

NATIONAL
BLOOD
AUTHORITY
AUSTRALIA

Annual Report

2024–25





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The National Blood Authority acknowledges the Traditional Owners and Custodians of Country throughout Australia and acknowledges their continuing connection to land water and community.
We pay our respects to the people, the cultures and the Elders past, present and emerging.

Letter of transmittal



The Hon Rebecca White 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 2024–25.

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 2024–25 annual performance statements of the NBA as required under section 39 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 section 39 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", with a horizontal line underneath.

John Cahill
Chief Executive
26 September 2025

Contents

Letter of transmittal	iii
Chief Executive review	1
Part 1: Overview	9
About the NBA	10
Key achievements in 2024–25	15
Year at a glance – snapshot of the blood sector in 2024–25	16
NBA Board	18
Managing risk	24
Part 2: Annual performance	29
Annual Performance Statements	30
Strategy 1: Provide a safe, secure and affordable supply of blood and blood-related products and services	35
Strategy 2: Drive performance improvement in the Australian blood sector	60
Strategy 3: Promote a best-practice model of the management and use of blood and blood-related products and services	71
Strategy 4: Develop and provide policy advice to support a sustainable blood sector in Australia	80
Strategy 5: Be a high-performing organisation	84
Part 3: Management and accountability	95
Corporate governance	96
External scrutiny	104
Fraud control	105
Our people	106
Part 4: Financial management	113
Financial arrangements	114
Financial performance	116
Assets management	120
Purchasing	120
Financial statements	124
Part 5: Appendixes	167
Appendix 1: Committee and Board member profiles	168
Appendix 2: Workforce statistics	174
Appendix 3: Fresh blood components supplied under contract by Lifeblood in 2024–25	178
Appendix 4: Plasma and recombinant products supplied under contract in 2024–25	179
Appendix 5: Other mandatory reporting	184
Appendix 6: List of requirements	190
Appendix 7: Acronyms and abbreviations	197
Index	199
The journey of blood	208

List of tables

Table 1.1	Details of accountable authority during the current report period (2024–25)	11
Table 2.1	Alignment of PBS performance measures with the Corporate Plan 2024–25 to 2027–28	33
Table 2.2	Performance measures: Provide a safe, secure and affordable supply of blood and blood-related products and services	36
Table 2.3	Blood and blood products purchased by product category 2020–21 to 2024–25	39
Table 2.4	Fresh blood expenditure since 2015–16	42
Table 2.5	Lifeblood performance for key indicators	47
Table 2.6	CSL Behring performance under the NaFAA, 2024–25	49
Table 2.7	Supplier performance 2024–25: imported immunoglobulin products	50
Table 2.8	Supplier performance 2024–25: imported plasma and recombinant products	52
Table 2.9	Immunoglobulin demand growth 2020–21 to 2024–25	52
Table 2.10	Performance measures: Drive performance improvement in the Australian blood sector	60
Table 2.11	Performance measures: Promote a best-practice model of the management and use of blood and blood-related products and services	71
Table 2.12	Performance measures: Develop and provide policy advice to support a sustainable blood sector in Australia	80
Table 2.13	Performance measures: Be a high-performing organisation	84
Table 3.1	Australian Public Service Act employment arrangements as at 30 June 2025	107
Table 3.2	Australian Public Service Act employment by classification and NBA salary range as at 30 June 2025	107
Table 3.3	Executive remuneration 2024–25	108
Table 4.1	High-level summary: departmental and administered funding and expenditure 2024–25	114
Table 4.2	Key financial performance 2019–20 to 2024–25	116
Table 4.3	Summarised administered revenue 2019–20 to 2024–25	118
Table 4.4	Summarised administered expenses 2019–20 to 2024–25	119
Table 4.5	Expenditure on reportable consultancy contracts 2024–25	121
Table 4.6	Organisations receiving a share of reportable consultancy contract expenditure 2024–25	121
Table 4.7	Expenditure on reportable non-consultancy contracts 2024–25	122
Table 4.8	Organisations receiving a share of reportable non-consultancy contract expenditure 2024–25	122
Table 5.1	All ongoing employees 2024–25	174
Table 5.2	All non-ongoing employees 2024–25	174
Table 5.3	All ongoing employees 2023–24	174
Table 5.4	All non-ongoing employees 2023–24	174
Table 5.5	Australian Public Service Act ongoing employees 2024–25	175
Table 5.6	Australian Public Service Act non-ongoing employees 2024–25	175

Table 5.7	Australian Public Service Act ongoing employees 2023–24	175
Table 5.8	Australian Public Service Act non-ongoing employees 2023–24	175
Table 5.9	Australian Public Service Act employees by employment status 2024–25	176
Table 5.10	Australian Public Service Act employees by employment status 2023–24	176
Table 5.11	Australian Public Service Act employment type by location 2024–25	176
Table 5.12	Australian Public Service Act employment type by location 2023–24	176
Table 5.13	Australian Public Service Act Indigenous employment 2024–25	177
Table 5.14	Australian Public Service Act Indigenous employment 2023–24	177
Table 5.15	Fresh blood components supplied under contract by Lifeblood 2024–25	178
Table 5.16	Plasma and recombinant products supplied under various contracts for 2024–25	179
Table 5.17	NBA greenhouse gas emissions report (location-based approach) 2024–25	185
Table 5.18	Electricity greenhouse gas emissions report (location-based approach) 2024–25	186
Table 5.19	Agency resource statement	188
Table 5.20	Agency expenses by outcome	189

List of figures

Figure 1.1	NBA organisational structure as at 30 June 2025	12
Figure 2.1	Savings to government for fresh blood products 2020–21 to 2024–25	43
Figure 2.2	Red blood cells issued by Lifeblood 2020–21 to 2024–25 per '000 population	44
Figure 2.3	Platelets issued by Lifeblood 2020–21 to 2024–25 per '000 population	45
Figure 2.4	Whole blood plasma and apheresis plasma for fractionation 2020–21 to 2024–25	46
Figure 2.5	Immunoglobulin products issued 2020–21 to 2024–25 per '000 population	53
Figure 2.6	Factor VIII products issued 2020–21 to 2024–25 per '000 population	54
Figure 2.7	Factor IX products issued 2020–21 to 2024–25 per '000 population	54
Figure 2.8	Factor VIIa products issued 2020–21 to 2024–25 per '000 population	55
Figure 2.9	FEIBA issued 2020–21 to 2024–25 per '000 population	55
Figure 2.10	C1 esterase inhibitor issue 2020–21 to 2024–25 per '000 population	56
Figure 2.11	Emicizumab issued since introduction in 2020–21 per '000 population	57
Figure 2.12	Example of a dashboard using Power BI	66
Figure 3.1	Blood sector governance	97
Figure 3.2	NBA governance	97

Chief Executive review



As I prepare this final review for the National Blood Authority (NBA) Annual Report, I reflect on an extraordinary journey. After nearly 9 years leading the NBA, and more than 5 decades of public service across diverse roles, responsibilities, departments and agencies, I will conclude my term with the NBA in late September 2025. It has been an immense privilege to serve as NBA Chief Executive and to lead an agency and a tremendous team of highly committed and professional people that play such a vital, and largely unsung, role in saving and improving the lives of Australians.

The NBA is a gem in Australia's health system. Australia's national blood arrangements that are administered by the NBA are world leading and consistently deliver outcomes that benefit all Australians, both directly and indirectly. For more than 22 years, Australia's national blood arrangements have delivered the best managed and sustainable blood sector in the world, including through a global pandemic.

The platform for this success has been a long-term, bipartisan national agreement that all Australian governments remain committed to, a continuing commitment to shared proportional funding by governments that involves no direct cost to individual patients for blood or blood product use, a national authority to administer the arrangements, and national legislation. Other comparable countries have some, but not all, of these elements.

The collaborative work of officials across jurisdictions to support the arrangements is of course paramount, as is the engagement with, and advice and assistance from clinicians, nurses, other experts and, most importantly, patients and their representatives.

The NBA is fortunate to work with one national collector of whole blood and plasma, the Australian Red Cross Lifeblood (Lifeblood), one national fractionator of domestically collected plasma in CSL Behring (Australia) Pty Ltd (CSL Behring), and other commercial suppliers of blood products that engage in mature and reliable partnerships with the NBA to deliver the uninterrupted supply of blood, blood products and blood services to meet all clinical demand in Australia.

When I commenced my role with the NBA in September 2016, Australia's national blood arrangements were well developed but facing emerging pressures, growing demand, evolving clinical practice, and a more complex and volatile global market for the secure and sustainable supply of blood products; and then there was a global pandemic! These challenges required us to consider how we best delivered the policy objectives of governments, expressed through legislation and the National Blood Agreement, but always with patients at the centre of our work.

Thanks to the NBA's highly capable and dedicated team, we have delivered improvements to the way Australia manages its national blood supply, enhanced sector resilience, and achieved substantial savings for governments.

Throughout my tenure, my focus has been on strengthening Australia's world-class blood arrangements to ensure patients can access safe, timely, and appropriate blood products and services. This has involved improving supply security, diversifying supplier arrangements, and supporting best practice and the most appropriate use of blood and blood products to deliver the best possible patient outcomes and sustainable national arrangements.

As Australia's population and needs have grown, annual funding for the national blood supply has grown from around \$1.1 billion in 2016 to a budget of \$2.140 billion in 2025–26. During this time, we have maintained – and in many areas improved – supply security, access to therapies, and the efficiency and effectiveness of procurement arrangements. There have also been substantial savings returned to governments as a result of effective contract negotiations, contract management, governance and efficiencies.

During my time as NBA Chief Executive, the agency has substantially evolved and matured. Although it is still relatively young, having been established in 2003, the NBA now has a much greater depth of capability, experience, knowledge, expertise and professionalism than it once did. The agency has shown agility and responsiveness to emerging needs, including through the COVID-19 pandemic, and demonstrated a high degree of prescience in diversifying supply arrangements for blood products, as well as strongly supporting efforts to expand Australia's resilience and sovereign self-sufficiency in relation to domestic blood supply arrangements.

The NBA consistently delivers high performance and outcomes. There are too many achievements to adequately cover in full, but some of the most rewarding highlights during the last 9 years include:

- ♦ delivering an uninterrupted supply of blood and blood products nationally that met clinical demand and the needs of patients, including through a global pandemic;
- ♦ meeting with and listening to patients and their families and representatives about their health journeys, and how the NBA could and did help;
- ♦ working with clinicians and other experts, researchers, advisors and jurisdictional colleagues to ensure the availability, accessibility and most appropriate use of blood and blood products;
- ♦ working in partnership with Lifeblood to fund and expand the blood donor collection network across Australia, including 2 donor centres dedicated to the collection of plasma, and to expand the size and diversity of the donor panel;
- ♦ negotiating and implementing the National Fractionation Agreement for Australia (NaFAA), to ensure a long-term, value-for-money domestic plasma fractionation capability through CSL Behring, with a contract value of some \$3.4 billion and estimated savings to governments in the order of \$200 million;
- ♦ introducing the supply of extended half-life clotting factor products and emicizumab, significantly improving haemophilia treatment options;
- ♦ implementing the award-winning national immunoglobulin (Ig) governance program to support the most appropriate access and use of Ig and the sustainability of supply arrangements, including through the national implementation of the BloodSTAR digital system to authorise and manage access arrangements; and
- ♦ negotiating, renewing and managing what are now 18 major supply contracts, including those with multi-national commercial suppliers of blood products, compared with 5 supply contracts in 2003–04.

There is much more that could be said about the fascinating detail and complexity that sits behind much of the NBA's work and achievements, including the importance of the enabling services, data management, financial management and the technology that underpins this work. This Annual Report for 2024–25 summarises much of this detail and demonstrates another year of substance and real achievement by the NBA and its staff.

As always, however, there is also much more to do. As I prepare to step aside, I do so with confidence in the NBA's future and deep gratitude to the people who have made this journey so rewarding. It has been a privilege to lead a strong and committed team whose expertise and dedication have been at the heart of the NBA's achievements. The objective NBA data and high scores recently reported in the 2025 APS Staff Census reinforces the engagement and commitment of all staff, and how satisfied they are with the NBA environment and culture, and the effective contributions they are able to make. This contribution, along with their professionalism and adaptability, has enabled the agency to continue to deliver on its responsibilities in a complex and evolving environment.

I would like to acknowledge the contribution of my Deputy Chief Executives over the years, whose leadership and advice have been invaluable. I am particularly grateful to the executive office staff, especially Courtney Dale and Emmy Arthurson, who have worked closely with me throughout my term, providing unwavering support and professionalism, and ensuring the NBA's seamless and smooth operation.

