor IX increased by 7.3 per cent. The resumption of surgeries after COVID-19 and the establishment of ongoing access to extended half-life recombinant factor IX clotting factor products under the national supply arrangements both contributed to the variability of year-to-year growth in demand for these products.



FIGURE 2.7 Factor IX products issued 2018–19 to 2022–23 per '000 population



Demand for recombinant factor VIIa decreased by 15.5 per cent (Figure 2.8) and demand for factor VIII anti-inhibitor (FEIBA) increased considerably by 208.6 per cent (Figure 2.9) compared with 2021–22 demand. The decrease for recombinant factor VIIa was due to the continued effect of the introduction of emicizumab. The increase for FEIBA was due to a high number of acquired haemophilia A patients requiring treatment. Recombinant factor VIIa and FEIBA are generally used to treat inhibitor development in patients with severe and moderate haemophilia A. Emicizumab treats factor VIII deficiency and reduces the development of inhibitors.

FIGURE 2.8 Factor VIIa products issued 2018–19 to 2022–23 per '000 population

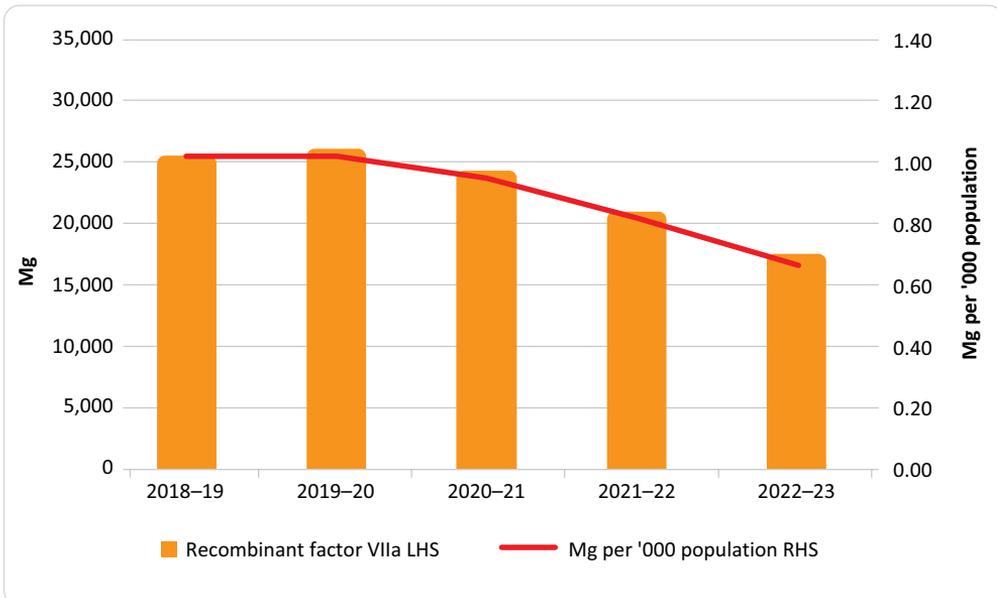
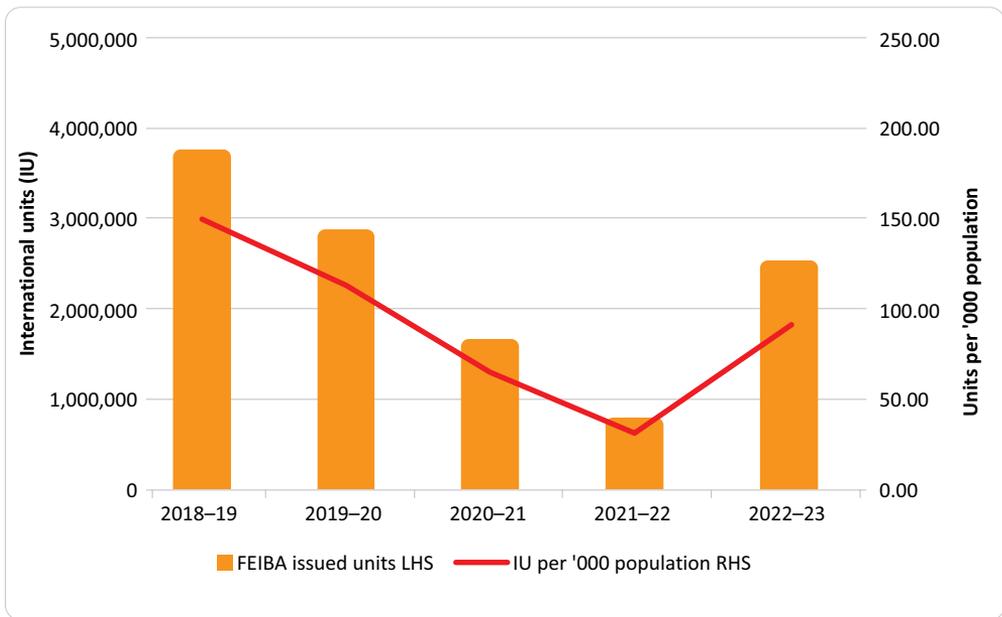
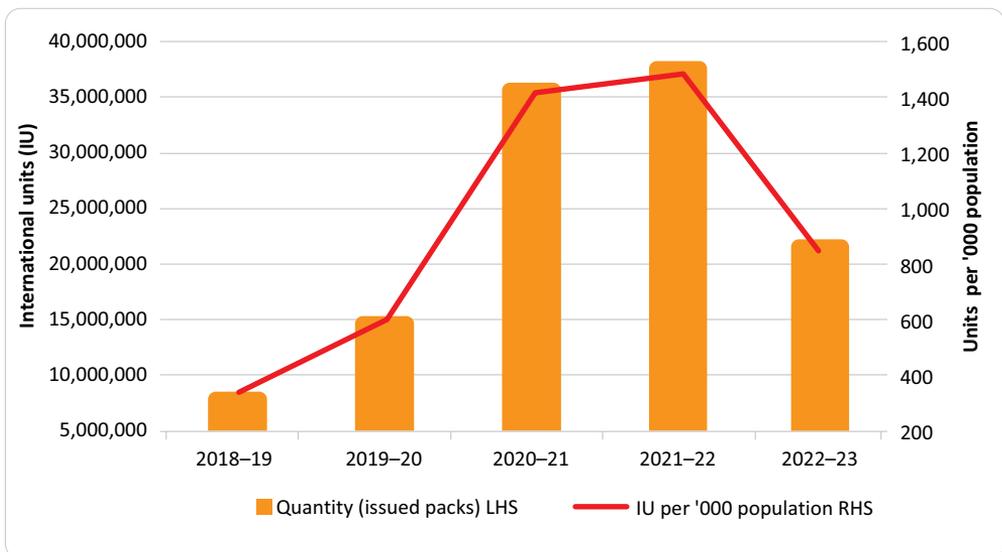


FIGURE 2.9 FEIBA issued 2018–19 to 2022–23 per '000 population



As shown in Figure 2.10, demand for C1 esterase inhibitor decreased by 40.5 per cent during 2022–23 after a decrease of 5.3 per cent in 2021–22, which followed an increase of 136.2 per cent in 2020–21. The introduction of an alternative product, lanadelumab, to the Pharmaceutical Benefits Scheme saw clinicians elect to move many of their patients to the new product in 2022–23.

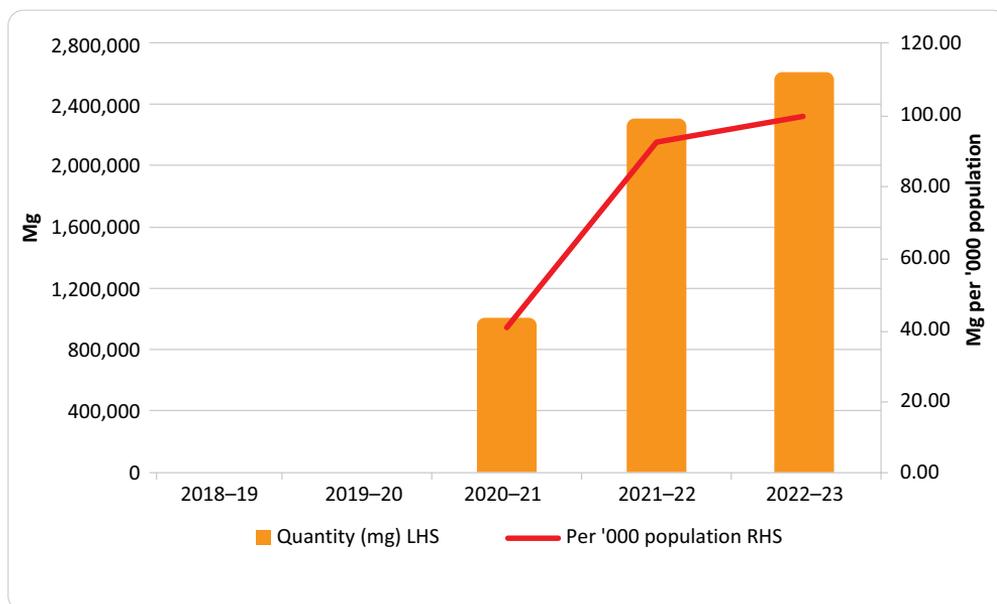
FIGURE 2.10 C1 esterase inhibitor issued 2018–19 to 2022–23 per '000 population



Emicizumab

Added to the national supply arrangements in 2020–21, emicizumab (Hemlibra) is a monoclonal product used to treat factor VIII deficiency. As shown in Figure 2.11, demand for emicizumab increased by 13.8 per cent compared to 2021–22 and stabilised in the latter half of 2022–23.

FIGURE 2.11 Emicizumab issued since introduction in 2020–21 per '000 population



Red cell diagnostic reagent products

Red cell diagnostic reagents are used in laboratory testing processes to establish the blood group of human red cells; detect red cell antibodies; and control, standardise and validate routine immunohaematology tests.

The NBA established a standing offer arrangement with four suppliers for the period 1 July 2016 to 30 June 2019. The NBA has extended these arrangements to 30 June 2024 with the following suppliers:

- ◆ Bio-RAD Laboratories Pty Ltd
- ◆ Grifols Australia
- ◆ Immulab Pty Ltd
- ◆ Ortho-Clinical Diagnostics (Johnson & Johnson Medical Pty Ltd).

The standing offer lists more than 100 red cell diagnostic products, which are used in laboratory tests such as blood typing and cross matching. These tests ensure that when a person needs a blood transfusion, they receive blood that is compatible with their own.

Expenditure on diagnostic reagent supply is capped at \$4.85 million per year. The NBA administers the cap for suppliers on behalf of jurisdictions.

Strategy 2:

Drive performance improvement in the Australian blood sector

The aim of this strategy is to support the appropriate use of products that have finite availability in a way that has the greatest positive impact on patient outcomes. In 2022–23 the NBA continued to pursue activities to drive performance improvement in the Australian blood sector. This included publishing performance reporting and benchmarking information, publishing data on the usage of blood and blood related products, reviewing product utilisation, and supporting continuous improvement in the use and management of Ig products.

A summary of performance against key indicators for Strategy 2 is provided in Table 2.10.

TABLE 2.10 Key performance indicators: Drive performance improvement in the Australian blood sector

Summary of results against 2022–23 key performance indicators	
Publish performance reporting and benchmarking information on the NBA website for the blood sector community (PBS target: Publish performance reporting and benchmarking information on the NBA website for the blood sector community)	Met Monthly wastage data was published with jurisdictions. Annual performance scorecards were provided as part of annual reporting.
Data is published each year for fresh blood components, Ig and clotting factor usage	Met Monthly immunoglobulin (Ig) data for 2022–23 and the 2020–21 Australian Bleeding Disorders Registry Annual Report outlining clotting factor usage are published on the NBA website. This report provides issues and expenditure for major product groups including fresh blood components.
Continue product utilisation reviews	Met The two planned pilot reviews of C1-esterase inhibitor concentrate (Berinert) and activated recombinant factor VII (NovoSeven RT) have been completed. Results have been shared with jurisdictions.
Support improvements for the use and management of Ig products	Met Continuous improvement in access to and use of Ig nationally continued under the NBA’s Ig Governance Program. Enhancements to BloodSTAR were developed to further streamline access to Ig. A review of the National Subcutaneous Immunoglobulin (SCIg) Program has been completed.

Performance criteria source: Health Portfolio Budget Statements 2022–23, pp. 314–316; NBA Corporate Plan 2022–23 to 2025–26, p. 28.

Delivery of Strategy 2

In 2022–23 the NBA delivered activities to support improvements across prescribers and suppliers of blood products to optimise appropriate use and reduce wastage. This included management of the Immunoglobulin (Ig) Governance Program, improvements in data collection and use, and improving key information technology systems used by clinicians and the NBA.

Governance of access to immunoglobulin

Ig is used to treat a wide range of immune related medical conditions and is a finite resource. Access to publicly funded Ig in Australia is managed through national governance arrangements which prioritise access for patients who need it most.

In 2022–23 the Ig Governance Program continued to:

- ◆ implement and promote the National Policy: Access to Government-Funded Immunoglobulin Products in Australia, which defines the role and responsibilities of all professionals involved in the prescription, management and use of Ig
- ◆ oversee the digital Ig management system BloodSTAR (Blood System for Tracking Authorisations and Reviews), which facilitates clinical requests for patient access to Ig products
- ◆ monitor and improve access to Ig, including by reviewing and refining the Criteria for the Clinical Use of Immunoglobulin in Australia, which define eligibility for access to Ig based on expert clinical assessment and advice
- ◆ advise and support clinical staff by reporting on Ig usage and responding to enquiries relating to access to Ig.

The Ig Governance Program also:

- ◆ assisted in the development of enhancements to BloodSTAR to further streamline access to Ig by making the system easier for clinicians to use
- ◆ conducted a review of the National Subcutaneous Immunoglobulin (SCIg) Program with the aim of identifying options to overcome barriers to program uptake and inform the future direction of the program. The NBA is currently considering recommendations from the report provided by HealthConsult, the consultant engaged to undertake the review.

National Haemovigilance Program

Haemovigilance is a set of surveillance procedures covering the entire blood transfusion chain, from the donation and processing of blood and its components to their provision and transfusion to patients, to patient follow-up. It includes monitoring, reporting, investigating and analysing adverse events related to the donation, processing and transfusion of blood, as well as development and implementation of recommendations to prevent the occurrence or recurrence of adverse events.

The NBA's National Haemovigilance Program is informed by the Haemovigilance Advisory Committee (HAC). This group provides advice to the NBA on adverse event reporting originating from health services and on national transfusion safety priorities. More information on the HAC is provided under 'Statutory committees' in Part 3 of this report.

Haemovigilance online webinars

The International Haemovigilance Network, the International Society of Blood Transfusion (ISBT) and the Australian and New Zealand Society of Blood Transfusion collaborated with the NBA to deliver a series of four free, open-access online forums in late 2022 where scientists, haematologists, transfusion nurses, regulatory authorities and consumers came together to discuss safety and quality through data, the care and wellbeing of donors, and improving consumer engagement.



The forum topics were:

1. Sharing international Haemovigilance experiences
2. Improving patient safety and quality through consumer engagement
3. Improving safety and quality through data
4. Improved care and wellbeing of donors.

Over 3,400 participants registered to see well-known experts present their insights across national and international haemovigilance experiences. The participants were located all over the world. Of the 395 who answered the survey question 'Where are you joining us from?', 113 said Australia and New Zealand,

103 said Asia, 103 said Europe, 51 said Africa and the Middle East, 16 said North America, and nine said South America.

Speakers included:

- ◆ Shruthi Narayan from Serious Hazards of Transfusion (SHOT), UK
- ◆ Anna Flynn from the Australian Commission on Safety and Quality in Health Care
- ◆ Linley Bielby and Christine Akers from the Serious Transfusion Incident Reporting System, Australia
- ◆ Meredith Smith from the New Zealand Blood Service
- ◆ Barbee Whitaker from the US Food and Drug Administration
- ◆ Alison Street AO from the National Haemovigilance Advisory Committee, Australia
- ◆ Veronica Hoad, Joanna Speedy and James Daly from Australian Red Cross Lifeblood
- ◆ Michael Busch (US) and Erica Wood AO (Australia) from ISBT
- ◆ Jane and Robbin, consumers (Australia).

The online forums are available for viewing on the ISBT website at: <https://www.isbtweb.org/events/hvwebinars.html>



Clockwise from top left: James Daly, Shruthi Narayan, Erica Wood AO, Christine Akers, Meredith Smith.

Product reviews

Changes and additions to products funded under the national blood supply arrangements are made through a process outlined in Schedule 4 of the National Blood Agreement. The NBA receives and evaluates proposals for these changes and additions.

The NBA manages an initial multi-criteria analysis of these proposals as necessary, to inform consideration by governments and ensure alignment with blood sector objectives. This may be followed by a more comprehensive assessment by the Medical Services Advisory Committee in the Commonwealth Department of Health and Aged Care.

Evaluations are not exclusive to new products. In 2022–23 the NBA completed pilot utilisation reviews of two products already listed on the National Product Price List, to understand their usage patterns. These reviews were for C1-esterase inhibitor concentrate (Berinert) and activated recombinant factor VII (NovoSeven RT). Berinert is used to treat people with hereditary angioedema (HAE). HAE is a rare genetic disease that causes swelling in subcutaneous tissues which can lead to severe pain and, if swelling occurs in the airways, can be life threatening. NovoSeven RT is used to treat people with haemophilia and other bleeding disorders. The results of these reviews were shared with jurisdictions and will be used to inform future work programs in this space.

A third pilot review of emicizumab (Hemlibra), another product used to treat haemophilia, is underway.

Now that the NBA has completed the pilot utilisation reviews for Berinert and NovoSeven RT, consideration will be given to our future approach to the utilisation review framework and establishing an ongoing program for utilisation reviews.

Performance improvements through information management and technology

The NBA operates and supports a suite of national blood sector systems – ICT systems that enable the provision of a safe, secure and affordable blood supply for all Australians. These include BloodNet, BloodSTAR, BloodPortal, the Australian Bleeding Disorders Registry (ABDR) and the MyABDR app.

These systems directly enable the ordering of blood and blood products, the management of product authorisations, and the clinical management and treatment of patients with bleeding disorders. They are also a key enabler of data collection and analysis to inform performance improvement, research, policy development, system reporting and governance controls.

Blood sector system upgrades

In 2021–22 the NBA implemented three blood sector system enhancement and maintenance releases. In 2022–23 these upgrades continued to deliver a variety of enhancements including:

- ◆ usability enhancements including improvements in instructions, system messaging and displays, and modifications of existing fields
- ◆ improved search functionality
- ◆ auto-population of previous dose regime and other dose related enhancements
- ◆ exportable system control documents
- ◆ clearer distinctions between differing facilities
- ◆ recording cancellation reasons for cancelled orders
- ◆ streamlining the dose change request process
- ◆ security and privacy features
- ◆ improved functionality of user accounts.

All of these upgrades have improved the user experience of the systems.

Interface with laboratory information systems

The NBA's BloodNet system has an electronic interface that allows laboratory information systems (LIS) in Australian hospitals to connect directly to it. This provides near real-time visibility of the national blood supply to hospital pathology teams and delivers significant time savings through the automated exchange of data.

In November 2022 ACT Pathology went live with its Evolution LIS integrating with BloodNet.

The NBA continued to develop this interface with health provider systems, working with NSW Health Pathology, Northern Territory Health, QLD Pathology, the Royal Hobart Hospital, and PathWest (WA). This work is ongoing and is likely to be completed in 2023–24.

The NBA continues to work with LIS vendors interested in having their products integrated with BloodNet. To enable this capability, we work with vendors to complete a certification process.

Oracle-Cerner's Millennium LIS and NSW Health Pathology were certified in June 2023. Several other LIS vendor certifications in progress are expected to be finalised during 2023–24.

Data services

A substantial amount of data and information exists in the blood sector. In 2022–23 the NBA continued to build its data capture and analysis capabilities across all aspects of the supply chain, including through system and reporting enhancements to BloodNet and BloodSTAR. Enhancing data quality improves the overall efficiency and sustainability of the sector, including by providing measurements for improvement.

During 2022–23 the NBA:

- continued the Data Improvement Program by developing a plan to implement new system capabilities for data reporting, analysis and visualisation (data warehouse visualisation tools) to support strategic corporate and program objectives
- continued to provide monthly and quarterly reporting both internally and externally as business-as-usual activities
- developed a draft Data Strategy for the NBA for the next three to five years, to be published in 2023–24
- continued to refine existing monthly and quarterly reports for stakeholders and implemented additional reporting
- collected, analysed and distributed discard data from BloodNet to support the establishment of revised targets for discard rates
- drafted the National Report on the Issue and Use of Immunoglobulin: Annual Report for 2018–19, 2019–20 and 2021–22 from BloodSTAR and the Supply Tracking Analysis Recording System (STARS) database
- provided BloodSTAR reporting to jurisdictions and monthly Ig data for publication on the NBA website
- responded to 79 data requests from internal and external stakeholders
- published the ABDR Annual Report for 2020–21 and provided the 2010–21 ABDR Benchmarking Report to the Australian Haemophilia Centre Directors' Organisation
- developed the ABDR Annual Report for 2021–22 for publication in 2023–24
- continued to refine the set of data standards as part of the data integrity process for the ABDR
- developed a Fresh Blood Report for 2021–22 for publication in 2023–24
- piloted the NSP&B and monthly reporting models developed in 2021–22 and continually updated the models through this pilot process
- developed state and territory reports for red blood cell trends from 2017–18 to 2021–22 and red blood cell ABO groups for discussion with jurisdictions
- published the 2019–20 Haemovigilance Annual Report and commenced the development of the 2020–21 report with the Haemovigilance Advisory Committee.

Blood Operations Centre

The NBA's Blood Operations Centre (BOC) is the front line of the NBA, providing 24/7 support to the Australian blood sector.

The small team supports over 40,000 system users in hospitals, allied medical facilities and specialist haemophilia centres nationally to access fresh blood and other blood products.

The BOC provided regular NBA news and alerts to users, such as updating users on any potential issues with blood product supply; ensured the systems regularly and accurately monitored national inventory levels; and facilitated the ordering of important and lifesaving products through Lifeblood.

Significantly, the BOC supported users to navigate systems in urgent situations, including after hours when immediate access to blood products was needed to support patients with life-threatening conditions. This included supporting users who sought urgent dispatch of additional fresh blood from Lifeblood to a hospital to support trauma patients, who often require multiple transfusions of various fresh blood products. The BOC also provided immediate support to users who were new to the system and needed support to organise an urgent Ig product to treat a newborn baby diagnosed with alloimmune thrombocytopenia or haemorrhage.

The BOC continued to support the operation of the ABDR and the MyABDR patient app and website. This information is used to assist in managing the treatment of people with bleeding disorders as well as to gain a better understanding of the incidence and prevalence of bleeding disorders.

For the NBA, the BOC provides critical information and perspectives on the user experience of both health providers and patients, which supports upgrades and changes to our systems, procedures and policies.



NBA employee Pablo Careaga demonstrating the Blood Operations Centre dashboards.



NBA employee Kaylee Gray demonstrating the Blood Operations Centre dashboards.

Strategy 3:

Promote a best practice model of the management and use of blood and blood related products and services

To help improve patient outcomes and the appropriate use of blood and blood related products and services, the NBA implements programs that promote best practice models of the management and use of blood. This includes supporting reductions in blood wastage; improving guidelines, tools and resources for clinicians; administering grants for high-quality research; and ensuring the criteria for access to and use of Ig are in accordance with the best evidence and clinical advice.

Performance against the key performance indicators for this strategy is summarised in Table 2.11.

TABLE 2.11 Key performance indicators: Promote a best practice model of the management and use of blood and blood related products and services in Australia

Summary of results against 2022–23 key performance indicators	
Sustained improvements in the management and use of blood products through:	
<ul style="list-style-type: none"> Continued reduction in blood wastage 	<p>Met</p> <p>Discards as a percentage of net issues (DAPI) for red blood cells was 1.2% for 2022–23, compared with 1.4% in 2021–22. DAPI for platelets in 2022–23 was 7.4%, down from 7.8% in 2021–22.</p>
<ul style="list-style-type: none"> Improved clinical guidelines, clinical practice tools and resources developed and promoted 	<p>Met</p> <p>The NBA progressed the review of the <i>Guideline for the prophylactic use of Rh D immunoglobulin in pregnancy care</i> and Patient Blood Management Module 1 Critical Bleeding/Massive Transfusion Guideline for publication in early 2023–24.</p>
<ul style="list-style-type: none"> Increased publications linked to NBA grants 	<p>Met</p> <p>There were 12 publications from 7 completed projects funded through the National Blood Sector Research and Development Program. This is an increase of 5 publications from the previous reporting period.</p>
<ul style="list-style-type: none"> Changes to the Ig criteria are consistent with quality information, evidence and clinical advice 	<p>Met</p> <p>Changes in 2022–23 to the Criteria for the Clinical Use of Immunoglobulin in Australia were based on evidence and advice from specialist working groups of clinicians with relevant experience in the fields of haematology, immunology, neurology and transplant. Quality information, evidence and clinical best practices were researched to support changes to the criteria.</p>
<ul style="list-style-type: none"> Outcomes of scheduled utilisation reviews used to inform appropriate use 	<p>Met</p>

Performance criteria source: NBA Corporate Plan 2022–23 to 2025–26, p. 30.

Delivery of Strategy 3

In 2022–23 the NBA promoted best practice models of the management and use of blood by:

- ◆ developing a range of resources directed to improving patient blood management (PBM)
- ◆ updating guidelines
- ◆ delivering education and training through BloodSafe eLearning Australia
- ◆ collaborating with the Australian Commission on Safety and Quality in Health Care (ACSQHC) on the National Safety and Quality Health Service (NSQHS) standards
- ◆ implementing blood product management, including Group O negative red blood cell management
- ◆ improving the process for developing the supply plan and budget
- ◆ delivering the National Immunoglobulin (Ig) Governance Program, including refining the Criteria for the Clinical Use of Immunoglobulin in Australia (Criteria) and supporting the development of Ig knowledge resources
- ◆ delivering the National Blood Sector Research and Development Program.

Promoting patient blood management

The promotion of safe, high-quality management and use of blood and blood products is a primary objective of the National Blood Agreement. PBM improves patient outcomes by ensuring that a focus of the patient’s medical and surgical management is on optimising and conserving the patient’s own blood.

In 2022–23 the NBA continued to develop materials that promote the safe and efficient use of blood and blood products, informed by close engagement with clinicians. Activities directed to improving PBM included:

- ◆ The Patient Blood Management Advisory Committee (PBMAC) met in July, September and November 2022, and in May 2023.
- ◆ The NBA published on its website two high-quality animated videos to support PBM education and promotion, and implementation of the Patient Blood Management Guidelines (PBM Guidelines) in Australia. These were produced for the NBA by the International Foundation for Patient Blood Management (IFPBM).
- ◆ The IFPBM conducted a pilot (limited trial) audit and audit tool for the NBA on PBM in tertiary hospitals in Western Australia to identify current implementation gaps. The audit tool – with the accompanying report of the pilot audit – is undergoing further refinement for national use and is expected to be available on the NBA website in 2024.
- ◆ The IFPBM also completed a pilot project (limited trial) for the development of PBM resources following a short survey to evaluate clinicians’ preferences regarding a hand-held printed manual or an electronic app to help them at the bedside to better apply current best practice. An app was the preferred resource, and a prototype was developed along with an interactive PDF. The final report is under review.

Blood conference awards sponsorship

The Blood conference is the annual scientific meeting of the Haematology Society of Australia and New Zealand, the Australian and New Zealand Society of Blood Transfusion (ANZSBT) and the Thrombosis and Haemostasis Society of Australia and New Zealand.

Each year, the ANZSBT Council awards prizes sponsored by the NBA for outstanding presentations to the Blood conference. In 2022 the NBA sponsored the following awards:

- Best oral or poster abstract with a transfusion focus by a young investigator
- Best poster or oral presentation on haemovigilance
- Best poster or oral presentation on patient blood management.



Ms Yusra Shahid

The recipient of the \$500 **Young Investigator Award** was Ms Yusra Shahid for her research 'Predicting the severity of cardiac iron-overload in transfusion dependent thalassemia (TDT) patients through

deep learning'. The study demonstrated a deep learning algorithm on cardiovascular magnetic resonance (CMR) images identifying myocardial overload in TDT patients, bypassing the need for costly software and highly trained professionals. This algorithm has potential to improve health outcomes in TDT patients in a resource efficient manner. This research was developed by Yusra and her team at Integration Xperts using data on TDT patients at Aga Khan University Hospital in Karachi, Pakistan.

Ms Shahid graduated from NED University of Engineering and Technology in Karachi with a bachelor's degree in computer information systems engineering.



Mrs Dolly Mathew

The recipient of the \$500 **Best Poster/ Oral Presentation on Haemovigilance Award** was Mrs Dolly Mathew for her research 'A comprehensive neonatal-paediatric intravenous immunoglobulin (IVIg) treatment plan

developed to improve health care outcomes for children requiring IVIg infusions in Australia'. The research was conducted at Joondalup Health Campus, Western Australia. Children are sometimes over- or under-prescribed and/or administered IVIg. Dose and rate of IVIg infusions differ according to the individual diagnosis and weight of the child. Mrs Mathew developed an IVIg plan designed for neonatal and paediatric patients which helps clinicians prescribe the correct dose and rate of IVIg administration according to the weight of the child. The Neonatal-Paediatric Intravenous Immunoglobulin (IVIg) Treatment Plan proved to be an effective tool in educating staff and reducing errors when prescribing and administering IVIg products for children.

Mrs Mathew is a Registered Nurse, Registered Midwife at Joondalup Health Campus (Ramsay Health Care) currently working as a Transfusion Nurse Specialist and PBM Clinical Nurse Consultant. She has vast experience in clinical practice and teaching.



Dr Allison Mo

The recipient of the \$500 Best Poster/ Oral Presentation on Patient Blood Management Award was Dr Allison Mo for her research 'Making decisions about platelet transfusions in patients with myelodysplastic syndromes (MDS): a clinician survey to inform future clinical trials'. The survey described current use of platelet transfusions and tranexamic acid in Australia for patients with MDS who have thrombocytopenia, aiming to inform future trial design in this area. The survey was

developed in collaboration with the Australasian Leukaemia and Lymphoma Group (ALLG) Supportive Care working party. The results of the survey suggest that MDS related thrombocytopenia management is highly variable, and clinical trials are necessary to inform practice.

Dr Allison Mo is a clinical and laboratory haematologist at Monash Health. She is currently undertaking a PhD at the Transfusion Research Unit, Monash University, focusing on optimising transfusion practices with MDS, and transfusion related quality of life and functional outcomes.

Disclaimer: This story is not indicative of a measure of performance.

Updating guidelines

The NBA has funded and managed the development of a series of evidence-based PBM Guidelines. These guidelines were developed by clinical experts and are based on the results of a systematic review of relevant literature. The guidelines are intended to assist health professionals to apply PBM when caring for people with or at risk of experiencing a bleeding event.

The six PBM Guideline modules, completed in 2016, make up a substantial body of work. Over 160,000 hard copies of the PBM modules were issued from 2011 to 2022. They have also been downloaded electronically in over 60 countries.

During 2022–23 the NBA continued its work on developing a sustainable methodology to maintain the currency of the guidelines. Rather than updating each module in an isolated and iterative process, the NBA has taken a broader approach to reviewing and updating the guidelines, by considering the entire suite of modules. The objective is to adopt a methodology that will enable more rapid updating of the guideline recommendations and to transition to a 'living guideline' model. As part of this process improvement opportunity, the NBA is transitioning to developing and publishing guidelines on MAGICapp, an online platform for developing and publishing guidelines.

During 2022–23 the Critical Bleeding Clinical/Consumer Reference Group (CRG) completed its review and update of PBM Guidelines: Module 1 – Critical Bleeding/Massive Transfusion. The retitled *Patient blood management guideline for adults with critical bleeding* was released for public comment in September 2022. The CRG considered all feedback received and updated the guideline accordingly. The guideline will be published on MAGICapp in the first half of 2023–24.

During 2022–23 the Rh D Immunoglobulin Expert Reference Group approved updates to the *Guideline for the prophylactic use of Rh D immunoglobulin in pregnancy care* and agreed to re-publish it on MAGICapp. The NBA is finalising the transition of the guideline to MAGICapp and it will be published in the first half of 2023–24.

The number of PBM Guidelines downloaded in 2022–23 was 33,751, down from 34,469 in 2021–22. The number of PBM tools downloaded in 2022–23 was 20,820, up from 15,843 in 2021–22.

BloodSafe eLearning Australia

BloodSafe eLearning Australia provides online education and training resources for health professionals in Australia to improve knowledge of PBM and clinical transfusion practice to improve patient outcomes. BloodSafe eLearning is funded by the NBA on behalf of all Australian governments.