I also want to recognise the NBA Board, whose members have provided expert guidance, support and insights throughout my tenure. Their advice has been instrumental in helping the NBA navigate many difficult challenges. I particularly acknowledge the leadership of the current Chair, Dr Amanda Rischbieth AM, whose stewardship has ensured the Board maintained a clear focus on the NBA's strategic direction. I sincerely thank all current and former members of the Board for their contributions and commitment to the NBA's mission.

I also extend my thanks to the Audit and Risk Committee (ARC), which has played a central role in supporting the NBA's governance, accountability and risk management. Under the current leadership of Ms Roslyn Jackson, the ARC has provided invaluable oversight and assurance, ensuring the NBA has consistently maintained strong systems of control and met its obligations to governments and the community.

I would like to acknowledge the relationship with many staff of the Australian Government Department of Health, Disability and Ageing, and the policy, health technology assessment and other teams whose engagement and advice have been instrumental to the NBA's work. Together with our jurisdictional colleagues, suppliers and blood sector stakeholders, we have strengthened Australia's national blood arrangements, ensuring all Australians can continue to rely on a safe, secure and world-class blood supply.

It has been an honour to serve the NBA and the Australian community. I leave with pride in what we have achieved together and confidence in the agency's ongoing success.

John Cahill
Chief Executive

Acknowledgements

Throughout 2024–25, the NBA continued to benefit from the valuable advice, guidance and support provided by many stakeholders across the blood sector. We are grateful for the ongoing contributions of clinical experts, community and patient representatives, and others who have shared their expertise and perspectives.

We also acknowledge the support received from professional colleges, societies and individuals who contributed to the development of our publications, resources and clinical tools. Their input has ensured the NBA continues to deliver relevant, evidence-based information to support clinicians, patients and health services.

The NBA's work is strengthened by the collaboration and commitment of our many advisors, partners and sector colleagues, who contribute to the national blood arrangements through a range of advisory groups and committees. These contributions have supported our work in improving access to blood and blood products, advancing patient care, and strengthening the governance of the national blood arrangements.

We particularly acknowledge those who provided expert advice across clinical issues, patient perspectives, information technology, and corporate governance, including the following groups and committees:

- ◆ Australian Bleeding Disorders Registry Data Managers Group
- ◆ Australian Bleeding Disorders Registry Steering Committee and Stakeholder Group
- ◆ Australian Haemophilia Centre Directors' Organisation
- ◆ 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*
- ◆ Haemophilia Foundation Australia
- ◆ Haemovigilance Advisory Committee and working groups for their advice on the National Haemovigilance Program
- ◆ National Blood Authority Advisory Board
- ◆ National Blood Authority Audit and Risk Committee
- ◆ National Immunoglobulin Governance Advisory Committee and its 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.

Spotlight



(Left to right) Mr Jean-Marc Morange, CSL Behring Senior Vice President and General Manager of Asia Pacific; Mr John Cahill, NBA Chief Executive



(Left to right) Thierry Heinrich, Grifols, Ben Noyen, Deputy Chief Executive , Alvaro Cespedes, Grifols, Mr John Cahill, NBA Chief Executive, Rosa Avella, Grifols, Joana Sabat, Grifols, and Ryan Hose, Grifols



(Left to right) Ms Georgia Cornelissen, Professor Stephen Cornelissen AM, Chief Executive Officer Australian Red Cross Lifeblood; Mr John Cahill, NBA Chief Executive, attending a major promotion of blood donation by Lifeblood partner, the Sydney Swans AFL Football Club

Vale James Harrison, anti-D donor



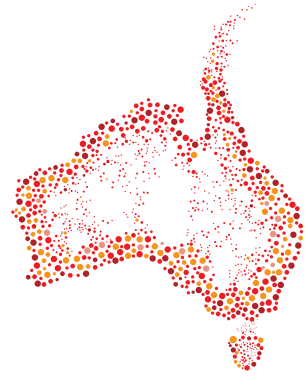
The National Blood Authority gratefully acknowledges the generosity of Mr James Harrison OAM, who passed away aged 88 in February 2025.

Mr Harrison was a prolific donor who donated plasma more than 1,100 times over his life. Mr Harrison's plasma contained a rare and extremely valuable antibody, which is used to create life-saving anti-D medicine. Anti-D protects unborn babies when their blood type is incompatible with their mother's, which can cause the mother's immune system to attack the baby.

Following the example of his father, who was also a donor, Mr Harrison began donating when he was only 18 years old and continued regularly right up to 2018. His extensive donations contributed to saving the lives of more than 2 million babies in Australia. He was awarded the Medal of the Order of Australia in 1999 for his service to the community through plasma donation.

We thank Mr Harrison for his extraordinary generosity and commitment to donation over his long lifetime.

Part 1



Overview

About the NBA

Key achievements in 2024–25

Year at a glance

NBA Board

Managing risk

About the NBA

Our vision

To save and improve Australian lives and patient outcomes 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

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.

Our responsible Minister and portfolio

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

Accountable authority

Details of the NBA's accountable authority during the 2024–25 reporting period are in Table 1.1.

Mr John Cahill was reappointed as General Manager of the National Blood Authority for a 4-year term from 27 September 2020. This was extended for another year to September 2025.

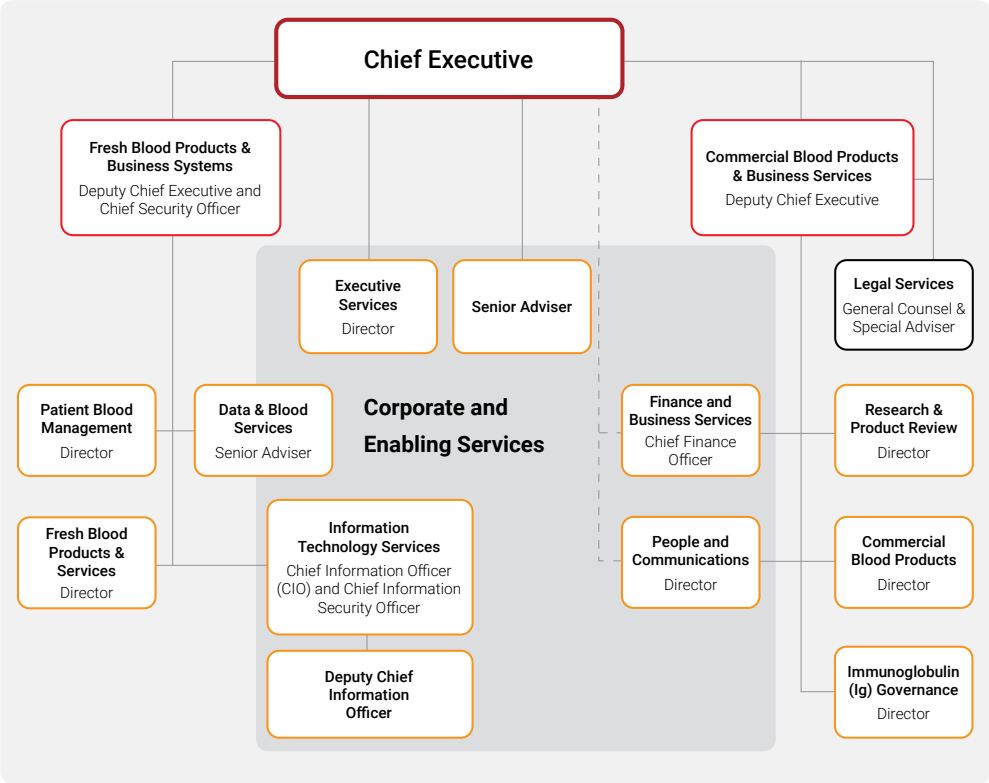
TABLE 1.1 Details of accountable authority during the current report period (2024–25)

Name	Position title / position held	Date of commencement	Date of cessation
Mr John Cahill	Chief Executive	October 2016	September 2025

Our organisational structure

Figure 1.1 shows our organisational structure as at 30 June 2025.

FIGURE 1.1 NBA organisational structure as at 30 June 2025



Our executive management team

As at 30 June 2025 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 has held senior executive positions in several departments and agencies involving wide-ranging policy, program and operational experience.

Mr Cahill has 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.

During his tenure 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.



Ms Kate McCauley

Deputy Chief Executive, Fresh Blood Products and Business Systems

Ms McCauley became Deputy Chief Executive, Fresh Blood Products and Business Systems, in November 2022. She has wide-ranging capabilities in organisational change and reform, health-related policy and service delivery. She is an experienced Senior Executive Service officer who has worked in several areas of government, including the health and education portfolios and with central agencies. Her early career as a registered nurse gives her a unique understanding of the practical implications of government decision-making and policy implementation.

Ms McCauley's NBA responsibilities cover fresh blood products and services and related issues. This includes coordinating the national supply planning processes across Australia. She has principal executive responsibility for our contract with Australian Red Cross Lifeblood. She also has executive responsibility for the Chief Information Officer group, our ICT and data management activities, and coordination of our corporate risk management work.



Mr Ben Noyen

Deputy Chief Executive, Commercial Blood Products and Business Services

Mr Noyen was appointed as the Deputy Chief Executive, Commercial Blood Products and Business Services in mid-November 2023. He is an experienced senior executive and leader with a background in health policy, compliance and regulation, manufacturing and corporate operations. Originally an industrial engineer, Mr Noyen's experience prior to government extends to private sector roles in business consulting and in fraud and risk management. Earlier in his career, he served as a police officer.

In the National Blood Authority, Mr Noyen is responsible for the commercial strategy and supply of plasma-derived products, recombinant products and other alternative blood products. In addition, he leads the national Immunoglobulin Governance Program and manages the assessment and funding of new products. Mr Noyen is also responsible for national blood sector research and development, along with the National Blood Authority's business services, which include finance, legal services, human resources and communications.

Key achievements in 2024–25

- ◆ Maintained an uninterrupted supply of blood and blood products that met clinical demand without needing to activate the National Blood Supply Contingency Plan.
- ◆ Continued strong and effective partnerships with suppliers of blood and blood products to manage blood arrangements in a challenging environment.
- ◆ Maintained governance arrangements for immunoglobulin that kept demand growth at 6.7%.
- ◆ Reduced the level of red blood cell wastage to 1.1%.
- ◆ Achieved savings of \$79.4 million, or 4.3%, against the 2024–25 National Supply Plan and Budget of \$1.844 billion.
- ◆ Maintained an uninterrupted supply of life-saving plasma-derived treatments during the transition of Australia's domestically produced plasma products by CSL Behring's globally consistent manufacturing processes.
- ◆ Finalised an extension of a Deed with Lifeblood for a further 3 years to ensure the ongoing safe and secure supply of blood products and services.
- ◆ Supported the opening of 2 new blood and plasma donor centres.
- ◆ Successfully negotiated 5 new Deeds for several imported plasma and recombinant products used for the treatment of haemophilia A and B.
- ◆ Finalised a procurement process for Red Cell Diagnostic Products.
- ◆ Achieved a staff engagement score of 79%, maintaining the strong result from the previous year.
- ◆ Finalised the updated AHMDS in October 2024 to report transfusion-related adverse events; this will be implemented by most states and territories from 1 July 2025.
- ◆ Progressed applications for funding for 2 new products through to the Medical Services Advisory Committee.
- ◆ Updated the Ig access criteria for 11 medical conditions.
- ◆ Considered 5 additional conditions for access to Ig.

Year at a glance

Snapshot of the blood sector in 2024–25



Donating

568,073

donors

223,941

plasma donors

1,672,293

blood donations



**Collecting
and processing**

905

tonnes of plasma collected

81

fixed collection sites

5

manufacturing
centres

4

testing
centres

18

contracts managed by the
NBA for the supply of products



**Ordering
(BloodNet)**

221,856

BloodNet orders

608

(average) orders
per day

2,746,580

units received by
BloodNet facilities

207

laboratories interfaced
with BloodNet

100%

national uptake of BloodNet
fate module



Supplying

\$775.9m

fresh blood components

\$4.8m

diagnostic reagents

\$967.1m

plasma-derived and recombinant products

709,471

units of red blood cells issued

160,125

units of platelets issued

4,201,650

grams of domestic Ig issued

5,683,137

grams of imported Ig issued



8,483

patients registered in ABDR

5.5

days average age of red blood cells at issue

7,966

discards of red blood cells

640

guideline publications distributed

946,915

registered users of BloodSafe eLearning



2,097

patients receiving products for bleeding disorders

28,650

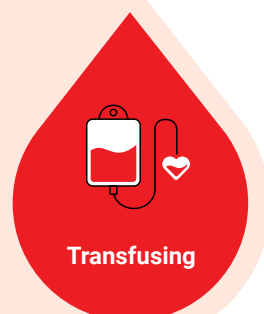
patients receiving Ig products

1,066

facilities issued blood in BloodNet

63

product groups provided under the national blood arrangements



\$1,752.5m

government funding for product supply

\$79.4m

savings to governments

\$14.9m

operational funding

-4.3%

variance between actual and estimated demand for the supply of blood and products

\$818m

funding returned to governments over the past 10 years



NBA Board

The NBA Board was established under the NBA Act to advise the Chief Executive on the performance of the NBA's functions. It is therefore principally an advisory body with no formal decision-making or governance responsibilities in relation to the day-to-day management of the NBA.

The Board usually meets quarterly to consider key issues for the blood sector and the NBA.

Board members also engage with stakeholders to strengthen relationships, promote the NBA and contribute generally to our work. Some members chair or participate in NBA advisory and governance committees on specific issues where their particular expertise is valuable.

The Commonwealth Minister appoints Board members after consulting with 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
- ◆ any other functions specified in a written notice from the Minister to the Chair.

Board membership

In 2024–25 the Board welcomed new member Mr Peter Lewinsky AM, and farewelled Professor Lyn Beazley AO. Professor Beazley joined the Board in January 2017 as State and Territory Representative (small jurisdiction).

Dr Simon Towler, Chief Medical Officer, Department of Health, Western Australia was appointed as acting State and Territory Representative (small jurisdiction) from 26 March for a 3-month period.

As at 30 June 2025, the NBA Board members were:

- ◆ Dr Amanda Rischbieth AM – Chair
- ◆ Mr Geoffrey Bartle – Community Representative
- ◆ Professor Nicola Spurrier PSM – Public Health Expert
- ◆ Dr John Rowell – State and Territory Representative (large jurisdiction)
- ◆ Ms Penny Shakespeare – Australian Government Representative
- ◆ Mr Peter Lewinsky AM – Financial Expert.

Board member profiles are included in Appendix 1.

Report of the Board's operations

During 2024–25 the NBA Board provided strategic oversight and expert advice on the performance priorities and risks across the national blood arrangements. The Board continued to support the NBA's efforts to ensure a safe, secure and sustainable supply of blood and blood products for all Australians.

Board membership changes occurred during the year, with the retirement of long-serving member Professor Lyn Beazley AO and the appointments of Mr Peter Lewinsky AM as Financial Expert and Dr Simon Towler as acting State and Territory Representative (small jurisdiction). The Board acknowledges Professor Beazley's distinguished service and thanks her for her valued contributions to the NBA and the broader health sector.

The Board welcomed progress on several key strategic and operational matters, including the development of the 2025–26 National Supply Plan and Budget (NSP&B). The NSP&B's forecast expenditure of \$2.14 billion reflects the increasing complexity and cost pressures across the sector.

The Board also provided advisory oversight on work to extend the Deed for services provided by Australian Red Cross Lifeblood which will support continuity of service while the future contract arrangements progress.

At its meetings in August 2024, November 2024, February 2025 and June 2025 the Board discussed key initiatives including:

- progress on the review of the national blood arrangements, including mechanisms for consultation and future policy directions
- supply security and sector resilience, with a focus on jurisdictional perspectives such as those presented by Queensland Health
- plasma supply strategies, including updates on the plasma pathway implementation and the national haemovigilance reporting
- the status and governance of new product proposals under Schedule 4 of the National Blood Agreement, particularly proposals to add high-cost and emerging therapies.

The Board engaged in strategic discussions on immunoglobulin (Ig) supply and demand outlook, supported by a presentation from Adjunct Professor Albert Farrugia, Biopharmaceutical Consultant in the Faculty of Medicine and Health Sciences, University of Western Australia.

The Board reviewed staff engagement and culture, noting the NBA's strong results in the 2024 Australian Public Service (APS) Employee Census, with a response rate of 88%. Members acknowledged the work of the NBA leadership and welcomed the agency's staff initiatives including the establishment of an internal Innovation Hub to support continuous improvement.

The Board maintained its engagement with the Lifeblood Board, attending a joint meeting and discussions in November 2024 that included a tour of Lifeblood's Sydney processing facility. The Board also considered international engagement activity, emerging risks identified through horizon scanning, and data transformation efforts underway to enhance blood sector reporting.

As the NBA approaches a period of leadership transition, the Board acknowledges the outstanding contributions of Mr John Cahill, who has provided strong and steady leadership since 2016. His tenure has been marked by numerous achievements – too many to list – across all facets of the agency's work.

Mr Cahill's leadership has been instrumental in guiding the NBA through complex challenges and delivering outcomes that have benefited patients, the health sector and governments alike. His work reflects a deep commitment to public service, and his over 50 years of service in the APS is both remarkable and deeply appreciated.

The Board extends its sincere gratitude to Mr Cahill, who will continue to serve as Chief Executive until late September 2025, ensuring a smooth and considered transition.

The Board looks forward to working with the incoming Chief Executive and continuing to support the NBA's critical role in ensuring access to world-class blood and blood products and services.

Dr Amanda Rischbieth AM



(Left to right) Ms Emmy Arthurson, NBA; Professor Lyn Beazley AO, Board Member; Mr Geoff Bartel, Board Member; Dr John Rowell, Board Member; Mr Ben Noyen, NBA; Ms Penny Shakespeare, Board Member; Dr Amanda Rischbieth AM, Board Chair; Ms Courtney Dale, NBA; Ms Kate McCauley, NBA; and Mr John Cahill, NBA Chief Executive, at Lifeblood's Sydney processing facility

Associate Professor Alison Street AO – Ruth Sanger Oration at the Blood 2024 conference



Associate Professor Alison Street AO chaired the Haemovigilance Advisory Committee (HAC) from 2013 to 2024. Alison made a significant contribution to the committee as an originating member since 2009. From that time, Alison participated in various working groups and contributed to the annual haemovigilance reports and the finalisation of the updated Australian Haemovigilance Minimum Data Set in 2024.

Alison was also a corresponding member of the Patient Blood Management Advisory Committee as an Expert Advisor (2017–2024) and was appointed to the National Blood Authority Board as a Public Health Expert (2017–2023). In 2006, Alison received the Award of Officer in the Order of Australia for services to haematology and

the community of people with congenital bleeding disorders. Alison is an honorary life member of the Haematology Society of Australia and New Zealand, the Australian Society of Thrombosis and Haemostasis, and the Australian and New Zealand Society of Blood Transfusion (ANZSBT).

In 2024 she was invited to deliver the ANZSBT Ruth Sanger Oration at its annual scientific meeting – the ANZSBT’s highest honour, which is given in recognition of the orator’s significant contribution to the field of transfusion medicine. Alison’s oration was titled ‘History Redux, Humanity, Harm and Healing’.

*History Redux –
things that have
been brought back*

Alison’s presentation focused on the importance of understanding history for humankind, in learning from the past, valuing the present and guiding the future – categorised into 3 themes.

Humanity – of blood and tissue donors, who in expressing their kindness, compassion and concern for others confer a unique gift to their recipients. Blood transfusion has a rich history based on principles of the Australian Red Cross Society and blood transfusion services, which embody humanity.

Harm – of transfusion-transmitted infections such as hepatitis B, hepatitis C and human immunodeficiency virus, some of which were present until the early 1990s. In 2024 the UK Infected Blood Inquiry reported its recommendations, which have important contemporary relevance for patients, clinicians, institutions and governments in Australia and New Zealand.

Healing – in acknowledging inadvertent harm and taking action to reduce further occurrence and recurrence of adverse events. Many changes have occurred in response to recognition of adverse events of transfusion (and non-transfusion) with understanding of contributory human factors and improvements in governance of blood procurement and preparation, transfusion practices, and patient and community engagement.

Alison spoke about the 1999 Commonwealth Inquiry into the Australian Blood System, the establishment of the National Blood Authority and its current patient blood management and haemovigilance programs, clinical practice guidelines, online education programs and other freely accessible tools and resources.

Throughout her address, Alison reflected on personal experiences. These included several with Michael, who in 1996 at the age of 14 was the first patient with haemophilia in Australia to be treated with recombinant factor VIII. Now 42, Michael leads a happy, bleed-free life, thanks to weekly subcutaneous self-administered injections of a treatment that was yet to be imagined in those days.

Managing risk

The NBA's risk management arrangements in compliance with Section 16 of the *Public Governance, Performance and Accountability Act 2013* (PGPA Act) are established in our Risk Management Policy, which sets out our approach to managing risks to our people, systems, resources or operations. The Risk Management Policy and associated framework document a risk culture in which staff responsibly engage with risk as part of their day-to-day activities and make measured risk-informed decisions.

The NBA accepts risk as a natural part of its business and works to responsibly manage uncertainty within tolerable levels, relative to the nature and significance of each risk and to the potential impacts should a risk be realised. In recognition of this and to best position the NBA to manage its risks, the NBA completed a review of our enterprise-level risk management framework and updated the policy. The updated policy identifies the principles of risk management at the NBA and the framework for staff to confidently engage with risk using contemporary best practice that aligns with Commonwealth requirements.

The NBA actively manages its risks with specific controls to ensure Australia maintains an adequate, safe, secure and affordable supply of blood, blood products and blood services, and through the National Managed Fund has a contingency for potential claims relating to the activities of Lifeblood.

National Blood Supply Contingency Plan

Under the national blood arrangements, the NBA is responsible for ensuring that patients in Australia have access to an adequate, safe and secure supply of blood and blood products. This includes having contingency and risk mitigation measures in place to ensure continuity of the supply of blood and blood-related products and services. The National Blood Supply Contingency Plan (NBSCP) provides the NBA and its key stakeholders with a framework for a coordinated national response to supply risks.

In 2024–25 there were no events that triggered the NBSCP.

The NBA and jurisdictions are collaborating to ensure the NBSCP provides the highest level of operational preparedness for a safe and secure blood supply for Australian patients. In 2024–25 the NBA commenced a review to update the NBSCP.

The objective of the NBSCP review and update is to ensure the plan remains fit for purpose, including expanded information covering roles and responsibilities, strengthened communication channels in times of activation of the plan, and clearer escalation and management responsibilities during an activation of the plan.

KPMG was engaged to work with the NBA and a jurisdictional working group (with representatives from all jurisdictions) to review and update the plan and to then develop a set of exercises/simulations to test the plan.

The initial stakeholder engagement is key to understanding how the NBSCP fits not just within the blood sector but also within the broader health sector and the wider emergency management sector at both the state/territory and Commonwealth levels, including contingency planning, approaches to emergency management and lessons learned through the COVID-19 pandemic. The stakeholder engagement approach is designed to facilitate effective communication and collaboration to ensure the review of the NBSCP builds in contemporary roles and responsibilities.

KPMG has completed the initial stakeholder consultation and the desktop review, and provided the NBSCP Review Report. This report was reviewed by the NBA and the jurisdictional working group. The project will continue into 2025–26.

Business continuity framework

The NBA continues to maintain contingency and continuity measures 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.

In 2025–26 the NBA will be validating our critical business functions and updating our Business Continuity Framework to ensure our arrangements keep pace with an evolving blood sector and operating environment.

Information and communications technology disaster recovery plan

The NBA's ICT Disaster Recovery Plan (DRP) contains detailed instructions to return critical ICT services to use if there is a major disruption.

The NBA's systems are designed to be resilient and can be run from either of our 2 data centres if necessary. In 2024–25 we continued to demonstrate our ability to work from locations other than the main office as the need arose.

While our ICT DRP was not activated in 2024–25, elements of it continued to be tested through our responses to ICT incidents and trials of our ability to restore data from our back-up solution.

Review of the ICT DRP is ongoing, and we continue to evolve it alongside the modernisation of our ICT environment. A full rewrite of our ICT DRP is planned for 2025–26, following some significant changes to our ICT infrastructure environment that are underway.

Cyber security uplift

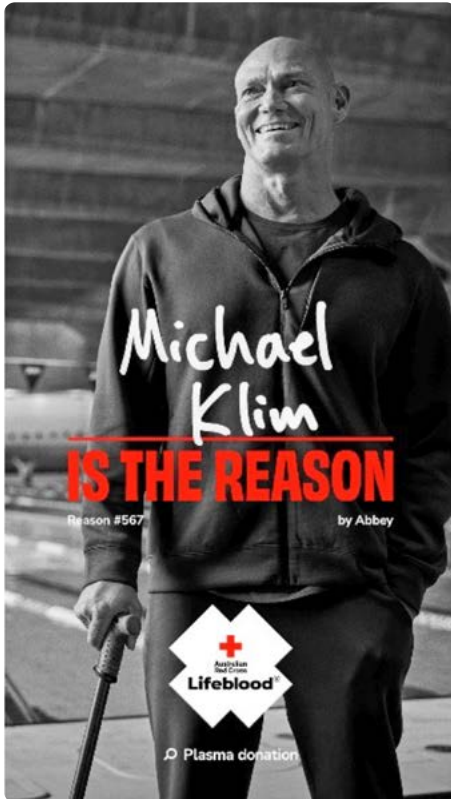
The NBA has had a significant focus on improving the cyber posture of our corporate and business ICT environments over the last few years, supported by technical advice and assistance from the Australian Signals Directorate (ASD).