The first course of this education and training initiative for healthcare professionals, Clinical Transfusion Practice, was released in late 2007. The program has since expanded to 38 courses, one mobile device application and a range of other resources, with further courses in development. All courses are based on published guidelines, evidence-based practice and expert opinion.

Highlights from 2022–23 include:

- ◆ There were 65,462 new users during the year. Since 2007 the total number of users has grown to over 809,924 million.
- ◆ Participants completed 2.96 million BloodSafe eLearning hours of learning.
- ◆ An Rh D Ig course was released in August 2022. This course is based on the 2021 *Guideline for the prophylactic use of Rh D immunoglobulin in pregnancy care*, Patient Blood Management Guidelines: Module 5 – Obstetrics and Maternity, and other relevant Australian and New Zealand Society of Blood Transfusion (ANZSBT) guidelines.
- ◆ Two podcasts to complement the Bleeding Risk Assessment course were released.

BloodSafe eLearning also has a series of standalone videos available to view or download for later use. Most are under five minutes and suitable for education sessions.

To access the courses, go to <https://learn.bloodsafelearning.org.au>.

National Safety and Quality Health Service Standards

The NSQHS standards, produced by the ACSQHC, are designed to protect the public from harm and improve the quality of health care. The standards describe the level of care that should be provided by health service organisations and the systems that are needed to deliver such care.

As part of the suite of standards, the NBA joined with the ACSQHC to develop the Blood Management Standard (Standard 7) to improve outcomes for patients by identifying risks, using strategies that optimise and conserve a patient's own blood, and ensuring that any blood and blood products that patients receive are safe and appropriate. The Blood Management Standard covers all elements in the blood management and clinical transfusion process and includes the PBM principles.

During 2022–23 the NBA continued to work with the ACSQHC and other stakeholders on the implementation of the second edition of the NSQHS standards. The NBA is focused on helping Australian health providers to meet the NSQHS Blood Management Standard requirements.

Blood product management

The NBA has maintained a focus on activities to support measures to improve blood management and appropriate use, as articulated in the National Patient Blood Management Implementation Strategy 2017–24 and the National Blood Product Management Improvement Strategy 2018–24. This focus has continued through the challenges to blood inventory levels experienced in recent years.

In 2022–23 the NBA continued to implement the National Blood Product Management Improvement Strategy by:

- ◆ progressing the national transition to the updated blood product barcodes ISBT 128 DataMatrix and GS1 DataMatrix as part of an update to the *Barcode specifications for blood and blood products funded under the national blood arrangements* (Barcoding Specification) so that the barcoding policy requirements are embedded in supply contracts and implemented by all suppliers by an agreed date
- ◆ continuing the development of a blood tracking framework for the blood sector that builds on the Barcoding Specification
- ◆ completing analysis of red blood cell issues, transfers and discard patterns across Australia for 2017–2022, including separate analysis for each jurisdiction for discussion in 2023–24
- ◆ engaging with stakeholders to understand the drivers of red blood cell demand and the potential for data sharing
- ◆ analysing 2017–2022 data on non-fresh blood product issues, transfers and discards to develop discard target recommendations for the non-fresh blood components
- ◆ publishing the Single Unit Transfusion Decision Support Tool to help clinicians with the appropriate prescribing of red blood cells. The tool supports the Single Unit Transfusion Guide, which is based on the PBM Guidelines. The Decision Support Tool and Single Unit Transfusion Guide are available at www.blood.gov.au/single-unit-transfusion.
- ◆ developing a single unit transfusion fact sheet in collaboration with the ACSQHC to be published in 2023–24. The fact sheet will assist healthcare organisations, clinicians and NSQHS Blood Management Standard (Standard 7) assessors to understand how to implement a single unit transfusion policy.

Group O negative red blood cell management

Group O Rh D negative red blood cells (RBCs) have traditionally been used for all emergency transfusions, despite providing no additional safety benefit to most emergency transfusion recipients. While only 6.5 per cent of the Australian population are group O Rh D negative, group O Rh D negative RBCs have represented as high as 17 per cent of total RBCs issued to Australian health providers.

Closer management and rationalisation of group O Rh D negative RBC inventory and use, including their use in emergency transfusion, provides significant benefit, easing pressure on group O Rh D negative RBC donors and supplies.

The NBA, the National Blood Transfusion Committee (Australian Red Cross Lifeblood), the Australian and New Zealand Society of Blood Transfusion, the National Pathology Accreditation Advisory Council, the Australian College of Rural and Remote Medicine and the Australian College of Emergency Medicine have developed and published a joint national statement through an expert working group: the National Statement for the Emergency Use of Group O Red Blood Cells, available at www.blood.gov.au/group-o-negative-red-blood-cell-management.

The National Statement for the Emergency Use of Group O Red Blood Cells underwent a consultative process before publication.

The working group has also started to develop accompanying guidance for the management of RBCs, including guidance on inventory management and a National Statement for the Emergency Use of Group A Fresh Frozen Plasma and Cryoprecipitate.

Process improvement for developing the Supply Plan and Budget

Since 2003 the NBA has successfully maintained an annual supply of blood and blood products within a 5 per cent variance from the National Supply Plan and Budget (NSP&B). This has been achieved by ongoing identification of new data sources that can help us to identify current use trends, research and analysis to understand likely future use, and ongoing engagement with jurisdictions and suppliers on product needs and availability.

Over time, additional products have been added to the arrangements, which has resulted in a complex dataset and forecasting model that is a challenge to sustain. To address this, the NBA engaged consultants to review the NSP&B processes and identify opportunities to strengthen, streamline and simplify them.

The review made several key findings and recommendations that the NBA began implementing in 2022–23. This has resulted in the NBA ensuring that its process is more robust and streamlined, allowing more time to analyse and understand trends, and less time managing underlying data, resulting in:

- ◆ better quality and more timely insights and reporting
- ◆ more reliable budget recommendations
- ◆ a process that enables performance to be sustained into the future.

The improvements are being implemented in two phases. Those in Phase 1 were tactical improvements, mainly relating to people, processes and tools. During 2022–23 the NBA implemented this phase and piloted the solutions, which relate to changes to data models and the use of single source of truth (SSOT) data collections. These changes have also resulted in more effective and efficient processes for establishing and monitoring the NSP&B. Throughout the pilot year the data models and processes have been tweaked and amended to make small improvements identified in applying them. The new model will be rolled into 2023–24 for monthly reporting and the development of the 2024–25 NSP&B. These foundational improvements will then enable the NBA to optimise its technology investment in future phases.

Phase 2 builds on this by implementing technology-based improvements that relate to a fit-for-purpose planning solution. The focus of this phase is to implement a fit-for-purpose planning solution that could include automated data inputs and integrated ‘real-time’ data feeds from the source, supplemented with provider ‘self-serve’ uploads.

Governance of use of immunoglobulin

National Immunoglobulin Governance Program

Through its National Immunoglobulin (Ig) Governance Program, the NBA continued to drive improvements in the use of Ig nationally. (For more on this program, see ‘Governance of access to immunoglobulin’ under Strategy 2.)

A network of committees and interest groups provide advice to inform the work of the Ig Governance Program. The main NBA committee for this work is the National Immunoglobulin Governance Advisory Committee (NIGAC). Four immunoglobulin specialist working groups (SWGs) provide expert advice and comment to the NBA in the areas of haematology, immunology, neurology and transplant.

NIGAC is a key body assisting the Ig Governance team in its implementation of the National Immunoglobulin Governance Program Performance Improvement Strategy. Among other things, the NIGAC and SWGs provide expert evidence-based advice in the NBA’s continuous review of the Criteria.

Criteria for immunoglobulin use

In 2022–23 the NBA continued to evolve the Criteria. The NBA has been active in reviewing and evolving the Criteria based on publications, reviews, and clinical expert advice from the SWGs. Each SWG continued to work through its 2021–2024 work plan of activities to support the review of the Criteria.

As part of the continual review of the Criteria, in 2022–23 the SWGs considered the Ig use and evidence for the following conditions:

- ◆ primary immunodeficiency disease – common variable immunodeficiency and severe combined immunodeficiency
- ◆ secondary hypogammaglobulinaemia – chronic disseminated enterovirus infection
- ◆ vaccine-induced immune thrombotic thrombocytopenia (VITT)
- ◆ vaccine-associated myocarditis and pericarditis
- ◆ allogeneic haemopoietic stem cell transplant
- ◆ haemolytic disease of the newborn
- ◆ heparin-induced thrombocytopenia
- ◆ solid organ transplantation
- ◆ Guillain-Barré syndrome
- ◆ chronic inflammatory demyelinating polyneuropathy (CIDP)
- ◆ inflammatory myopathies.

Immunoglobulin knowledge resources

In 2022–23 the NBA continued to harness opportunities for increasing knowledge of Ig use and management. The NBA provided guidance and advice to support the completion of the NPS Medicinewise Value in Prescribing (ViP) Program. The program developed in total 18 resources about Ig use to support clinicians, dispensers and consumers, including four videos and 14 downloadable resources. NIGAC provided expert advice as the steering committee for the ViP initiative.

The NBA will continue to explore further opportunities to support the efficient, effective, ethical and most appropriate use of this precious resource and enable continued patient access to Ig therapy under national funding arrangements.

Research and development

The NBA's National Blood Sector Research and Development Program was established in 2015 as a nationally coordinated effort to address evidence gaps in the blood sector. It is a relatively small, niche program that helps support the appropriate use of blood and blood products. It has funded 40 research projects to date, totalling around \$6 million.

The NBA is uniquely placed to oversee this program due to its role in managing a centralised, coordinated system for policymaking, funding and supply of blood and blood products. The program's research priorities are focused on patient blood management and the appropriate use of Ig. It aims to:

- ◆ enhance the sustainability and affordability of the national supply of blood products, including through increased efficiency and reduced blood product usage and wastage
- ◆ identify appropriate use and reduce inappropriate use of blood products
- ◆ maintain or enhance clinical outcomes for patients.

Since 2015 the success of the program has been in supporting exploratory, preliminary or early phases of research. Findings from some research funded through the program have also been leveraged to gain further funds to support larger studies. For example, the results from the FEISTY (Fibrinogen Early in Severe Trauma Study) Pilot Trial funded in Round 1 of the program facilitated the design of a larger multi-centre randomised controlled trial investigating fibrinogen replacements in severely injured bleeding trauma patients through Round 3 (FEISTY II). This trial has since been expanded, with a significant investment from the Medical Research Future Fund in early 2022 and additional investment from the NBA in 2022–23 to ensure the project can complete successfully and generate much-needed evidence to inform decisions about the best use of blood and blood products for the best clinical outcomes for Australian patients.

Grantees continue to provide regular status updates on their projects so that the NBA can track their progress against agreed outcomes. While the impacts of COVID-19 on the blood sector more broadly are starting to stabilise, the NBA recognises the continued impact of the pandemic on the research sector, particularly for patient recruitment. As a result, the NBA has continued to support grantees by approving variations to project milestones where needed. Two projects were terminated during this reporting period. One of these terminations was due to patient recruitment challenges as a result of COVID-19, and the other due to complications in an international arm of the study. Despite these challenges, the contribution of NBA grantees to research in the blood sector is evidenced by the seven projects that were successfully completed in 2022–23. This is an outstanding achievement – double the number of projects completed in 2021–22. The seven completed projects resulted in 12 publications, with another nine planned or in draft.

To further strengthen and improve research and development in the sector, and in recognition that it has been eight years since the NBA first introduced its research program, we will conduct a thorough evaluation of the program in 2023–24. The evaluation will inform deliberations by the NBA and governments about future investment into and sustainability of the program, and demonstrate accountability to the Australian public.

National Blood Sector Research and Development Program

Research is valuable to the whole blood sector as it improves evidence about blood products and helps inform good decisions by governments, patients and clinicians. The following example of a recently completed project from Round 5 of the NBA's research grants highlights these benefits.

Red cell transfusion and patient outcomes in First Nations people

A study of more than 15,000 patients was undertaken in the Northern Territory and South Australia to better understand the outcomes and use of blood transfusion for Aboriginal and Torres Strait Islander (First Nations) people.

In patients admitted to intensive care, undergoing heart surgery, and admitted for pregnancy care, the study found significant differences in the frequencies of different blood groups (ABO and Rh blood groups) between First Nations and non-First Nations patients. This finding has implications for management of blood bank inventories in rural and remote Australian hospitals serving First Nations people.

Researchers found that First Nations patients had a higher prevalence of anaemia and were more likely to be given a red-cell transfusion. Among patients admitted for pregnancy care, 57.3 per cent of First Nations women, compared to 40.6 per cent of non-First Nations women, were found to be anaemic. Of those, 5.5 per cent of First Nations women received a transfusion, compared to 2.3 per cent of non-First Nations women. These findings highlight that further research could be done to help inform and improve the current Patient Blood Management Guidelines.

Different perspectives and lived experiences improve the quality, relevance and impact of research.

Engaging First Nations people, including patients, at each stage of this project and within the project team itself allowed for a greater awareness of the deep spiritual and cultural beliefs many First Nations people have about blood as a substance. Understanding how to best seek consent for First Nations patients will help to improve shared decision making and clinical outcomes.

It is anticipated that the research findings can be used to develop tools and aids to better engage with First Nations patients in future blood research.

The study found evidence of an increased risk in First Nations patients who receive a red blood cell transfusion. First Nations patients were more likely to form antibodies against transfused red blood cells (alloantibodies), compared to non-First Nations patients. Although further research will be needed to understand the clinical consequences of this finding, it is known that alloantibodies can affect future pregnancies in women and pose a higher risk for both men and women in finding compatible blood for future transfusions.

Together, findings from the study underscore the importance of reserving blood transfusions for settings in which there is clear benefit, and educating prescribers of transfusion products so that they better understand the risks and benefits. The study findings also highlight the need to improve shared decision-making approaches with First Nations patients.

Disclaimer: This story is not indicative of a measure of performance.

Strategy 4:

Support a sustainable blood sector

The NBA works with Australian Red Cross Lifeblood and state and territory governments on developing strategies to ensure the sustainability of the blood sector. A sustainable blood sector is one in which issues relating to the supply and future demand requirements for blood and blood products are well managed.

A summary of performance against key indicators for this strategy is provided in Table 2.12.

TABLE 2.12 Key performance indicators: Support a sustainable blood sector

Summary of results against 2022–23 key performance indicators	
New Output Based Funding Model in place	<p>Met</p> <p>New Output Based Funding Model (OBFM) Principles for 2022–23 to 2024–25 was implemented from 1 July 2023.</p>
Blood donor panel increased	<p>Met</p> <p>Lifeblood’s donor panel increased from 521,342 at the end of 2021–22 to 592,291 at the end of 2022–23.</p>
Advice provided to governments and others on blood supply and demand issues	<p>Met</p> <p>The NBA continues to provide advice on the relationship between supply and demand for fresh and commercial products. This is central to the NBA’s management of the national blood supply on behalf of all Australian governments.</p> <p>The NBA proactively searches for new and emerging trends through its horizon-scanning activities to support its policy advice to governments.</p> <p>During 2022–23 the NBA provided advice and guidance to governments and others regarding continued blood inventory pressures arising from the ongoing effects of the COVID-19 pandemic.</p>

Performance criteria source: NBA Corporate Plan 2022–23 to 2025–26, p. 31.

Delivery of Strategy 4

In 2022–23 the NBA delivered Strategy 4 by implementing its new funding model for Lifeblood services and by providing advice and guidance on strategies to ensure the sustainability of the blood sector. These strategies involve balancing the available supply of blood and blood products with current and forecast future demand.

As indicated elsewhere in this report, the national demand for and supply of blood and blood products was highly dynamic and challenging in 2022–23. This was due to the ongoing effects of the COVID-19 pandemic on demand for health care, changes in the behaviour of communities and blood donors, and other factors.

This situation required close and active monitoring by the NBA and the provision of information, advice and guidance by the NBA to governments and others.

Renewal of Lifeblood funding arrangements

A new three-year Output Based Funding Model (OBFM) for Lifeblood commenced on 1 July 2022 and will continue until the end of the current Deed of Agreement on 30 June 2025.

Increase in blood donor panel

Lifeblood's donor panel increased from 521,000 people at the end of 2021–22 to 592,291 at the end of 2022–23. A large proportion of the growth was the result of the removal of the geographical deferral for people who lived in the UK in the 1980s and 1990s; this change yielded more than 34,000 new donors in 2022–23.

Policy advice to government

The NBA provides advice to governments on the relationship between supply and demand for fresh and commercial products, the cost of plasma for fractionation, and the cost of domestic and imported Ig and other plasma-derived products. These factors relate to several key policy settings and are central to the NBA's management of the national blood supply on behalf of all Australian governments.

In 2022–23 the NBA gave information, briefings and advice to jurisdictions, Health Ministers, the Australian Health Protection Principal Committee, the Private Hospitals Forum, Health Chief Executives, Chief Health Officers and others. The NBA also provided input to progress health reforms and commit to improving health outcomes for Australians through participation in the mid-term review of the National Health Reform Agreement Addendum 2020–25.

To maintain good information and intelligence, the NBA continued its horizon scanning of international experience that may influence the management of blood and blood products in Australia. It also engaged even more closely with suppliers to better understand their perspectives in a dynamic environment. This monitoring activity informs the provision of current analysis of new and emerging issues relating to product use and technologies.

Strategy 5:

Be a high-performing organisation

The NBA maintains and develops organisational capabilities and processes that enable us to perform at a high level.

A summary of performance against key indicators for this strategy is provided in Table 2.13.

TABLE 2.13 Key performance indicators: Be a high-performing organisation

Summary of results against 2022–23 key performance indicators	
National Supply Plan and Budget agreed by governments	<p>Met</p> <p>National Supply Plan and Budget 2023–24 approved by all Australian Health Ministers following review and endorsement by the Jurisdictional Blood Committee.</p>
Governance and accountability processes streamlined and improved	<p>Not met</p> <p>Finance delegations were streamlined. Review of Accountable Authority Instructions (AAIs) was delayed due to resourcing. New AAIs will be implemented early in 2023–24. Revised human resources (HR) delegations were postponed to take account of APS bargaining outcomes.</p>
Better work environment for NBA staff provided	<p>Met</p> <p>Safe (including COVID-safe) work arrangements provided, including flexible working arrangements.</p> <p>The renovation of the NBA office accommodation provides an attractive and functionally effective workspace that is enjoyable for staff and visitors to work and collaborate in.</p> <p>Microsoft 365 implementation, with extension of Microsoft Teams to the NBA’s meeting rooms, improved opportunities for collaboration and engagement in the office or from other work locations.</p> <p>Improvements were made to ICT security without impacting on the ability of staff to work efficiently in the office or remotely.</p>
NBA remains an employer of choice with a staff engagement score of 75% or more	<p>Not met</p> <p>2023 engagement score is 74%.</p>
A safe and healthy working environment is maintained with a reportable incident rate of less than 2%	<p>Met</p> <p>No notifiable incidents were reported during 2022–23.</p>
Staff completion of mandatory annual online learning and development modules by not less than 90% of staff	<p>Not met</p> <p>77% of staff completed mandatory online learning.</p>

Performance criteria source: NBA Corporate Plan 2022–23 to 2025–26, p. 33.

Delivery of Strategy 5

National Supply Plan and Budget agreed by governments

The NBA successfully developed and secured agreement from all Health Ministers for the 2023–24 National Supply Plan and Budget (NSP&B). The NSP&B is key to enabling the NBA to achieve security of blood supply. Its development each year involves forecasting supply and demand based on data trends and market analysis and liaising with each state and territory government to inform accurate estimates and understand variations in the operating environment. More discussion of the NSP&B can be found under Strategy 1.

Supporting our people

In 2022–23, after two years of COVID-19 lockdowns and remote work, large numbers of NBA staff returned to the office. The NBA continued to support flexible working arrangements on a case-by-case basis, focusing on achieving a balance between individual and organisational needs.

The transition from remote work coincided with the completion of a redesign and refit of our office premises. Our new office design and facilities support more agile and collaborative work practices, enabled through improved technology. The redesign also provides more space between desks and better ventilation, creating a healthier environment.

Staff have welcomed the new facilities and features, which include:

- ◆ contemporary design and technology
- ◆ collaborative working spaces
- ◆ individually allocated desks for each staff member, providing for COVID-safe distancing
- ◆ meeting rooms that are fitted with accessibility features (braille signs and infrared hearing assistance) and screens enabling virtual meetings
- ◆ quiet rooms with adjustable lighting which are being used for diverse purposes including virtual training, small meetings, and as a workplace adjustment
- ◆ a wellness room – a multifunctional private room that can be used for prayer, as a breastfeeding space, and for rest and meditation
- ◆ an upgraded first aid room.

Staff engagement

The results of the 2023 APS employee census show that staff remained generally positive about the NBA's performance and operations. The NBA's engagement score was 74 per cent. This is slightly below our KPI of 75 per cent but above the overall APS engagement score. Our participation rate in the APS census was 82 per cent of employees. In addition to the slight reduction in our engagement score there was a slight reduction from the previous year in satisfaction with leadership. Employees reported increased satisfaction in areas such as respect from colleagues, having tools and resources to work well and having choice about managing their work. The census results will be explored further with staff in the second part of 2023.

In 2022–23 the NBA prioritised issues and ideas emerging from the 2022 APS census. At the same time we continued to explore and build on the findings of a series of staff workshops held in 2021 to unpack the APS census results, with a focus on strategies for maintaining and building high performance in the NBA.

Staff were directly engaged in the NBA’s planning processes during 2022–23 by participating in workshops on:

- the NBA website redevelopment project – giving all staff the opportunity to contribute and discuss ideas
- the agency’s integrated data management system – involving representatives from all relevant areas
- the release management process – consulting with staff on enhancements to blood sector systems
- the office fit-out project
- the development of HR procedures.

The Staff Participation Forum met twice, in November 2022 and March 2023.

Remuneration arrangements

All staff received a 3 per cent increase in salary from January 2023, in line with the Public Sector Interim Workplace Arrangements 2022. The Australian Public Service Commission (APSC) commenced APS-wide bargaining in March 2023 with the aim to improve commonality in pay and conditions across the APS. The NBA issued a Notice of Employee Representational Rights on 23 February 2023, which commenced bargaining for the NBA’s enterprise agreement.

The NBA has kept staff informed of the progress of APS bargaining and has regularly participated in APS-wide employer bargaining meetings, including providing input to the APSC on employer bargaining positions.

Recruitment

The NBA actively seeks to attract the skills, experience and talent required for our business. For us, like many other APS agencies, 2022–23 was another challenging year for recruiting staff. The competitive labour market has required us to use different approaches, including sourcing APS and external staff through temporary employment and mobility registers, through recruitment agencies, and using APS networks and communities of practice.

As a small agency, it is difficult for the NBA to establish the range of entry-level programs that are often used in larger agencies. We continue to access the graduate program run by our portfolio agency, the Department of Health and Aged Care, offering placement opportunities in the NBA for graduates participating in the program.

We continue to explore other opportunities, including internships and APS-wide programs, to build capability across the agency.

Professional development

The NBA is committed to building and retaining the skills, experience and talent required to deliver our business.

During 2022–23 we sourced a range of in-house face-to-face courses through the APS Academy and from external providers. We will continue to use the training provided by the APS Academy where possible. The recent ICT upgrade across the agency facilitated virtual delivery of in-house training for participants who were unable to attend face to face.

In 2021–22 the NBA provided a three-stage writing course for all staff to support and enhance the NBA's guidance and advice role. The same course was delivered again in early 2023 for staff who, for leave or other reasons, could not attend the earlier training or had joined the agency since. This course had high uptake and engagement and drew positive feedback, particularly from staff who were new to the APS and to the conventions of Australian Government writing.

The NBA's target of 90 per cent of staff completing annual mandatory training at the end of the 2021–22 performance cycle was not met. The proportion of staff who completed the annual mandatory training suite, comprising nine online courses, was 77 per cent. System issues, including access to up-to-date training and accurate reporting mechanisms through our eLearning system, affected this performance.

A review of our annual mandatory learning program considering these challenges resulted in streamlined online training arrangements and revised reporting tools. As a result of the review the content was also refreshed and new training courses added:

- ◆ the APSC's 'Integrity' training – for all staff who are new to the APS
- ◆ the National Office of Child Safety's 'Awareness' eLearning module, as part of our compliance with the Commonwealth Child Safe Framework – for new starters and as annual mandatory training for the 2022–23 cycle
- ◆ Comcare's 'Introduction to psychological health and safety in the workplace' training to support the new regulations for identifying and managing workplace psychosocial hazards and risks under the Work Health and Safety Regulations 2011.

Information management and technology

ICT modernisation

In 2021–22 the NBA's ICT team completed the first phase of the agency's corporate modernisation project by delivering a secure and collaborative desktop computing system and infrastructure that significantly upgrades our digital continuity capabilities. This involved migrating the entire corporate environment to the cloud-based operating system Microsoft 365 in May 2022 and issuing laptops to all staff.

The successful rollout of laptops enables NBA staff to work securely within the NBA digital environment in any physical location. This strengthens the NBA's performance across all strategies by facilitating better working from home and hybrid work arrangements.

In 2022–23 the modernisation project continued with the extension of the Microsoft Teams environment into all meeting rooms as part of our new office fit-out. This increases opportunities for collaboration, provides a better meeting experience and better engagement with remote participants, and enables virtual facilitation and delivery of workshops. Staff are finding it easier to work collaboratively and easier to stay in touch while working outside the office. This supports the NBA’s ability to offer flexible working arrangements.

Improvements underway are:

- ◆ Expanding the desktop Teams environment into a telephony system. This will enable external calls to be made through Teams and remove the need for desk phones. Phone numbers will be virtual, so staff will no longer miss landline calls from external stakeholders when working from home. They will also be able to call each other on Teams externally as well as (as currently) internally.
- ◆ Modernisation of the NBA website – both the content and the platform. The site will move to GOVCMS, which provides a consistent user experience across all government websites. This change will make the NBA’s online presence consistent with that of other agencies, including the Department of Health and Aged Care. It will also remove certain security risks. At the same time the NBA is undertaking a full review of website content and updating it to provide current information written for website users.
- ◆ Modernisation of the NBA intranet – both the content and the platform. The purpose of this project is to improve the user experience and flexibility of publishing to enable the agency to provide up-to-date information to support staff in their daily work. The project involves migration to the SharePoint platform and a full content review and update. The new platform also removes certain security risks.
- ◆ Progress on laboratory interfaces. (See ‘Interface with laboratory information systems’ under Strategy 2.)

Security

The NBA continued to monitor and enhance the protective security and cyber resilience of its ICT systems and infrastructure in 2022–23. We continued to improve the agency’s security posture through improvements to our systems and ICT infrastructure, as well as new training for all staff to improve awareness and detection of phishing and ransomware cyber threats.

The NBA also continued to implement the Australian Signals Directorate recommended Essential 8 controls as part of our ongoing active management of cyber security.

Blood sector knowledge development

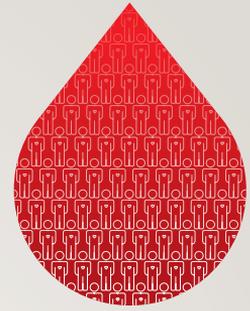
A wide range of work contributed to blood sector knowledge development across the NBA in 2022–23. For example, NBA staff developed their knowledge of the sector by:

- ◆ attending (or virtually attending) domestic and international meetings and conferences to maintain and share current information and knowledge of domestic and global blood sector issues
- ◆ visiting blood product manufacturing facilities and distribution centres to support an understanding of the blood and blood products supply chain
- ◆ monitoring and reporting on international issues and trends relevant to the management of blood arrangements in Australia.

The NBA continued to release regular summary reports on international trends that may influence management of blood and blood products in Australia. These reports are published on our website and sent directly to selected internal and external stakeholders.



PART 3



Management and accountability

Corporate governance

External scrutiny

Fraud control

Our people

Bob's story

I'm 64 years old and grateful to be here.

My story starts nine years ago with a trip to the doctor about some stomach pain. Three days later I was in hospital with advanced leukaemia.

In 2014 I was leading a very active life. I was a scuba diving instructor. I'd trekked the Kokoda Trail. I enjoyed bushwalking and trail running.

I'd put my fatigue down to age and had no idea I'd been fighting leukaemia for over three months. At the point when I was diagnosed, I had two weeks to live if not treated. I went through chemotherapy, lumbar punctures and a bone marrow transplant.

During my treatment, I received countless life-saving bags of blood, plasma and platelets. These kept me alive. Only 5 per cent of adult leukaemia patients survive, and I was one of them. With every bag of blood, I thanked the faceless hero who'd donated it.

I was so grateful, I asked one of the nurses how I could give something back. They said the best thing I could do is ask my friends and family to donate blood. So that's what I've done: we recruited over 300 people to give blood as Bob's Blood Angels.

Three weeks after I was diagnosed, my first granddaughter, Elle, was born. Six months after I was diagnosed, my daughter Tanya



married and I was able to walk her down the aisle. Today, Kelly and I have five grandkids, whom I love spending time with.

It's been nine years since my diagnosis and I'm grateful for every day of it. From the bottom of my heart, I want to thank every donor for their generosity.

Disclaimer: This story is not indicative of a measure of performance.

Corporate governance

National blood sector governance arrangements

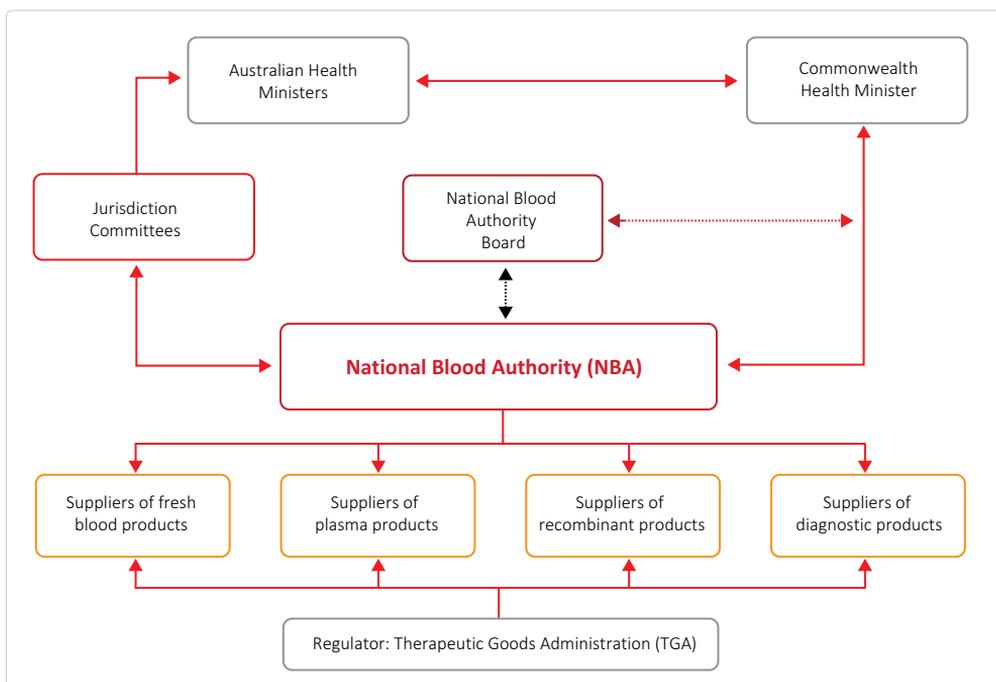
The NBA is established under the *National Blood Authority Act 2003*. It is a statutory body and portfolio agency of the Commonwealth Department of Health and Aged Care. Funding for the national blood arrangements is jointly provided by all Australian governments, with the Commonwealth Government providing 63 per cent of funding and states and territories 37 per cent.

The National Blood Agreement between all governments in 2002 outlines the policy framework for the national blood arrangements. The agreement outlines the:

- ◆ nationally agreed objectives of governments for the blood sector
- ◆ governance arrangements for the sector
- ◆ administrative arrangements for the management of the national blood supply
- ◆ financial arrangements for the national blood supply.

The key governing arrangements within the Australian blood sector are summarised in Figure 3.1.