This focus and support allowed us to continue to improve our cyber maturity in 2024–25, reducing the cyber threat risks to the NBA in the process.

The NBA's cyber security focus was reinforced through our participation in the Department of Home Affairs' Systems of Government Significance (SoGS) pilot program. The SoGS program will deliver a prioritised list of the Australian Government's critical digital functions and systems, based on the potential for significant consequences to Australia's economic prosperity, social cohesion or national interest if disrupted.

Our engagement in this program helped shape the policy framework and assessment criteria for SoGS and helped us understand the impact on our services should they be declared SoGS.

Cameo: Life Is the Reason marketing campaign



The safe and secure supply of fresh blood products in Australia relies entirely on the generous donations of blood, plasma and platelets from the Australian community. On behalf of all Australian governments, the NBA contracts Lifeblood to collect blood donations from voluntary, non-remunerated donors. The current donor pool has just over 568,000 active donors – a number estimated to be around just 3% of the population of eligible Australians who could donate. Their generosity provides the life-saving blood and blood products for those in need.

Lifeblood is continually working to build this donor pool and conducts extensive marketing and communication activities that are supported by government funding to attract new donors. This is vitally important, as a new donor is needed every 5 minutes in Australia to keep meeting the growing need for blood and blood products.

In September 2024 Lifeblood launched a new, high-profile marketing campaign, Life Is the Reason, asking people to find their reason to become a blood donor.

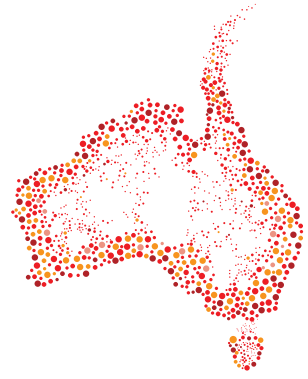
The objective is to get 100,000 new donors a year to find their reason to donate. The new campaign content is designed to emotionally engage people who might otherwise not have considered becoming a donor, and to think about why they might donate blood or plasma. Lifeblood is asking Australians to visit www.lifeblood.com.au/life-is-the-reason and find or share their reason for donating.

The campaign website already features thousands of reasons from individual donors – from 'My mum's cancer' and 'Community care' to 'Truly, it's a lot to do with the party pies' and 'I'm no longer a mad cow!' (reflecting the fact that those who had spent 6 months or more in the UK between 1980 and 1996 can now donate, since the deferral for variant Creutzfeldt-Jakob disease – 'mad cow' disease – was lifted in 2022).

Lifeblood says:

We estimate just three per cent of the eligible population in Australia currently donates, and that tells us there are a lot of reasons why people don't donate. We're asking people to find just one reason why they should.

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: Develop and provide policy advice to support a sustainable blood sector in Australia

Strategy 5: Be a high-performing organisation

Annual Performance Statements

The performance reporting format for the National Blood Authority (NBA) for 2024–25 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 2024–25 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.

A handwritten signature in black ink, appearing to read 'John Cahill', with a horizontal line underneath.

John Cahill
Chief Executive
National Blood Authority

Introductory statement

As required by 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 2024–25 (PBS) and the NBA's Corporate Plan for 2024–25.

In accordance with paragraph 17(2)(b) of the PGPA Rule 2014, the NBA Audit and Risk Committee has reviewed the NBA's performance reporting as part of its functions and considers the reporting appropriate.

Performance framework

In pursuing its vision in 2024–25, the NBA worked to deliver against the outcome, program and performance measures outlined in the 2024–25 PBS. We did this through the 3 objectives and 5 strategies set out in our Corporate Plan 2024–25 to 2027–28.

Outcome

Outcome 1: Access to a secure supply of safe and affordable blood products

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

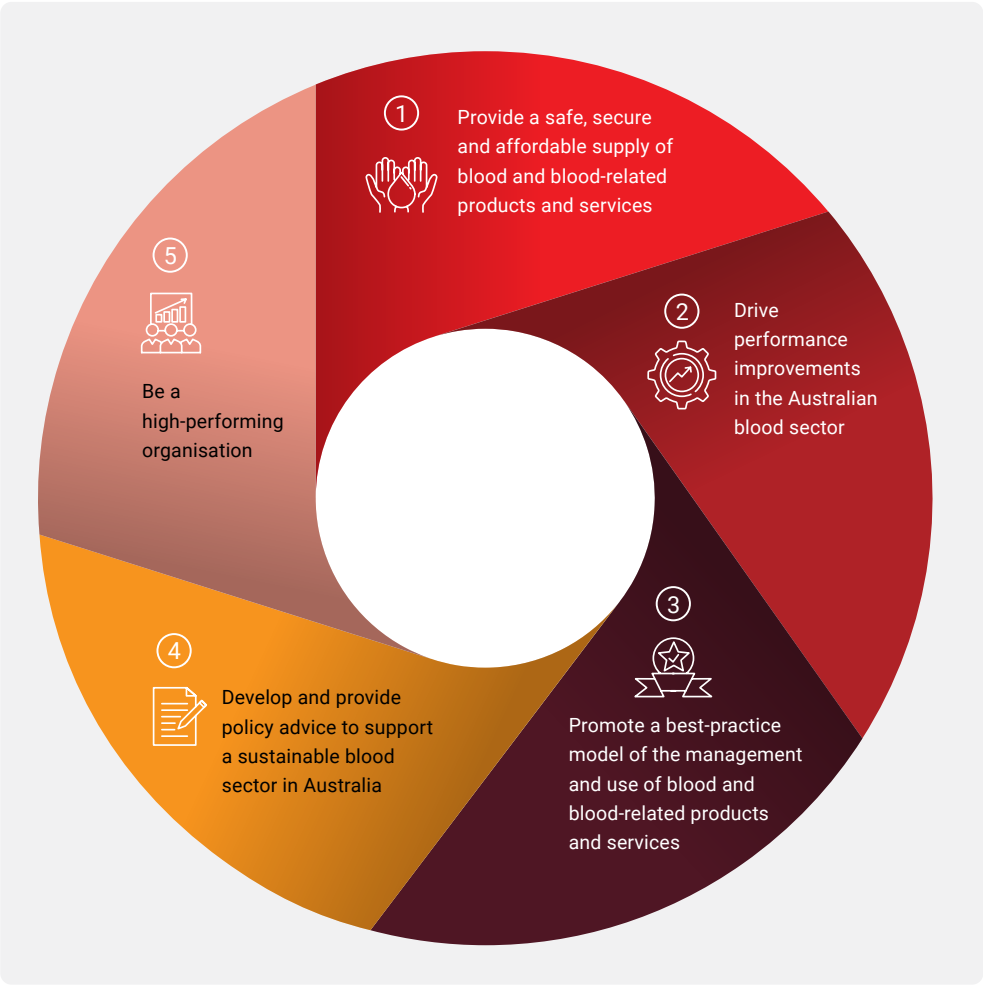
The NBA works to save and improve Australian lives through a world-class blood supply that is safe, secure, affordable and well-managed.

Objectives

1. Secure the supply of blood and blood products.
2. Improve risk management and blood sector performance.
3. Promote the safe and efficient use of blood and blood products.

Strategies

- 1. Provide a safe, secure and affordable supply of blood and blood-related products and services.
- 2. Drive performance improvement in the Australian blood sector.
- 3. Promote a best-practice model of the management and use of blood and blood-related products and services.
- 4. Develop and provide policy advice to support a sustainable blood sector in Australia.
- 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 2024–25 to 2027–28

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 agreements	
Performance measures (PBS)	2024–25 targets (PBS)
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.
The supply outcome is within 5% of the National Supply Plan & Budget approved by governments.	<5% variation.
Appropriate access and use of immunoglobulin (Ig), as indicated by clinical demand against approved access criteria. ¹	<8% growth in Ig demand under approved criteria.
National performance reporting and benchmarking across the Australian blood sector.	Published performance reporting and benchmarking information on the NBA website for the blood sector community. ²

1. For further information about the criteria refer to the Ig governance website at www.criteria.blood.gov.au.

2. Performance reporting and benchmarking information is published progressively throughout the year as data collation and analysis is completed, and such reporting and information is also included annually in the NBA Annual Report.

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.

Spotlight



(Left to right) Mr John Cahill, NBA Chief Executive; Dr CK Lee, Chief Executive and Medical Director, Hong Kong Red Cross Blood Transfusion Service

The NBA Patient Blood Management Guidelines are used in Hong Kong, and Mr Cahill and Dr Lee met to discuss issues of common interest in the supply and management of blood and plasma and associated matters in their domestic environments and globally.

Strategy 1:

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

The NBA manages the national blood supply to ensure healthcare providers have sustainable, reliable and efficient access to blood and blood products they need for patient care.

Under contract with the NBA, the Lifeblood is responsible for collecting blood and plasma from donors in Australia, and supplying plasma to CSL Behring for processing into plasma derived medicinal products. As the contract for Lifeblood services was due to finish at the end of 2024–25, establishing subsequent contract arrangements was a key priority for the NBA this year.

To ensure clinical demand is met, Australia also imports some blood products. The NBA manages multiple contracts to make up for any shortfall in domestic production and to supply products not otherwise available in Australia with multinational suppliers to ensure adequate supply and value for money for these products.

To ensure continuous provision of a safe, secure and affordable supply of blood and blood products, we closely monitor, anticipate and respond to:

- ◆ changes in the clinical environment and their 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, and variations in product usage
- ◆ the state of clinical knowledge, and associated research and development.

Focus areas for our work under Strategy 1 in 2024–25 included:

- ◆ extending the Deed of Agreement for Lifeblood services
- ◆ monitoring and improving access arrangements for Ig products
- ◆ reviewing supply arrangements for red cell diagnostic products (RCDPs)
- ◆ reviewing and updating the National Blood Supply Contingency Plan.

Table 2.2 summarises our results against the 2024–25 performance measures for Strategy 1.

TABLE 2.2 Performance measures: Provide a safe, secure and affordable supply of blood and blood-related products and services

Summary of results against 2024–25 performance measures	
Availability of blood and blood-related products meets clinical requirements	Met Blood and blood products were available to meet clinical demand. There were no events that activated the National Blood Supply Contingency Plan.
National Supply Plan and Budget agreed by governments	Met All governments endorsed the 2024–25 National Supply Plan and Budget
Multiple contracts from diverse sources for blood products are in place and well managed	Met In 2024–25 the NBA managed 18 blood and blood product supply contracts and arrangements. Actual results were 4.3% (\$79.4 million) below the National Supply Plan and Budget.
Provision and use of Ig is consistent with access criteria (PBS target: <8% growth in Ig demand under approved criteria)	Met In 2024–25 the rate of growth of immunoglobulin (Ig) use was 6.7%.
Collection and production yield for domestic Ig is maximised	Not met The plasma for fractionation target was not met in 2024–25. Lifeblood delivered 905 tonnes against a target of 918 tonnes.
Continuing supply arrangements determined for RCDPs	Met A limited tender was conducted in March 2025. As a result, 4 suppliers have been contracted to deliver red cell diagnostic products from 1 July 2025.
Discards as a percentage of net issues of red blood cells is less than 2% nationally	Met Discards as a percentage of net issues of red blood cells were 1.1%.
Supply outcome is within 5% of the National Supply Plan and Budget approved by governments (PBS target: <5% variation)	Met Actual results were 4.3% (\$79.4 million) below the National Supply Plan and Budget. There were no contingency events during the reporting period that required the National Blood Supply Contingency Plan to be activated. The NBA continued to closely monitor the supply of blood and blood products to Australia and mitigated risk issues.

Performance criteria source: NBA Corporate Plan 2024–25 to 2027–28, p. 24; NBA PBS 2024–25, p. 341.

The NBA achieved 7 of the 8 performance measures for Strategy 1.

Delivery of Strategy 1

In 2024–25 the NBA managed the national blood supply to ensure healthcare providers had sustainable, reliable and efficient access to blood and blood products needed for patient care. We ensured blood supply security by:

- working with all Australian governments to set and manage the annual National Supply Plan and Budget (NSP&B)
- negotiating and managing blood supply contracts with Australian and overseas suppliers – including our contract with Lifeblood and the fractionation agreement with CSL Behring.

Through these contracts we secured the supply of fresh blood products (red blood cells, platelets and plasma); and plasma-derived and recombinant products, including Ig and clotting factors.

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 NSP&B. This includes obtaining annual approval from Health Ministers.

We achieve this by:

- ◆ developing a national estimate of product demand for the year
- ◆ liaising with jurisdictions 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 2024–25 NSP&B

Throughout 2024–25, products were supplied to meet clinical demand, and supply risks were effectively managed.

The approved budget for 2024–25, covering supply and management of blood and blood products and services under contract, was \$1,859 million. Of this, \$788 million was allocated for fresh blood products and plasma collection, and \$1,045 million for plasma-derived and recombinant products. There was also a budget of \$26.4 million for activities supporting the appropriate use and management of blood, blood products and blood-related services. This included:

- ◆ distributing the Patient Blood Management Guidelines
- ◆ administering the Australian Bleeding Disorders Registry (ABDR)
- ◆ maintaining the Australian Haemophilia Centre Directors' Organisation (AHCDO)
- ◆ funding BloodSafe eLearning Australia
- ◆ managing Ig governance arrangements
- ◆ maintaining and enhancing blood sector ICT systems
- ◆ assessing and reviewing blood products
- ◆ maintaining the day-to-day operations of the NBA.

TABLE 2.3 Blood and blood products purchased by product category 2020–21 to 2024–25

Products purchased	Supplier	2020–21 (\$m)	2021–22 (\$m)	2022–23 (\$m)	2023–24 (\$m)	2024–25 (\$m)
Fresh blood products	Australian Red Cross Lifeblood	698.46	708.83	685.83	752.62	775.90
Domestic plasma products	CSL Behring (Australia) Pty Ltd	302.73	325.92	311.83	321.41	342.96
Imported plasma and recombinant products	• CSL Behring (Australia) Pty Ltd	156.41	179.17	169.31	161.18	169.58
	• Takeda Pharmaceuticals Australia Pty Ltd					
	• Roche Products Pty Ltd					
	• Pfizer Australia Pty Ltd					
	• Novo Nordisk Pharmaceuticals Pty Ltd					
	• Sanofi-Aventis Australia Pty Ltd					
Imported Ig	• CSL Behring (Australia) Pty Ltd	208.64	257.05	399.22	447.03	454.60
	• Takeda Pharmaceuticals Australia Pty Ltd					
	• Octapharma Australia Pty Ltd					
	• Grifols Australia Pty Ltd					
Diagnostic reagent products	• Grifols Australia Pty Ltd	4.73	4.73	4.74	4.79	4.80
	• Paragon Care Group Australia Pty Ltd					
	• Ortho-Clinical Diagnostics					
	• Bio-Rad Laboratories Pty Ltd					
Total purchases of blood and blood products		1,370.98	1,475.70	1,570.95	1,687.03	1,747.84

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.

We develop contracts in line with the Commonwealth Procurement Rules and manage them in line with best-practice guidance for contract management, including the Department of Finance guideline on developing and managing contracts.

In 2024–25 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 on behalf of all Australian governments with the Australian Red Cross Society, for services provided by Lifeblood.

To secure Australia's supply of plasma and recombinant products, the NBA managed 17 contracts with commercial suppliers in 2024–25, including:

- the National Fractionation Agreement for Australia with CSL Behring
- contracts for imported Ig; imported recombinant factors VIIa, VIII, IX and XIII; and other imported plasma and recombinant products from commercial suppliers
- standing offer arrangements for red cell diagnostic reagent products.

Transition of Australia's domestic plasma products

In May 2025 the transition of Australia's prothrombin complex concentrate (PCC) from Prothrombinex-VF to Beriplex AU was completed, concluding more than 2 years of product transition activity resulting from CSL Behring's alignment of manufacturing processes in Australia with those it uses globally and expansion of manufacturing capacity at its facility in Broadmeadows, Victoria. These changes will deliver a range of benefits and support Australia's long-term capacity to continue processing our growing plasma collections into plasma products.

The transition to Beriplex AU was the final of 5 product transitions that occurred between 2023 and 2025.

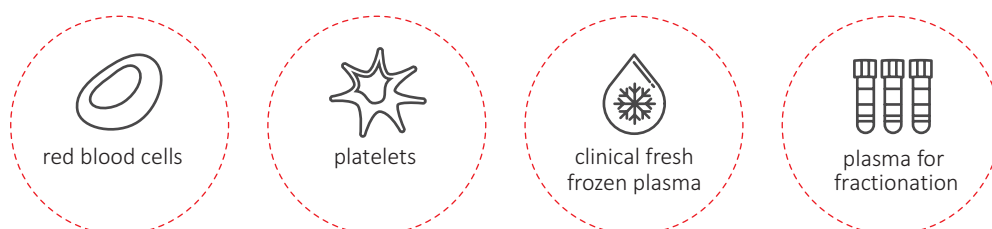
Previous Product		Replacement Product
Intragam 10 (10% IVIg)	→	Privigen AU (10% IVIg)
Evogam (16% SCIg)	→	Hizentra AU (20% SCIg)
Albumex 4 (4% albumin)	→	Alburex 5 AU (5% albumin)
Albumex 20 (20% albumin)	→	Alburex 20 AU (20% albumin)
Prothrombinex-VF (PCC containing clotting factors II, IX and X)	→	Beriplex AU (PCC containing clotting factors II, VII, IX and X)

The NBA worked with CSL Behring, Lifeblood, patients and other stakeholders to support the product transitions and ensure the uninterrupted supply of life-saving plasma-derived treatments was maintained.

The NBA will reflect on the many issues that were managed during this substantial multiyear project and engage with stakeholders who were involved to consider the lessons learned and possible improvements to assist with any similar future product changes.

Fresh blood products

The fresh blood products supplied in 2024–25 are listed in Appendix 3. The 4 main products were red blood cells, platelets, clinical fresh frozen plasma, and plasma for fractionation.



The Deed of Agreement that covers Lifeblood's operations ensures funding to Lifeblood for all reasonable costs it incurs for the collection, processing and supply of blood and services covered by the Deed. The trend in fresh blood expenditure (see Table 2.4) reflects changes in the demand for some fresh blood products over time, and the effect of the funding model for the operations and sustainability of Lifeblood.

Key factors that influenced changes in 2024–25 were:

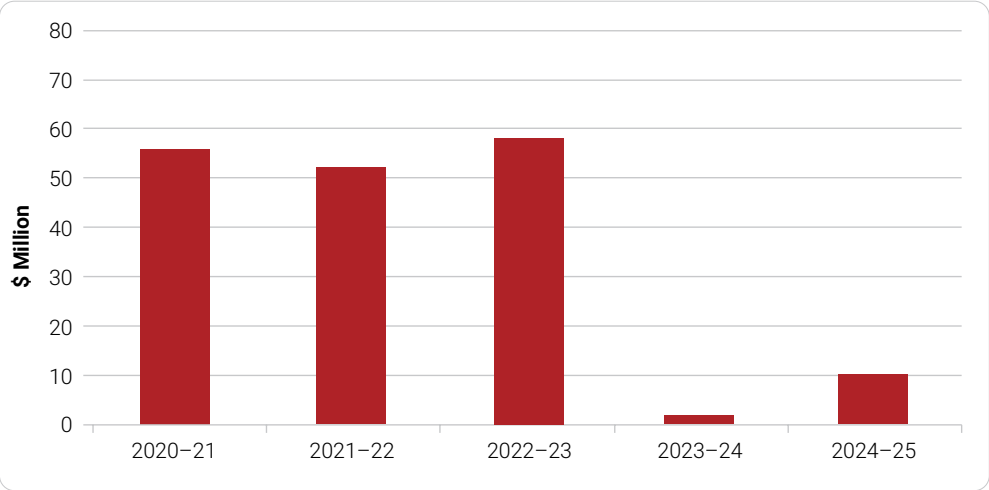
- continued higher demand for red blood cells (0.7% higher compared to 2023–24)
- annual indexation of 2.22%
- a 1.4% decrease in the collection of plasma for fractionation, with 905 tonnes collected, against a target of 918 tonnes; this lower plasma collection was the result of a range of factors, including natural disasters and extreme weather events closing donor centres for short periods, and the need to temporarily convert some plasma donors to whole-blood donations at times, to support national supplies
- continued high demand for Ig and its impact on demand for domestic plasma.

TABLE 2.4 Fresh blood expenditure since 2015–16

Year	Amount (A\$ million)	% growth
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
2023–24	752.6	9.7
2024–25	775.9	3.1
Total	6,732.6	3.7% average

The cost of fresh blood products issued under the national blood arrangements in 2024–25 totalled \$777.3 million, against a budget of \$787.7 million.

FIGURE 2.1 Savings to government for fresh blood products 2020–21 to 2024–25

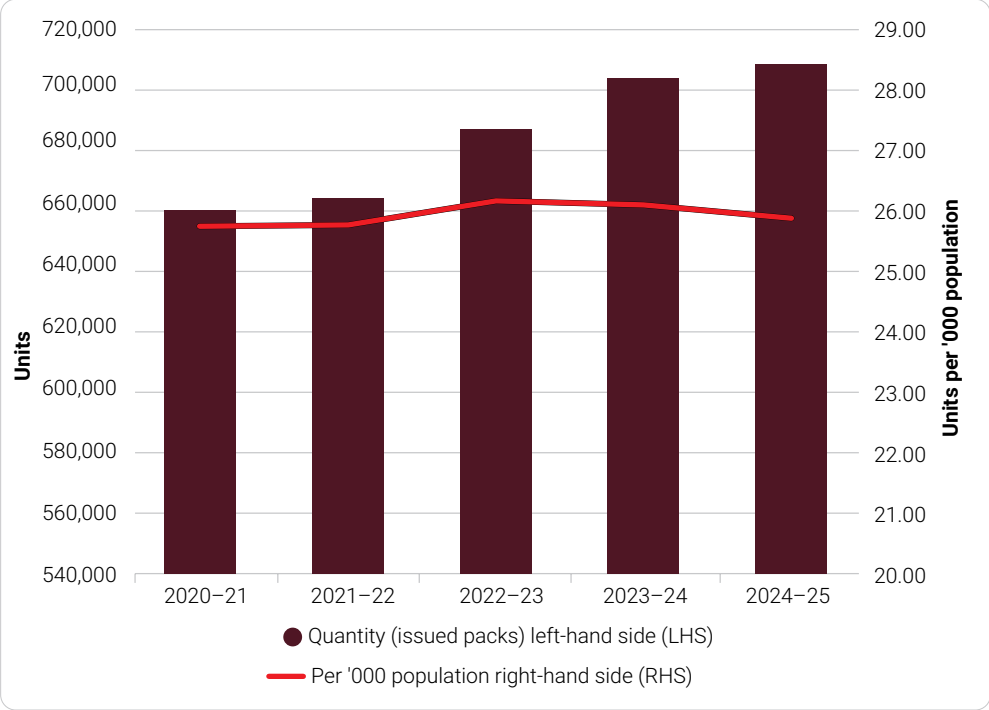


Savings to governments include savings from budget and surpluses in operating costs for Lifeblood. In 2023–24 and 2024–25 the savings were from the budget.

Red blood cells

Red blood cells contain haemoglobin and are the oxygen-carrying cells of the body. They are used in the treatment of many different diseases and blood disorders. They are also used during surgeries, for patients in accidents or other traumas, and to help pregnant women. Red blood cells make up approximately 16.1% of total blood and blood product expenditure. They are the second-largest item in the total cost of fresh products, after plasma for fractionation. Figure 2.2 illustrates an increase of 0.7% in red blood cells issued compared with 2023–24.