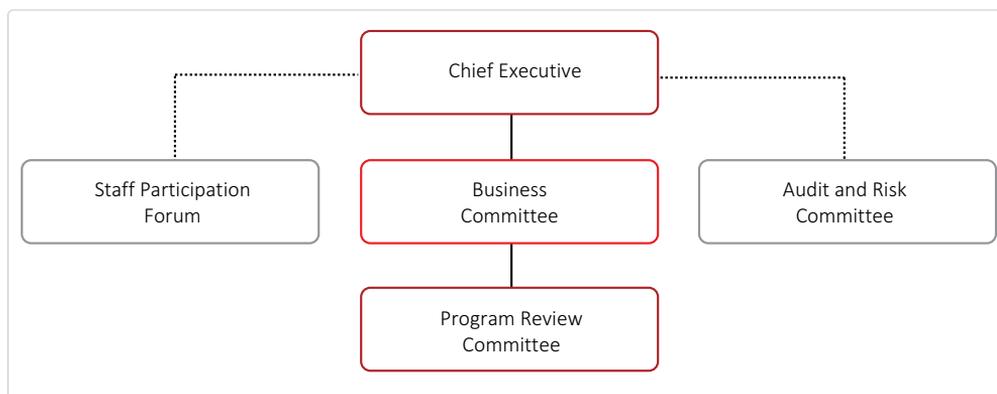
FIGURE 3.1 Blood sector governance



NBA governance arrangements

Four committees assist the NBA Chief Executive with the corporate governance and administration of the agency as shown in Figure 3.2.

FIGURE 3.2 NBA governance



NBA Business Committee

The NBA Business Committee is the primary governance committee for the NBA. It provides strategic oversight and direction for the management of the NBA and its business and finance activities.

The functions of the Business Committee are to:

- ◆ support and advise the Chief Executive
- ◆ provide strategic leadership, guidance and direction in relation to all business activities and processes, and in relation to people management, ICT issues and financial and information management
- ◆ review NBA business plans and activities, and monitor progress regularly against key milestones and deliverables
- ◆ consider NBA investment priorities and review them on a regular basis
- ◆ oversee relevant sub-committees and project boards.

The committee comprises the Chief Executive; Deputy Chief Executives; Chief Finance Officer; Chief Information Officer; and Director, People and Communications. The committee is chaired by the Chief Executive and supported by the Executive Office. Other staff are occasionally required to attend meetings for relevant agenda items.

Audit and Risk Committee

The NBA Audit and Risk Committee (ARC) provides independent advice and assurance to the Chief Executive on strategies to enhance the organisation's governance control and risk management framework, assist with planning and conducting the NBA's internal audit program, and support financial and legislative compliance.

The committee met six times in 2022–23.

The ARC comprises independent members with relevant expertise appointed by the NBA Chief Executive. The ARC members in 2022–23 were:

- ◆ Mrs Roslyn Jackson (Chair)
- ◆ Mr Paul Bedbrook (NBA Board member)
- ◆ Mr Greg Fraser.

Short biographies for each member, their attendance at committee meetings and information about their remuneration can be found in Appendix 1.

The ARC Charter is approved by the NBA Chief Executive and is regularly reviewed in conjunction with the ARC. The ARC undertakes an annual process of performance self-assessment. The charter can be found on the NBA website at www.blood.gov.au/committees-and-working-groups.

The NBA Chief Executive, Deputy Chief Executives and Chief Financial Officer maintain an active engagement with the ARC and attend ARC meetings. This provides relevant organisational input and context to help the ARC's deliberations and enhances the direct benefit of advice provided by the ARC.

Representatives from the Australian National Audit Office (ANAO) and the NBA's internal auditors (currently RSM (Australia)) also attend meetings and contribute to agenda items and discussion as required.

The ARC Charter describes four primary areas of focus. In 2022–23, matters considered by the ARC included:

- ◆ financial reporting
 - engagement with NBA management and the ANAO in relation to the annual financial statements audit, including formal clearance of annual financial statements
- ◆ performance reporting
 - NBA Corporate Plan, Business Plan and Operational Scorecard
 - NBA annual performance KPIs and reporting
- ◆ systems of risk oversight and management
 - NBA strategic risk management and business continuity framework
 - NBA fraud control framework
 - Comcover benchmark reporting
 - National Managed Fund investment framework and performance
- ◆ systems of internal control
 - annual internal audit work plan, reports and implementation of recommendations.

Internal audit and risk

The NBA's internal audit and risk program is guided by the ARC and is a key element of risk assessment and management. The ARC reviews the risk register on an annual basis as a key input in developing the NBA's internal audit program.

RSM (Australia) conducted a range of internal audits and reviews in line with the work program developed in conjunction with the ARC. The 2022–23 work program encompassed audits of the Staff Participation Forum Framework, records management, and work health and safety.

The ARC continued to monitor the implementation of internal audit report recommendations through regular status reports.

Program Review Committee

The NBA Program Review Committee focuses on the implementation and delivery of the 10 major NBA work areas to ensure strong performance and accountability and provides guidance and direction on issues and the forward work program.

The committee is chaired by the Chief Executive and comprises all the NBA Senior Management Group, supported by the Executive Office. Staff from the area under review also attend relevant meetings.

Staff Participation Forum

The Staff Participation Forum is established under the NBA Enterprise Agreement as a formal mechanism for NBA management to consult directly with employee representatives about significant issues relating to employment matters. The forum comprises NBA staff representatives, NBA management representatives and a work health and safety representative.

The Staff Participation Forum met twice during 2022–23 and discussed the following issues:

- ◆ COVID-19 management, including seeking input on the NBA's COVID safety plan
- ◆ The proposed salary increase under section 24(1) of the *Public Service Act 1999*
- ◆ Australian Public Service (APS) employee census results
- ◆ APS-wide bargaining
- ◆ Draft flexible working principles
- ◆ Annual mandatory training requirements for 2022–23
- ◆ Work health and safety, including psychosocial hazards and health and safety representative arrangements.

Statutory committees

Four committees have been established by the NBA Chief Executive under section 38 of the *National Blood Authority Act 2003* to provide advice and assist with the performance of the NBA's functions.

The terms of reference, membership details and section 38 instruments for these committees are available on the NBA website. Their roles and functions are as follows.

National Immunoglobulin Governance Committee

The National Immunoglobulin Governance Committee (NIGAC) provides clinical advice to enhance the National Immunoglobulin Governance Program. Members are appointed based on expertise and experience.

The NIGAC met three times in 2022–23.

The NIGAC is chaired by Emeritus Professor Robert Moulds. Its members represent medical specialisations, consumer advocacy, epidemiology, health economics, nursing, large and small jurisdictions, Australian Red Cross Lifeblood and the NBA.

The NIGAC is supported by the specialist working groups for immunology, haematology, neurology and transplantation medicine.

Australian Bleeding Disorders Registry Steering Committee

The Australian Bleeding Disorders Registry (ABDR) is used daily by clinicians to help manage the treatment of people with bleeding disorders and to understand more about the incidence and prevalence of bleeding disorders.

The ABDR Steering Committee provides advice to the NBA on the governance and use of the ABDR. It consists of representatives involved in clinical management, advocacy, and funding of treatment for people with bleeding disorders. The committee chair is Dr Chris Barnes.

The committee met twice in 2022–23 and held one out-of-session meeting. It provided advice on system enhancements to the ABDR; ABDR Steering Committee governance; product use and management for the treatment of bleeding disorders; and data access and analysis.

Patient Blood Management Advisory Committee

The Patient Blood Management Advisory Committee (PBMAC) provides advice and guidance to the NBA about implementing patient blood management in Australia, including developing a new National Patient Blood Management Implementation Strategy.

The PBMAC was established in 2019, replacing the previous Patient Blood Management Steering Committee. Its members have expertise and knowledge in the health sector, blood management, education, quality and safety, and consumer issues.

The PBMAC is chaired by Dr Lilon Bandler, Associate Professor and Principal Research Fellow for the Leaders in Indigenous Medical Education (LIME) Network. Professor Bandler has been involved in medical education across the healthcare sector since 1985. She has worked in general practice for many years and currently provides regular GP services (including telehealth) to rural and remote western New South Wales. She is a member of the Macquarie University Humanities and Social Sciences Human Research Ethics Committee.

The PBMAC met in July, September and November 2022, and in May 2023.

In November 2022 both the PBMAC and the Haemovigilance Advisory Committee (HAC) met face to face in Canberra at the same time. Their separate meetings were followed by a joint meeting the next day to discuss common issues on which the two committees could collaborate.



Members of the Patient Blood Management Advisory Committee and the Haemovigilance Advisory Committee in Canberra, November 2022.

Left to right: Elizabeth Quinn, Leia Earnshaw, Karyn Barton, Janine Hardy, Sandra Cochrane, Erica Wood AO, Linley Bielby, James Daly, James Isbister, Tracey Spigiel, Bronwyn Pearse, Alison Street AO, Lana Ngo, Neil Everest, Penny O’Beid, Angela Gowland, Maria Burgess, Susan Ireland, Suzie Cong, Brett Aitken, Kobie von Wielligh, Bradley Webster, Jeffrey Hamdorf.

Emeritus Professor James Isbister, a long-time member and former chair of the PBMAC and a friend of the NBA, retired from the PBMAC this year, and the November meeting was his last. To honour the length and breadth of Emeritus Professor Isbister’s advice, expertise and participation in the blood sector, and in particular patient blood management, the NBA and the two committees celebrated with a dinner in Canberra.



Mr John Cahill (left) presenting a gift to Emeritus Professor James Isbister, November 2022.

Haemovigilance Advisory Committee

The NBA’s National Haemovigilance Program is informed by the HAC. This group provides advice and guidance to the NBA on adverse event reporting originating from health service organisations, on national transfusion safety priorities and on the development and implementation of the strategic framework.

The HAC is chaired by Associate Professor Alison Street AO, a member of the NBA Board from 2017 to June 2023. Its members have expertise and knowledge in the health sector, blood management, quality and safety, and consumer issues.

The HAC met four times during 2022–23 via videoconference and once face to face.

External scrutiny

There were no judicial decisions, decisions of administrative tribunals or decisions of the Australian Information Commissioner in 2022–23 that had, or may have had, a significant impact on the NBA's operations.

There were no legal actions lodged against the NBA in 2022–23.

There were no reports on operations of the NBA by the Auditor-General, a parliamentary committee or the Commonwealth Ombudsman in 2022–23.

There were no capability reviews of the NBA released during 2022–23.

Fraud control

Consistent with the Public Governance, Performance and Accountability Rule 2014 (section 10), the NBA conducts fraud risk assessments regularly and when there is a substantial change in the structure, functions or activities of the organisation.

Under the current fraud control plan, the NBA continually monitors accountability and control frameworks to meet the specific needs of the agency and ensure that it complies with the Public Governance, Performance and Accountability Rule 2014.

No instances of fraud were detected during the reporting year.

Certification of fraud control arrangements

I, John Cahill, certify that the National Blood Authority has:

- ◆ prepared fraud risk assessments and a fraud control plan
- ◆ in place appropriate fraud prevention, detection, investigation and reporting mechanisms that meet the specific needs of the NBA
- ◆ taken all reasonable measures to appropriately deal with fraud relating to the NBA.

John Cahill
Chief Executive
National Blood Authority

Our people

At 30 June 2023 the NBA had 81 staff employed under the *Public Service Act 1999* (PS Act). The NBA's average staffing level for 2022–23 was 68.60. The APS workforce was complemented by 21 contract staff.

Most staff work out of the NBA's office in Canberra, with one staff member outposted in Queensland, one in New South Wales and one in Victoria.

Of the NBA's APS staff, 75 per cent are female, 17 per cent work part time, 93 per cent are ongoing APS employees, and 54 per cent are at APS 6 or EL 1 level. In the 2023 APS employee census, 2 per cent of NBA staff identified as Australian Aboriginal and/or Torres Strait Islander, 21 per cent as having been born outside Australia, 16 per cent as having an ongoing disability and 15 per cent as LGBTIQ+. Further information on the NBA workforce is in Appendix 2.

As a small agency, the NBA provides an environment that empowers staff to take direct responsibility for delivering in a challenging and ever-changing sector. The NBA promotes an environment of diversity, agility, resilience, enthusiasm and leadership, with a strong work ethic.

During 2022–23 the NBA continued its commitment to managing and developing its employees to meet organisational objectives. Further information on the NBA's effectiveness in managing and developing employees can be found in Part 2, Delivery of Strategy 5.

Gender pay gap

The APS Gender Equality Strategy 2021–26 sets out a shared vision for gender equality towards which everyone in the APS can contribute. Reducing the gender pay gap is an important part of this vision, as essentially the gender pay gap is a measure of the value of the contribution of each gender in the workforce.

The most recent data, collected in 2021, shows that on average, pay for women in the NBA was 3.9 per cent higher than pay for men. This contrasts with the gender pay gap for the APS as a whole, which was 6 per cent in favour of men. On those figures, the NBA is one of only 13 APS agencies where average earnings are higher for women than for men. This reflects the high proportion of women in the NBA workforce – 75 per cent as at 30 June 2023.

Our values

The NBA supports the APS values, employment principles and code of conduct. These standards apply to the conduct of all NBA staff. Our staff understand their responsibilities as Australian public servants and as representatives of the NBA and the Australian Government.

As part of the NBA's induction program, new employees complete mandatory eLearning on APS values and principles.

Employment arrangements

The terms and conditions of employment for non-SES employees are covered by the National Blood Authority Enterprise Agreement 2015–18, with further wage increases provided between 2022 and 2023 under the National Blood Authority Determination 2022/1. Individual flexibility arrangements are implemented with non-SES employees for additional entitlements to meet the genuine needs of the NBA and individual employees.

Terms and conditions of employment for SES employees are implemented through individual determinations made by the Chief Executive under subsection 24(1) of the PS Act.

TABLE 3.1 Australian Public Service Act employment arrangements as at 30 June 2023

	SES	Non-SES	Total
National Blood Authority Enterprise Agreement 2015–18 and National Blood Authority Determination 2022/01		80	80
<i>Public Service Act 1991</i> section 24(1) determinations	1		1
Individual flexibility arrangements		14	14
TOTAL	1	94	95

Remuneration and benefits

TABLE 3.2 Australian Public Service Act employment by classification and NBA salary range as at 30 June 2023

	Minimum salary (\$)	Maximum salary (\$)
SES 1	251,772	251,772
EL 2	132,002	148,721
EL 1	111,076	126,156
APS 6	89,995	101,526
APS 5	81,580	86,104
APS 4	75,005	79,253
APS 3	66,200	73,381
APS 2	57,287	62,513
APS 1	48,998	55,046

TABLE 3.3 Executive remuneration 2022–23

Name	Position title	Short-term benefits \$			Post-employment benefits \$	Long-term benefits \$		Termination benefits \$	Total remuneration \$
		Base salary \$	Bonuses	Other benefits and allowances		Long service leave	Other long-term benefits		
John Cahill	Chief Executive	342,957	-	-	37,119	5,732	-	-	385,808
Anna Peatt	Deputy Chief Executive	222,436	-	-	37,164	4,586	-	-	264,187
Kate McCauley	Deputy Chief Executive	141,223	-	-	28,379	5,194	-	-	174,795
Elizabeth Quinn	Deputy Chief Executive	119,244	-	-	19,910	2,278	-	-	141,431

TABLE 3.4 Remuneration for NBA Senior Executive Service (SES) staff 2022–23

Total remuneration bands \$	Number of SES staff	Short-term benefits \$			Post-employment benefits \$		Long-term benefits \$		Termination benefits \$	Total remuneration \$
		Average base salary	Average bonuses	Average other benefits and allowances	Average superannuation contributions	Average long service leave	Average other long-term benefits	Average termination benefits		
0–220,000	2	130,234	-	-	24,145	3,736	-	-	158,114	
220,001–245,000	-	-	-	-	-	-	-	-	-	
245,001–270,000	1	222,436	-	-	37,164	4,587	-	-	264,187	
270,001–295,000	-	-	-	-	-	-	-	-	-	
295,001–320,000	-	-	-	-	-	-	-	-	-	
320,001–345,000	-	-	-	-	-	-	-	-	-	
345,001–370,000	-	-	-	-	-	-	-	-	-	

Performance pay

Performance pay was not a component of any remuneration for NBA staff during 2022–23.

Non-salary benefits

NBA staff had access to a range of non-salary benefits during 2022–23, including:

- ◆ access to purchased additional annual leave
- ◆ car parking (for EL 2 staff and senior executives)
- ◆ Christmas close-down period
- ◆ wellbeing facilities
- ◆ Employee Assistance Program
- ◆ financial assistance and/or paid leave for professional development
- ◆ flexible working arrangements
- ◆ health and wellbeing program enabling staff to be reimbursed for health and wellbeing activities
- ◆ rapid antigen tests (for COVID-19)
- ◆ influenza vaccinations for staff and their immediate family members
- ◆ laptop computers, peripherals, internet access and mobile phones
- ◆ professional development, mentoring and counselling
- ◆ professional memberships
- ◆ reimbursement of reasonable expenses associated with performance of duties
- ◆ reimbursement for financial advice associated with a voluntary redundancy
- ◆ salary packaging.

Professional and personal development

Employee development in the APS is an important contributor to a productive, progressive, innovative and engaged workforce. The NBA recognises the importance of ensuring that staff members continue to develop their skills. We facilitate this through sourced internal training, eLearning programs, external training, and development opportunities such as studies assistance, stakeholder engagement and participation in conferences.

The NBA's eLearning management system, Learnhub, supports ongoing professional and personal development for staff. Learnhub has strengthened staff and NBA capabilities, building on existing staff skills and satisfying annual mandatory training requirements.

For information about training provided to NBA staff in 2022–23, see Part 2, Delivery of Strategy 5.

Work health and safety

Workplace health and safety matters are standing agenda items that are routinely discussed at various organisational meetings. This includes regular reporting to the senior management group, the NBA Business Committee, the NBA Board and the Staff Participation Forum.

No notifiable incidents were lodged with Comcare in 2022–23.

Comcare’s ‘Introduction to psychological health and safety in the workplace’ training was added to the mandatory annual learning program for NBA staff to support the new regulations for identifying and managing workplace psychosocial hazards and risks under the Work Health and Safety Regulations 2011.

Ergonomic workstation assessments were offered to all staff in early 2023 following the new office fit-out, which included new desks. Additional workstation equipment was then sourced for those who required it.

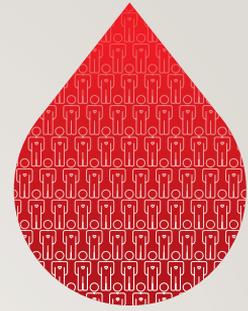
The 2023 Influenza Vaccination Program, administered by the Pharmacy Guild of Australia, was available to all NBA employees and their families. As at 30 June 2023, a total of 88 people had used the program.

The NBA continued to manage COVID issues in line with ACT Government advice. This included implementing COVID-safe practices to support staff, updating the COVID safety plan as necessary, providing advice to staff, providing rapid antigen tests for staff, supporting hybrid working arrangements to reduce the risk of transmission in the workplace, maintaining hygiene protocols and providing cleaning products. As part of our new office fit-out, all staff have individually allocated desks at safe distances apart.

Other NBA initiatives to maintain a healthy, safe and secure workplace during 2022–23 included:

- ◆ continuing access to the Employee Assistance Program
- ◆ reviewing workplace health and safety policies and guidance
- ◆ increasing the number of health and safety representatives
- ◆ supporting the training requirements of first aid officers, including new appointees
- ◆ purchasing new defibrillators
- ◆ supporting the accreditation of two staff members as mental health first aid officers.

PART 4



Financial management

Financial arrangements

Financial performance

Assets management

Purchasing

Financial statements



Financial arrangements

Funding

The functions of the NBA are prescribed in the *National Blood Authority Act 2003*, with policy and administrative provisions contained in the National Blood Agreement signed by all governments in 2002. As a material statutory agency, the NBA has a range of corporate and compliance responsibilities under the *National Blood Authority Act 2003*, the *Public Governance, Performance and Accountability Act 2013* (PGPA Act) and the *Public Service Act 1999*, along with a responsibility to meet ministerial, parliamentary and financial reporting requirements.

Under the National Blood Agreement between the Commonwealth of Australia and all states and territories, 63 per cent of NBA funding is provided by the Commonwealth and the remaining 37 per cent by the state and territory governments. The funding covers both the national blood supply and the operations of the NBA.

For budgeting and accounting purposes, the NBA's financial transactions are classified as either departmental or administered revenues or expenses as follows:

- ◆ Departmental revenues and expenses: assets, liabilities, revenues and expenses controlled by the NBA for its operations
- ◆ Administered revenues and expenses: activities and expenses controlled or incurred by the NBA on behalf of governments, mainly for procuring requested products and services.

The NBA's agency resource statement and total resources for outcome tables are in Appendix 5. Table 4.1 summarises the NBA's high-level funding and expenditure for 2022–23.

TABLE 4.1 High-level summary: departmental and administered funding and expenditure 2022–23

	Funding (\$m)	Expenditure (\$m)
Departmental – NBA Operations	10.722	13.270
Administered – National Blood and Blood Products Supply	1,558.767	1,549.710

Special accounts

The NBA operates its financial arrangements through two special accounts, the National Blood Account and the National Managed Fund (Blood and Blood Products) Special Account 2017.

Special accounts are held in the Consolidated Revenue Fund and are used for setting aside and recording amounts to be used for specified purposes. Funds received from the Commonwealth, state and territory governments are held in the special accounts and used as required.

Funding for the supply of blood and blood products and the operation of the NBA is included in the National Blood Account, established under section 40 of the *National Blood Authority Act 2003*. All balances in the National Managed Fund (Blood and Blood Products) Special Account are classified as administered funds.

The National Managed Fund (Blood and Blood Products) Special Account 2017 was established under section 78 of the PGPA Act to accumulate funds required to meet potential product liability claims against Lifeblood. Contributions to the account have been made by all governments and Lifeblood. In addition, interest is received on special account balances.

Financial performance

This section provides a summary of the NBA's financial performance for 2022–23. Details of departmental and administered results are shown in the audited financial statements. This summary should be read in conjunction with those statements.

Audit report

The NBA received an unqualified audit report for 2022–23.

Departmental finances

The NBA's departmental finances cover the NBA's operations.

Operating result

The NBA's income statement reports a 2022–23 operating loss of \$2.5 million, compared with an operating loss of \$0.524 million in 2021–22. This loss is due to increased resourcing and IT services and a return to pre-COVID expenditure in areas such as office supplies and travel. There was also a one-off correction to an accounting error from the previous period which resulted from the application of AASB 16 *Leases*. Further detail is provided in the financial statements in this report.

TABLE 4.2 Key financial performance 2018–19 to 2022–23

Revenue and expenses	2018–19 (\$m)	2019–20 (\$m)	2020–21 (\$m)	2021–22 (\$m)	2022–23 (\$m)
Contributions from the Australian Government	5.682	5.681	5.510	5.513	5.479
Contributions from states and territories, and other revenue	4.469	4.769	5.242	5.031	5.243
Total revenue	10.151	10.451	10.752	10.544	10.722
Employee expenses	7.438	7.689	7.605	7.683	9.058
Supplier expenses	2.909	1.855	2.433	2.003	2.686
Other expenses	0.481	1.129	1.189	1.382	1.526
Total expenses	10.828	10.763	11.227	11.068	13.270
Operating result	(0.677)	(0.154)	(0.475)	(0.524)	(2.548)

Revenue

Total departmental revenue received in 2022–23 amounted to \$10.722 million: \$5.479 million in funding from the Commonwealth Government; and \$5.243 million in contributions received from the states and territories and other revenue. This represents an increase of \$0.178 million (1.69 per cent) on revenue received in 2021–22. Other revenue mostly relates to adjustments arising from the entitlements of staff transferring from other agencies.

Expenses

The NBA's expenses for 2022–23 amounted to \$13.270 million. This represents an increase of \$2.202 million (19.90 per cent) on total expenses from 2021–22. This is due to increased headcount, IT services and returning to a non-COVID-19 work environment.

Balance sheet

Details of the NBA's assets and liabilities are presented in the audited financial statements in this report.

Financial assets

The NBA held cash and cash equivalents of \$0.663 million at 30 June 2023. This included funds received from all jurisdictions and transferred to the Official Public Account held by the Department of Finance until required for expenditure. The cash balance reduced significantly due to the timing of appropriation drawdowns and the need to have funds on hand for the office refurbishment.

The balance of trade and other receivables was \$3.408 million at 30 June 2023; this consists of appropriations receivable. The increase from the prior period is due to the timing of appropriation drawdowns.

Non-financial assets

The NBA had non-financial assets of \$9.608 million at 30 June 2023. The carrying amount of non-financial assets increased during the financial year due to the office refurbishment.

Payables

There was no significant change in the carrying amount of payables during the financial year.

Interest-bearing liabilities

The interest-bearing liability is the 243 Northbourne Avenue NBA office. The current year increase is due to the accounting treatment of a lease incentive not reported at the commencement of the lease; it is partially offset by current year payments.

Provisions

Employee provisions, which cover annual and long-service leave entitlements, increased by \$0.422 million to \$2.319 million due to increased staffing.

Administered finances

The NBA's administered funding includes contributions from the Commonwealth and all state and territory governments for the supply of blood and blood products. Each year, Health Ministers approve an annual National Supply Plan and Budget that is formulated by the NBA from estimates provided by individual states and territories of the expected products required to meet clinical demand within their respective jurisdictions.

In 2022–23 the NBA returned \$23.378 million (compared with \$13.33 million in 2021–22) to all governments for the 2021–22 end-of-year reconciliation as part of the National Blood Agreement.

Revenue

Total revenue for 2022–23 is summarised in Table 4.3. Total revenue increased by \$88,101 million (a 5.99 per cent increase, down from the 12.57 per cent increase in the prior year) for 2022–23.

TABLE 4.3 Summarised administered revenue 2018–19 to 2022–23

Administered revenue	2018–19 (\$m)	2019–20 (\$m)	2020–21 (\$m)	2021–22 (\$m)	2022–23 (\$m)
Funding for supply of blood and blood products	1,203.591	1,211.007	1,303.983	1,468.979	1,555.744
Other revenue	4.330	3.419	2.437	1.686	3.023
Total administered revenue	1,207.921	1,214.426	1,306.420	1,470.655	1,558.767

Expenses

Total administered expenses for 2022–23, including grants and rendering of goods and services, are summarised in Table 4.4. Administered expenses for 2022–23 increased by 10.73 per cent from 2021–22.

In accordance with the Output Based Funding Model, Lifeblood returned \$25.32 million to the NBA in 2022–23, compared with \$61.21 million in 2021–22.

TABLE 4.4 Summarised administered expenses 2018–19 to 2022–23

Administered expenses	2018–19 (\$m)	2019–20 (\$m)	2020–21 (\$m)	2021–22 (\$m)	2022–23 (\$m)
Rendering of goods and services – external entities	1,193.734	1,174.839	1,365.007	1,396.321	1,544.875
Grants to the private sector – non-profit organisation	0.738	0.745	0.582	0.372	1.057
Other	1.600	2.058	2.724	2.802	3.778
Total administered expenses	1,196.072	1,177.642	1,368.313	1,399.495	1,549.710

Administered assets and liabilities

The NBA's administered assets comprise:

- ◆ funds held in the Official Public Account
- ◆ investments made in relation to the National Managed Fund
- ◆ goods and services tax receipts from the Australian Taxation Office and payments to suppliers for products
- ◆ blood and blood product inventory held for distribution, including the national reserve of blood products
- ◆ a prepayment to Lifeblood as part of the Output Based Funding Model.

During 2022–23, net administered assets increased by \$9.057 million.

Administered liabilities comprise payables to suppliers.

Assets management

The NBA has developed an asset replacement strategy to ensure that it has adequate funding for the replacement of assets as they come to the end of their useful life.

Purchasing

The NBA's procurement activities were undertaken in accordance with the PGPA Act, the Commonwealth Procurement Rules and best practice guidance when undertaking procurements. The NBA applies these requirements through internal financial and procurement policies.

The NBA has developed business processes to ensure that the knowledge and best practices developed in the agency for key purchasing activities are captured and made available to new staff and that relevant procedures and processes are documented and followed.

Over recent years several internal audit programs have tested these processes to ensure that they comply with government policy and better practice. The audit findings have been consistently favourable in relation to complying with mandatory processes. The NBA has implemented recommended improvements.

The NBA's key business processes are constantly reviewed and refined as part of the NBA's expectation of itself that it will continuously improve the management of its core business functions.

The Chief Executive did not issue any exemptions from the required publication of any contract or standing offer in the purchasing and disposal gazette.

Information on all NBA contracts awarded with a value of \$10,000 (incl. GST) or more is available on AusTender at www.tenders.gov.au.

There were no contracts of \$100,000 or more (incl. GST) let in 2022–23 that did not provide for the Auditor-General's access to the contractor's premises.

Consultancy and non-consultancy contracts

Annual reports contain information about actual expenditure on reportable consultancy and non-consultancy contracts. Information on the overall value of these contracts is available on AusTender at www.tenders.gov.au.

The NBA selects consultants using panel arrangements or by making an open approach to market. Decisions to engage consultants during 2022–23 were made in accordance with the PGPA Act and related provisions including the Commonwealth Procurement Rules, and relevant internal policies and procedures.

As summarised in Table 4.5, three new reportable consultancy contracts were entered into during 2022–23, involving total actual expenditure of \$678,709. In addition, three ongoing reportable consultancy contracts were active during the period, involving total actual expenditure of \$686,805.

TABLE 4.5 Expenditure on reportable consultancy contracts 2022–23

	Number	Expenditure \$ (GST incl.)
New contracts entered into during the reporting period	3	678,709
Ongoing contracts entered into during the previous reporting period	3	686,805
Total	6	1,365,514

Table 4.6 shows organisations receiving a share of reportable consultancy contract expenditure in 2022–23.

TABLE 4.6 Organisations receiving a share of reportable consultancy contract expenditure 2022–23

Name of organisation	Expenditure \$ (GST incl.)
Proximity Advisory Services Pty Ltd (92 147 937 844)	579,038
Health Technology Analysts Pty Ltd (13 099 239 442)	240,146
ABT Associates Pty Ltd (76 091 591 294)	224,620
Gartner Australasia Pty Ltd (69 003 708 601)	192,267
HealthConsult Pty Ltd (67 118 337 821)	129,443

Note: a share of reportable consultancy contract expenditure refers to contracts that are the top five highest expenditure or greater than 5 per cent of the total consultancy expenditure.

Table 4.7 shows total expenditure on all reportable non-consultancy contracts in 2022–23.

TABLE 4.7 Expenditure on reportable non-consultancy contracts 2022–23

	Number	Expenditure \$ (GST incl.)
New contracts entered into during the reporting period	27	138,786,251
Ongoing contracts entered into during the previous reporting period	30	1,587,170,758
Total	57	1,725,957,009

Table 4.8 shows organisations receiving a share of reportable non-consultancy contract expenditure in 2022–23.

TABLE 4.8 Organisations receiving a share of reportable non-consultancy contract expenditure 2022–23

Name of organisation	Expenditure \$ (GST incl.)
Australian Red Cross Lifeblood (50 169 561 394)	748,386,034
CSL Behring (Australia) Pty Ltd (48 160 734 761)	660,269,433
Roche Products Pty Ltd (70 000 132 865)	78,520,398
Grifols Australia Pty Ltd (35 050 104 875)	75,572,298
Octapharma Australia Pty Ltd (23 109 574 692)	43,098,935

Note: a share of reportable non-consultancy contract expenditure refers to contracts that are the top five highest expenditure or greater than 5 per cent of the total non-consultancy expenditure.

Procurement initiatives to support small business

The NBA supports small business participation in the Commonwealth Government procurement market. Small and medium enterprise (SME) and small enterprise participation statistics are available on the Department of Finance website at www.finance.gov.au/procurement/statistics-on-commonwealth-purchasing-contracts.

The NBA recognises the importance of ensuring that small businesses are paid on time. The results of the Survey of Australian Government Payments to Small Business are available on the Treasury website at www.treasury.gov.au.

The NBA has procurement practices in place that support SMEs. These include electronic systems or other processes used to facilitate on-time payment performance, such as the use of credit cards as a payment mechanism for low-value procurements.

Financial statements



INDEPENDENT AUDITOR'S REPORT

To the Minister for Health and Aged Care

Opinion

In my opinion, the financial statements of the National Blood Authority (the Entity) for the year ended 30 June 2023:

- (a) comply with Australian Accounting Standards – Simplified Disclosures and the *Public Governance, Performance and Accountability (Financial Reporting) Rule 2015*; and
- (b) present fairly the financial position of the Entity as at 30 June 2023 and its financial performance and cash flows for the year then ended.

The financial statements of the Entity, which I have audited, comprise the following as at 30 June 2023 and for the year then ended:

- Statement by the Accountable Authority and Chief Financial Officer;
- Statement of Comprehensive Income;
- Statement of Financial Position;
- Statement of Changes in Equity;
- Cash Flow Statement;
- Administered Schedule of Comprehensive Income;
- Administered Schedule of Assets and Liabilities;
- Administered Reconciliation Schedule;
- Administered Cash Flow Statement; and
- Notes to the financial statements, comprising a summary of significant accounting policies and other explanatory information.