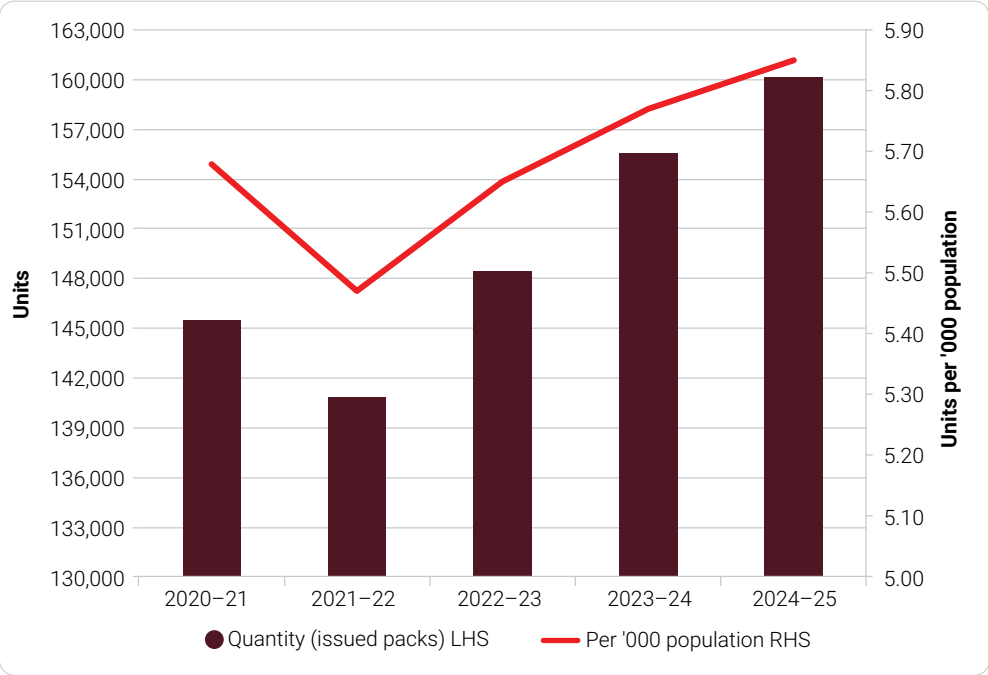
FIGURE 2.2 Red blood cells issued by Lifeblood 2020–21 to 2024–25 per '000 population



Platelets

Platelets are tiny fragments of cells in blood which group together to stop bleeding and seal wounds. They are used to treat patients whose platelet counts are extremely low, and to stop bleeding during surgeries or major traumas. Platelets make up 3.5% of total blood and blood product expenditure. Figure 2.3 shows a 2.9% increase in platelets issued compared with 2023–24. Platelets are derived from both apheresis and whole-blood collections. In 2024–25, 34% of the platelets issued were from apheresis (32% in 2023–24) and 66% from whole blood (68% in 2023–24).

FIGURE 2.3 Platelets issued by Lifeblood 2020–21 to 2024–25 per '000 population



Plasma collection

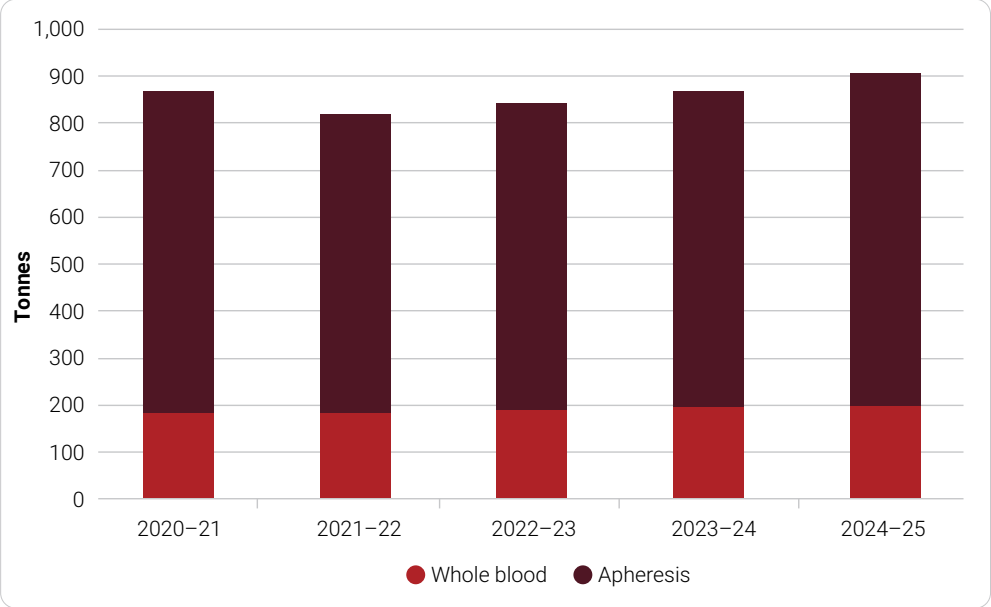
Lifeblood collects plasma for a range of purposes. Plasma is the liquid portion of blood that carries red and white cells, platelets, proteins and nutrients through the body. It contains antibodies, clotting agents to help stop bleeding, and albumin. Lifeblood processes collected plasma into fresh frozen plasma for transfusions for patients. Fresh frozen plasma makes up 1.0% of total blood and blood product expenditure.

Lifeblood also 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 for fresh blood products, representing 20.2% of total expenditure on blood and blood products. Figure 2.4 shows the supply of plasma for fractionation for the last 5 years.

In 2024–25 Lifeblood supplied 905.0 tonnes of plasma to CSL Behring, against a target of 918 tonnes. This comprised 196.8 tonnes of plasma from whole blood and 708.2 tonnes of plasma derived from apheresis.

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).

FIGURE 2.4 Whole blood plasma and apheresis plasma for fractionation 2020–21 to 2024–25



Contract for Lifeblood services

The NBA (representing all Australian governments) has a Deed of Agreement with the Australian Red Cross Society, of which Lifeblood is a subordinate entity. Under the Deed, Lifeblood collects, processes and supplies fresh blood products and services, and plasma for fractionation.

Under the national blood arrangements, Australian governments contract Lifeblood as the sole supplier of fresh blood products in Australia. The supply of fresh blood products is an essential clinical service that saves and improves lives every day. The Deed is one of the NBA’s most important contracts. We operate a continuous program of interaction and reporting to ensure that Lifeblood is performing and accountable under the Deed.

The current Deed commenced on 1 July 2016 and was to expire on 30 June 2025, a 9-year term. The Deed was varied on 27 March 2025 to extend the agreement for a further 3 years, until 30 June 2028. The estimated funding for the 3 years is \$2.4 billion.

The varied Deed continues the original agreement’s cyclical 3-year Funding and Services Agreement (FSA). Funding is determined using an Output Based Funding Model (OBFM). The FSA and OBFM Principles were also updated in 2024–25 to align with the Deed extension.

Funding for Lifeblood in 2024–25 was \$775.5 million, an increase of \$22.9 million from 2023–24.

Performance

The performance of Lifeblood is a key element in meeting blood sector objectives. The requirements that Lifeblood must meet are set out in the Deed and in the Statement of Expectations. Table 2.5 shows Lifeblood's performance against selected indicators.

TABLE 2.5 Lifeblood performance for key indicators

Domain	Indicator	2023–24 result	2024–25 Statement of Expectations target	2024–25 result
Donor management	New donors Whole blood and apheresis (combined)	104,212	n/a	110,058
Effective management of Lifeblood inventory	Number of days within inventory bands	263	n/a	296
	Red cell yield (proportion of collections converted to supply)	92.9%	n/a	93.3%
	Age of red cells at issue (days)	5.0	n/a	5.4
	Clinically acceptable order fulfilment on red blood cells	96.0%	≥95%	97.0%
Ensure health provider satisfaction	Health providers are satisfied with the provision of products and services with a mean overall satisfaction level of ≥8 /10	9.3	≥8/10	9.4
Deliver financial efficiencies	Annual ongoing operational efficiencies of ≥1% of total funding are achieved in accordance with the OBFM	\$7.1m	Deficit <\$17.7m	Deficit \$1.6m*

*Interim result as of 30 June 2025, subject to external audit and adjustments. Note: Lifeblood is funding the 2024–25 deficit from the Corporate Risk Reserve and no additional government funding is required.

Plasma-derived and recombinant products

The total cost of plasma-derived and recombinant blood products issued under NBA arrangements in 2024–25 was \$975.2 million. This was an increase of \$54.0 million (5.9%) from 2023–24. The main reason for this increase was a 6.7% increase in the demand for Ig (\$38.8 million) and an increase in demand for factor VIII and factor VIIa products of \$10 million.

Management of the National Fractionation Agreement

The NBA is responsible for negotiating and managing the National Fractionation Agreement for Australia (NaFAA), which commenced on 1 January 2018 and will continue until 31 December 2026. Under the NaFAA, CSL Behring manufactures plasma-derived blood products using plasma collected by Lifeblood from Australian donors.

In 2024–25, 905.0 tonnes of Australian plasma was pooled for fractionation, with expenditure on the resulting products totalling \$356.8 million.

During 2024–25 the NBA worked with CSL Behring, Lifeblood and other stakeholders to implement the last of the product transitions resulting from CSL Behring's manufacturing changes. The expansion of CSL Behring's manufacturing facility in 2022–23 supports the processing of Australia's growing plasma collections to ensure that supply of domestically produced plasma products remains safe and secure into the future.

As part of this expansion, CSL Behring has changed how it manufactures 5 of Australia's plasma products to align with its global manufacturing processes. The product transitions began in 2023 and concluded in 2025. The transitions involved Australia's:

- albumin 4%, which changed to a 5% concentration (Albumex 4 to Alburex 5 AU)
- albumin 20% concentration (Albumex 20 to Alburex 20 AU)
- intravenous Ig (Intragam 10 to Privigen AU)
- subcutaneous Ig (Evogam to Hizentra AU)
- prothrombin complex concentrate (PCC), which changed from a 3-factor PCC, containing human coagulation factors II, IX and X, to a 4-factor PCC with the addition of factor VII and proteins C and S (Prothrombinex-VF to Beriplex AU).

Performance

Table 2.6 shows the performance of CSL Behring against the NaFAA key performance indicators (KPIs) in 2024–25. CSL Behring maintained sufficient supply of all products throughout 2024–25 despite some deviations from performance targets.

TABLE 2.6 CSL Behring performance under the NaFAA, 2024–25

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)	≤2,000kg	0kg	0kg	48,568.151kg ¹	0kg
	Starting plasma (Hyperimmune)	≤200kg	0kg	0kg	0kg	0kg
	Failed production batches (Ig)	0kg	0kg	0kg	0kg	0kg
	Failed production batches (Hyperimmune)	0kg	0kg	0kg	0kg	0kg
	Low yielding production batches (Ig)	0kg	0kg	0kg	1,266.743kg ¹	1,550.138kg ¹
	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 2024–25			
	Products in inventory	100%	Not Achieved ²	Not Achieved ²	Not Achieved ²	Not Achieved ²
	Products in the national reserve	100%	Achieved	Not Achieved ²	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%	98.5%	99.4%	99.8%	99.7%
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%	Achieved	Achieved	Achieved	Not Achieved ³

IVIg = intravenous immunoglobulin; SCIg = subcutaneous immunoglobulin

1. This KPI deviation arose from an unforeseen short-term manufacturing issue and did not adversely affect the overall supply of products due to the availability of inventory reserves. Financial penalties were imposed by the NBA in accordance with the NaFAA.
2. This KPI deviation did not adversely affect the overall supply of products. Financial penalties were imposed by the NBA in accordance with the NaFAA.
3. This KPI deviation arose from lower than forecast clinical demand for Rh D Immunoglobulin 250IU and was beyond the reasonable control of CSL Behring.

Imported immunoglobulin products

The NBA maintains arrangements with a diverse set of suppliers to secure a range of Ig products. Ig products imported from overseas complement the domestic plasma-derived products supplied by CSL Behring under the NaFAA. They ensure that we can meet the overall clinical demand for blood products in Australia.

There are 4 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 5 years, with extension options available. Table 2.7 summarises these supply arrangements. The suppliers are CSL Behring, Grifols Australia Pty Ltd, Takeda Pharmaceuticals Australia Pty Ltd and Octapharma Australia Pty Ltd.

In 2024–25 the NBA spent a total of \$454.6 million under these contracts. Product and supplier diversity remains very important in an uncertain global operating environment to ensure that Australian health providers have adequate, safe and secure access to blood products needed for patient care.

Performance

Table 2.7 shows the performance of imported Ig suppliers against the contractual KPIs for 2024–25. Supply of products continued to meet demand during the year, and supply was not adversely affected by deviations in KPIs.

TABLE 2.7 Supplier performance 2024–25: imported immunoglobulin products

KPI	Performance	CSL Behring (Australia) Pty Ltd	Grifols Australia Pty Ltd	Octapharma Australia 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 (the IPRP Deeds) with suppliers to import certain plasma-derived and recombinant blood products to augment domestic supply. These are products that Australia does not manufacture or does not manufacture in a sufficient quantity to meet clinical demand.