Basis for opinion

I conducted my audit in accordance with the Australian National Audit Office Auditing Standards, which incorporate the Australian Auditing Standards. My responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Statements* section of my report. I am independent of the Entity in accordance with the relevant ethical requirements for financial statement audits conducted by the Auditor-General and his delegates. These include the relevant independence requirements of the Accounting Professional and Ethical Standards Board's APES 110 *Code of Ethics for Professional Accountants (including Independence Standards)* (the Code) to the extent that they are not in conflict with the *Auditor-General Act 1997*. I have also fulfilled my other responsibilities in accordance with the Code. I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my opinion.

Accountable Authority's responsibility for the financial statements

As the Accountable Authority of the Entity, the Chief Executive Officer is responsible under the *Public Governance, Performance and Accountability Act 2013* (the Act) for the preparation and fair presentation of annual financial statements that comply with Australian Accounting Standards – Simplified Disclosures and the rules made under the Act. The Chief Executive Officer is also responsible for such internal control as the Chief Executive Officer determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the Chief Executive Officer is responsible for assessing the ability of the Entity to continue as a going concern, taking into account whether the Entity's operations will cease as a result of an administrative restructure or for any other reason. The Chief Executive Officer is also responsible for disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the assessment indicates that it is not appropriate.

Auditor's responsibilities for the audit of the financial statements

My objective is to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes my opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with the Australian National Audit Office Auditing Standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of the financial statements.

As part of an audit in accordance with the Australian National Audit Office Auditing Standards, I exercise professional judgement and maintain professional scepticism throughout the audit. I also:

- identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for my opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control;
- obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Entity's internal control;
- evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the Accountable Authority;
- conclude on the appropriateness of the Accountable Authority's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Entity's ability to continue as a going concern. If I conclude that a material uncertainty exists, I am required to draw attention in my auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify my opinion. My conclusions are based on the audit evidence obtained up to the date of my auditor's report. However, future events or conditions may cause the Entity to cease to continue as a going concern; and
- evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

I communicate with the Accountable Authority regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that I identify during my audit.

Australian National Audit Office



Sally Bond

Executive Director

Delegate of the Auditor-General

Canberra

12 October 2023

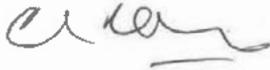
NATIONAL BLOOD AUTHORITY
FINANCIAL STATEMENTS
for the year ended 30 June 2023

STATEMENT BY THE ACCOUNTABLE AUTHORITY AND CHIEF FINANCIAL OFFICER

In our opinion, the attached financial statements for the year ended 30 June 2023 comply with subsection 42(2) of the *Public Governance, Performance and Accountability Act 2013* (PGPA Act), and are based on properly maintained financial records as per subsection 41(2) of the PGPA Act.

In our opinion, at the date of this statement, there are reasonable grounds to believe that the National Blood Authority will be able to pay its debts as and when they fall due.

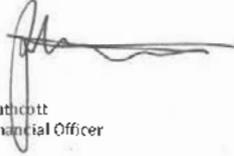
Signed



John Cahill
Accountable Authority

11 October 2023

Signed



Paul Southcott
Chief Financial Officer

11 October 2023

The above statement should be read in conjunction with the accompanying notes

CONTENTS

Certification

Primary financial statements

- Statement of Comprehensive Income
- Statement of Financial Position
- Statement of Changes in Equity
- Cash Flow Statement
- Administered Schedule of Comprehensive Income
- Administered Schedule of Assets and Liabilities
- Administered Reconciliation Schedule
- Administered Cash Flow Statement

Overview

Notes to the financial statements

- 1. Departmental Financial Performance**
 - 1.1 Expenses
 - 1.2 Own-Source Revenue and Gains
- 2. Income and Expenses Administered on Behalf of Government**
 - 2.1 Administered - Expenses
 - 2.2 Administered - Income
- 3. Departmental Financial Position**
 - 3.1 Financial Assets
 - 3.2 Non-Financial Assets
 - 3.3 Payables
 - 3.4 Interest Bearing Liabilities
 - 3.5 Other Provisions
- 4. Assets and Liabilities Administered on Behalf of Government**
 - 4.1 Administered - Financial Assets
 - 4.2 Administered - Non-Financial Assets
 - 4.3 Administered - Payables
- 5. Funding**
 - 5.1 Appropriations
 - 5.2 Special Accounts
 - 5.3 Net Cash Appropriation Arrangements
- 6. People and Relationships**
 - 6.1 Employee Provisions
 - 6.2 Key Management Personnel Remuneration
 - 6.3 Related Party Disclosures
- 7. Managing Uncertainties**
 - 7.1 Contingent Assets and Liabilities
 - 7.2 Departmental - Financial Instruments
 - 7.3 Administered - Financial Instruments
 - 7.4 Fair Value Measurement
 - 7.5 Administered - Fair Value Measurement
- 8. Other Information**
 - 8.1 Aggregate Assets and Liabilities
 - 8.2 Budgetary Reports and Explanations of Major Variances

The above statement should be read in conjunction with the accompanying notes

**NATIONAL BLOOD AUTHORITY
STATEMENT OF COMPREHENSIVE INCOME**

for the year ended 30 June 2023

	Notes	2023 \$'000	2022 restated \$'000
NET COST OF SERVICES			
Expenses			
Employee benefits	1.1A	9,058	7,683
Suppliers	1.1B	2,686	2,003
Depreciation and amortisation	3.2A	1,521	1,351
Finance costs	1.1C	5	7
Losses from asset sales		-	24
Total expenses		13,270	11,068
Own-Source Income			
Own-source revenue			
Revenue from contracts with customers	1.2A	4,739	4,710
Other revenue	1.2B	504	321
Total own-source revenue		5,243	5,031
Gains			
Gains from asset sales		-	-
Total gains		-	-
Total own-source income		5,243	5,031
Net cost of services		(8,027)	(6,037)
Revenue from government	1.2C	5,479	5,513
Deficit		(2,548)	(524)
OTHER COMPREHENSIVE INCOME			
Items not subject to subsequent reclassification to net cost of services			
Changes in asset revaluation surplus		-	-
Total comprehensive loss		(2,548)	(524)

The above statement should be read in conjunction with the accompanying notes

NATIONAL BLOOD AUTHORITY
STATEMENT OF FINANCIAL POSITION
as at 30 June 2023

		2023	2022 restated
	Notes	\$'000	\$'000
ASSETS			
Financial assets			
Cash and cash equivalents	3.1A	663	6,990
Trade and other receivables	3.1B	3,408	1,848
Total financial assets		4,071	8,838
Non-financial assets			
Buildings	3.2A	2,919	3,658
Leasehold improvements	3.2A	6,041	1,454
Plant and equipment	3.2A	490	521
Computer software	3.2A	13	61
Other non-financial assets		145	190
Total non-financial assets		9,608	5,884
Total assets		13,679	14,722
LIABILITIES			
Payables			
Suppliers	3.3A	201	111
Other payables	3.3B	194	307
Deferred revenue	3.3C	303	301
Total payables		698	719
Interest bearing liabilities			
Leases	3.4A	4,050	3,597
Total interest bearing liabilities		4,050	3,597
Provisions			
Employee provisions	6.1A	2,319	1,897
Total provisions		2,319	1,897
Total liabilities		7,067	6,213
Net assets		6,612	8,509
EQUITY			
Contributed equity		7,740	7,089
Reserves		619	619
Retained surplus		(1,747)	801
Total equity		6,612	8,509

The above statement should be read in conjunction with the accompanying notes

NATIONAL BLOOD AUTHORITY
STATEMENT OF CHANGES IN EQUITY
for the year ended 30 June 2023

	Retained Earnings		Asset revaluation reserve		Contributed equity/capital		Total equity	
	2023	2022	2023	2022	2023	2022	2023	2022
	\$'000	\$'000	\$'000	\$'000	\$'000	\$'000	\$'000	\$'000
Opening balance								
Balance carried forward from previous period	801	1,325	619	619	7,089	6,444	8,509	8,388
Opening balance	801	1,325	619	619	7,089	6,444	8,509	8,388
Comprehensive Income								
Revaluation adjustment	-	-	-	-	-	-	-	-
Deficit for the period	(2,548)	(524)	-	-	-	-	(2,548)	(524)
Total comprehensive income attributable to Australian Government	(2,548)	(524)	-	-	-	-	(2,548)	(524)
Transactions with owners								
<i>Contributions by owners</i>								
Departmental capital budget	-	-	-	-	651	645	651	645
Total transactions with owners	-	-	-	-	651	645	651	645
Closing balance as at 30 June attributable to Australian Government	(1,747)	801	619	619	7,740	7,089	6,612	8,509

Accounting Policy:

Equity injection

Amounts appropriated which are designated as 'equity injections' for a year (less any formal reductions) and Departmental Capital Budgets (DCBs) are recognised directly in contributed equity in that year.

The above statement should be read in conjunction with the accompanying notes

**NATIONAL BLOOD AUTHORITY
CASH FLOW STATEMENT**

for the year ended 30 June 2023

	Notes	2023 \$'000	2022 restated \$'000
OPERATING ACTIVITIES			
Cash received			
Appropriations		4,222	4,963
Sale of goods and rendering of services		5,240	4,940
Net GST received		414	344
Other cash received		-	-
Total cash received		9,876	10,247
Cash used			
Employees		9,171	7,534
Suppliers		3,024	1,796
Section 74 receipts transferred to the OPA		638	455
Interest payments on lease liabilities		5	8
Total cash used		12,838	9,793
Net cash from operating activities		(2,962)	454
INVESTING ACTIVITIES			
Cash used			
Purchase of property, plant and equipment		5,291	886
Purchase of intangibles		-	-
Total cash used		5,291	886
Net cash used by investing activities		(5,291)	(886)
FINANCING ACTIVITIES			
Cash received			
Contributed equity - departmental capital budget		1,561	302
Lease incentive received		1,369	-
Total cash received		2,930	302
Cash used			
Principal repayment of lease liabilities		1,004	932
Total cash used		1,004	932
Net cash from/(used by) financing activities		1,926	(630)
Net (decrease)/increase in cash held		(6,327)	(1,062)
Cash and cash equivalents at the beginning of the reporting period		6,990	8,053
Cash and cash equivalents at the end of the reporting period	3.1A	663	6,990

Remapped prior year comparative to make consistent with current year Cash Flow Statement mapping

The above statement should be read in conjunction with the accompanying notes

NATIONAL BLOOD AUTHORITY
ADMINISTERED SCHEDULE OF COMPEHENSIVE INCOME
for the year ended 30 June 2023

	Notes	2023 \$'000	2022 \$'000
NET COST OF SERVICES			
Expenses			
Employee benefits	2.1A	1,161	870
Suppliers	2.1B	1,544,875	1,396,321
Grants - non-profit organisations	2.1C	1,057	372
Depreciation and amortisation	4.2A	2,617	1,932
Total expenses		1,549,710	1,399,495
Income			
Revenue			
Non-taxation revenue			
Revenue from contracts with customers	2.2A	1,555,744	1,468,979
Interest income		3,023	1,686
Other revenue		-	-
Total non-taxation revenue		1,558,767	1,470,665
Total revenue		1,558,767	1,470,665
Total income		1,558,767	1,470,665
Net contribution by services (Deficit)/Surplus		9,057	71,170
OTHER COMPREHENSIVE INCOME			
Items not subject to subsequent reclassification to net cost of services			
Changes in asset revaluation surplus		-	-
Total comprehensive (loss)/income		9,057	71,170

The above statement should be read in conjunction with the accompanying notes

NATIONAL BLOOD AUTHORITY
ADMINISTERED SCHEDULE OF ASSETS AND LIABILITIES
as at 30 June 2023

	Notes	2023 \$'000	2022 \$'000
ASSETS			
Financial assets			
Cash and cash equivalents	4.1A	234,728	182,647
Trade and other receivables	4.1B	24,570	47,830
Other investments	4.1C	140,073	138,973
Total financial assets		399,371	369,450
Non-financial assets			
Plant and equipment	4.2A	289	10
Intangibles	4.2A	2,462	4,502
Inventories	4.2B	112,641	115,177
Prepayments	4.2C	83,620	60,359
Total non-financial assets		199,012	180,048
Total assets administered on behalf of Government		598,383	549,498
LIABILITIES			
Payables			
Suppliers	4.3A	55,568	22,009
Deferred revenue	4.3B	131,940	125,671
Total payables		187,508	147,680
Total liabilities administered on behalf of Government		187,508	147,680
Net assets		410,875	401,818

The above statement should be read in conjunction with the accompanying notes

NATIONAL BLOOD AUTHORITY
ADMINISTERED RECONCILIATION SCHEDULE
as at 30 June 2023

	2023 \$'000	2022 \$'000
Opening administered assets less administered liabilities as at 1 July 2022	401 818	330,305
Net (cost of) / contribution by services		
Income	1,558,767	1,470,665
Expenses		
Payments to entities other than corporate Commonwealth entities	(1,549,710)	(1,399,495)
Other comprehensive income		
Revaluations transferred to reserves	-	-
Transfers (to) / from the Australian Government:		
Appropriation transfers from Official Public Account:		
Annual appropriations	-	343
Closing assets less liabilities as at 30 June 2023	410,875	401,818

Accounting Policy

Administered cash transfers to and from the Official Public Account

Revenue collected by the entity for use by the Government rather than the entity is administered revenue. Collections are transferred to the Official Public Account (OPA) maintained by the Department of Finance. Conversely, cash is drawn from the OPA to make payments under parliamentary appropriation on behalf of Government. These transfers to and from the OPA are adjustments to the administered cash held by the entity on behalf of the Government and reported as such in the schedule of administered cash flows and in the administered reconciliation schedule.

The above statement should be read in conjunction with the accompanying notes

NATIONAL BLOOD AUTHORITY
ADMINISTERED CASH FLOW STATEMENT
for the year ended 30 June 2023

	Notes	2023 \$'000	2022 \$'000
OPERATING ACTIVITIES			
Cash received			
Revenue from contracts with customers		1,582,983	1,468,012
Interest		1,988	1,833
Net GST received		156,529	133,261
Total cash received		1,741,500	1,603,106
Cash used			
Employees		1,161	870
Grants		1,057	372
Suppliers		1,685,244	1,555,413
Total cash used		1,687,462	1,556,655
Net cash (used by)/ from operating activities		54,038	46,451
INVESTING ACTIVITIES			
Cash received			
Maturity of investments		25,000	67,132
Total cash received		25,000	67,132
Cash used			
Purchase of property, plant & equipment and intangibles		856	1,227
Acquisition of investments		26,100	68,405
Total cash used		26,956	69,632
Net cash (used by) investing activities		(1,956)	(2,500)
Net (decrease)/increase in cash held		52,081	43,951
Cash and cash equivalents at the beginning of the reporting period		182,647	138,696
Cash from the Official Public Account			
Appropriations		-	343
Total cash from the Official Public Account		-	343
Cash to the Official Public Account			
Special accounts ¹		-	(343)
Total cash to the Official Public Account		-	(343)
Cash and cash equivalents at the end of the reporting period	4.1A	234,728	182,647

1. cash transfers to the OPA from special accounts are still treated as cash available to NBA and therefore included as cash and cash equivalents at the end of the reporting period.

2. Comparative have been adjusted for a reclassification in Special Account

The above statement should be read in conjunction with the accompanying notes

NATIONAL BLOOD AUTHORITY OVERVIEW NOTE

for the year ended 30 June 2023

Objectives of the National Blood Authority

The National Blood Authority (NBA) is a non-corporate Commonwealth entity and the address of its registered office is 243 Northbourne Avenue, Lyneham, ACT 2602.

The NBA was established on 1 July 2003 with the primary objectives of securing the supply of blood and blood products, improving risk management and blood sector performance, and promoting the safe and efficient use of blood and blood products.

The NBA manages the supply of blood and blood products on behalf of the Commonwealth and all state and territory governments, with the Commonwealth contributing 63 percent of funding, and State and Territory governments providing 37 percent.

The NBA is structured to meet the following outcome:

Outcome 1: Access to a secure supply of safe and affordable blood products, including through national supply arrangements and coordination of best practice standards within agreed funding policies under the national blood arrangements.

NBA activities contributing to Outcome 1 are classified as either departmental or administered. Departmental activities involve the use of assets, liabilities, income and expenses controlled or incurred by the NBA in its own right. Administered activities involve the management or oversight by the NBA, on behalf of the governments, of items controlled or incurred by the governments.

The NBA conducts the following administered activities on behalf of the governments: management and coordination of Australia's blood supply in accordance with the National Blood Agreement agreed by the Australian Government and the governments of the States and Territories.

The NBA operates under a special account – the National Blood Account. Revenues and expenses associated with the funding and supply of blood and blood products, as well as the operations of the NBA, are recorded in this special account. The NBA also manages the NMF Blood and Blood Products Special Account which is intended to meet potential blood and blood product liability claims against the Australian Red Cross Lifeblood (Lifeblood). This special account commenced on 1 April 2017 and replaced the National Managed Fund (Blood and Blood Products) Special Account which was terminated on 31 March 2017.

The continued existence of the NBA in its present form, and with its present programs, is dependent on Government policy, the enabling legislation *National Blood Authority Act 2003*, and on continuing funding by Parliament and contributions from States and Territories for the NBA's administration and programs. Details of planned activities for the year can be found in the Portfolio Budget Statements for 2022-23 which have been tabled in Parliament.

The Basis of Preparation

The financial statements are required by Section 42 of the *Public Governance, Performance and Accountability Act 2013*.

The financial statements have been prepared in accordance with:

- *Public Governance, Performance and Accountability (Financial Reporting) Rule 2015 (FRR)*; and
- Australian Accounting Standards and Interpretations – including simplified disclosures for Tier 2 Entities under AASB 1060 issued by the Australian Accounting Standards Board (AASB) that apply for the reporting period.

The financial statements have been prepared on an accrual basis and in accordance with the historical cost convention, except for certain assets and liabilities at fair value. Except where stated, no allowance is made for the effect of changing prices on the results or the financial position. The financial statements are presented in Australian dollars and are rounded to the nearest thousand dollars unless otherwise specified.

Correction of prior period error - Departmental financial statements

In 2022-23, a prior period error was identified in the application of AASB 16 Leases where a lease incentive was not included in the calculation of the right of use asset / lease liability for NBA's office lease entered in September 2021. The accounting error was identified during 2022-23 upon the cash receipt of the lease incentive. After an investigation, it was discovered that the lease incentive deed was unintentionally omitted in the initial lease calculations in 2021-22.

NBA has determined this error as material when considering both qualitative and quantitative factors and has restated each impacted financial statement line item for the year ended 30 June 2022. The tables below illustrate the impact of the restatement of each impacted line item within the financial statements:

STATEMENT OF COMPREHENSIVE INCOME (EXTRACT)	Note	2022	2022 restated	Adjustment
		'000	'000	'000
NET COST OF SERVICES				
Expenses				
Finance costs	1.1C	8	7	(1)
Depreciation and Amortisation	3.2A	1,541	1,351	(190)
Total expenses		11,259	11,068	(191)
Net Cost of services		(6228)	(6037)	191
Deficit		(715)	(524)	191
Total comprehensive loss		(715)	(524)	191

The above statement should be read in conjunction with the accompanying notes

STATEMENT OF FINANCIAL POSITION (EXTRACT)	Note	2022	2022 restated	Adjustment
		'000	'000	'000
ASSETS				
Non-financial assets				
Buildings	3.2A	4,836	3,658	(1,178)
Total non-financial assets		7,062	5,884	(1,178)
Total assets		15,900	14,722	(1,178)
LIABILITIES				
Interest bearing liabilities				
Leases	3.4A	4,966	3,597	(1,369)
Total interest-bearing liabilities		4,966	3,597	(1,369)
Total liabilities		7,582	6,213	(1,369)
Net assets		8,318	8,509	191
EQUITY				
Retained Surplus		610	801	191
Total Equity		8,318	8,509	191

Taxation

The NBA is exempt from all forms of taxation except Fringe Benefits Tax (FBT) and the Goods and Services Tax (GST). Revenues, expenses, liabilities and assets are recognised net of GST except:

- where the amount of the GST incurred is not recoverable from the Australian Taxation Office; and
- for receivables and payables.

Reporting of Administered Activities

Administered revenue, expenses, assets, liabilities and cash flows are disclosed in the administered schedules and related notes.

Except where otherwise stated, administered items are accounted for on the same basis and using the same policies as for departmental items, including the application of Australian Accounting Standards.

Events after the Reporting Period

Departmental

There were no events occurring after 30 June 2023 with the potential to significantly affect the ongoing structure and financial activities of the

Administered

There were no events occurring after 30 June 2023 with the potential to significantly affect the ongoing structure and financial activities of the NBA.

The above statement should be read in conjunction with the accompanying notes

Departmental Financial Performance

This section analyses the departmental financial performance of the National Blood Authority for the year ended 2023.

1.1 Expenses

	2023 \$'000	2022 restated \$'000
1.1A: Employee benefits		
Wages and salaries	6,126	5,364
Superannuation:		
Defined contribution plans	717	637
Defined benefit plans	425	403
Leave and other entitlements	1,570	1,021
Separation and redundancies	2	139
Other employee benefits	218	119
Total employee benefits	9,058	7,683

Accounting Policy

Accounting policy for employee related expenses are contained in the People and Relationships section.

1.1B: Suppliers

Goods and services supplied or rendered

Consultants	217	200
Contractors	517	494
Travel	215	17
Legal	445	409
IT services	723	506
Other	524	354
Total goods and services supplied or rendered	2,641	1,980

Goods supplied	138	96
Services rendered	2,503	1,884
Total goods and services supplied or rendered	2,641	1,980

Other suppliers

Workers compensation expenses	45	23
Operating lease rentals	-	-
Total other suppliers	45	23
Total suppliers	2,686	2,003

NBA has no short-term lease commitments as at 30 June 2023.

The above lease disclosures should be read in conjunction with the accompanying notes 3.2 and 3.4A.

1.1C: Finance Costs

Interest on lease liabilities	5	7
Total finance costs	5	7

All borrowing costs are expensed as incurred

The above statement should be read in conjunction with the accompanying notes

NATIONAL BLOOD AUTHORITY
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
for the year ended 30 June 2023

1.2 Own-Source Revenue and Gains

	2023 \$'000	2022 restated \$'000
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Income

1.2A: Revenue from contracts with customers

Rendering of services	4,739	4,710
Total revenue from contracts with customers	4,739	4,710

Disaggregation of revenue from contracts with customers

Revenue under AASB15 is derived from the rendering of services for customers. NBA has decided to categorise revenue according to the type of customer. This enables NBA stakeholders to understand the nature, amount, timing and uncertainty of revenue which pertains to NBA.

Type of customer:

NBA Administered (related parties)	904	904
State and Territory Governments	3,835	3,806
	4,739	4,710

Accounting Policy

The following is a description of principal activities from which NBA generates its revenue:

1. NBA Administered (related parties)

Cost recovery for direct Administered expenses for the delivery of the National Supply Plan and Budget that were borne by Departmental funds.

2. State and Territory Governments

Nature - NBA receives 37% of its funding for the National Supply Plan and Budget from the States and Territories, as per the National Blood Agreement. The National Blood Agreement's primary policy objectives and the NBA's role is to provide an adequate, safe, secure and affordable supply of blood products, blood related products and blood related services in Australia and to promote safe, high quality management and use of blood products, blood related products and blood related services in Australia.

The agreement meets the criteria of a "contract" as per *paragraph 9* of AASB15.

Timing - the agreement is an enforceable contract with specific performance obligations and once the obligations are met an invoice is issued and revenue recognised.

Payment terms - the receivable for the rendering of services has 30 day payment terms.

The transaction price is the total amount of consideration to which the NBA expects to be entitled in exchange for transferring promised goods or services to a customer. The consideration promised in a contract with a customer may include fixed amounts, variable amounts, or both. The practical expedient in AASB15.121 is not applied in NBA's financial statements.

Receivables for goods and services, which have 30 day terms, are recognised at the nominal amounts due less any impairment allowance amount. Collectability of debts is reviewed at end of the reporting period. Allowances are made when collectability of the debt is no longer probable.

The above statement should be read in conjunction with the accompanying notes

NATIONAL BLOOD AUTHORITY
 NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
 for the year ended 30 June 2023

	2023	2022 restated
	\$'000	\$'000
1.2B: Other Revenue		
Resources received free of charge		
Remuneration of auditors - Audit Fees	66	66
Other revenue - Misc	438	255
Total other revenue	504	321

Accounting Policy

Resources Received Free of Charge

Resources received free of charge are recognised as revenue when, and only when, a fair value can be reliably determined and the services would have been purchased if they had not been donated. Use of those resources is recognised as an expense. Resources received free of charge are recorded as either revenue or gains depending on their nature.

Other Revenue

Revenue received from leave liabilities.

1.2C: Revenue from Government

Appropriations		
Departmental appropriations	5,479	5,513
Total revenue from Government	5,479	5,513

Accounting Policy

Revenue from Government

Amounts appropriated for departmental appropriations for the year (adjusted for any formal additions and reductions) are recognised as revenue from Government when the NBA gains control of the appropriation, except for certain amounts that relate to activities that are reciprocal in nature, in which case revenue is recognised only when it has been earned. Appropriations receivable are recognised at their nominal amounts.

Funding received or receivable from non-corporate Commonwealth entities (appropriated to the non-corporate Commonwealth entity as a corporate Commonwealth entity payment item for payment to the NBA) is recognised as revenue from Government by the corporate Commonwealth entity unless the funding is in the nature of an equity injection or a loan.

The above statement should be read in conjunction with the accompanying notes

Income and Expenses Administered on Behalf of Government

This section analyses the activities that NBA does not control but administers on behalf of Government. Unless otherwise noted, the accounting policies adopted are consistent with those applied for departmental reporting.

2.1 Administered Expenses

	2023 \$'000	2022 \$'000
2.1A: Employee benefits		
Wages and salaries	828	590
Superannuation		
Defined contribution plans	86	30
Defined benefit plans	71	74
Leave and other entitlements	150	175
Other employee benefits	26	1
Total employee benefits*	1,161	870

Accounting Policy:

Employee Benefits

Accounting policies for employee related expenses is contained in the People and Relationships section.

1. These salaries relate to programs of work funded under the National Blood Agreement through the National Supply Plan and Budget

2.1B: Suppliers

Goods and services supplied or rendered

Purchases of blood and blood products	1,536,475	1,389,257
Consultants	1,953	2,050
Contractors	4,972	3,933
Travel	35	-
IT services	323	95
Other	1,117	986
Total goods and services supplied or rendered	1,544,875	1,396,321
Goods supplied	1,536,535	1,389,326
Services rendered	8,340	6,995
Total goods and services supplied or rendered	1,544,875	1,396,321

Accounting Policy:

Suppliers

Under the Deed of Agreement with the Australian Red Cross Lifeblood (ARCL or Lifeblood) will return any operating surplus to the NBA, unless otherwise agreed by the NBA. In the prior years surpluses greater than \$5 million are offset against expenses in the following year. In 2022-23, \$25.3m (2021-22: \$61.2m) was returned by the Lifeblood which related to the 2021-22 financial year. This return reduced the supplier expenses in the current year.

	2023 \$'000	2022 \$'000
2.1C: Grants		
Private sector		
Not-for-profit organisations	1,057	372
Total grants	1,057	372

Accounting Policy:

Grants

The NBA administers grants on behalf of Governments. Grant liabilities are recognised to the extent that (i) the services required to be performed by the grantee have been performed, or (ii) the grant eligibility criteria have been satisfied, but payments due have not been made. When the Government enters into an agreement to make these grants and services but services have not been performed or criteria satisfied, this is considered a commitment.

Research and Development

Under the National Blood Agreement, the National Blood Authority (NBA) is 'to facilitate and fund appropriate research'. The NBA has received approval from funding governments to run six grant rounds under the National Blood Sector Research and Development Program. The program funds research in immunoglobulin and patient blood management. Expenditure to date for projects funded under the first five grant rounds is included in this year's financial statements. Applications for the sixth round will open in the 2023-24 financial year.

The above statement should be read in conjunction with the accompanying notes

NATIONAL BLOOD AUTHORITY
 NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
 for the year ended 30 June 2023

2.2 Administered - Income		
	2023	2022
	\$'000	\$'000
Revenue		
Non-Taxation Revenue		
2.2A: Revenue from contracts with customers		
Rendering of services	1,555,744	1,468,979
Total revenue from contracts with customers	1,555,744	1,468,979
Disaggregation of revenue from contracts with customers		
Revenue under AASB15 is all derived from the rendering of services for customers. NBA has categorised revenue according to the type of customer. This enables NBA stakeholders to understand the nature, amount, timing and uncertainty of revenue which pertains to NBA.		
Type of customer:		
Commonwealth Government	980,027	920,547
State and Territory Governments	575,595	548,093
External entities	122	339
	1,555,744	1,468,979

In 2021-22 a Commonwealth Government arrangement has been reclassified from External entities to Commonwealth Government.

Accounting Policy

All administered revenues are revenues relating to ordinary activities performed by the entity on behalf of the Australian Government. As such, administered appropriations are not revenues of the individual entity that oversees distribution or expenditure of the funds as directed.

The following is a description of principal activities from which NBA generates its revenue:

1. State & Territory Contributions

Nature - the NBA receives 37% of its administered funding for the National Supply Plan and Budget from the States and Territories, as per the National Blood Agreement. The National Blood Agreement's primary policy objectives and the NBA's role is to provide an adequate, safe, secure and affordable supply of blood products, blood related products and blood related services in Australia and to promote safe, high quality management and use of blood products, blood related products and blood related services in Australia. The agreement meets the criteria of a "contract" as per *paragraph 9* of AASB15.

Timing - the contract is enforceable with specific performance obligations and once the obligations are met an invoice is issued and revenue recognised.

Payment terms - the receivable for the rendering of services has 30 day payment terms.

2. McMaster University

Nature - revenue is derived from a contract with McMaster University (Canada), for the supply of a bleeding disorders registry and associated services. The revenue from this contract is received and recognised on a quarterly basis, after the required services have been delivered.

Timing - the contract is enforceable with specific performance obligations and once the obligations are met an invoice is issued and revenue recognised.

Payment terms - the receivable for the rendering of services has 30 day payment terms.

The above statement should be read in conjunction with the accompanying notes

Departmental Financial Position

This section analyses NBA's assets used to conduct its operations and the operating liabilities incurred as a result. Employee related information is disclosed in the People and Communications section.

3.1 Financial Assets

	2023	2022 restated
	\$'000	\$'000

3.1A: Cash and cash equivalents

Cash in special accounts - held in the OPA	357	6,000
Cash in special accounts - on hand or on deposit	<u>306</u>	<u>990</u>
Total cash and cash equivalents	<u>663</u>	<u>6,990</u>

Accounting Policy

Cash is recognised at its nominal amount. Cash and cash equivalents includes:

- a) cash on hand;
- b) demand deposits in bank accounts with an original maturity of 3 months or less that are readily convertible to known amounts of cash and subject to insignificant risk of changes in value; and
- c) cash in special accounts

3.1B: Trade and other receivables

Goods and services receivables

Goods and services	352	414
Total goods and services receivables	<u>352</u>	<u>414</u>

Appropriations receivables

Appropriation receivable	3,005	1,336
Total appropriations receivables	<u>3,005</u>	<u>1,336</u>

Other receivables

Statutory receivables - GST receivable	51	98
Total other receivables	<u>51</u>	<u>98</u>

Total trade and other receivables (gross)

<u>3,408</u>	<u>1,848</u>
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Total trade and other receivables (net)

<u>3,408</u>	<u>1,848</u>
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Credit terms for goods and services were within 30 days (2021-22: 30 days).

Accounting Policy

Financial assets

Trade receivables, loans and other receivables that are held for the purpose of collecting the contractual cash flows where the cash flows are solely payments of principal and interest, that are not provided at below-market interest rates, are subsequently measured at amortised cost using the effective interest method adjusted for any loss allowance.

The above statement should be read in conjunction with the accompanying notes

NATIONAL BLOOD AUTHORITY
 NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
 for the year ended 30 June 2023

3.2. Non-Financial Assets

3.2A: Reconciliation of the Opening and Closing Balances of Property, Plant and Equipment, Intangibles, Leasehold Improvements and Right of Use Asset

	Buildings - Right of Use Asset \$'000	Leasehold Improvements \$'000	Other plant and equipment \$'000	Intangibles - Computer Software ¹ \$'000	Total \$'000
As at 1 July 2022					
Gross book value	4,522	2,302	1,708	3,909	12,441
Accumulated depreciation, amortisation and impairment	(864)	(848)	(1,187)	(3,848)	(6,747)
Total as at 1 July 2022	3,658	1,454	521	61	5,694
Additions					
Purchase or internally developed	-	5,007	284	-	5,291
Depreciation and amortisation	-	(420)	(315)	(48)	(782)
Depreciation on right-of-use assets	(739)	-	-	-	(739)
Total as at 30 June 2023	2,919	6,041	490	13	9,464
Net book value as of 30 June 2023 represented by:					
Gross book value	4,522	7,309	1,992	3,909	17,732
Accumulated depreciation, amortisation & impairment	(1,603)	(1,268)	(1,502)	(3,896)	(8,268)
	2,919	6,041	490	13	9,464

No indicators of impairment were found for leasehold improvements, property, plant and equipment or intangibles. All revaluations are conducted in accordance with the revaluation policy stated on the next page.

The above statement should be read in conjunction with the accompanying notes

NATIONAL BLOOD AUTHORITY
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
for the year ended 30 June 2023

Accounting Policy:

Acquisition of Assets

Assets are recorded at cost on acquisition. The cost of acquisition includes the fair value of assets transferred in exchange and liabilities undertaken. Financial assets are initially measured at their fair value plus transaction costs where appropriate.

Property, Plant and Equipment

Asset Recognition Threshold

Purchases of property, plant and equipment are recognised initially at cost in the statement of financial position, except for purchases costing less than the thresholds listed below for each class of asset, which are expensed in the year of acquisition (other than where they form part of a group of similar items which are significant in total).

Asset class	Recognition Threshold
Property, plant and equipment	\$2,000
Purchased software	\$5,000
Leasehold improvements	\$10,000
Internally developed software	\$50,000

The initial cost of an asset includes an estimate of the cost of dismantling and removing the item and restoring the site on which it is located. This is particularly relevant to 'make good' provisions in property leases taken up by the NBA where there exists an obligation to restore the property to its original condition. These costs are included in the value of the NBA's leasehold improvements with a corresponding provision for the 'make good' recognised.

Lease Right of Use (ROU) Assets

Leased ROU assets are capitalised at the commencement date of the lease and comprise of the initial lease liability amount, initial direct costs incurred when entering into the lease less any lease incentives received. These assets are accounted for by Commonwealth lessees as separate asset classes to corresponding assets owned outright, but included in the same column as where the corresponding underlying assets would be presented if they were owned.

Following initial application, an impairment review is undertaken for any right of use lease asset that shows indicators of impairment and an impairment loss is recognised against any right of use lease asset that is impaired. Lease ROU assets continue to be measured at cost after initial recognition in Commonwealth agency, GGS and Whole of Government financial statements.

Revaluations

Fair values for each class of asset are determined as shown below.

Asset class	Fair value measured at
Leasehold improvements	Depreciated replacement cost
Property, plant & equipment	Market selling price

Following initial recognition at cost, property, plant and equipment (excluding ROU assets) are carried at fair value less subsequent accumulated depreciation and accumulated impairment losses. Valuations are conducted every five years. If there is a material difference between the carrying amount and assets' carrying amount then a valuation will be conducted. The most recent independent valuation was conducted by Jones Lang Lasalle on 31 March 2020.

Revaluation adjustments are made on a class basis. Any revaluation increment is credited to equity under the heading of asset revaluation reserve except to the extent that it reverses a previous revaluation decrement of the same asset class that is previously recognised in the surplus/deficit. Revaluation decrements for a class of assets are recognised directly in the surplus/deficit except to the extent that they reverse a previous revaluation increment for that class.

Any accumulated depreciation as at the revaluation date is eliminated against the gross carrying amount of the asset and the asset restated to the revalued amount.

Depreciation

Depreciable property, plant and equipment assets are written-off to their estimated residual values over their estimated useful lives to the NBA using, in all cases, the straight-line method of depreciation. Depreciation rates (useful lives), residual values and methods are reviewed at each reporting date and necessary adjustments are recognised in the current, or current and future reporting periods, as appropriate.

Depreciation rates applying to each class of depreciable asset are based on the following useful lives:

Asset class	2023	2022
Property, plant and equipment	3 to 7 years	3 to 7 years
Leasehold improvements	Lease term	Lease term

Impairment

All assets were assessed for impairment at 30 June 2023. Where indications of impairment exist, the asset's recoverable amount is estimated and an impairment adjustment made if the asset's recoverable amount is less than its carrying amount.

The recoverable amount of an asset is the higher of its fair value less costs to sell and its value in use. Value in use is the present value of the future cash flows expected to be derived from the asset. Where the future economic benefit of an asset is not primarily dependent on the asset's ability to generate future cash flows, and the asset would be replaced if the NBA were deprived of the asset, its value in use is taken to be its depreciated replacement cost.

Derecognition

An item of property, plant and equipment is derecognised upon disposal or when no further economic benefits are expected from its use or disposal.

Intangibles

The NBA's intangibles comprise internally developed software and purchased software for internal use. These assets are carried at cost less accumulated amortisation and accumulated impairment losses.

Software is amortised on a straight-line basis over its anticipated useful life. The useful lives of the NBA's software are:

Type	2023	2022
Purchased software	3 years	3 years
Internally developed software	5 years	5 years

All software assets were assessed for indications of impairment at 30 June 2023.

The above statement should be read in conjunction with the accompanying notes

NATIONAL BLOOD AUTHORITY
 NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
 for the year ended 30 June 2023

	2023 \$'000	2022 restated \$'000
3.3 Payables		
3.3A: Suppliers		
Trade creditors and accruals	201	111
Total suppliers	201	111
3.3B: Other payables		
Salaries and wages	156	280
Superannuation	38	27
Other	-	-
Total other payables	194	307
3.3C: Deferred revenue		
Deferred revenue	303	301
Total deferred revenue	303	301

3.4 Interest Bearing Liabilities

3.4A: Leases

Lease liabilities:		
Buildings	4,050	3,597
Total leases	4,050	3,597

Total cash outflow for leases for the year ended 30 June 2023 was \$924,649 (2021-22 \$847,028).

3.4B: Maturity analysis - contractual undiscounted cash flows

Within 1 year	919	(482)
Between 1 to 5 years	3,144	4,064
More than 5 years	-	-
Total leases	4,063	3,582

The NBA in its capacity as lessee has one (2021-22: 2) agreements for the leasing of premises at 243 Northbourne Avenue Lyneham. In the prior period, the negative cashflow includes a one-off lease incentive received of \$1,368.7m, which resulted in a cash inflow.

Accounting Policy:

Leases

For all new contracts entered into, the NBA considers whether the contract is, or contains a lease. A lease is defined as 'a contract, or part of a contract, that conveys the right to use an asset (the underlying asset) for a period of time in exchange for consideration'.

Once it has been determined that a contract is, or contains a lease, the lease liability is initially measured at the present value of the lease payments unpaid at the commencement date, discounted using the interest rate implicit in the lease, if that rate is readily determinable, or the Department of Finance incremental borrowing rate.

Subsequent to initial measurement, the liability will be reduced for payments made and increased for interest. It is remeasured to reflect any reassessment or modification to the lease. When the lease liability is remeasured, the corresponding adjustment is reflected in the right-of-use asset or profit and loss depending on the nature of the reassessment or modification.

The above statement should be read in conjunction with the accompanying notes

Assets and Liabilities Administered on Behalf of the Government

This section analyses assets used to conduct operations and the operating liabilities incurred as a result NBA does not control but administers on behalf of the Government. Unless otherwise noted, the accounting policies adopted are consistent with those applied for departmental reporting.

4.1 Administered - Financial Assets

	2023 \$'000	2022 \$'000
4.1A: Cash and cash equivalents		
Cash in special accounts - held in the OPA	234,420	182,355
Cash in special accounts - on hand or on deposit	64	-
Cash - on hand or on deposit	244	292
Total cash and cash equivalents	234,728	182,647

Accounting Policy

Cash is recognised at its nominal amount. Cash and cash equivalents includes:

- cash on hand;
- demand deposits in bank accounts with an original maturity of 3 months or less that are readily convertible to known amounts of cash and subject to insignificant risk of changes in value; and
- cash in special accounts.

4.1B: Trade and other receivables

Goods and services receivables	18,339	46,802
Total goods and services receivables	18,339	46,802
Other receivables		
Interest	1,662	627
Statutory receivables - GST receivable	4,569	401
Total other receivables	6,231	1,028
Total trade and other receivables (gross)	24,570	47,830
Less impairment loss allowance	-	-
Total trade and other receivables (net)	24,570	47,830

Credit terms for goods and services were within 30 days (2020-21: 30 days).

Accounting Policy:

Financial assets

Trade receivables and other receivables that are held for the purpose of collecting the contractual cash flows, where the cash flows are solely payments of principal and interest, that are not provided at below-market interest rates, are subsequently measured at amortised cost using the effective interest method adjusted for any loss allowance. The NBA's trade and other receivables do not have a significant financing component. Hence the NBA uses the simplified approach for trade receivables and other receivables as per AASB 9 Financial Instruments. Under this model the NBA will recognise a loss allowance equivalent to the receivables' lifetime expected credit loss (ECL) as a provision in the Statement of Financial Position and as an expense in the Statement of Comprehensive Income, once there is an indication that there is a possibility of a credit loss from default events. No ECL was recognised in 2022-23.

4.1C: Other investments

Deposits ¹	140,073	138,973
Total other investments	140,073	138,973
Other investments expected to be recovered		
No more than 12 months	61,800	67,132
More than 12 months	78,273	71,841
Total other investments	140,073	138,973

1. Monies invested in term deposits with various approved institutions under Section 58 of the *Public Governance, Performance and Accountability Act 2013*, for the purpose of receiving passive investment income.

Accounting Policy:

National managed fund

The national managed fund was established to manage the liability risks of the Australian Red Cross Society in relation to the provision of blood and blood products. The NBA manages this fund on behalf of Australian Governments. To facilitate the transfer of the fund to the NBA, a special account under Section 78 of the *Public Governance, Performance and Accountability Act 2013* was established, and this fund was transferred to the NBA for reporting.

The fund came into effect on 1 July 2000 and to date no claims have been made against it. The balance of the fund as at 30 June 2023 is \$142,318,000 (30 June 2022: \$140,435,000), and is a combination of cash (\$251,000), investments (\$140,073,000) and the balance of the special account (\$1,994,000).

The above statement should be read in conjunction with the accompanying notes

NATIONAL BLOOD AUTHORITY
 NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
 for the year ended 30 June 2023

4.2 Administered - Non-Financial Assets

4.2A: Reconciliation of the opening and closing balances of property, plant and equipment and intangibles

	Plant and equipment \$'000	Computer Software ¹ \$'000	Total \$'000
As at 1 July 2022			
Gross book value	148	13,213	13,361
Accumulated depreciation, amortisation and impairment	(138)	(8,711)	(8,849)
Total as at 1 July 2022	10	4,502	4,512
Additions			
Purchase or internally developed	414	442	856
Revaluations and impairments recognised in other comprehensive income	-	-	-
Depreciation and amortisation	(135)	(2,482)	(2,617)
Disposals			
Other	-	-	-
Total as at 30 June 2023	289	2,462	2,751
Net book value as at 30 June 2023 represented by:			
Gross book value	562	13,655	14,217
Accumulated depreciation, amortisation & impairment	(273)	(11,193)	(11,466)
	289	2,462	2,751

No plant and equipment or intangibles are expected to be sold or disposed of within the next 12 months.

Revaluations of non-financial assets and intangible assets

All revaluations are conducted in accordance with the revaluation policy stated at Note 3.2.

The NBA did not undertake a revaluation of property, plant and equipment during 2022-23. In 2019-20 a revaluation increment for property, plant and equipment of \$1,770.49 was credited to the asset revaluation surplus by asset class and included in the equity section of the statement of financial position.

	2023 \$'000	2022 \$'000
4.2B: Inventories		

National reserve inventory held for distribution	47,190	51,128
Other inventory held for distribution	65,451	64,049
Total Inventories	112,641	115,177

During 2022-23, \$580,251 of inventory held for distribution related to a net write-off of damaged and expired stock and was recognised as an expense (2021-22: \$331,183). No items of inventory were recognised at fair value less cost to sell. All inventory is expected to be distributed in the next 12 months.

Accounting Policy:

Inventories

Inventories held for distribution are valued at cost, adjusted for any loss of service potential.

Costs incurred in bringing each item of inventory to its present location and condition are assigned as follows:

- a) raw materials and stores – purchase cost on a first-in-first-out basis, with the exception of plasma products which are based on a weighted average; and
- b) finished goods and work-in-progress – cost of direct materials and labour plus attributable costs that can be allocated on a reasonable basis.

4.2C: Prepayments

Prepayments	83,620	60,359
Total Prepayments	83,620	60,359

Accounting Policy:

Prepayments

Prepayments include the July invoice paid in advance to The Australian Red Cross Blood Service for the supply of blood and blood products and services.

Other prepayments include services and subscriptions paid for in advance.

The above statement should be read in conjunction with the accompanying notes

NATIONAL BLOOD AUTHORITY
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
for the year ended 30 June 2023

4.3 Administered - Payables		
	2023	2022
	\$'000	\$'000
4.3A: Suppliers		
Trade creditors and accruals	55,568	22,009
Total suppliers	55,568	22,009
Suppliers expected to be settled		
No more than 12 months	55,568	22,009
More than 12 months	-	-
Total suppliers	55,568	22,009
Settlement was usually made within 30 days.		
4.3B: Deferred revenue		
Deferred revenue	131,940	125,671
Total deferred revenue	131,940	125,671

The above statement should be read in conjunction with the accompanying notes

Funding

This section identifies NBA's funding structure.

5.1 Appropriations

5.1A: Annual appropriations (recoverable GST exclusive)

Annual Appropriations for 2023

	2023 Annual Appropriation ³ \$'000	2023 Adjustments to appropriation ¹ \$'000	2023 Total Appropriation \$'000	Appropriation applied in 2023 (current and prior years) \$'000	Variance \$'000
DEPARTMENTAL					
Ordinary annual services	5,557	638	6,195	4,222	1,973
Capital Budget ²	651	-	651	1,561	(910)
Total departmental	6,208	638	6,846	5,783	1,063
ADMINISTERED					
Ordinary annual services Administered items	184	-	184	-	184
Total administered	184	-	184	-	184

1. Adjustments to appropriation comprises Section 74 receipts.

2. Departmental and administered capital budgets are appropriated through Appropriation Acts (No. 1,3,5). They form part of ordinary annual services, and are not separately identified in the Appropriation Acts. The NBA did not have an administered capital budget in 2023.

3. Section 51 funds in the current year is \$78k in respect of Budget October 2022-23 saving measures.

Annual Appropriations for 2022 restated

	2022 Annual Appropriation \$'000	2022 Adjustments to appropriation ¹ \$'000	2022 Total appropriation \$'000	Appropriation applied in 2022 (current and prior years) \$'000	Variance \$'000
DEPARTMENTAL					
Ordinary annual services	5,513	455	5,968	4,963	1,005
Capital Budget ²	645	-	645	302	343
Total departmental	6,158	455	6,613	5,265	1,348
ADMINISTERED					
Ordinary annual services Administered items	343	-	343	343	-
Total administered	343	-	343	343	-

1. Adjustments to appropriation comprises Section 74 receipts.

2. Departmental and administered capital budgets are appropriated through Appropriation Acts (No. 1,3,5). They form part of ordinary annual services, and are not separately identified in the Appropriation Acts.

3. Comparative have been adjusted for a reclassification S74 receipts incorporated into Appropriations applied

5.1B: Unspent annual appropriations (recoverable GST exclusive)

	2023 \$'000	2022 restated \$'000
DEPARTMENTAL		
Cash	306	990
Appropriation Act (No.1) 2020-2021 - DCB	-	268
Supply Bill (No. 1) 2020-21 - DCB	-	377
Appropriation Act (No.1) 2021-2022 - Operating	-	46
Appropriation Act (No.1) 2021-2022 - DCB	-	645
Supply Bill (No. 1) 2022-23 - Operating	74	-
Supply Bill (No. 3) 2022-23 - Quarantine ¹	78	-
Supply Bill (No. 3) 2022-23 - Operating	2,551	-
Supply Bill (No. 3) 2022-23 - DCB	380	-
Total	3,389	2,326

1. Section 51 funds in the current year is \$78k in respect of Budget October 2022-23 saving measures.

5.1B: Unspent annual appropriations (recoverable GST exclusive)

	2023 \$'000	2022 restated \$'000
ADMINISTERED		
Cash	234,728	182,647
Supply Act (No.1) - Operating	77	-
Supply Act (No.3) - Operating	107	-
Total	234,912	182,647

The above statement should be read in conjunction with the accompanying notes

NATIONAL BLOOD AUTHORITY
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
for the year ended 30 June 2023

5.2 Special Accounts

	The National Blood Account ¹		NMF Blood and Blood Products Special Account 2017 ²	
	2023 \$'000	2022 \$'000	2023 \$'000	2022 \$'000
Balance brought forward from previous period	188,176	146,103	1,170	393
Increases				
Appropriation credited to special account	5,783	5,265	-	-
Departmental				
Other receipts - State and territory contributions	5,240	4,940	-	-
Other receipts - external parties	1,369	-	-	-
Total departmental increases	6,609	4,940	-	-
Administered				
Realised investments	-	-	25,000	67,132
Other receipts - Commonwealth contributions	979,367	920,891	-	-
Other receipts - State and territory contributions	603,494	546,785	-	-
Other receipts - external parties	122	337	1,988	2,050
Total administered increases	1,582,983	1,468,013	26,988	69,182
Total increases	1,595,375	1,478,218	26,988	69,182
Available for payments	1,783,551	1,624,321	28,158	69,575
Decreases:				
Departmental				
Payments made to employees	9,171	7,534	-	-
Payments made to suppliers	9,548	3,733	-	-
Total departmental decreases	18,719	11,267	-	-
Administered				
Payments made to employees	1,161	870	-	-
Payments made to suppliers	1,530,583	1,424,008	-	-
Investments made from the special account (PGPA Act section 58)	-	-	26,100	68,405
Total administered decreases	1,531,744	1,424,878	26,100	68,405
Total decreases	1,550,463	1,436,145	26,100	68,405
Total balance carried forward to the next period	233,088	188,176	2,058	1,170
Balance represented by:				
Cash held in entity bank accounts	306	990	64	-
Cash held in the Official Public Account	232,782	187,186	1,994	1,170
Total balance carried forward to the next period	233,088	188,176	2,058	1,170

1. Appropriation: Public Governance, Performance and Accountability Act 2013 section 80

Establishing Instrument: National Blood Authority Act 2003

Purpose: The National Blood Authority was established on 1 July 2003 with the principal role of managing the national blood arrangements, ensuring sufficient supply and to provide a new focus on the safety and quality of blood and blood products. Blood and blood products are funded from a special account established under the National Blood Authority Act 2003, section 40. The NBA's activities contributing to its outcome are classified as either departmental or administered. Departmental activities involve the use of assets, liabilities, revenues and expenses controlled by the agency in its own right. Administered activities are managed or oversights by the NBA on behalf of the Government.

2. Appropriation: Public Governance, Performance and Accountability Act 2013 section 78

Establishing Instrument: Public Governance, Performance and Accountability Act 2013 section 78

Purpose: For the receipt of monies and payment of all expenditure related to the management of blood and blood products liability claims against the Australian Red Cross Society (ARCS) in relation to the activities undertaken by the operating division of the ARCS known as the Australian Red Cross Lifeblood (previously Australian Red Cross Blood Service).

3. Comparative have been adjusted for a reclassification interest in NMF Special Account

The above statement should be read in conjunction with the accompanying notes

NATIONAL BLOOD AUTHORITY
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
for the year ended 30 June 2023

5.3 Net Cash Appropriation Arrangements

	2023 \$'000	2022 restated \$'000
Total comprehensive income/(loss) - as per the Statement of Comprehensive Income	(2,548)	(524)
<i>Plus</i> : depreciation/amortisation of assets funded through appropriations (departmental capital budget funding and/or equity injections)	782	577
<i>Plus</i> : depreciation of right-of-use assets ¹	739	774
<i>Less</i> : lease principal repayments ¹	925	847
Net Cash Operating Surplus/ (Deficit)	(1,952)	(20)

1. The inclusion of depreciation/amortisation expenses related to ROU leased assets and the lease liability principal repayment amount reflects the impact of AASB 16 Leases, which does not directly reflect a change in appropriation arrangements.

The above statement should be read in conjunction with the accompanying notes

People and Relationships

This section describes a range of employment and post employment benefits provided to our people and our relationships with other key people.

6.1 Employee Provisions

	2023 \$'000	2022 restated \$'000
6.1A: Employee provisions		
Leave	2,319	1,897
Total employee provisions	2,319	1,897

Accounting Policy:

Liabilities for short-term employee benefits and termination benefits expected within twelve months of the end of reporting period are measured at their nominal amounts.

Other long-term employee benefits are measured as net total of the present value of the defined benefit obligation at the end of the reporting period minus the fair value at the end of the reporting period of plan assets (if any) out of which the obligations are to be settled directly.

Leave

The liability for employee benefits includes provision for annual leave and long service leave.

The leave liabilities are calculated on the basis of employees' remuneration at the estimated salary rates that will be applied at the time the leave is taken, including NBA's employer superannuation contribution rates to the extent that the leave is likely to be taken during service rather than paid out on termination.

The liability for long service leave has been determined by using the shorthand method. The estimate of the present value of the liability takes into account attrition rates and pay increases through promotion and inflation.

Separation and redundancy

Provision is made for separation and redundancy benefit payments. The entity recognises a provision for termination when it has developed a detailed formal plan for the terminations and has informed those employees affected that it will carry out the terminations.

Termination Benefits

No provision for termination benefits was recognised by the NBA as at 30 June 2023.

Superannuation

The entity's staff are members of the Commonwealth Superannuation Scheme (CSS), the Public Sector Superannuation Scheme (PSS), or the PSS accumulation plan (PSSap), or other superannuation funds held outside the Australian Government.

The CSS and PSS are defined benefit schemes. The PSSap is a defined contribution scheme.

The liability for defined benefits is recognised in the financial statements of the Australian Government and is settled by the Australian Government in due course. This liability is reported in the Department of Finance's administered schedules and notes.

The entity makes employer contributions to the employees' defined benefit superannuation scheme at rates determined by an actuary to be sufficient to meet the current cost to Government. The entity accounts for the contributions as if they were contributions to defined contribution plans.

The liability for superannuation recognised as at 30 June 2023 represents outstanding contributions.

The above statement should be read in conjunction with the accompanying notes

NATIONAL BLOOD AUTHORITY
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
for the year ended 30 June 2023

6.2 Key Management Personnel Remuneration

Key management personnel are those persons having authority and responsibility for planning, directing and controlling the activities of the entity, directly or indirectly, including any directors (executive or otherwise) of that entity.

The NBA has determined the key management personnel to be the Chief Executive, Deputy Chief Executive - Commercial Blood Products and Business Services and Deputy Chief Executive - Fresh Blood Products and Business Systems. Key management personnel remuneration is reported in the table below:

	2023	2022 restated
	\$	\$
Short-term employee benefits	825,860	828,357
Post-employment benefits	122,573	118,518
Other long-term benefits	17,789	17,042
Total key management personnel compensation expenses	966,222	963,917

The total number of key management personnel that are included in the above table are 4 (2022-23: 3). Note the Deputy Chief Executive - Commercial Blood Products and Business Services position was held by two people in the 2022-23 financial year.

6.3 Related Party Disclosures

Related party relationships

The NBA is an Australian Government controlled entity. Related parties to the NBA are key management personnel including the Portfolio Minister, Chief Executive, Deputy Chief Executive - Commercial Blood Products and Business Services and Deputy Chief Executive - Fresh Blood Products and Business Systems, and other Australian Government entities.

Transactions with related parties

Given the breadth of government activities, related parties may transact with the government sector in the same capacity as ordinary citizens. Such transactions include the payment or refund of taxes, receipt of a Medicare rebate or higher education loans in general government departments. These transactions have not been separately disclosed in this note.

Giving consideration to relationships with related entities, and that transactions entered into during the reporting period by the NBA, it has been determined that there are no related party transactions to be separately disclosed (2021-22: nil).

Managing uncertainties

This section analyses how the NBA manages financial risks within its operating environment.

7.1 Contingent Assets and Liabilities

7.1A: Departmental - Contingent Assets and Liabilities

Quantifiable contingencies

There were no quantifiable contingent assets or liabilities in this reporting period.

Unquantifiable contingencies

There were no unquantifiable contingent assets or liabilities in this reporting period.

Accounting Policy:

Contingent liabilities and contingent assets

Contingent assets and liabilities are not recognised in the Statement of Financial Position but are reported in the notes in line with the requirements of the accounting standards. They may arise from uncertainty as to the existence of a liability or asset or represent an asset or liability in respect of which the amount cannot be reliably measured. Contingent assets are disclosed when settlement is probable but not virtually certain and contingent liabilities are disclosed when there is a potential loss that may occur in future depending on the outcome of a specific event and the possibility of settlement is greater than remote.

7.1B: Administered - Contingent Assets and Liabilities

	2023	2022
	\$'000	\$'000
Contingent liabilities		
Indemnities	92,273	103,640
Total contingent liabilities	92,273	103,640
Net administered contingent liabilities	92,273	103,640

Quantifiable administered contingencies

The above table contains \$92,273,358 of contingent liabilities disclosed in respect to the Deed of Indemnity between the Australian Red Cross Society (ARCS) and the NBA (2021-22: \$103,639,750). The Deed indemnifies the ARCS in relation to funding arrangements for the Sydney Processing Centre (SPC) and the Melbourne Processing Centre (MPC). The NBA indemnifies the ARCS in respect of the ARCS's liability to meet a funded obligation relating to the SPC or MPC if contracted payments become due and payable after the date when the ARCS does not have sufficient SPC or MPC funding.

Unquantifiable administered contingencies

At 30 June 2023, the NBA had three unquantifiable contingencies (2021-22: 3) disclosed below:

Unquantifiable Contingent Assets

- The NBA has a Deed of Agreement with the ARCS for the supply of products. Under the Output Based Funding Model (OBFM) principles the Australian Red Cross Lifeblood (Lifeblood) will return any operating surplus to the NBA, unless otherwise agreed by the NBA.

Unquantifiable contingent liabilities

- The NBA under the National Blood Agreement prepares an annual National Supply Plan & Budget (NSP&B) for products. States & Territories and the Commonwealth make payments to the NBA based on this plan. Any surplus or shortfall is paid or recovered in the following year.
- Under certain conditions Australian Governments jointly provide indemnity for Lifeblood through a cost sharing arrangement for claims, both current and potential, regarding personal injury and damage suffered by a recipient of certain blood products. The Australian Government's share of any liability is limited to sixty three per cent of any agreed net cost.

The Deed of Agreement between the ARCS and the NBA in relation to the operation of Lifeblood includes certain indemnities and a limit of liability in favour of the ARCS. These cover a defined set of potential business, product and employee risks and liabilities arising from the operations of Lifeblood. Certain indemnities for specific risk events operate within the term of the Deed of Agreement, are capped and must meet specified pre-conditions. Other indemnities and the limitation of liability only operate in the event of the expiry and non renewal, or the earlier termination of the Deed of Agreement relating to the operation of the ARCS or the cessation of funding for the principal sites, and only within a certain scope. All indemnities are also subject to appropriate limitations and conditions including mitigation, contributory fault, and the process of handling relevant claims.

In the event of the contingent liability disclosed in the quantifiable administered contingencies occurring, the Commonwealth, or its nominee, would be assigned ownership of Lifeblood MPC building.

It was not possible to estimate the amounts of any eventual payments that may be required in relation to these claims. These were not included in the above table.

Accounting Policy:

Indemnities

The maximum amounts payable under the indemnities given is disclosed above. At the time of completion of the financial statements, there was no reason to believe that the indemnities would be called upon, and no recognition of any liability was therefore required.

The above statement should be read in conjunction with the accompanying notes

NATIONAL BLOOD AUTHORITY
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
for the year ended 30 June 2023

7.2 Departmental - Financial Instruments

7.2A: Categories of Financial Instruments

	2023 \$'000	2022 restated \$'000
Financial Assets		
Financial assets at amortised cost		
Cash and cash equivalents	663	6,990
Trade and other receivables	3,408	1,848
Total financial assets at amortised cost	4,071	8,838
Financial Liabilities		
Financial liabilities measured at amortised cost		
Trade and other creditors	201	111
Total financial liabilities measured at amortised cost	201	111

Accounting Policy:

Financial assets

The entity classifies its financial assets in the following categories:

- financial assets at fair value through profit or loss;
- financial assets at fair value through other comprehensive income; and
- financial assets measured at amortised cost.

The classification depends on both the entity's business model for managing the financial assets and contractual cash flow characteristics at the time of initial recognition. Financial assets are recognised when the entity becomes a party to the contract and, as a consequence, has a legal right to receive or a legal obligation to pay cash and derecognised when the contractual rights to the cash flows from the financial asset expire or are transferred upon trade date.

Financial assets at amortised cost

Financial assets included in this category need to meet two criteria:

- the financial asset is held in order to collect the contractual cash flows; and
- the cash flows are solely payments of principal and interest (SPPi) on the principal outstanding amount.

Amortised cost is determined using the effective interest method.

7.3 Administered - Financial Instruments

7.3A: Categories of Financial Instruments

	2023 \$'000	2022 \$'000
Financial Assets		
Financial assets at amortised cost		
Deposits	140,073	138,973
Cash and cash equivalents	234,728	182,647
Trade and other receivables	24,570	47,830
Total financial assets	399,371	369,450
Financial Liabilities		
Financial liabilities at amortised cost		
Trade and other creditors	55,568	22,009
Total financial liabilities at amortised cost	55,568	22,009

7.3B: Net Gains or Losses on Financial Assets

Financial assets at amortised cost		
Interest revenue	3,023	1,686
Net gain on financial assets at amortised cost	3,023	1,686

Accounting Policy:

Financial assets

The entity classifies its financial assets in the following categories:

- financial assets at fair value through profit or loss;
- financial assets at fair value through other comprehensive income; and
- financial assets measured at amortised cost.

The classification depends on both the entity's business model for managing the financial assets and contractual cash flow characteristics at the time of initial recognition. Financial assets are recognised when the entity becomes a party to the contract and, as a consequence, has a legal right to receive or a legal obligation to pay cash and derecognised when the contractual rights to the cash flows from the financial asset expire or are transferred upon trade date.

Financial assets at amortised cost

Financial assets included in this category need to meet two criteria:

- the financial asset is held in order to collect the contractual cash flows; and
- the cash flows are solely payments of principal and interest (SPPi) on the principal outstanding amount.

Amortised cost is determined using the effective interest method.

The above statement should be read in conjunction with the accompanying notes

NATIONAL BLOOD AUTHORITY
 NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
 for the year ended 30 June 2023

7.4 Departmental - Fair Value Measurement

Fair value measurements at the end of the reporting period

	2023	2022 restated
	\$'000	\$'000
Non-financial assets		
Leasehold improvements	6,041	1,454
Plant and equipment	490	521

7.5 Administered - Fair Value Measurement

Fair value measurements at the end of the reporting period

	2023	2022
	\$'000	\$'000
Non-financial assets		
Plant and equipment	289	10

Accounting Policy:

Fair value measurement

An annual assessment is undertaken to determine whether the carrying amount of the assets is materially different from the fair value. Comprehensive valuations are carried out at least once every three years in compliance with AASB 13 Fair Value Measurement requirements. On 31 March 2020 an independent valuer conducted revaluations of leasehold improvements and property, plant and equipment.

The methods utilised to determine and substantiate the unobservable inputs are derived and evaluated as follows:

Physical Depreciation and Obsolescence - Assets that do not transact with enough frequency or transparency to develop objective opinions of value from observable market evidence have been measured utilising the depreciated replacement cost approach.

Under the depreciated replacement cost approach the estimated cost to replace the asset is calculated and then adjusted to take into account physical depreciation and obsolescence. Physical depreciation and obsolescence has been determined based on professional judgement regarding physical, economic and external obsolescence factors relevant to the asset under consideration. For all leasehold improvement assets, the consumed economic benefit / asset obsolescence deduction is determined based on the term of the associated lease.