In 2024–25 the NBA managed IPRP Deeds with:

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

During 2024–25 the NBA successfully completed procurements for new national contracts for the supply of several imported plasma and recombinant products (IPRPs) used for the treatment of haemophilia A and B. The procurement resulted in the establishment of contracts with 5 companies: Sanofi, Takeda, Pfizer and CSL Behring for the supply of recombinant factor VIII and recombinant factor IX; and Roche for the supply of emicizumab (Hemlibra), a monoclonal antibody.

Expenditure under these contracts in 2024–25 totalled \$169.6 million.

Performance

Table 2.8 shows the performance of suppliers under the IPRP Deeds in 2024–25. All suppliers achieved the required performance levels. Together they maintained sufficient supply of products to meet demand during the year.

TABLE 2.8 Supplier performance 2024–25: imported plasma and recombinant products

Performance measure	KPI 1	KPI 2	KPI 3	KPI 4
Supplier	In-country reserve product inventory	Shelf life on products delivered	Delivery performance	Reporting accuracy and timeliness
Sanofi-Aventis Australia Pty Ltd (Alprolix, Eloctate)	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, Novo Thirteen)	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 grew at around 11% a year up to and including 2017–18. In 2018–19 the increase in demand began to slow and has remained under 8% for the last 7 years.

Demand for Ig was 6.7% in 2024–25, continuing the trend of a slower growth rate. While the demand for Ig continues to grow each year, the growth rates since 2018–19 have been the lowest annual rates of increase since 2004–05, when Australia first secured supply sufficiency.

Table 2.9 shows changes in Ig demand since 2020–21.

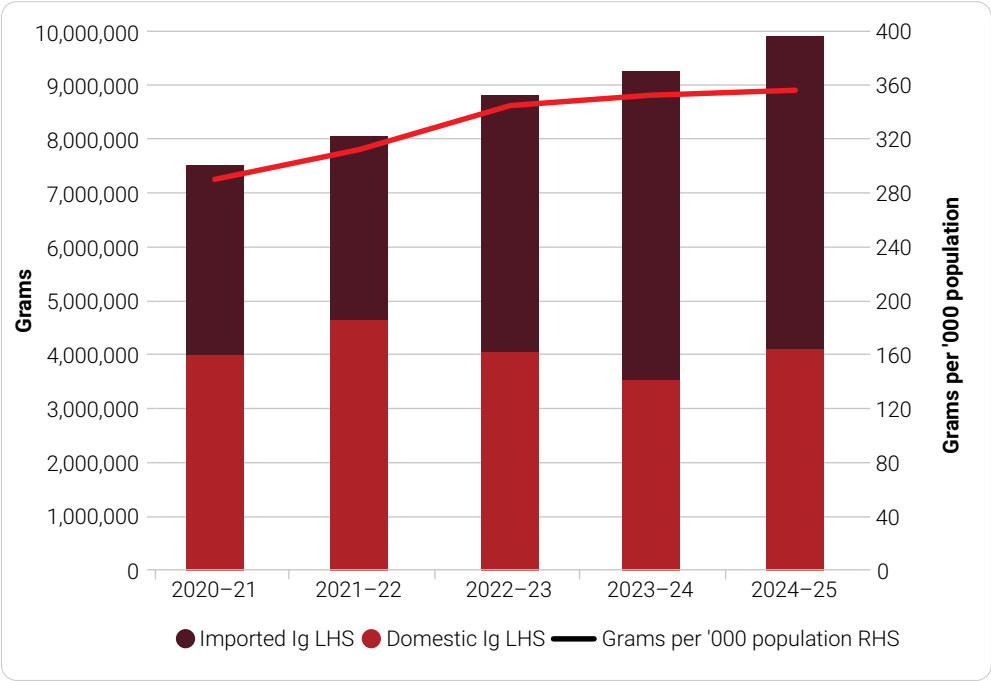
TABLE 2.9 Immunoglobulin demand growth 2020–21 to 2024–25

2020–21	2021–22	2022–23	2023–24	2024–25
7.4%	6.9%	7.9%	6.6%	6.7%

In 2024–24 a total of 9.88 million grams of Ig was issued nationally at a cost of \$1,060.9 million (including the cost of plasma for fractionation and capital). This equates to 60.1% of total blood and blood product issues in Australia. Of this amount, 42.5% was Ig produced in Australia and 57.5% was imported.

Figure 2.5 shows the annual growth in volume of Ig issued over the past 5 years and the proportions of imported and domestic Ig.

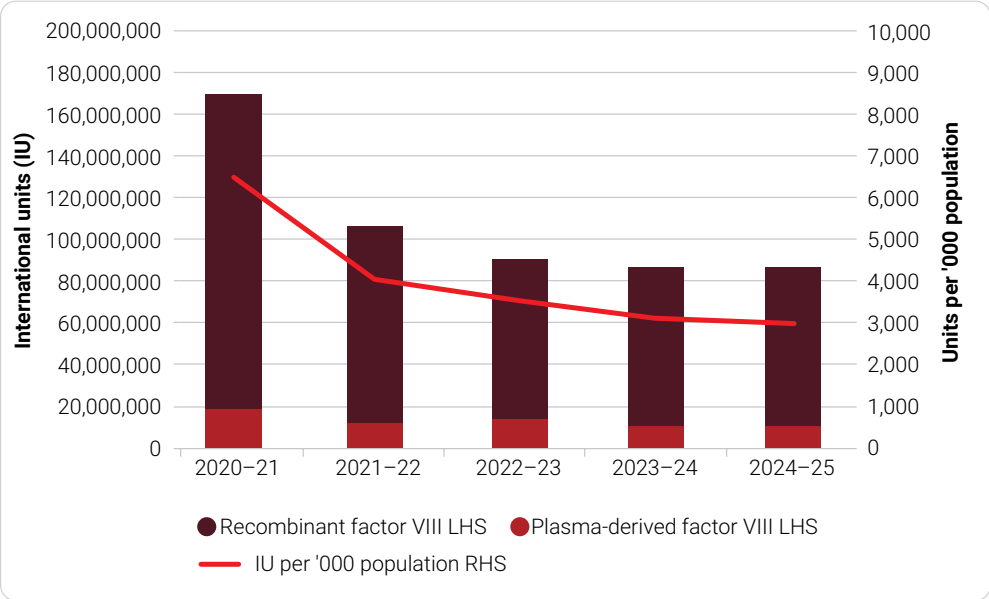
FIGURE 2.5 Immunoglobulin products issued 2020–21 to 2024–25 per '000 population



Clotting factors supply and demand

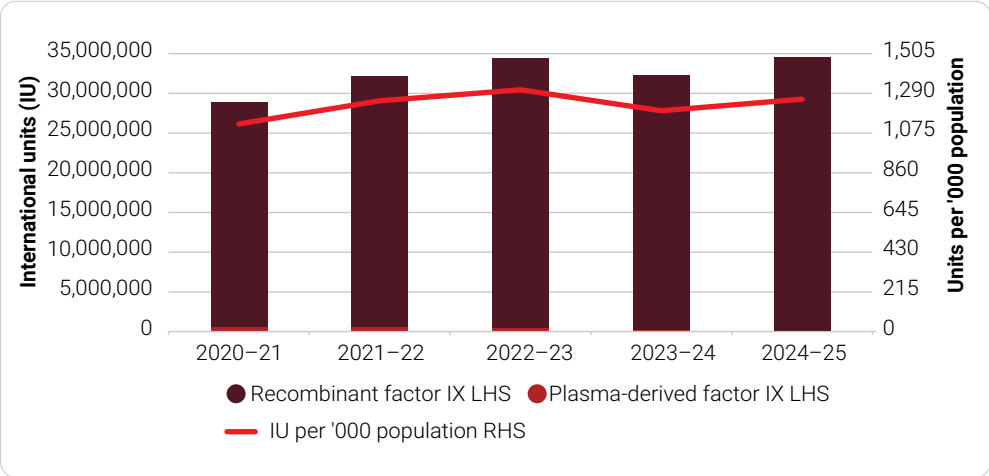
In 2024–25 clotting factors made up 6.7% of total blood and blood product expenditure. As shown in Figure 2.6, the demand for factor VIII products decreased by 4.2% in 2024–25 compared with 2023–24. In 2024–25 demand for recombinant factor VIII decreased by 7.9% and demand for plasma-derived factor VIII increased by 16.1% from 2023–24 levels.

FIGURE 2.6 Factor VIII products issued 2020–21 to 2024–25 per '000 population



The demand for factor IX products increased by 7.1% in 2024–25 compared with 2023–24 (Figure 2.7). Plasma-derived factor IX demand has now ceased as all patients have transitioned to recombinant products. Demand for recombinant factor IX increased by 7.5%.

FIGURE 2.7 Factor IX products issued 2020–21 to 2024–25 per '000 population



Demand for recombinant factor VIIa increased by 25.2% (Figure 2.8) and demand for factor VIII anti-inhibitor (FEIBA) reduced by 13.2% (Figure 2.9) compared with the unusually high 2023–24 demand. The increase for recombinant factor VIIa was due to the continued effect of the introduction of emicizumab. The decrease for FEIBA was a result of demand returning to previous patterns after a high number of acquired haemophilia A patients required treatment in 2022–23. Recombinant factor VIIa and FEIBA are generally used to treat inhibitor development in patients with severe and moderate haemophilia A, and the need for these products can be highly variable.

FIGURE 2.8 Factor VIIa products issued 2020–21 to 2024–25 per '000 population

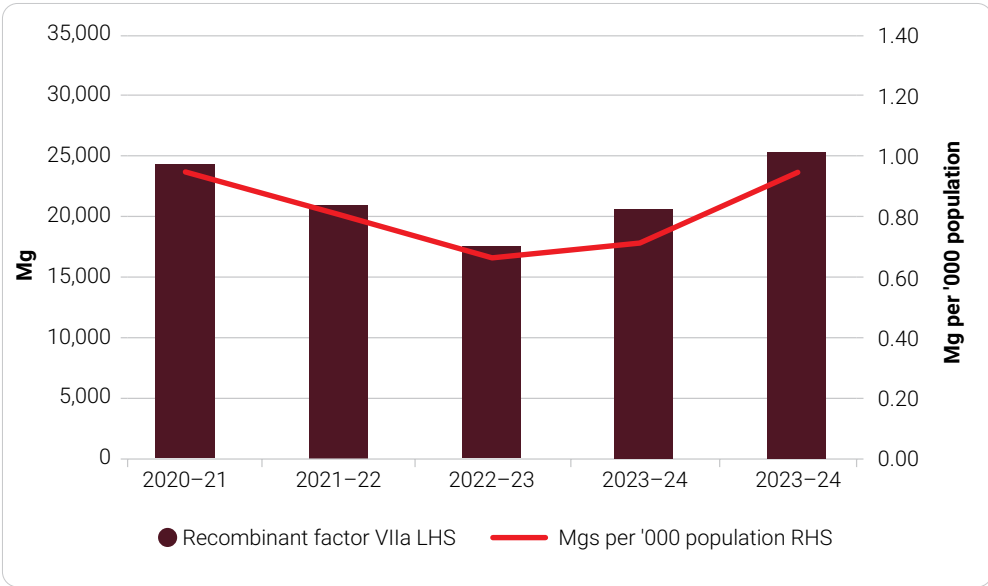
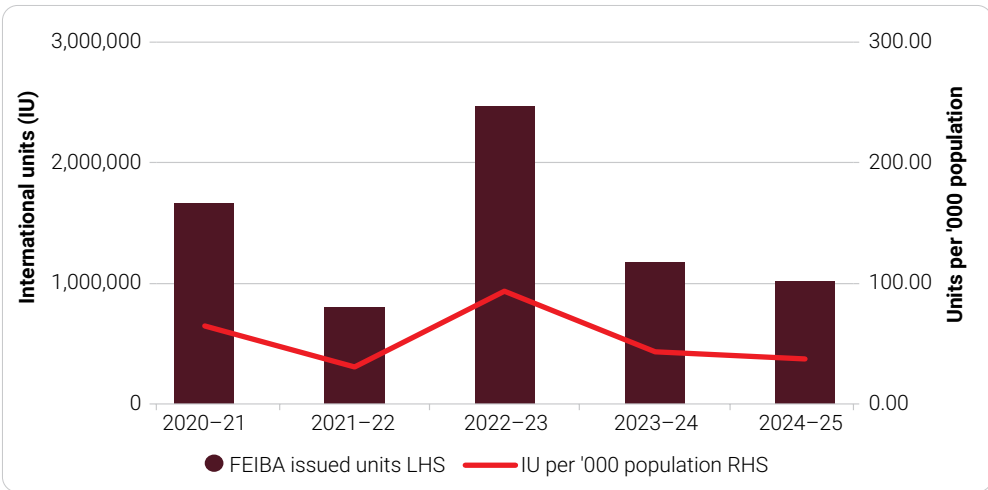
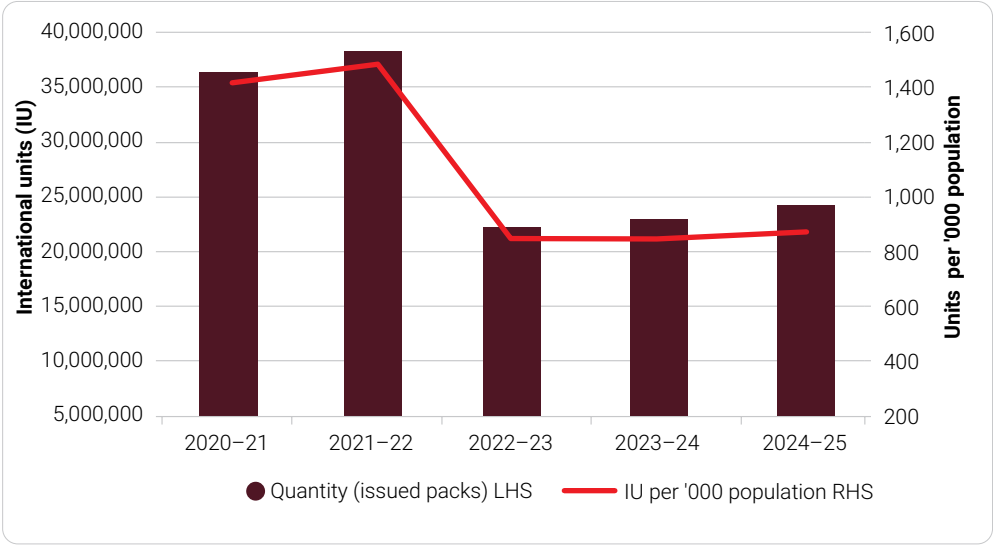