The above statement should be read in conjunction with the accompanying notes

Other Information

8.1 Current/non-current distinction for assets and liabilities

8.1A: Departmental - Current/non-current distinction for assets and liabilities

	2023 \$'000	2022 restated \$'000
Assets expected to be recovered in:		
No more than 12 months		
Cash and cash equivalents	663	6,990
Trade and other receivables	3,408	1,848
Total no more than 12 months	4,071	8,838
More than 12 months		
Buildings	2,919	3,658
Leasehold improvements	6,041	1,454
Plant and equipment	490	521
Computer software	13	61
Other non-financial assets	145	190
Total more than 12 months	9,608	5,884
Total assets	13,679	14,722
Liabilities expected to be settled in:		
No more than 12 months		
Suppliers	201	111
Other Payables	194	307
Deferred Revenue	303	301
Total no more than 12 months	698	719
More than 12 months		
Leases	4,050	3,597
Employee Provisions	2,319	1,897
Other Provision	-	-
Total no more than 12 months	6,369	5,494
Total liabilities	7,067	6,213

8.1B: Administered - Current/non-current distinction for assets and liabilities

	2023 \$'000	2022 \$'000
Assets expected to be recovered in:		
No more than 12 months		
Cash and cash equivalents	234,728	182,647
Trade and other receivables	24,570	47,830
Other investments	61,800	67,132
Other non-financial assets	83,620	60,359
Total no more than 12 months	404,718	357,968
More than 12 months		
Plant and equipment	289	10
Other intangibles	2,462	4,502
Inventories	112,641	115,177
Other investments	78,273	71,841
Total More than 12 months	193,665	191,530
Total assets	598,383	549,498
Liabilities expected to be settled in:		
No more than 12 months		
Suppliers	55,568	22,009
Total no more than 12 months		
More than 12 months		
Deferred Revenue	131,940	125,671
Total more than 12 months	131,940	125,671
Total liabilities	187,508	147,680

The above statement should be read in conjunction with the accompanying notes

NATIONAL BLOOD AUTHORITY
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
for the year ended 30 June 2023

8.2: BUDGETARY REPORTS AND EXPLANATIONS OF MAJOR VARIANCES

The following tables provide a comparison of the original budget as presented in the 2022-23 Portfolio Budget Statements (PBS) to the 2022-23 final outcome as presented in accordance with Australian Accounting Standards for the NBA. The Budget is not audited.

8.2A: Departmental Budgetary Reports

Statement of Comprehensive Income for the NBA for the year ended 30 June 2023	2023 Actual \$'000	2023 Budget \$'000	2023 Variance \$'000
NET COST OF SERVICES			
Expenses			
Employee benefits	9,058	6,498	2,560
Suppliers	2,686	2,143	543
Depreciation and amortisation	1,521	1,566	(45)
Interest on RoU	-	25	(25)
Finance costs	5	5	-
Losses from asset sales	-	-	-
Total expenses	13,270	10,237	3,033
Own-source income			
Own-source revenue			
Revenue from contracts with customers	4,739	3,656	1,083
Other revenue	504	250	254
Total own-source revenue	5,243	3,906	1,337
Gains			
Resources received free of charge - remuneration of auditors	-	66	(66)
Gains from asset sales	-	-	-
Total gains	-	66	(66)
Total own-source income	5,243	3,972	1,271
Net (cost of)/contribution by services	(8,027)	(6,265)	(1,762)
Revenue from government	5,479	5,479	-
Surplus/(Deficit) before income tax on continuing operations	(2,548)	(786)	(1,762)
Income tax expense	-	-	-
Surplus/(Deficit) after income tax on continuing operations	(2,548)	(786)	(1,762)
OTHER COMPREHENSIVE INCOME			
Items not subject to subsequent reclassification to net cost of services			
Changes in asset revaluation surplus	-	-	-
Total other comprehensive income	-	-	-
Total comprehensive income/(loss)	(2,548)	(786)	(1,762)

The above statement should be read in conjunction with the accompanying notes

NATIONAL BLOOD AUTHORITY
 NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
 for the year ended 30 June 2023

STATEMENT OF FINANCIAL POSITION as at 30 June 2023	2023 Actual \$'000	2023 Budget \$'000	2023 Variance \$'000
ASSETS			
Financial assets			
Cash and cash equivalents	663	2,874	(2,211)
Trade and other receivables	3,408	1,848	1,560
Total financial assets	4,071	4,722	(651)
Non-financial assets			
Buildings	2,919	7,111	(4,192)
Leasehold improvements	6,041	-	6,041
Plant and equipment	490	2,863	(2,373)
Computer software	13	99	(86)
Other non-financial assets	145	189	(44)
Total non-financial assets	9,608	10,262	(654)
Total assets	13,679	14,984	(1,305)
LIABILITIES			
Payables			
Suppliers	201	104	97
Other payables	194	610	(416)
Deferred revenue	303	-	303
Total payables	698	714	(16)
Interest bearing liabilities			
Leases	4,050	4,185	(135)
Total interest bearing liabilities	4,050	4,185	(135)
Provisions			
Employee provisions	2,319	1,897	422
Other provisions	-	5	(5)
Total provisions	2,319	1,902	417
Total liabilities	7,067	6,801	266
Net assets	6,612	8,183	(1,571)
EQUITY			
Contributed equity	7,740	7,740	-
Reserves	619	619	-
Retained surplus/(Accumulated deficit)	(1,747)	(176)	(1,571)
Total equity	6,612	8,183	(1,571)

The above statement should be read in conjunction with the accompanying notes

NATIONAL BLOOD AUTHORITY
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
for the year ended 30 June 2023

Statement of Changes in Equity for the NBA
for the year ended 30 June 2023

	Retained Earnings			Asset revaluation reserve			Contributed equity/capital			Total equity		
	2023	2023	2023	2023	2023	2023	2023	2023	2023	2023	2023	2023
	Actual	Budget	Variance	Actual	Budget	Variance	Actual	Budget	Variance	Actual	Budget	Variance
	\$'000	\$'000	\$'000	\$'000	\$'000	\$'000	\$'000	\$'000	\$'000	\$'000	\$'000	\$'000
Opening balance												
Balance carried forward from previous period	801	610	191	619	619	-	7,089	7,089	-	8,509	8,318	191
Adjusted opening balance	801	610	191	619	619	-	7,089	7,089	-	8,509	8,318	191
Comprehensive income												
Surplus / (Deficit) for the period	(2,548)	(786)	(1,762)	-	-	-	-	-	-	(2,548)	(786)	(1,762)
Total comprehensive income attributable to Australian Government	(2,548)	(786)	(1,762)	-	-	-	-	-	-	(2,548)	(786)	(1,762)
Transactions with owners												
<i>Contributions by owners</i>	-	-	-	-	-	-	651	651	-	651	651	-
Departmental capital budget	-	-	-	-	-	-	-	-	-	-	-	-
Total transactions with owners	-	-	-	-	-	-	651	651	-	651	651	-
Closing balance as at 30 June 2023 attributable to Australian Government	(1,747)	(176)	(1,571)	619	619	-	7,740	7,740	-	6,612	8,183	(1,571)

The above statement should be read in conjunction with the accompanying notes

NATIONAL BLOOD AUTHORITY
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS

for the year ended 30 June 2023

Cash Flow Statement for the NBA for the year ended 30 June 2023	2023 Actual \$'000	2023 Budget \$'000	2023 Variance \$'000
OPERATING ACTIVITIES			
Cash received			
Appropriations	4,222	5,479	(1,257)
Sale of goods and rendering of services	5,240	3,906	1,334
Net GST received	414	-	414
Total cash received	9,876	9,385	491
Cash used			
Employees	9,171	6,498	2,673
Suppliers	3,024	2,082	942
Section 74 receipts transferred to the OPA	638	-	638
Interest payments on lease liabilities	5	25	(20)
Total cash used	12,838	8,605	4,233
Net cash from/(used by) operating activities	(2,962)	780	(3,742)
INVESTING ACTIVITIES			
Cash used			
Purchase of property, plant and equipment	5,291	4,767	524
Purchase of intangibles	-	-	-
Total cash used	5,291	4,767	524
Net cash from/(used by) investing activities	(5,291)	(4,767)	(524)
FINANCING ACTIVITIES			
Cash received			
Contributed Equity - departmental capital budget	1,561	651	910
Lease incentive received	1,369	-	1,369
Total cash received	2,930	651	2,279
Cash used			
Principal repayment of lease liabilities	1,004	780	224
Total cash used	1,004	780	224
Net cash from/(used by) financing activities	1,926	(129)	2,055
Net increase/(decrease) in cash held	(6,327)	(4,116)	(2,211)
Cash and cash equivalents at the beginning of the reporting period	6,990	6,990	0
Cash and cash equivalents at the end of the reporting period	663	2,874	(2,211)

3.1A

The above statement should be read in conjunction with the accompanying notes

8.2B: Departmental Major Budget Variances for 2023

Explanations of major variances	Affected line items (and statement)
Statement of Comprehensive Income	
<u>Employee benefits</u>	
This variance arises from two main factors: - the recruitment of additional staff during the year, which resulted in higher average staffing levels throughout the financial year; and - the budget does not include leave expenses that were cost recovered.	<i>Employee Benefits (Statement of Comprehensive Income) (Statement of Financial Position) (Cash Flow Statement)</i>
<u>Suppliers</u>	
The overspend against budget predominantly relates to increased ICT and contractor costs..	<i>Suppliers (Statement of Comprehensive Income) (Cash Flow Statement)</i>
<u>Own-source revenue</u>	
<i>Revenue from contracts with customers</i> - Fee for service arrangement and Administered fund cost-recovery excluded from the budget. <i>Other revenue</i> - The budget does not include cost recovery revenue relating to the leave provisions of incoming staff.	<i>Own-source revenue (Statement of Comprehensive Income), Sale of goods and rendering of services (Cash Flow Statement)</i>
Statement of Financial Position	
<u>Cash and cash equivalents</u>	
This variance is primarily due to the capital spend in the current financial year (fit-out 243 Northbourne Avenue) and the current year operating loss.	<i>Cash and cash equivalents (Statement of Financial Position) (Cash Flow Statement)</i>
<u>Trade and other receivables</u>	
This variance is mainly a result of higher than anticipated appropriation receivable including to a lesser extent the Departmental Capital Budget (DCB).	<i>Trade and other receivables (Statement of Financial Position) (Cash Flow Statement)</i>
<u>Buildings, Leasehold improvements and Property and equipment</u>	
The budget does not split out leasehold improvements from buildings, and the budget also overstates Property and equipment with part of the Non-financial asset belonging to Leasehold improvements. The total of the Non-financial assets across the above categories are marginally less than budget.	<i>Non-financial assets (Statement of Financial Position)</i>
<u>Other payables and Deferred Revenue</u>	
The budget for deferred revenue was included in other payables.	<i>Payables (Statement of Financial Position)</i>
<u>Employee provisions</u>	
The employees provisions are greater than budget due increase increased staffing compared to budget.	<i>Provisions (Statement of Financial Position)</i>
Cash Flow Statement	
Variances against budget in the Cash flow statement are broadly consistent with the explanations provided for expenses. The timing of payments, particularly for suppliers, will be dependent on the receipt of the goods and services and their related invoices and so can vary between reporting periods.	<i>(Cash Flow Statement)</i>

The above statement should be read in conjunction with the accompanying notes

NATIONAL BLOOD AUTHORITY
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
for the year ended 30 June 2023

8.2C: Administered Budgetary Reports

Administered Schedule of Comprehensive Income for the NBA for the period ended 30 June 2022	2023 Actual \$'000	2023 Budget \$'000	2023 Variance \$'000
NET COST OF SERVICES			
Expenses			
Employee benefits	1,161	-	1,161
Suppliers	1,544,875	1,579,416	(34,541)
Grants - non-profit organisations	1,057	-	1,057
Depreciation and amortisation	2,617	-	2,617
Total expenses	1,549,710	1,579,416	(29,706)
Income			
Revenue			
Non-taxation revenue			
Other sources of non-taxation revenues	1,558,767	1,588,562	(29,795)
Other revenue	-	-	-
Total non-taxation revenue	1,558,767	1,588,562	(29,795)
Total revenue	1,558,767	1,588,562	(29,795)
Total income	1,558,767	1,588,562	(29,795)
Net (cost of)/contribution by services	9,057	9,146	(89)
Surplus/(Deficit)	9,057	9,146	(89)
OTHER COMPREHENSIVE INCOME			
Items not subject to subsequent reclassification to net cost of services			
Changes in asset revaluation surplus	-	-	-
Total comprehensive income/(loss)	9,057	9,146	(89)

The above statement should be read in conjunction with the accompanying notes

NATIONAL BLOOD AUTHORITY**NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS***for the year ended 30 June 2023*

Administered Schedule of Assets and Liabilities for the NBA as at 30 June 2023	2023 Actual	2023 Budget	2023 Variance
	\$'000	\$'000	\$'000
ASSETS			
Financial assets			
Cash and cash equivalents	234,728	187,831	46,897
Trade and other receivables	24,570	47,830	(23,260)
Other investments	140,073	143,119	(3,046)
Total financial assets	399,371	378,780	20,591
Non-financial assets			
Plant and equipment	289	11	278
Other intangibles	2,462	4,502	(2,040)
Inventories	112,641	115,177	(2,536)
Prepayments	83,620	60,359	23,261
Total non-financial assets	199,012	180,049	18,963
Total assets administered on behalf of Government	598,383	558,829	39,554
LIABILITIES			
Payables			
Suppliers	55,568	22,009	33,559
Deferred revenue	131,940	125,671	6,269
Total payables	187,508	147,680	39,828
Total liabilities administered on behalf of Government	187,508	147,680	39,828
Net assets/(liabilities)	410,875	411,149	(274)

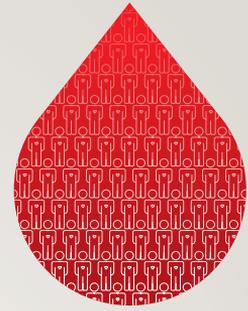
The above statement should be read in conjunction with the accompanying notes

8.2D: Administered Major Budget Variances for 2023

Explanations of major variances	Affected line items (and statement)
Administered Schedule of Comprehensive Income	
<u>Suppliers</u>	
This variance predominantly relates to: - the return of the Lifeblood operating surplus for 2021-22 as per the Australian Red Cross Lifeblood Output Based Funding Model.	<i>Suppliers (Administered Schedule of Comprehensive Income), Deficit/Surplus (Administered Schedule of Comprehensive Income)</i>
<u>Other sources of non-taxation revenues</u>	
This variance predominantly relates to the return of \$27.4m to the Commonwealth, and State and Territory Governments for the 2021-22 end of year reconciliation as part of the National Blood Agreement.	<i>Other sources of non-taxation revenues (Administered Schedule of Comprehensive Income), Deficit/Surplus (Administered Schedule of Comprehensive Income)</i>
Administered Schedule of Assets and Liabilities	
<u>Cash and cash equivalents</u>	
This variance relates primarily to the timing of supplier payments, which is evidenced by the increased suppliers payable.	<i>Cash and cash equivalents, (Administered Schedule of Assets and Liabilities)</i>
<u>Trade Receivables</u>	
The actual Trade receivable is significantly below budget due to earlier than anticipated payment from State and Territory Governments in the 2022-23 financial year.	<i>Trade and other receivables (Administered Schedule of Assets and Liabilities)</i>
<u>Prepayments</u>	
The actual Prepayments is above budget due to a year end adjustment of Fresh Blood product expenditure.	<i>Prepayments (Administered Schedule Assets and Liabilities)</i>
<u>Suppliers</u>	
This variance is as a result of timing of payments at year end.	<i>Suppliers (Administered Schedule of Assets and Liabilities)</i>
<u>Deferred Revenue</u>	
This variance is due to increased Administered funding for blood products, blood-related products and blood-related services.	<i>Deferred Revenue (Administered Schedule of Assets and Liabilities)</i>

PART 5

Appendixes



- Appendix 1.** Committee and Board member profiles
- Appendix 2.** Workforce statistics
- Appendix 3.** Fresh blood components supplied under contract by Lifeblood in 2022–23
- Appendix 4.** Plasma and recombinant products supplied under contract in 2022–23
- Appendix 5.** Other mandatory reporting
- Appendix 6.** List of requirements
- Appendix 7.** Acronyms and abbreviations

Index



Our new work environment

In the first half of 2022 the NBA rolled out new ICT arrangements that enabled quicker and more effective video meetings and collaboration. The agency-wide ICT upgrade was followed with a redesign and refurbishment of the NBA's office premises later in 2022. We now have a modern physical and virtual environment that supports agile and collaborative work practices, enabled through contemporary design and technology.



Appendix 1

Committee and Board member profiles

NBA Board members

Dr Amanda Rischbieth AM – Chair

Dr Amanda Rischbieth AM was a Visiting Scientist at Harvard T.H. Chan School of Public Health from 2017 to 2022 after being competitively selected as one of 40 global leaders, and the only Australian, as a Harvard Advanced Leadership Fellow in 2017.

In 2023 she received a Member of the Order of Australia (AM) award for her services to public health and governance. She has over 24 years of directorship experience and was CEO of a leading health organisation for six years.

Dr Rischbieth is a Non-Executive Director of Duxton Farms (ASX:DBF), an Advisory Board member for Circular Energy Group, a Non-Executive Director of the International Women's Forum Australia (IWFA), and a member of the International Foundation for Valuing Impacts Technical and Research Committee. She is an Associate Clinical Professor at the University of Adelaide, a Fellow of the Australian Institute of Company Directors, a member of Chief Executive Women, and a former Telstra Business Women's Award Finalist.

She undertakes boutique board advisory work focusing on environmental, social and governance (ESG) strategy, reporting and upskilling; health; cyber; and corporate governance.

Dr Rischbieth's previous directorships include the Australian Organ and Tissue Authority, the National Heart Foundation of Australia SA, the Australian College of Critical Care Nurses (National President), the South Australian Public Health Council, the Urban Renewal Authority, the Leaders Institute of SA, and the South Australian Motor Sport Board (V8 Supercars Adelaide 500). She received her PhD, which focused on intensive care decision-support systems, in 2007 at the University of Adelaide. Earlier in her career she established and co-led a private intensive care unit for 10 years. In 2018 she joined the Hands-On group going to Sri Lanka, fitting 247 prosthetic hands to landmine victims.

Dr Rischbieth was re-appointed Chair of the NBA Board in June 2023.

Mr Geoffrey Bartle – Community Representative

Mr Geoffrey Bartle is a retired management consultant. He has over 15 years' experience as a consumer representative in several diverse state and national roles, where his contribution has been highly regarded as representing the community to ensure that their experiences and expectations are heard and understood. He is passionate about achieving a holistic and integrated consumer-centric approach across the entire healthcare continuum to deliver better health outcomes for the community. He understands the importance of ensuring that there is a consumer-focused approach in the design of resources, systems, processes, and products that are evidence and standards based.

He currently holds several other community representative roles including:

- ◆ National Blood Authority – Haemovigilance Advisory Committee
- ◆ Royal Australian College of General Practitioners – Consumer Advisor
- ◆ Consumer Health Forum – Member.

His previous community representative roles have included:

- ◆ NPS MedicineWise – chronic heart failure, opioids, and low back pain working groups
- ◆ WA Primary Health Alliance – Chair, Community Engagement Committee
- ◆ WA Primary Health Alliance – Health Care Home Steering Committee
- ◆ WA Health Department – Cardiovascular Health Network Executive Advisory Group
- ◆ RACGP National Expert Committee – eHealth and Practice Systems
- ◆ Australian Digital Health Agency – Diagnostic Imaging Steering Committee.

Prior to retirement, he had a proven track record of delivering genuine business benefits for his consulting clients in Western Australia and the Northern Territory. His experience included strategy, governance, business architecture, benefits management, organisational transformation, procurement, change management, business and system analysis, strategic business cases, program design, business process improvement, business continuity and disaster recovery, and the design of technology-enabled solutions to optimise business outcomes.

Mr Bartle's industry experience included health, human services, disability services, policing, education, superannuation, government services, insurance, small business, sustainability, mining, taxation, racing and wagering, social welfare, public housing, and smartcards. This was delivered in government, university and private sector environments.

Prior to becoming a consultant, he also had over 20 years' experience in a diverse range of senior executive service roles in the public sector in Australia and New Zealand, leading national legislative, compliance, business, and client service programs.

The diverse range of roles undertaken by Mr Bartle equipped him with sound business acumen and an unusual breadth of knowledge and experience, which he drew upon to deliver high-calibre consulting services. Since retirement, he now draws on his broad experience and pragmatic approach to make a practical and informed contribution as a consumer representative.

Mr Bartle was re-appointed to the NBA Board as the community representative in November 2021.

Professor Lyn Beazley AO – State and Territory Representative (Small Jurisdiction)

After graduating from Oxford and Edinburgh universities, Professor Lyn Beazley AO built an internationally renowned research team in neuroscience that focused on recovery from brain damage, with much of her investigations undertaken as Winthrop Professor at the University of Western Australia. Currently Professor Beazley is Adjunct Professor of Science at Murdoch University.

Professor Beazley was the Chief Scientist of Western Australia from 2006 to 2013, advising the Western Australian Government on science, innovation and technology. Professor Beazley currently chairs the board of the Northwest Shelf Flatback Turtle Conservation Program and the Strategic Economic Advisory Group of the City of Mandurah. She also serves on other boards including the WA Australian Israeli Chamber of Commerce, the Royal Institution of Australia and the Council of the Australian Academy of Science, being responsible for public awareness and education. Professor Beazley was a Trustee of the Western Australian Museum from 1999 to 2006 and is patron of many educational, environmental, social and health related organisations. She is Vice Patron of the Royal Society of Western Australia, the Perron Institute for Neurological and Translational Science, and Gingin Gravity Discovery Centre.

In 2009 Professor Beazley was awarded the Officer of the Order of Australia. In that year she was elected a Fellow of the Australian Academy of Technological Sciences and Engineering and in 2019 she became a Fellow of the Australian Academy of Science. In 2011 Professor Beazley was inducted into the inaugural Western Australian Women's Hall of Fame and was elected a Fellow of the Australian College of Educators and a Companion of Engineers Australia. In 2015 she was inducted into the Western Australian Science Hall of Fame and was announced as the 2015 WA Australian of the Year, and in 2023 she received the President's Medal of the WA chapter of the Australian Medical Association. Professor Beazley has received honorary doctorates from Edith Cowan University, Monash University, the Australian National University and Murdoch University and has two species named after her.

Professor Beazley works to promote science, technology, engineering and mathematics to the community, especially to young people, including those who are neurodiverse, as well as striving to advance gender equity by bringing online knowledge to women, especially those experiencing violence and/or financial abuse.

Professor Beazley was re-appointed to the Board in November 2020.

Mr Paul Bedbrook – Financial Expert

Mr Paul Bedbrook has had a connection with blood issues via his personal involvement with haemophilia for three decades. He is the father of two adult sons with haemophilia. For much of this time, Mr Bedbrook has been involved with the Haemophilia Foundation NSW (HFNSW) and the Haemophilia Foundation Australia (HFA). Mr Bedbrook is a past President of HFNSW and past Treasurer of HFA. He brings his personal experiences with blood issues to the Board, as well as feedback from a community of individuals who rely on the blood and plasma products distributed to Australia's health services under the auspices of the NBA.

Professionally, Mr Bedbrook has had over 30 years of experience in financial services. His current roles include Chair of Zurich Financial Services Australia Ltd, Independent Non-Executive Director of Great Southern Bank and Independent Chair of the ASX-listed Elanor Investors Group.

Mr Bedbrook was a senior executive for over 20 years with the Dutch global banking, insurance and investment group ING. His early career was as an Investment Analyst and Investment Portfolio Manager at ING, and between 1987 and 1995 he was the General Manager Investments and Chief Investment Officer for the Mercantile Mutual (ING) Group in Sydney. In the decade to 2010 Mr Bedbrook was, in turn, President and CEO of INGDIRECT Canada, CEO and Director of ING Australia and Regional CEO of ING Asia Pacific, based in Hong Kong.

Mr Bedbrook has been a member of the NBA Board since May 2011 and was appointed to his current Board role as financial expert in August 2013. Mr Bedbrook is also a member of the NBA Audit and Risk Committee.

Mr Bedbrook was re-appointed to the Board in November 2020.

Ms Penny Shakespeare – Australian Government Representative

Ms Penny Shakespeare is Deputy Secretary for Health Resourcing in the Commonwealth Department of Health and Aged Care, responsible for the Australian Government's investments in the Medicare Benefits Schedule, Pharmaceutical Benefits Schedule, health workforce, digital health policy, private health insurance and COVID-19 vaccine delivery.

Since joining Health in 2006, Ms Shakespeare has held a number of senior leadership positions. Prior to joining Health, she was an industrial relations lawyer in the Department of Employment and Workplace Relations and worked in regulatory policy roles, including as head of the Australian Capital Territory's Office of Industrial Relations.

Ms Shakespeare has a Bachelor of Laws and a Master of International Law and is admitted as a barrister and solicitor.

Ms Shakespeare was re-appointed to the NBA Board in June 2023.

Dr John Rowell – State and Territory Representative (Large Jurisdiction)

Dr John Rowell graduated in medicine at Monash University and underwent further training in haematology at the Geelong, Alfred and Royal Prince Alfred hospitals, and became a Fellow of the Royal College of Pathologists of Australasia. Dr Rowell was initially appointed Haematologist at the Royal Brisbane Hospital in 1984 and later became Director of Haematology at Pathology Queensland and Director of the Haemophilia Centre at the Royal Brisbane and Women's Hospital.

He earned his master's degree in business administration at the University of Queensland and became a graduate of the Australian Institute of Company Directors.

Dr Rowell's major interests are in haemophilia and other bleeding disorders, genetic diagnosis, and transfusion. He has been a member of the Council of the Australian and New Zealand Society of Blood Transfusion, was Chairman of the Royal College of Pathologists of Australasia (RCPA) Transfusion Quality Assurance Program and was an examiner in haematology for the RCPA.

Dr Rowell was awarded the Ruth Sanger medal by the Australian and New Zealand Society of Blood Transfusion in 2008.

Dr Rowell was appointed to the NBA Board in June 2023.

Professor Nicola Spurrier PSM – Public Health Expert

Professor Nicola Spurrier PSM is the Chief Public Health Officer for the Department for Health and Wellbeing, South Australia, having been appointed in 2019. The Chief Public Health Officer is responsible for statewide preventive health activities including the identification and management of communicable diseases. Professor Spurrier's role includes advising the Minister and the Chief Executive of SA Health about proposed legislative or administrative changes in relation to population health. Professor Spurrier specialises in developing and implementing policies and programs across child health, obesity prevention and Aboriginal health.

She also has extensive experience in health protection and promotion, public health partnership and health diplomacy activities.

Professor Spurrier is a dual qualified medical specialist, public health physician and paediatrician, with 32 years' experience within SA Health including 13 years in the Department for Health and Wellbeing.

During the COVID-19 pandemic, Professor Spurrier was instrumental in South Australia's effective virus response. She continues to take a personal focus on the health and wellbeing of every South Australian.

Professor Spurrier was appointed to the NBA Board in June 2023.

Audit and Risk Committee

Ms Roslyn Jackson – Chair

Ms Roslyn Jackson was appointed as the Chair of the Audit and Risk Committee (ARC) in September 2019. Ms Jackson has been a member of the committee since September 2017.

Ms Jackson brings more than 30 years of experience as a chartered accountant working in both public practice and government accounting. Over her career, Ms Jackson has specialised in the Australian Government financial framework.

Ms Jackson has also been a non-executive director of several not-for-profit companies, primarily in the health sector, and is Chair of Health Education Services Australia, Director of the Australian Nursing and Midwifery Accreditation Council and Director of the Canberra Institute of Technology.

Ms Jackson attended all six ARC meetings during 2022–23 and was remunerated \$9,460.00.

Mr Greg Fraser

Mr Greg Fraser is a Fellow of the Governance Institute of Australia.

Mr Fraser is former Chief Executive of the ACT Department of Health and Community Care and has had extensive involvement in intergovernmental initiatives and forums. He has consulted to public, private and not-for-profit bodies for 25 years and is an expert in public and not-for-profit governance and risk management.

Mr Fraser has served on several corporate, public sector and not-for-profit boards and audit and risk committees.

Mr Fraser attended all six ARC meetings during 2022–23 and was remunerated \$7,858.50.

Mr Paul Bedbrook – NBA Board Representative

Mr Bedbrook’s biography can be found under ‘NBA Board members’ above.

Mr Bedbrook attended five ARC meetings during 2022–23 and was remunerated \$11,050.00.

Appendix 2

Workforce statistics

TABLE 5.1 All ongoing employees 2022–23

	Male			Female			Indeterminate			Total
	Full time	Part time	Total male	Full time	Part time	Total female	Full time	Part time	Total	
NSW	-	-	-	1	-	1	-	-	-	1
VIC	-	-	-	1	-	1	-	-	-	1
QLD	-	-	-	1	-	1	-	-	-	1
ACT	17	2	19	41	12	53	-	-	-	72
Total	17	2	19	44	12	56	-	-	-	75

TABLE 5.2 All non-ongoing employees 2022–23

	Male			Female			Indeterminate			Total
	Full time	Part time	Total male	Full time	Part time	Total female	Full time	Part time	Total	
ACT	1	-	1	5	-	5	-	-	-	6
Total	1	-	1	5	-	5	-	-	-	6

TABLE 5.3 All ongoing employees 2021–22

	Male			Female			Indeterminate			Total
	Full time	Part time	Total male	Full time	Part time	Total female	Full time	Part time	Total	
NSW	-	-	-	-	1	1	-	-	-	1
Qld	-	-	-	1	-	1	-	-	-	1
Vic	-	-	-	1	-	1	-	-	-	1
ACT	18	-	18	35	10	45	-	-	-	63
Total	18	-	18	37	11	48	-	-	-	66

TABLE 5.4 All non-ongoing employees 2021–22

	Male			Female			Indeterminate			Total
	Full time	Part time	Total male	Full time	Part time	Total female	Full time	Part time	Total	
ACT	1	-	1	1	-	1	-	-	-	2
Total	1	-	1	1	-	1	-	-	-	2

TABLE 5.5 Australian Public Service Act ongoing employees 2022–23

	Male			Female			Indeterminate			Total
	Full time	Part time	Total male	Full time	Part time	Total female	Full time	Part time	Total	
SES 1	-	-	-	1	-	1	-	-	-	1
EL 2	2	-	2	6	1	7	-	-	-	9
EL 1	8	-	8	12	4	16	-	-	-	24
APS 6	3	1	4	10	4	14	-	-	-	18
APS 5	2	1	3	6	2	8	-	-	-	11
APS 4	2	-	2	9	1	10	-	-	-	12
Total	17	2	19	44	12	56	-	-	-	75

TABLE 5.6 Australian Public Service Act non-ongoing employees 2022–23

	Male			Female			Indeterminate			Total
	Full time	Part time	Total male	Full time	Part time	Total female	Full time	Part time	Total	
EL 1	-	-	-	1	-	1	-	-	-	1
APS 6	1	-	1	1	-	1	-	-	-	2
APS 5	-	-	-	1	-	1	-	-	-	1
APS 4	-	-	-	2	-	2	-	-	-	2
Total	1	-	1	5	-	5	-	-	-	6

TABLE 5.7 Australian Public Service Act ongoing employees 2021–22

	Male			Female			Indeterminate			Total
	Full time	Part time	Total male	Full time	Part time	Total female	Full time	Part time	Total	
SES 1	-	-	-	2	-	2	-	-	-	2
EL 2	2	-	2	6	1	7	-	-	-	9
EL 1	8	-	8	14	5	19	-	-	-	27
APS 6	4	-	4	6	2	8	-	-	-	12
APS 5	1	-	1	4	2	6	-	-	-	7
APS 4	3	-	3	5	1	6	-	-	-	9
Total	18	-	18	37	11	48	-	-	-	66

TABLE 5.8 Australian Public Service Act non-ongoing employees 2021–22

	Male			Female			Indeterminate			Total
	Full time	Part time	Total male	Full time	Part time	Total female	Full time	Part time	Total	
EL 1	-	-	-	1	-	1	-	-	-	1
APS 5	1	-	1	-	-	-	-	-	-	1
Total	1	-	1	1	-	1	-	-	-	2

TABLE 5.9 Australian Public Service Act employees by employment status 2022–23

	Ongoing			Non-ongoing			Total
	Full time	Part time	Total	Full time	Part time	Total	
SES 1	1	-	1	-	-	-	1
EL 2	9	1	10	-	-	-	10
EL 1	20	4	24	1	-	1	25
APS 6	12	5	17	2	-	2	19
APS 5	8	3	11	1	-	1	12
APS 4	11	1	12	2	-	2	14
Total	61	14	75	6	-	6	81

TABLE 5.10 Australian Public Service Act employees by employment status 2021–22

	Ongoing			Non-ongoing			Total
	Full time	Part time	Total	Full time	Part time	Total	
SES 1	2	-	2	-	-	-	2
EL 2	8	1	9	-	-	-	9
EL 1	22	5	27	1	1	1	28
APS 6	10	2	12	-	-	-	12
APS 5	5	2	7	1	1	1	8
APS 4	8	1	9	-	-	-	9
Total	55	11	66	2	2	2	68

TABLE 5.11 Australian Public Service Act employment type by location 2022–23

	Ongoing	Non-ongoing	Total
NSW	1	-	1
Qld	1	-	1
Vic	1	-	1
ACT	72	6	78
Total	75	6	81

TABLE 5.12 Australian Public Service Act employment type by location 2021–22

	Ongoing	Non-ongoing	Total
NSW	1	-	1
Qld	1	-	1
Vic	1	-	1
ACT	63	2	65
Total	66	2	68

TABLE 5.13 Australian Public Service Act Indigenous employment 2022–23

	Total
Ongoing	-
Non-ongoing	-
Total	-

TABLE 5.14 Australian Public Service Act Indigenous employment 2021–22

	Total
Ongoing	-
Non-ongoing	-
Total	-

Appendix 3

Fresh blood components supplied under contract by Lifeblood in 2022–23

TABLE 5.15 Fresh blood components supplied under contract by Lifeblood 2022–23

Product type	Name	Presentation ¹	Published price (\$)
Red blood cells	Whole blood (WB) red cells leucodepleted	>200ml	357.14
	WB paediatric red cells leucodepleted (set of 4)	25–100ml	436.72
	WB washed red cells leucodepleted	>130ml	426.59
Platelets	WB platelet pool leucodepleted	>160ml	244.69
	Apheresis platelet leucodepleted	100–400ml	531.01
	Paediatric apheresis platelet leucodepleted (set of 3)	40–60ml	685.48
Clinical fresh frozen plasma (FFP)	WB clinical FFP	295ml+/-10%	152.37
	WB paediatric clinical FFP (set of 4)	60–80ml	178.02
	Apheresis clinical FFP	295ml +/-10%	215.51
Cryoprecipitate	WB cryoprecipitate	30–40ml	163.01
	Apheresis cryoprecipitate	54–66ml	332.84
Cryo-depleted plasma	WB cryo-depleted plasma	215–265ml	151.63
	Apheresis cryo-depleted plasma	495–605ml	310.67
Other products	Autologous donation	n/a	379.19
	Therapeutic venesections for WB for discard	n/a	524.99
	Serum eye drops	Single collection	595.55
Plasma for fractionation	Plasma for fractionation ²	Presentation size n/a, but costed per kg	332.90

1. The presentation volume for a typical unit content is specified in the Australian Red Cross Lifeblood Blood Component Information 2023.

2. Plasma for fractionation is supplied to CSL Behring (Australia) Pty Ltd for manufacturing plasma-derived products.

Appendix 4

Plasma and recombinant products supplied under contract in 2022–23

TABLE 5.16 Plasma and recombinant products supplied under various contracts for 2022–23

Product type	Name	Presentation	Supplier	Published price (\$)¹
Albumin (plasma-derived – domestic)	Albumex 20%	10ml	CSL Behring (Australia) Pty Ltd	17.06
		100ml		67.26
	Albumex 4%	50ml		17.06
		500ml		67.26
	Alburex 20 AU	20g/50mL	CSL Behring (Australia) Pty Ltd	67.26
Antithrombin III concentrate (plasma-derived – domestic)	Thrombotrol VF	1,000 IU	CSL Behring (Australia) Pty Ltd	1,547.80
CMV Ig (plasma-derived – domestic)	CMV Ig	1.5 million units	CSL Behring (Australia) Pty Ltd	1,323.50
Emicizumab (bifunctional monoclonal antibody)	Hemlibra	30mg/1ml	Roche Australia Pty Limited	#
		60mg/0.4ml		#
		105mg/0.7ml		#
		150mg/1ml		#
Factor IX (plasma-derived – domestic)	MonoFIX	1,000 IU	CSL Behring (Australia) Pty Ltd	959.88
Factor IX (recombinant – imported)	Alprolix	250 IU	Sanofi-Aventis Australia Pty Ltd	#
		500 IU		#
		1,000 IU		#
		2,000 IU		#
		3,000 IU		#

Product type	Name	Presentation	Supplier	Published price (\$)¹
		4,000 IU		#
	BeneFIX	250 IU	Pfizer Australia Pty Ltd	#
		500 IU		#
		1,000 IU		#
		2,000 IU		#
		3,000 IU		#
Factor VIIa (recombinant – imported)	NovoSeven	1mg	Novo Nordisk Pharmaceuticals Pty Ltd	1,300.97*
		2mg		2,583.36*
		5mg		6,569.86*
		8mg		10,384.22*
Factor VIII (plasma-derived – domestic)	Biostate	250 IU	CSL Behring (Australia) Pty Ltd	239.96
		500 IU		479.94
		1,000 IU		959.88
Factor VIII (recombinant – imported)	Advate	250 IU	Takeda Pharmaceuticals Australia Pty Ltd	#
		500 IU		#
		1,000 IU		#
		1,500 IU		#
		2,000 IU		#
		3,000 IU		#
	Adynovate	250 IU	Takeda Pharmaceuticals Australia Pty Ltd	#
		500 IU		#
		1,000 IU		#
		1,500 IU		#
		2,000 IU		#
		3,000 IU		#
	Eloctate	250 IU	Sanofi-Aventis Australia Pty Ltd	#
		500 IU		#
		1,000 IU		#

Product type	Name	Presentation	Supplier	Published price (\$)¹
		2,000 IU		#
		3,000 IU		#
	Xyntha	250 IU	Pfizer Australia Pty Ltd	#
		500 IU		#
		1,000 IU		#
		2,000 IU		#
		3,000 IU		#
Factor VIII anti-inhibitor (plasma-derived – imported)	FEIBA	500 IU	Takeda Pharmaceuticals Australia Pty Ltd	1,175.35*
		1,000 IU		2,341.13*
		2,500 IU		5,761.86*
Factor XI (plasma-derived – imported)	Factor XI	1 IU	CSL Behring (Australia) Pty Ltd	14.73
Factor XIII (plasma-derived – imported)	Fibrogammin	250 IU	CSL Behring (Australia) Pty Ltd	214.27
		1,250 IU		1,071.32
Factor XIII (recombinant – imported)	NovoThirteen	2,500 IU	Novo Nordisk Pharmaceuticals Pty Ltd	30,000.00
Fibrinogen concentrate (plasma-derived – imported)	RiaSTAP	1g	CSL Behring (Australia) Pty Ltd	863.12
Hepatitis B Ig (plasma-derived – domestic)	Hepatitis B Ig	100 IU (2ml)	CSL Behring (Australia) Pty Ltd	48.38
		400 IU (5ml)		110.76
Human C1 esterase inhibitor concentrate (plasma-derived – imported)	Beriner IV	500 IU	CSL Behring (Australia) Pty Ltd	#
		1,500 IU		#
	Beriner SC	2,000 IU		#
		3,000 IU		#

Product type	Name	Presentation	Supplier	Published price (\$)¹
Human prothrombin complex (plasma-derived – domestic)	Prothrombinex	500 IU	CSL Behring (Australia) Pty Ltd	305.98
IVIg (plasma-derived – domestic)	Intragam 10	2.5g/25ml	CSL Behring (Australia) Pty Ltd	137.01
		10g/100ml		548.03
		20g/200ml		1,096.06
	Privigen AU	5g/50ml	CSL Behring (Australia) Pty Ltd	137.01
		10g/100ml		548.03
		20g/200ml		1,096.06
IVIg (plasma-derived – imported)	Flebogamma 5% DIF	2.5g/50ml	Grifols Australia Pty Ltd	#
		5g/100ml		#
		10g/200ml		#
		20g/400ml		#
	Flebogamma 10% DIF	5g/50ml		#
		10g/100ml		#
		20g/200ml		#
	Gamunex 10%	5g/50ml	Grifols Australia Pty Ltd	#
		10g/100ml		#
		20g/200ml		#
	Kiovig	1g/10ml	Takeda Pharmaceuticals Australia Pty Ltd	#
		2.5g/25ml		#
		5g/50ml		#
		10g/100ml		#
		20g/200ml		#
		30g/200ml		#
	Octagam	5g/50ml	Octapharma Australia Pty Limited	#

Product type	Name	Presentation	Supplier	Published price (\$)¹
		10g/100ml		#
		20g/200ml		#
	Privigen	5g/50ml	CSL Behring (Australia) Pty Ltd	#
		10g/100ml		#
		20g/200ml		#
		40g/400ml		#
Normal Ig NIg (plasma-derived – domestic)	Normal Ig VF	2ml (0.32g)	CSL Behring (Australia) Pty Ltd	34.82
		5ml (0.80g)		57.08
Protein C concentrate (plasma-derived – imported)	Ceprotrin	1,000 IU	Takeda Pharmaceuticals Australia Pty Ltd	2,418.98*
Rh (D) Ig (plasma-derived – domestic)	Rh (D) Ig VF	250 IU	CSL Behring (Australia) Pty Ltd	\$32.77
		625 IU		81.89
Rh (D) Ig (plasma-derived – imported)	Rhophylac	1,500 IU	CSL Behring (Australia) Pty Ltd	451.66
SCIg (plasma-derived – domestic)	Evogam 16%	0.8g/5ml	CSL Behring (Australia) Pty Ltd	43.84
		3.2g/20ml		175.37
SCIg (plasma-derived – imported)	CUVITRU	1g/5ml	Takeda Pharmaceuticals Australia Pty Ltd	#
		2g/10ml		#
		4g/20ml		#
		8g/40ml		#
	Hizentra	1g/5ml	CSL Behring (Australia) Pty Ltd	#
		2g/10ml		#
		4g/20ml		#
		10g/50ml		#

Product type	Name	Presentation	Supplier	Published price (\$)¹
Tetanus Ig (plasma-derived – domestic)	Tetanus Ig VF	250 IU	CSL Behring (Australia) Pty Ltd	47.83
		4,000 IU		765.06
Zoster Ig (plasma-derived – domestic)	Zoster Ig VF	200 IU	CSL Behring (Australia) Pty Ltd	303.34

Price is confidential and cannot be disclosed.

* Prices changed part-way through the year; an average has been provided.

1 The prices for CSL Behring (Australia) Pty Ltd for plasma-derived domestic products do not include the starting plasma provided by Australian Red Cross Lifeblood.

Appendix 5

Other mandatory reporting

Work health and safety

Information on work health and safety is included in Part 3 of this annual report.

Advertising and market research

Section 311A of the *Commonwealth Electoral Act 1918* requires entity annual reports to disclose particulars of all amounts greater than \$13,800 paid during a financial year to advertising agencies, market research organisations, polling organisations, direct mail organisations and media advertising organisations. The NBA made no payments of this kind in 2022–23.

The NBA did not conduct any advertising campaigns in 2022–23.

Ecologically sustainable development and environmental performance

The NBA continued to pursue activities that support the ecologically sustainable principles outlined in section 3A of the *Environment Protection and Biodiversity Conservation Act 1999*. During 2022–23 this included:

- continued use of audio and video conferencing and online collaboration in preference to face-to-face meetings requiring interstate or international travel
- recycling into four streams of waste – co-mingled material, paper, batteries and printer cartridges
- encouraging staff to recycle and re-use existing stationery before ordering new supplies
- maintaining paper-use reduction initiatives such as defaulting printer settings to print double-sided and in black and white, and using 100 per cent recycled paper wherever possible
- running the air conditioning systems on timers and occupancy sensors to ensure operation only during business hours when the immediate area is occupied
- ensuring that through purchasing activities further improvements were made within blood product supply contracts
- having electronic document and records management systems in place.

Table 5.17 provides information on the NBA's environmental performance. The NBA continues to look at ways to further reduce its impact on the environment.

TABLE 5.17 NBA environmental performance 2022–23

Theme	Performance measure	Indicator(s)	2021–22	2022–23
Energy efficiency	Total consumption of energy	Amount of electricity consumed (kWh)	151,538	91,168
		Amount of gas consumed (MJ)	0	0
		Amount of other fuels consumed (\$/kWh/MJ/L)	0	0
		Air travel distances (km)	23,976	247,176
	Total consumption of green energy	Amount of green energy purchased/consumed (\$/kWh)	0	0
	Greenhouse gas emissions	Amount of greenhouse gases produced (tonnes)	0	0
	Relative energy uses	Amount of green energy purchased divided by the amount of electricity consumed (%)	0	0
		Amount of total energy consumed (kWh) per employee	1,762	1,126
Waste	Total waste production	Amount of waste produced (tonnes)	2.39	4.78
	Un-recyclable waste production	Amount of waste going to landfills (tonnes)	1.25	1.823
	Recyclable waste production (excluding office paper)	Amount of waste going to recycling facilities (tonnes)	0.069	0.95
	Paper waste production	Amount of waste paper going to recycling facilities (tonnes)	1.070	1.76
		Amount of paper sourced from recyclable sources (tonnes)	0.461	0.05
		Percentage of paper sourced from recyclable sources (%)	86.0	36.36
	Use of renewable/recyclable products	Amount of products sourced from renewable/recyclable sources (tonnes)	0.461	0.05
	Relative waste production	Amount of total waste (tonnes) per employee	0.03	0.06
Water	Total consumption of water	Amount of water consumed (L)	459,906	651,958
	Grey water/rainwater capture and use	Grey water not applicable to NBA tenancies	n/a	n/a
	Relative consumption/use of water	Amount of total water use (L) per employee	5,347	8,048



Australian Public Service Net Zero 2030

As part of the reporting requirements under section 516A of the *Environment Protection and Biodiversity Conservation Act 1999*, and in line with the Government’s APS Net Zero 2030 policy, all Commonwealth entities are required to publicly report on the emissions from their operations, commencing with public reporting of 2022–23 emissions in entity annual reports.

Greenhouse gas emissions reporting has been developed with methodology that is consistent with the whole of Australian Government approach as part of the APS Net Zero 2030 policy.

Tables 5.18 and 5.19 present the NBA’s greenhouse gas emissions report for 2022–23.

TABLE 5.18 NBA greenhouse gas emissions report (location-based approach) 2022–23

Emission source	Scope 1 kg CO ₂ -e			
Electricity (location-based approach)	n/a	66,553	5,470	72,023
Natural gas	-	n/a	-	-
Fleet vehicles	-	n/a	-	-
Domestic flights	n/a	n/a	37,142	37,142
Other energy	-	n/a	-	-
Total kg CO₂-e	-	66,553	42,613	109,166

CO₂-e = carbon dioxide equivalent

The electricity emissions reported above are calculated using the location-based approach. When applying the market-based method, which accounts for activities such as GreenPower, purchased large-scale generation certificates (LGCs) and/or being located in the ACT, the total emissions for electricity are as shown in Table 5.19.

TABLE 5.19 NBA greenhouse gas emissions report (market-based approach) 2022–23

Emission source	Scope 1 kg CO ₂ -e			
Electricity (market-based approach)	n/a	5,436	719	6,156
Natural gas	-	n/a	-	-
Fleet vehicles	-	n/a	-	-
Domestic flights	n/a	n/a	37,142	37,142
Other energy	-	n/a	-	-
Total kg CO₂-e	-	5,436	37,862	43,298

CO₂-e = carbon dioxide equivalent

Grants

No grants were awarded by the NBA during the period 1 July 2022 to 30 June 2023. Information on previous grants awarded is available at www.blood.gov.au/governmental-compliance.

Disability reporting mechanism

Australia's Disability Strategy 2021–2031 (the Strategy) is the overarching framework for inclusive policies, programs and infrastructure that will support people with disability to participate in all areas of Australian life. The Strategy sets out where practical changes will be made to improve the lives of people with disability in Australia. It acts to ensure the principles underpinning the United Nations Convention on the Rights of Persons with Disabilities are incorporated into Australia's policies and programs that affect people with disability, their families and carers. All levels of government have committed to deliver more comprehensive and visible reporting under the Strategy. A range of reports on progress of the Strategy's actions and outcome areas will be published and available at <https://www.disabilitygateway.gov.au/ads>.

Disability reporting is included in the annual State of the Service Report and the APS Statistical Bulletin. These reports are available on the Australian Public Service Commission website at www.apsc.gov.au.

Freedom of information

Entities subject to the *Freedom of Information Act 1982* (FOI Act) are required to publish information to the public as part of the Information Publication Scheme (IPS). This requirement is in Part II of the FOI Act and has replaced the former requirement to publish a section 8 statement in an annual report. Each agency must display on its website a plan showing what information it publishes in accordance with the IPS requirements.

Further information about the IPS is available at the [Office of the Australian Information Commissioner website](http://www.oaic.gov.au).

A copy of the NBA IPS Plan and associated published documents are located at www.blood.gov.au/ips.

Remediation of information published in previous annual reports

See Part 4, Financial statements at page 114.

Agency resource statement

The agency resource statement (Table 5.20) provides details of the sources of funding for the NBA in 2022–23 together with information about special accounts balances to be carried over to 2023–24.

TABLE 5.20 Agency resource statement

	Actual available appropriation for 2022–23 \$'000	Payments made 2022–23 \$'000	Balance 2022–23 \$'000
	(a)	(b)	(a) – (b)
Ordinary Annual Services¹			
Departmental appropriation ²	9,172	5,783	3,389
Total	9,172	5,783	3,389
Administered expenses			
Outcome 1 ³	184	0	
Total	184	0	
Total ordinary annual services	9,356	5,783	
Special accounts ⁴			
Opening balance	189,346		
Appropriation receipts ⁵	5,783		
Non-appropriation receipts to special accounts	1,616,580		
Payments made		1,576,563	
Total special accounts	1,811,708	1,576,563	235,146
Total resourcing and payments	1,821,064	1,582,347	

1 *Appropriation Act (No. 1) 2022–23, Appropriation Act (No. 3) 2022–23* and prior year Departmental Appropriation.

2 Includes an amount of \$0.651 million in 2022–23 for the Departmental Capital Budget. For accounting purposes this amount has been designated as 'contributions by owners'.

3 Includes an amount of \$nil in 2022–23 for the Administered Capital Budget.

4 Does not include 'Special Public Money' held in accounts like Other Trust Monies account (OTM), Services for other Government and Non-agency Bodies accounts (SOG), or Services for Other Entities and Trust Monies Special accounts (SOETM).

5 Appropriation receipts from National Blood Authority annual appropriations for 2022–23 included above.

Resources for outcomes

Table 5.21 provides details of the total funding for each outcome approved by government for the NBA. In 2022–23 the NBA operated under a single outcome.

Resources for outcomes

Table 5.21 provides details of the total funding for each outcome approved by government for the NBA. In 2022–23, the NBA operated under a single outcome.

TABLE 5.21 Agency expenses by outcome

Outcome 1: Access to a secure supply of safe and affordable blood products	Budget* 2022–23 \$'000	Actual expenses 2022–23 \$'000	Variation 2022–23 \$'000
	(a)	(b)	(a) – (b)
Program 1.1: National Blood Agreement management			
Administered expenses			
Ordinary annual services (Appropriation Bill No. 1)	184	0	184
Ordinary annual services (Appropriation Bill No. 1) to special accounts	-184	0	-184
Special accounts	1,579,416	1,531,744	47,672
Departmental expenses			
Departmental appropriation ¹	6,130	5,783	347
Departmental appropriation to special accounts	-6,130	-5,783	-347
Special accounts ²	9,195	17,235	-8,040
s74 retained revenue receipts	250	638	-388
Expenses not requiring appropriation in the Budget year	870	847	23
Total for Program 1.1	1,589,731	1,550,463	39,268
Total expenses for Outcome 1	1,589,731	1,550,463	39,268
		2021–22	2022–23
Average staffing level (number)	52	68	-16

* Full-year budget, including any subsequent adjustment made to the 2022–23 Budget.

1 Departmental appropriation combines ordinary annual services (*Appropriation Act No. 1*).

2 Special account Budget and actual expense excludes s74 retained earnings.

Appendix 6

List of requirements

The following list of requirements is provided in accordance with the Department of Finance's Resource Management Guide No. 135 *Annual reports for non-corporate Commonwealth entities* as at May 2023.

PGPA Rule Reference	Part of Report	Description	Requirement	Page
17AD(g)	Letter of transmittal			
17AI	Front pages	A copy of the letter of transmittal signed and dated by accountable authority on date final text approved, with statement that the report has been prepared in accordance with section 46 of the Act and any enabling legislation that specifies additional requirements in relation to the annual report.	Mandatory	iii
17AD(h)	Aids to access			
17AJ(a)	Front pages	Table of contents (print only).	Mandatory	iv
17AJ(b)	Index	Alphabetical index (print only).	Mandatory	192–199
17AJ(c)	Appendix 7	Glossary of abbreviations and acronyms.	Mandatory	190–191
17AJ(d)	Appendix 6	List of requirements.	Mandatory	182–189
17AJ(e)	Front pages	Details of contact officer.	Mandatory	ii
17AJ(f)	Front pages	Entity's website address.	Mandatory	ii
17AJ(g)	Front pages	Electronic address of report.	Mandatory	ii
17AD(a)	Review by accountable authority			
17AD(a)	Front pages	A review by the accountable authority of the entity.	Mandatory	1–5
17AD(b)	Overview of the entity			
17AE(1)(a)(i)	Part 1	A description of the role and functions of the entity.	Mandatory	10–11
17AE(1)(a)(ii)	Part 1	A description of the organisational structure of the entity.	Mandatory	14–16
17AE(1)(a)(iii)	Part 1, 2	A description of the outcomes and programmes administered by the entity.	Mandatory	10, 35
17AE(1)(a)(iv)	Part 1	A description of the purposes of the entity as included in corporate plan.	Mandatory	10–11
17AE(1)(aa)(i)	Part 1	Name of the accountable authority or each member of the accountable authority	Mandatory	14

PGPA Rule Reference	Part of Report	Description	Requirement	Page
17AE(1)(aa)(ii)	Part 1	Position title of the accountable authority or each member of the accountable authority	Mandatory	14
17AE(1)(aa)(iii)	Part 1	Period as the accountable authority or member of the accountable authority within the reporting period	Mandatory	14
17AE(1)(b)	Part 1	An outline of the structure of the portfolio of the entity.	Portfolio departments mandatory	14
17AE(2)	N/A	Where the outcomes and programs administered by the entity differ from any Portfolio Budget Statement, Portfolio Additional Estimates Statement or other portfolio estimates statement that was prepared for the entity for the period, include details of variation and reasons for change.	If applicable, Mandatory	N/A
17AD(c)	Report on the Performance of the Entity			
	<i>Annual Performance Statements</i>			
17AD(c)(i); 16F	Part 2	Annual performance statement in accordance with paragraph 39(1)(b) of the Act and section 16F of the Rule.	Mandatory	33–83
17AD(c)(ii)	<i>Report on Financial Performance</i>			
17AF(1)(a)	Part 4	A discussion and analysis of the entity's financial performance.	Mandatory	106–109
17AF(1)(b)	Part 4	A table summarising the total resources and total payments of the entity.	Mandatory	104
17AF(2)	Part 4	If there may be significant changes in the financial results during or after the previous or current reporting period, information on those changes, including: the cause of any operating loss of the entity; how the entity has responded to the loss and the actions that have been taken in relation to the loss; and any matter or circumstances that it can reasonably be anticipated will have a significant impact on the entity's future operation or financial results.	If applicable, Mandatory	106
17AD(d)	Management and Accountability			
	<i>Corporate Governance</i>			
17AG(2)(a)	Part 3	Information on compliance with section 10 (fraud systems)	Mandatory	95
17AG(2)(b)(i)	Part 3	A certification by accountable authority that fraud risk assessments and fraud control plans have been prepared.	Mandatory	95

PGPA Rule Reference	Part of Report	Description	Requirement	Page
17AG(2)(b)(ii)	Part 3	A certification by accountable authority that appropriate mechanisms for preventing, detecting incidents of, investigating or otherwise dealing with, and recording or reporting fraud that meet the specific needs of the entity are in place.	Mandatory	95
17AG(2)(b)(iii)	Part 3	A certification by accountable authority that all reasonable measures have been taken to deal appropriately with fraud relating to the entity.	Mandatory	95
17AG(2)(c)	Part 3	An outline of structures and processes in place for the entity to implement principles and objectives of corporate governance.	Mandatory	87–93
17AG(2)(d) – (e)	N/A	A statement of significant issues reported to Minister under paragraph 19(1)(e) of the Act that relates to noncompliance with Finance law and action taken to remedy noncompliance.	If applicable, Mandatory	N/A
Audit Committee				
17AG(2A)(a)	Part 3	A direct electronic address of the charter determining the functions of the entity's audit committee.	Mandatory	89
17AG(2A)(b)	Part 3	The name of each member of the entity's audit committee.	Mandatory	89
17AG(2A)(c)	Appendix 1	The qualifications, knowledge, skills or experience of each member of the entity's audit committee.	Mandatory	163–164
17AG(2A)(d)	Appendix 1	Information about the attendance of each member of the entity's audit committee at committee meetings.	Mandatory	164
17AG(2A)(e)	Appendix 1	The remuneration of each member of the entity's audit committee.	Mandatory	164
External Scrutiny				
17AG(3)	Part 3	Information on the most significant developments in external scrutiny and the entity's response to the scrutiny.	Mandatory	94
17AG(3)(a)	N/A	Information on judicial decisions and decisions of administrative tribunals and by the Australian Information Commissioner that may have a significant effect on the operations of the entity.	If applicable, Mandatory	N/A
17AG(3)(b)	N/A	Information on any reports on operations of the entity by the AuditorGeneral (other than report under section 43 of the Act), a Parliamentary Committee, or the Commonwealth Ombudsman.	If applicable, Mandatory	N/A

PGPA Rule Reference	Part of Report	Description	Requirement	Page
17AG(3)(c)	N/A	Information on any capability reviews on the entity that were released during the period.	If applicable, Mandatory	N/A
<i>Management of Human Resources</i>				
17AG(4)(a)	Part 3	An assessment of the entity's effectiveness in managing and developing employees to achieve entity objectives.	Mandatory	96
17AG(4)(aa)	Appendix 2	Statistics on the entity's employees on an ongoing and nonongoing basis, including the following: (a) statistics on fulltime employees; (b) statistics on parttime employees; (c) statistics on gender (d) statistics on staff location	Mandatory	165
17AG(4)(b)	Appendix 2	Statistics on the entity's APS employees on an ongoing and nonongoing basis; including the following: Statistics on staffing classification level; Statistics on fulltime employees; Statistics on parttime employees; Statistics on gender; Statistics on staff location; Statistics on employees who identify as Indigenous.	Mandatory	166–168
17AG(4)(c)	Part 2, 3	Information on any enterprise agreements, individual flexibility arrangements, Australian workplace agreements, common law contracts and determinations under subsection 24(1) of the <i>Public Service Act 1999</i> .	Mandatory	80, 90, 97
17AG(4)(c)(i)	Part 3	Information on the number of SES and nonSES employees covered by agreements etc identified in paragraph 17AG(4)(c).	Mandatory	97
17AG(4)(c)(ii)	Part 3	The salary ranges available for APS employees by classification level.	Mandatory	97
17AG(4)(c)(iii)	Part 3	A description of nonsalary benefits provided to employees.	Mandatory	100
17AG(4)(d)(i)	N/A	Information on the number of employees at each classification level who received performance pay.	If applicable, Mandatory	N/A
17AG(4)(d)(ii)	N/A	Information on aggregate amounts of performance pay at each classification level.	If applicable, Mandatory	N/A

PGPA Rule Reference	Part of Report	Description	Requirement	Page
17AG(4)(d)(iii)	N/A	Information on the average amount of performance payment, and range of such payments, at each classification level.	If applicable, Mandatory	N/A
17AG(4)(d)(iv)	N/A	Information on aggregate amount of performance payments.	If applicable, Mandatory	N/A
Assets Management				
17AG(5)	N/A	An assessment of effectiveness of assets management where asset management is a significant part of the entity's activities	If applicable, mandatory	N/A
Purchasing				
17AG(6)	Part 4	An assessment of entity performance against the <i>Commonwealth Procurement Rules</i> .	Mandatory	110
Reportable consultancy contracts				
17AG(7)(a)	Part 4	A summary statement detailing the number of new reportable consultancy contracts entered into during the period; the total actual expenditure on all such contracts (inclusive of GST); the number of ongoing reportable consultancy contracts that were entered into during a previous reporting period; and the total actual expenditure in the reporting period on those ongoing contracts (inclusive of GST).	Mandatory	111
17AG(7)(b)	Part 4	A statement that <i>“During [reporting period], [specified number] new reportable consultancy contracts were entered into involving total actual expenditure of \$[specified million]. In addition, [specified number] ongoing reportable consultancy contracts were active during the period, involving total actual expenditure of \$[specified million].”</i>	Mandatory	111
17AG(7)(c)	Part 4	A summary of the policies and procedures for selecting and engaging consultants and the main categories of purposes for which consultants were selected and engaged.	Mandatory	111
17AG(7)(d)	Part 4	A statement that <i>“Annual reports contain information about actual expenditure on reportable consultancy contracts. Information on the value of reportable consultancy contracts is available on the AusTender website.”</i>	Mandatory	111

PGPA Rule Reference	Part of Report	Description	Requirement	Page
<i>Reportable non-consultancy contracts</i>				
17AG(7A)(a)	Part 4	A summary statement detailing the number of new reportable non-consultancy contracts entered into during the period; the total actual expenditure on such contracts (inclusive of GST); the number of ongoing reportable non-consultancy contracts that were entered into during a previous reporting period; and the total actual expenditure in the reporting period on those ongoing contracts (inclusive of GST).	Mandatory	112
17AG(7A)(b)	Part 4	A statement that “ <i>Annual reports contain information about actual expenditure on reportable non-consultancy contracts. Information on the value of reportable non-consultancy contracts is available on the AusTender website.</i> ”	Mandatory	111
<i>17AD(daa) Additional information about organisations receiving amounts under reportable consultancy contracts or reportable non-consultancy contracts</i>				
17AGA	Part 4	Additional information, in accordance with section 17AGA, about organisations receiving amounts under reportable consultancy contracts or reportable non-consultancy contracts.	Mandatory	111, 112
<i>Australian National Audit Office Access Clauses</i>				
17AG(8)	N/A	If an entity entered into a contract with a value of more than \$100 000 (inclusive of GST) and the contract did not provide the AuditorGeneral with access to the contractor’s premises, the report must include the name of the contractor, purpose and value of the contract, and the reason why a clause allowing access was not included in the contract.	If applicable, Mandatory	N/A
<i>Exempt contracts</i>				
17AG(9)	N/A	If an entity entered into a contract or there is a standing offer with a value greater than \$10 000 (inclusive of GST) which has been exempted from being published in AusTender because it would disclose exempt matters under the FOI Act, the annual report must include a statement that the contract or standing offer has been exempted, and the value of the contract or standing offer, to the extent that doing so does not disclose the exempt matters.	If applicable, Mandatory	N/A

PGPA Rule Reference	Part of Report	Description	Requirement	Page
<i>Small business</i>				
17AG(10)(a)	Part 4	A statement that “[Name of entity] supports small business participation in the Commonwealth Government procurement market. Small and Medium Enterprises (SME) and Small Enterprise participation statistics are available on the Department of Finance’s website.”	Mandatory	113
17AG(10)(b)	Part 4	An outline of the ways in which the procurement practices of the entity support small and medium enterprises.	Mandatory	113
17AG(10)(c)	Part 4	If the entity is considered by the Department administered by the Finance Minister as material in nature—a statement that “[Name of entity] recognises the importance of ensuring that small businesses are paid on time. The results of the Survey of Australian Government Payments to Small Business are available on the Treasury’s website.”	If applicable, Mandatory	113
<i>Financial Statements</i>				
17AD(e)	Part 4	Inclusion of the annual financial statements in accordance with subsection 43(4) of the Act.	Mandatory	114–155
<i>Executive Remuneration</i>				
17AD(da)	Part 3	Information about executive remuneration in accordance with Subdivision C of Division 3A of Part 23 of the Rule.	Mandatory	98–99
17AD(f)	Other Mandatory Information			
17AH(1)(a)(i)	N/A	If the entity conducted advertising campaigns, a statement that “During [reporting period], the [name of entity] conducted the following advertising campaigns: [name of advertising campaigns undertaken]. Further information on those advertising campaigns is available at [address of entity’s website] and in the reports on Australian Government advertising prepared by the Department of Finance. Those reports are available on the Department of Finance’s website.”	If applicable, Mandatory	N/A
17AH(1)(a)(ii)	Appendix 5	If the entity did not conduct advertising campaigns, a statement to that effect.	If applicable, Mandatory	176
17AH(1)(b)	Appendix 5	A statement that “Information on grants awarded by [name of entity] during [reporting period] is available at [address of entity’s website].”	If applicable, Mandatory	179

PGPA Rule Reference	Part of Report	Description	Requirement	Page
17AH(1)(c)	Appendix 5	Outline of mechanisms of disability reporting, including reference to website for further information.	Mandatory	179
17AH(1)(d)	Appendix 5	Website reference to where the entity's Information Publication Scheme statement pursuant to Part II of FOI Act can be found.	Mandatory	179
17AH(1)(e)	Appendix 5	Correction of material errors in previous annual report	If applicable, mandatory	179
17AH(2)	Appendix 5	Information required by other legislation	Mandatory	176–181

Appendix 7

Acronyms and abbreviations

ABDR	Australian Bleeding Disorders Registry
ABO	A, B, AB and O blood types
ACSQHC	Australian Commission on Safety and Quality in Health Care
ACT	Australian Capital Territory
ANAO	Australian National Audit Office
APS	Australian Public Service
ARC	Audit and Risk Committee
ASX	Australian Stock Exchange
BloodNet	Australia's online blood ordering and inventory management system
BloodSafe eLearning	transfusion practice and patient blood management education online system
BloodSTAR	Australia's blood system for tracking authorisations and reviews
BOC	Blood Operations Centre
Criteria	Criteria for the Clinical Use of Immunoglobulin in Australia
DAPI	discards as a percentage of net issues
FEIBA	factor VIII anti-inhibitor
FIX	factor IX
FOI Act	<i>Freedom of Information Act 1982</i>
GST	goods and services tax
HAC	Haemophilia Advisory Committee
HR	human resources
ICT	information and communications technology
Ig	immunoglobulin
IPS	Information Publication Scheme
ISBT	International Society of Blood Transfusion
IU	international units
IVIg	intravenous immunoglobulin
KPI	key performance indicator
kWh	kilowatt hour
Lifeblood	Australian Red Cross Lifeblood
LIS	Laboratory Information System
MyABDR	A secure app for smartphones and websites for people with bleeding disorders or parents/caregivers to record home treatments and bleeds

n/a	not applicable
NaFAA	National Fractionation Agreement for Australia
NBA	National Blood Authority
NBSCP	National Blood Supply Contingency Plan
NIGAC	National Immunoglobulin Governance Advisory Committee
NSP&B	National Supply Plan and Budget
NSQHS	National Safety and Quality Health Service
OBFM	Output Based Funding Model
PBM	patient blood management
PBMAC	Patient Blood Management Advisory Committee
PBS	Portfolio Budget Statements
PGPA Act	<i>Public Governance, Performance and Accountability Act 2013</i>
PGPA Rule	Public Governance, Performance and Accountability Rule 2014
PS Act	<i>Public Service Act 1999</i>
RBC	red blood cell
Red Cross	Australian Red Cross Society
SCIg	subcutaneous immunoglobulin
SES	Senior Executive Service
SMEs	small and medium enterprises
SWG	specialist working group
ViP	Value in Prescribing



Index

A

AAIs *see* Accountable Authority Instructions (AAIs)
abbreviations and acronyms, 190–191
ABDR *see* Australian Bleeding Disorders Registry (ABDR)
ABDR Steering Committee, 5, 91
Aboriginal and Torres Strait Islander (First Nations) people
 red cell transfusion and patient outcomes in, 75
 staff, 96, 168
accountability *see* management and accountability
accountable authority *see* Chief Executive
Accountable Authority Instructions (AAIs), 78
ACHDO *see* Australian Haemophilia Centre Directors' Organisation (ACHDO)
achievements in 2022-23, 22
acknowledgements, 5
acronyms and abbreviations, 190–191
ACSQHC *see* Australian Commission on Safety and Quality in Health Care (ACSQHC)
activated recombinant factor VII (NovoSeven RT), 57, 60
ACT Pathology, 61
administered finances, 104, 108–109
administration *see* corporate governance
administrative tribunal decisions, 94
Advate, 51, 171
advertising and market research, 176
advice to government, policy, 76, 77
Adynovate, 51, 171
agency resource statement, 104, 180–181
ANAO *see* Australian National Audit Office (ANAO)
anniversary of NBA, 20th, 3–4
annual mandatory training, 81, 101
Annual Performance Statements, 33–83
 introductory statement, 34
 performance framework, 34–36
 results against KPIs, 38–39, 57, 65, 76, 78
 Strategy 1: Provide a safe, secure and affordable supply of blood and blood related products and services, 38–56
 Strategy 2: Drive performance improvement in the Australian blood sector, 57–64
 Strategy 3: Promote a best practice model of the management and use of blood and blood related products and services, 65–75
 Strategy 4: Support a sustainable blood sector, 76–77
 Strategy 5: Be a high-performing organisation, 78–83
 summary of overall performance, 37
annual reports, corrections to previous, 179
ANZSBT *see* Australian and New Zealand Society of Blood Transfusion (ANZSBT)
APS Academy, 81
APSC *see* Australian Public Service Commission (APSC)
APS Code of Conduct, 96
APS Employee Census, 3, 79–80
APS Employment Principles, 96

APS Gender Equality Strategy 2021-26, 96
APS Net Zero 2030 policy, 178
APS Statistical Bulletin, 179
APS Values, 96
APS-wide bargaining, 3, 80
ARC *see* Audit and Risk Committee (ARC)
assets management, 32, 110
Assistant Minister for Health and Aged Care, 30
Audit and Risk Committee (ARC), 5, 34, 88–90, 163–164
Auditor-General *see* Australian National Audit Office (ANAO)
audits, 66
 financial statements, 106, 114–115
 internal audit program, 90, 110
AusTender, 110, 111
Australian and New Zealand Society of Blood Transfusion (ANZSBT), 22, 59, 67, 69, 71
Australian Bleeding Disorders Registry (ABDR), 21, 40, 57, 60, 62, 63, 91
Australian Bleeding Disorders Registry (ABDR) Steering Committee, 5, 91
Australian College of Emergency Medicine, 71
Australian College of Rural and Remote Medicine, 71
Australian Commission on Safety and Quality in Health Care (ACSQHC), 69, 70
Australian Haemophilia Centre Directors' Organisation (ACHDO), 4, 5, 40, 62
Australian Health Ministers, 40, 77, 78, 79, 87, 108
Australian Information Commissioner, 94, 179
Australian National Audit Office (ANAO), 89, 94, 110, 114–115
Australian Public Service Commission (APSC), 80, 81, 179
Australian Public Service Net Zero 2030 policy, 178
Australian Red Cross Lifeblood *see* Lifeblood
Australian Red Cross Society, 42, 46
 see also Lifeblood
Australian Signals Directorate Essential 8 controls, 82
Australia's Disability Strategy 2021-2031, 179
awards sponsored by NBA, 67–68

B

Bandler, Dr Lilon, 92
Barnes, Dr Chris, 91
Bartle, Geoffrey, 24, 160
Beazley, Her Excellency the Hon Margaret, 31
Beazley, Professor Lyn, 24, 161
Bedbrook, Paul, 24, 89, 161–162, 164
benefits, non-salary, 100
BeneFIX, 51, 171
Berinert, 51, 57, 60, 172
Bio-RAD Laboratories Pty Ltd, 41, 56
blood, journey of (diagram), 12–13
blood and blood related products and services, supply of and demand for, 1–2, 3, 10, 22, 24, 30
 see also Strategy 1: Provide a safe, secure and affordable supply of blood and blood related products and services

Blood conference, 67–68
 blood donor centres, opening of new, 30–31
 blood donor panel, increase in, 1–2, 27, 77
 blood equipment, gifting of retired, 32
 Blood Management Standard (Standard 7), 70
 BloodNet, 18, 20, 21, 60, 61, 62
 Blood Operations Centre (BOC), 62–64
 BloodPortal, 60
 BloodSafe eLearning Australia, 18, 21, 22, 40, 69
 blood sector, 1, 4
 governance arrangements, 25, 87
 knowledge development, 83
 National Blood Sector Research and Development Program, 2, 18, 65, 73–75
 snapshot of, 20–21
 see also Strategy 2: Drive performance improvement in the Australian blood sector; Strategy 4: Support a sustainable blood sector
 BloodSTAR (Blood System for Tracking Authorisations and Reviews), 18, 19, 57, 58, 60, 61, 62
 blood supply *see* blood and blood related products and services, supply of and demand for
 Board *see* NBA Board
 Bob's story (leukaemia), 86
 BOC *see* Blood Operations Centre (BOC)
 BPL factor XI, 51
 Business Committee, 88
 business continuity framework, 28, 29

C

Cahill, John, 14, 15, 31, 93, 98
 see also Chief Executive
 capability reviews, 94
 census results *see* APS Employee Census
 Ceprotin, 51, 174
 C1 esterase inhibitor, 55, 57, 60, 172
 Chair of the NBA Board, 3, 23, 24, 27, 159
 Report of Board's operations, 24–26
 Chief Executive, 14, 15, 31, 93, 97, 110
 accountable authority, 14, 34, 95, 116
 governance, 88, 89, 90, 91
 letter of transmittal, iii
 remuneration, 98
 review, 1–5
 classification levels of staff, 166, 167
 clotting factors, 51, 53–55, 57
 Code of Conduct, APS, 96
 Comcare, 81, 101
 Comcover Benchmarking Survey, 28
 commercial suppliers, 41, 50–51, 56, 87, 170–175
 committees, parliamentary, 94
 committees, statutory *see* statutory committees
 Commonwealth Child Safe Framework, 81
 Commonwealth Electoral Act 1918, 176
 Commonwealth Health Minister, 23, 87
 Commonwealth Ombudsman, 94
 Commonwealth Procurement Rules, 42, 110, 111
 Commonwealth Risk Management Policy, 28
 compliance index, 182–189
 conditions of employment, 97
 consultancy contracts, 29, 58, 71, 111
 contact officer, ii
 contracts *see* purchasing
 contract staff, 96

Cornelissen, Adjunct Professor Stephen, 30
 corporate governance, 78, 87–93
 national blood sector governance arrangements, 25, 87
 NBA governance arrangements, 88–90
 statutory committees, 91–93
 corporate modernisation project, 2, 19, 22, 78, 79, 81–82, 101, 158
 Corporate Operations, 14
 Corporate Plan 2022-23 to 2025-26, 34–36, 37
 COVID-19 pandemic, 28, 29, 79
 and research, 74
 and supply and management of blood and blood products, 1, 2, 30, 43, 44, 50, 53, 76–77
 and ways of working, 2, 29, 79, 101
 and work health and safety, 101
 CRG *see* Critical Bleeding Clinical/Consumer Reference Group (CRG)
 Criteria for the Clinical Use of Immunoglobulin in Australia, 58, 65, 72–73
 Critical Bleeding Clinical/Consumer Reference Group (CRG), 68
 CSL Behring (Australia) Pty Ltd, 2, 45, 47–49, 50, 51, 112
 products purchased from, 41, 170, 171, 172, 173, 174, 175
 cyber security, 2, 25, 28, 82

D

data services, 57, 61–62
 Deed of Agreement between Australian Red Cross Society and Commonwealth of Australia, 17, 18, 42, 46–47
 demand for and supply of blood and blood products, 1–2, 3, 10, 22, 24, 30
 see also Strategy 1: Provide a safe, secure and affordable supply of blood and blood related products and services
 departmental finances, 104, 106–107
 Department of Finance guidelines, 34, 42
 Department of Health and Aged Care, 25, 60, 82, 87
 graduate program, 80
 Deputy Chief Executives, 14, 15, 16, 30, 98
 digital systems *see* information management and technology
 disability reporting, 179
 diversity of staff, 96
 donor centres, opening of new, 30–31
 donor panel, increase in, 1–2, 27, 77

E

ecologically sustainable development, 176–177
 education and training
 BloodSafe eLearning Australia, 18, 21, 22, 40, 69
 blood sector knowledge development, 83
 cyber security, 82
 immunoglobulin knowledge resources, 73
 mandatory annual training program, 81, 101
 to promote patient blood management, 66
 staff professional and personal development, 81, 83, 100
 work health and safety, 81, 101
 eLearning management system, 81, 100
 emicizumab (Hemlibra), 19, 41, 51, 53, 54, 56, 60, 170
 emissions, 177, 178



employee census *see* APS Employee Census
 employees *see* staff
 employment arrangements, 97
 Employment Principles, APS, 96
 employment status of staff, 167–168
 energy efficiency, 176–177
 Enterprise Agreement 2015-18, 90, 97
 enterprise bargaining, 3, 80
 entry-level programs, 80
 environmental performance, 176–177
Environment Protection and Biodiversity Conservation Act 1999, 176, 178
 errors in previous annual reports, 179
 evaluations *see* reviews and evaluations
 Evolution LIS, 61
 Executive Management team, 15–16
 executive remuneration, 98–99
 Executive Services, 14
 exempt contracts, 110
 external scrutiny, 94

F

factor IX products, 17, 19, 51, 53–54, 170–171
 factor VIIa products, 54, 171
 factor VIII anti-inhibitor (FEIBA), 51, 54, 55, 172
 factor VIII products, 17, 19, 51, 53, 171–172
 FEIBA, 51, 54, 55, 172
 female staff, 96, 165, 166, 167
 Fibrogammin, 51, 172
 finance, 103–155
 arrangements, 104–105
 performance, 106–109
 resources for outcomes, 180–181
 financial statements, 114–115
 First Nations people, red cell transfusion and patient outcomes in, 75
 FOI Act *see* *Freedom of Information Act 1982*
 forums, haemovigilance online, 22, 59
 Franks, Camilla, 27
 Fraser, Greg, 89, 164
 fraud risk and control, iii, 28, 95
 freedom of information, 179
Freedom of Information Act 1982, 179
 fresh blood products, 41, 42–46, 169
 full time staff, 165, 166, 167
 functions *see* roles and functions
 funding
 of NBA, 10, 104, 180–181
 Output Based Funding Model (OBFM) for Lifeblood, 46, 76, 77

G

gender of staff, 96, 165, 166, 167
 gender pay gap, 96
 General Manager *see* Chief Executive
 Gene Therapy Roadmap, 4
 gifting of retired blood equipment, 32
 governance, corporate *see* corporate governance
 graduate program, Department of Health and Aged Care, 80
 grants, 179
 greenhouse gas emissions, 177, 178
 Grifols Australia Pty Ltd, 41, 50, 56, 112, 173

group O Rh D negative red blood cells (RBCs), management of, 71
Guideline for the prophylactic use of Rh D immunoglobulin in pregnancy care, 5, 19, 22, 65, 69

H

HAC *see* Haemovigilance Advisory Committee (HAC)
 HAE *see* hereditary angioedema (HAE)
 Haematology Society of Australia and New Zealand, 67
 haemophilia, 4, 19, 25, 54, 60
 Haemovigilance Advisory Committee (HAC), 5, 23, 58, 62, 92–93
 haemovigilance online webinars, 22, 59
 HealthConsult, 58, 111
 Health Ministers, 17, 40, 77, 78, 79, 87, 108
 Hemlibra, 19, 41, 51, 53, 54, 56, 60, 170
 hereditary angioedema (HAE), 60
 history of NBA, key events in, 17–19

I

ICT *see* information management and technology
 ICT Disaster Recovery Plan, 29
 ICT strategy, 25
 IFPBM *see* International Foundation for Patient Blood Management (IFPBM)
 Ig *see* immunoglobulin (Ig) products
 Immulab Pty Ltd, 41, 56
 Immunoglobulin (Ig) Governance Program, 18, 19, 22, 57, 58, 72
 immunoglobulin (Ig) products
 Criteria for the Clinical Use of Immunoglobulin in Australia, 58, 65, 72–73
 governance of access to, 58
 governance of use of, 72–73
 imported, 41, 50, 52
 knowledge resources, 73
 supply and demand, 30, 52
 imported plasma-derived and recombinant blood products, 41, 50–51
 incidents, notifiable, 78, 101
 independent review of the national blood arrangements and administrative processes, 25
 indeterminate gender staff, 165, 166, 167
 Indigenous staff, 96, 168
 individual flexibility arrangements, 97
 Influenza Vaccination Program, 101
 information management and technology
 Australian Bleeding Disorders Registry (ABDR), 17, 21, 40, 57, 60, 62, 63, 91
 BloodNet, 18, 20, 21, 60, 61, 62
 Blood Operations Centre (BOC), 62–64
 blood sector system upgrades, 61
 BloodSTAR (Blood System for Tracking Authorisations and Reviews), 18, 19, 57, 58, 60, 61, 62
 cyber security, 2, 25, 28, 82
 data services, 57, 61–62
 driving performance improvements in the Australian blood sector, 60–64
 ICT Disaster Recovery Plan, 29
 ICT modernisation, 2, 19, 22, 78, 79, 81–82, 101, 158

MyABDR app, 18, 60, 63
Information Publication Scheme (IPS), 179
internal audit program, 90, 110
International Foundation for Patient Blood
Management (IFPBM), 66
International Haemovigilance Network, 22, 59
International Society of Blood Transfusion (ISBT), 22, 59
IPRP Deeds, 50–51
IPS *see* Information Publication Scheme (IPS)
Isbister, Emeritus Professor James, 93
ISBT *see* International Society of Blood Transfusion
(ISBT)

J

Jackson, Roslyn, 89, 163–164
Johnson & Johnson Medical Pty Ltd, 41, 56
journey of blood (diagram), 12–13
judicial decisions, 94

K

Kearney, Hon Ged, 30
key achievements in 2022–23, 22
key events in NBA's history, 17–19
key performance indicators (KPIs), 37
 Strategy 1: Provide a safe, secure and affordable
 supply of blood and blood related products and
 services, 38–39
 Strategy 2: Drive performance improvement in the
 Australian blood sector, 57
 Strategy 3: Promote a best practice model of the
 management and use of blood and blood related
 products and services, 65
 Strategy 4: Support a sustainable blood sector, 76
 Strategy 5: Be a high-performing organisation, 78
Kiovig, 50, 173
knowledge development *see* education and training
KPIs *see* key performance indicators (KPIs)

L

laboratory information systems (LIS), 18, 20, 61
lanadelumab, 55
Learnhub, 81, 100
legal actions, 94
Legal Services, 14
letter of transmittal, iii
leukaemia, 86
Lifeblood
 blood donor panel, 2, 27, 77
 Deed of Agreement, 17, 18, 42, 46–47
 fresh blood products, 41, 42–46, 169
 gifting of retired blood equipment, 32
 opening of new donor centres, 30–31
 Output Based Funding Model (OBFM), 46, 76, 77
 performance, 46–47
 plasma and recombinant products, 2, 47, 48, 49
 relationship and collaboration with, 25, 62, 63, 71
 and special account, 105
LIS *see* laboratory information systems (LIS)
list of requirements, 182–189
location of staff, 96, 165, 167–168

M

'mad cow' disease, 2, 27
MAGICapp, 68, 69
male staff, 165, 166, 167
management and accountability, 85–101
 corporate governance, 78, 87–93
 external scrutiny, 94
 fraud risk and control, iii, 28, 95
 our people, 96–101
management and use of blood and blood related
 products and services *see* Strategy 3
mandatory training, 81, 101
market research, 176
Martha's story (thalassaemia), 8–9
Mathew, Dolly, 67
McCauley, Kate, 16, 98
Medical Research Future Fund, 74
members of the NBA Board, 3, 23–24, 26, 159–163
Minister for Health and Aged Care, 14, 23, 87
Mo, Dr Allison, 68
modernisation project, corporate, 2, 19, 22, 78, 79,
 81–82, 101, 158
Moulds, Emeritus Professor Robert, 91
MyABDR app, 18, 60, 63

N

NaFAA *see* National Fractionation Agreement for
Australia (NaFAA)
National Blood Account, 105
National Blood Agreement, 4, 25, 60, 87
 funding of NBA, 104
 outcome and program, 35, 181
 policy objectives, 10–11, 37, 66
national blood arrangements and administrative
 processes, independent review of, 25
National Blood Authority Act 2003, iii, 10, 23, 25, 87,
 91, 104, 105
National Blood Authority Determination 2022/1, 97
National Blood Authority Enterprise Agreement 2015–
 18, 90, 97
National Blood Authority (NBA)
 achievements in 2022–23, 22
 authority under the Act, 10
 Board and report, 23–27
 funding of, 10, 104, 180–181
 governance arrangements, 88–90
 key events in history of, 17–19
 organisational structure, 14–16
 outcomes and programs, 10, 35, 36, 180–181
 overview, 7–32
 responsible Minister and portfolio, 14
 role and functions, 10–11
 snapshot of blood sector in 2022–23, 20–21
 values, 96
 vision, 10
 20 year anniversary of, 3–4
National Blood Product Management Improvement
 Strategy 2018–24, 70
national blood sector governance arrangements, 25, 87
National Blood Sector Research and Development



Program, 2, 18, 65, 73–75

National Blood Supply Contingency Plan (NBSCP), 2, 17, 22, 28, 29, 38, 39

National Fractionation Agreement for Australia (NaFAA), 2, 18, 47–49

National Haemovigilance Program, 5, 17, 58

National Health Reform Agreement Addendum 2020–25, 77

National Immunoglobulin Governance Advisory Committee (NIGAC), 5, 72, 73, 91

National Immunoglobulin (Ig) Governance Program, 18, 19, 22, 57, 58, 72

National Managed Fund (Blood and Blood Products) Special Account 2017, 105

National Pathology Accreditation Advisory Council, 71

National Patient Blood Management Implementation Strategy 2017–24, 70

National Policy: Access to Government-Funded Immunoglobulin Products in Australia, 58

National Product Price List, 60

National Safety and Quality Health Service (NSQHS) Standards, 69–70

National Statement for the Emergency Use of Group O Red Blood Cells, 22, 71

National Subcutaneous Immunoglobulin (SCIg) Program, 57, 58

National Supply Plan and Budget (NSP&B), 19, 22, 40–41, 71–72, 79, 108

NBA *see* National Blood Authority (NBA)

NBA Act *see* *National Blood Authority Act 2003*

NBA Board, 3, 5, 23–27, 87

Chair, 3, 23, 24, 27, 159

functions, 23

members, 3, 23–24, 26, 159–163

Report of operations, 24–26

see also Audit and Risk Committee (ARC)

NBA website *see* website (NBA)

NBSCP *see* National Blood Supply Contingency Plan (NBSCP)

Net Zero 2030 policy, APS, 178

NIGAC *see* National Immunoglobulin Governance Advisory Committee (NIGAC)

non-consultancy contracts, 112

non-ongoing staff, 165, 166, 167–168

non-salary benefits, 100

Northern Territory Health, 61

Novo Nordisk Pharmaceuticals Pty Ltd, 41, 51, 171, 172

NovoSeven, 51, 57, 60, 171

NovoThirteen, 51, 172

NPS Medicinewise Value in Prescribing (ViP) Program, 73

NSP&B *see* National Supply Plan and Budget (NSP&B)

NSQHS standards *see* National Safety and Quality Health Service (NSQHS) Standards

NSW Health Pathology, 61

O

OBFM *see* Output Based Funding Model (OBFM) for Lifeblood

Octapharma Pty Ltd, 41, 50, 112, 173–174

office redesign and refurbishment, 2, 19, 22, 78, 79, 82, 101, 158

Ombudsman, 94

ongoing staff, 165, 166, 167–168

online haemovigilance forums, 22, 59

organisational structure, 14–16

Ortho-Clinical Diagnostics (Johnson & Johnson Medical Pty Ltd), 41, 56

outcomes and programs, 10, 35, 36, 180–181

Output Based Funding Model (OBFM) for Lifeblood, 46, 76, 77

overview, 7–32

P

Paragon Care Group Australia Pty Ltd, 41

parliamentary committees, 94

part time staff, 96, 165, 166, 167

PathWest (WA), 61

Patient Blood Management Advisory Committee (PBMAC), 5, 66, 91–93

Patient blood management guideline for adults with critical bleeding, 68

patient blood management (PBM), 66–68

Patient Blood Management (PBM) Guidelines, 5, 22, 66, 68–69

patient stories, 8–9, 86

pay *see* remuneration

PBM *see* patient blood management (PBM)

PBMAC *see* Patient Blood Management Advisory Committee (PBMAC)

PBM Guidelines *see* Patient Blood Management (PBM) Guidelines

PBS *see* Portfolio Budget Statements (PBS)

Peatt, Dr Anna, 30, 98

people *see* staff

performance *see* Annual Performance Statements

performance, blood sector *see* Strategy 2: Drive performance improvement in the Australian blood sector

performance framework, 34–36

performance pay, 100

performance statements *see* Annual Performance Statements

Pfizer Australia Pty Ltd, 41, 51, 171, 172

PGPA Act *see* *Public Governance, Performance and Accountability Act 2013*

PGPA Rule *see* Public Governance, Performance and Accountability Rule 2014

Pharmaceutical Benefits Scheme, 55

Pharmacy Guild of Australia, 101

pilot utilisation reviews, 57, 60

plasma-derived and recombinant blood products, 47–56

clotting factors supply and demand, 53–55

emicizumab (Hemlibra), 19, 41, 51, 53, 54, 56, 60, 170

immunoglobulin supply and demand, 30, 52

imported immunoglobulin products, 41, 50, 52

imported plasma-derived and recombinant blood products, 41, 50–51

management of National Fractionation Agreement (NaFAA), 47–49

red cell diagnostic reagent products, 56

supplied under contract in 2022–23, 170–175

plasma for fractionation, 2, 42, 43, 45–46, 47–49
platelets, 21, 43, 45, 65, 169
policy advice to government, 76, 77
portfolio, 14
Portfolio Budget Statements (PBS), 10, 36
procurement *see* purchasing
product categories, blood and blood products, 40–41
product reviews, 57, 60, 65
professional and personal development of staff *see*
education and training
Program Review Committee, 88, 90
programs *see* outcomes and programs
property redevelopment program, 2, 19, 22, 78, 79,
81–82, 101, 158
PS Act *see* *Public Service Act 1999*
Public Governance, Performance and Accountability Act
2013, iii, 10, 32, 34, 104, 105, 110, 111
Public Governance, Performance and Accountability
Rule 2014, 34, 95
Public Sector Interim Workplace Arrangements 2022,
3, 80
Public Service Act 1999, 10, 96, 97
purchasing, 110–113
advertising and market research, 176
consultancy contracts, 29, 58, 71, 111
contract management to secure supply, 42
contracts for supply of imported Ig products, 50
Deed of Agreement between Australian Red Cross
Society and Commonwealth of Australia, 17, 18,
42, 46–47
IPRP Deeds, 50–51
National Fractionation Agreement for Australia
(NaFAA), 2, 18, 47–49
non-consultancy contracts, 112
procurement initiatives to support small business,
113

Q

QLD Pathology, 61
Quinn, Elizabeth, 98

R

RBCs *see* red blood cells (RBCs)
recombinant blood products *see* plasma-derived and
recombinant blood products
recruitment, 80
red blood cells (RBCs), 22, 39, 43, 44, 65, 169
group O Rh D negative RBC management, 71
red cell diagnostic reagent products, 56
red cell transfusion and patient outcomes in First
Nations people, 75
remediation of information published in previous
annual reports, 179
remuneration, 3, 80, 97–100
Audit and Risk Committee (ARC), 164
executive, 98
gender pay gap, 96
non-salary benefits, 100
performance pay, 100
Senior Executive Service (SES) staff, 99
research and development, 2, 18, 65, 73–75
resources for outcomes, 180–181
resource statement, 104, 180–181

responsible Minister and portfolio, 14
retired blood equipment, gifting of, 32
reviews and evaluations, 28, 78
annual mandatory training program, 81
APS Employee Census, 3, 79–80
Criteria for the Clinical Use of Immunoglobulin in
Australia, 72–73
independent review of the national blood
arrangements and administrative processes, 25
National Blood Sector Research and Development
Program, 2, 74
National Blood Supply Contingency Plan (NBSCP), 29
National Fractionation Agreement for Australia
(NaFAA), 48
National Subcutaneous Immunoglobulin (SCIg)
Program, 58
National Supply Plan and Budget (NSP&B) processes,
71–72
Patient Blood Management (PBM) Guidelines, 5,
68–69
product reviews, 57, 60, 65
Rh D Immunoglobulin Expert Reference Group, 5, 69
Rhophylac, 51, 174
RiaSTAP, 51, 172
Rischbieth, Dr Amanda, 3, 23, 24, 27, 159
risk management, iii, 28–29, 95
Roche Products Pty Ltd, 41, 51, 112, 170
roles and functions
of NBA, 10–11
of NBA Board, 23
of NBA governance committees, 88–90
of statutory committees, 91–93
Rowell, Dr John, 3, 23, 24, 162–163
Royal Hobart Hospital, 61
RSM (Australia), 89, 90

S

salaries *see* remuneration
Sanofi-Aventis Australia Pty Ltd, 41, 51, 170, 171
SCIg Program, 57, 58
security, cyber, 2, 25, 28, 82
Senior Executive Service (SES) staff
employment arrangements, 97
remuneration, 99
Shahid, Yusra, 67
Shakespeare, Penny, 23, 24, 162
small business participation in procurement, 113
snapshot of blood sector in 2022–23, 20–21
special accounts, 105
specialist working groups (SWGs), immunoglobulin,
72–73
sponsorship of awards, 67–68
Spurrier, Professor Nicola, 3, 23, 24, 163
staff, 96–101
APS Employee Census, 3, 79–80
classification levels, 166, 167
contract staff, 96
diversity, 96
employment arrangements, 97
employment status, 167–168
engagement, 3, 79–80
gender, 96, 165, 166, 167
Indigenous, 96, 168

- location, 96, 165, 167–168
 - numbers and workforce composition, 96, 165–168
 - professional and personal development, 81, 83, 100
 - recruitment, 80
 - values, 96
 - see also* remuneration
 - Staff Participation Forum, 80, 90
 - State of the Service Report, 179
 - statutory committees, 91–93
 - Australian Bleeding Disorders Registry (ABDR) Steering Committee, 5, 91
 - Haemovigilance Advisory Committee (HAC), 5, 23, 58, 62, 92–93
 - National Immunoglobulin Governance Advisory Committee (NIGAC), 5, 72, 73, 91
 - Patient Blood Management Advisory Committee (PBMAC), 5, 66, 91–93
 - stories, patient, 8–9, 86
 - Strategies 1–5, 33, 35
 - Strategy 1: Provide a safe, secure and affordable supply of blood and blood related products and services, 38–56
 - contract management to secure supply, 42
 - contract with Lifeblood, 46–47
 - delivery of, 39
 - fresh blood products, 42–46
 - National Supply Plan and Budget (NSP&B), 40–41
 - performance against KPIs, 38–39
 - plasma and recombinant products, 47–56
 - Strategy 2: Drive performance improvement in the Australian blood sector, 57–64
 - delivery of, 58–64
 - governance of access to immunoglobulin, 58
 - haemovigilance online webinars, 59
 - National Haemovigilance Program, 58
 - performance against KPIs, 57
 - product reviews, 60
 - through information management and technology, 60–64
 - Strategy 3: Promote a best practice model of the management and use of blood and blood related products and services, 65–75
 - Blood conference awards sponsorship, 67–68
 - blood product management, 70
 - BloodSafe eLearning Australia, 69
 - delivery of, 66–75
 - governance of use of immunoglobulin, 72–73
 - group O negative red blood cell management, 71
 - immunoglobulin knowledge resources, 73
 - National Blood Sector Research and Development Program, 75
 - National Safety and Quality Health Service Standards, 69–70
 - performance against KPIs, 65
 - process improvement for developing the supply plan and budget, 71–72
 - promoting patient blood management, 66
 - research and development, 73–75
 - updating guidelines, 68–69
 - Strategy 4: Support a sustainable blood sector, 76–77
 - delivery of, 76–77
 - increase in blood donor panel, 77
 - performance against KPIs, 76
 - policy advice to government, 77
 - renewal of Lifeblood funding arrangements, 77
 - Strategy 5: Be a high-performing organisation, 78–83
 - blood sector knowledge development, 83
 - delivery of, 79–83
 - information management and technology, 81–82
 - National Supply Plan and Budget agreed by governments, 79
 - performance against KPIs, 78
 - supporting our people, 79–81
 - Street, Associate Professor Alison, 3, 23, 24, 59, 93
 - structure *see* organisational structure
 - suppliers of blood and blood products, 41, 50–51, 56, 87, 170–175
 - supply of and demand for blood and blood products, 1–2, 3, 10, 22, 24, 30
 - see also* Strategy 1: Provide a safe, secure and affordable supply of blood and blood related products and services
 - supply plan and budget *see* National Supply Plan and Budget (NSP&B)
 - sustainability of blood sector *see* Strategy 4: Support a sustainable blood sector
 - SWGs *see* specialist working groups (SWGs), immunoglobulin
- ## T
- Takeda Pharmaceuticals Australia Pty Ltd, 41, 50, 51, 171, 172, 173, 174
 - terms and conditions of employment, 97
 - TGA *see* Therapeutic Goods Administration (TGA)
 - thalassaemia, 8–9
 - Therapeutic Goods Administration (TGA), 27, 87
 - Thrombosis Haemostasis Society of Australia and New Zealand, 67
 - training *see* education and training
 - Tran, Professor Huyen, 25
- ## U
- United Nations Convention on the Rights of Persons with Disabilities, 179
 - utilisation reviews, 57, 60, 65
- ## V
- Value in Prescribing (VIP) Program, NPS Medicinewise, 73
 - values, 96
 - variant Creutzfeldt-Jakob disease (vCJD), 2, 27
 - veterinarian services, 32
 - vision, 10
- ## W
- wages *see* remuneration
 - waste management, 176–177
 - water consumption, 176–177
 - webinars, haemovigilance online, 22, 59
 - website (NBA), ii, 21, 82, 89
 - workforce statistics, 165–168
 - work health and safety, 81, 101
 - Work Health and Safety Regulations 2011, 81, 101
- ## X
- Xyntha, 51, 172



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