FIGURE 2.9 FEIBA issued 2020–21 to 2024–25 per '000 population



As shown in Figure 2.10, demand for C1 esterase inhibitor increased slightly by 3.4% in 2024–25. This was the second year of slightly higher demand following a decrease of 40.5% in 2022–23, when an alternative product (lanadelumab) was added to the Pharmaceutical Benefits Scheme and taken up by many patients.

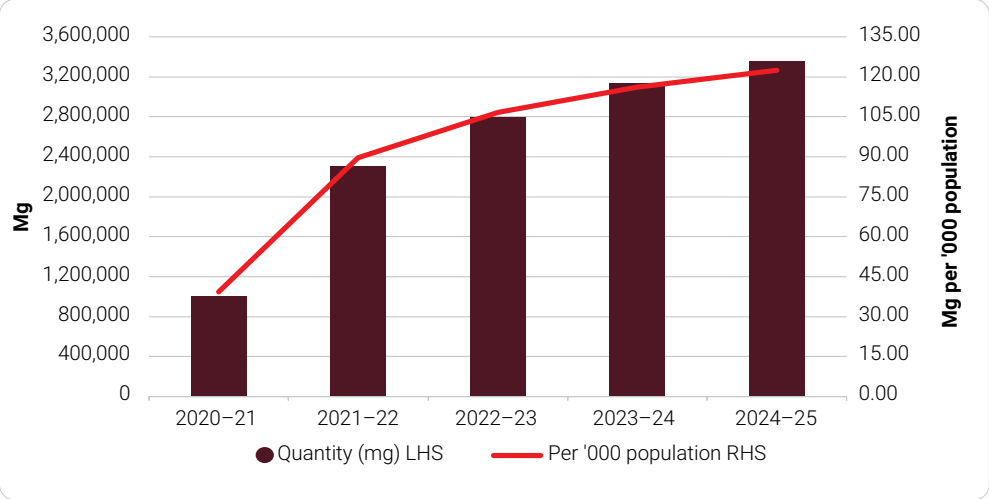
FIGURE 2.10 C1 esterase inhibitor issue 2020–21 to 2024–25 per '000 population



Emicizumab

Added to the national supply arrangements in 2020–21, emicizumab (Hemlibra) is a monoclonal product used to treat factor VIII deficiency, also known as haemophilia A. Demand for emicizumab increased by 7.1% in 2024–25 compared to 2023–24, which saw an increase in demand of 11.8%. This progressive increase in demand following the introduction of this new product was expected.

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 with 4 companies to supply these products for the period 1 July 2016 to 30 June 2019. We extended these arrangements to 30 June 2025.

The 4 companies with which the NBA had a standing offer arrangement for supply of these products in 2024–25 were:

- ◆ Bio-Rad Laboratories Pty Ltd
- ◆ Grifols Australia Pty Ltd
- ◆ Paragon Care Group Australia Pty Ltd (trading as Immulab)
- ◆ Ortho-Clinical Diagnostics Australia Pty Ltd (trading as QuidelOrtho).

The standing offer listed more than 100 RCDPs, 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 was capped at \$4.85 million per year. The NBA administered the cap for suppliers on behalf of the states and territories.

In 2024–25 the NBA completed a limited tender and secured ongoing supply of RCDPs with the suppliers above from 1 July 2025. Purchase of RCDPs will no longer be capped and a broader range of products will be available to approved recipients under these new arrangements.

Cameo: Danielle's story



In July 2015, I was diagnosed with immune thrombocytopenia (ITP), a rare autoimmune condition where the immune system attacks the body's platelets and also restricts their production in the bone marrow. Platelets are essential for clotting, so when counts drop too low, even everyday activities can lead to bruising, nosebleeds or more serious bleeding.

At first my ITP was manageable. But by October 2018, things changed dramatically. My platelet count fell sharply and I entered a prolonged period of instability. From late 2018 and into 2019, I relied heavily on intravenous immunoglobulin (IVIg) infusions to maintain my platelet levels within a safe range. Without these infusions, my counts would drop into single digits, putting me at risk of severe bleeding.

IVIg is made from donated plasma and works by flooding the immune system with healthy antibodies. This can slow or temporarily stop the destruction of

platelets. While it did help to raise my count, the effects were short lived. I often needed repeat infusions every few weeks. Each treatment involved between 4 and 6 bottles of IVIg, usually administered over several hours. In some cases the infusions occurred over multiple consecutive days, requiring hospital admissions.

The process was exhausting. Physically IVIg came with side-effects like headaches and fatigue. Emotionally the uncertainty of how long the treatment would work was incredibly challenging. During this time, I also tried a range of other treatments in the hope of finding something more permanent. Unfortunately nothing made a lasting difference.

Eventually I had a splenectomy to remove my spleen, which is one of the main organs involved in platelet destruction. Although it did not resolve my ITP, it was a necessary step. I now take regular oral medication to manage my platelet count and monitor my condition closely. It's great to know that I have access to IVIg if and when my platelet count becomes unstable and critical.

ITP has profoundly affected my life. It is unpredictable, physically draining, and often invisible to others. But it has also made me appreciate the importance of the blood and plasma donor community. IVIg kept me alive during my most challenging period. Because of this, my husband and family are now regular blood, plasma and platelet donors. It is their way of giving back and supporting others who rely on these life-saving treatments.

Strategy 2:

Drive performance improvement in the Australian blood sector

Strategy 2 supports the appropriate use of products that have finite availability in ways that are considered most likely to have the most positive impact on patient outcomes.

In 2024–25 the NBA pursued performance improvement in the Australian blood sector through a range of activities focusing on:

- governance of access to and use of Ig products
- haemovigilance
- product reviews
- resilient blood sector IT systems
- real-time information and inventory management for laboratory information systems
- publication of data.

Table 2.10 summarises the NBA's performance against the 2024–25 performance measures for Strategy 2.

TABLE 2.10 Performance measures: Drive performance improvement in the Australian blood sector

Summary of results against 2024–25 performance measures	
Indicator	Outcome
Publish performance reporting and benchmarking information on the NBA website for the blood sector community. (PBS target: Published 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 Ig data for 2024–25 and the 2022–23 and 2023–24 Ig Annual Reports were published on the NBA website.
Consideration of utilisation reviews by governments leading to improved practice where required.	Met The final pilot utilisation review, for emicizumab (Hemlibra), is well underway. Learnings from the pilot utilisation reviews are being used to inform the utilisation review framework and the ongoing program of reviews.

Performance criteria source: NBA Corporate Plan 2024–25 to 2027–28, p. 32; NBA PBS 2024–25, p. 341.

The NBA achieved 3 of the 3 performance measures for Strategy 2.

Delivery of Strategy 2

In 2024–25 the NBA delivered activities that supported improvements across prescribers and suppliers of blood products to optimise appropriate use and reduce wastage. This included managing the Immunoglobulin (Ig) Governance Program and the National Haemovigilance Program, conducting product reviews, horizon scanning across the blood sector, operating and supporting key blood sector IT systems, delivering enhanced data services, and providing 24/7 support and advice to blood system users.

Governance of access to immunoglobulin

Ig is a precious blood product offering significant therapeutic benefit for the treatment of various conditions where immune replacement or immune modulation therapy is indicated. Due to the high cost of Ig and the demand for its use in Australia, eligibility for access to government-funded Ig – like many other high-cost treatments – is managed through strong governance arrangements.

In 2024–25 the NBA continued to improve Ig access arrangements through the work of the Ig Governance Program. We:

- ◆ 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
- ◆ implemented digital enhancements to BloodSTAR (Blood System for Tracking Authorisation and Review) to improve efficiency and transparency while strengthening decision-making and data capture
- ◆ introduced automatic approval of emergency requests for Ig access for certain conditions through BloodSTAR to support patients in critical need
- ◆ continued to advise and support clinical staff by reporting on Ig usage and responding to enquiries about access to Ig
- ◆ continued to implement recommendations from the NBA-commissioned report [*Evaluate and develop options to improve access to subcutaneous immunoglobulin \(SCIg\)*](#) (2023)
- ◆ continued to develop a framework to guide decision-making on the allocation of Ig to patients if there were to be a significant interruption to supply.

For more on the Ig Governance Program, see ‘Governance of the use of immunoglobulin’ under Strategy 3.

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. It also includes developing and implementing recommendations to prevent adverse events from occurring or recurring.

The NBA's National Haemovigilance Program is informed by the Haemovigilance Advisory Committee (HAC). This group advises the NBA on adverse event reporting from health services and on national transfusion safety priorities. For more on the HAC, see 'Statutory committees' in Part 3 of this report.

Highlights from 2024–25 include:

- ◆ 2 meetings of the HAC, in July 2024 and April 2025
- ◆ HAC sub-group meetings to review and publish a second version of the Australian Haemovigilance Minimum Data Set, finalised in October 2024
- ◆ a HAC sub-group meeting to consider the barriers and incentives to haemovigilance in Australia and the feasibility of a National Antibody Register (procurements of consultancies for both are being developed)
- ◆ publication of 2 Haemovigilance Annual Reports (data for 2020–21 and 2021–22)
- ◆ meetings with a working group to review the 2022–23 Haemovigilance Annual Report.

Product reviews

Patient groups, suppliers and other interested parties can propose changes to the list of products and services that are publicly funded under the national blood arrangements and included in the National Product Price List (NPPL).

Through a process specified in Schedule 4 of the National Blood Agreement, the NBA assesses the merits of these proposals. We are currently progressing 3 applications proposing changes to the NPPL.

For each proposal, the NBA uses a multi-criteria analysis to inform consideration by governments and ensure alignment with blood sector objectives. In some cases a more comprehensive health technology assessment of the proposed change is required. In such cases the assessment is conducted by the Medical Services Advisory Committee of the Department of Health, Disability and Ageing.

The NBA also conducts utilisation reviews of products that are already supplied and funded under the national blood arrangements. A utilisation review for emicizumab (Hemlibra), a product to treat haemophilia A (also known as factor VIII deficiency), is underway.

In 2024–25 we set out to conduct a final pilot utilisation review before establishing the NBA's product utilisation review framework and an ongoing program for conducting product utilisation reviews and implementing any improvements identified by the reviews. The final review, along with the framework and ongoing program design, will be completed in 2025–26.

Horizon scanning

In 2024–25 the NBA refreshed its approach and increased its focus on the ongoing work of horizon scanning across the blood sector. Several internal ongoing horizon-scanning functions have been revitalised, and in the final quarter of 2024–25 the NBA finalised plans to communicate blood sector news and trends externally.

Performance improvements through information management and technology

Blood sector systems

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 ABDR and the MyABDR app.

These systems enable:

- ◆ blood and blood product ordering
- ◆ management of product authorisations
- ◆ information management for people with bleeding conditions
- ◆ data collection and analysis to inform performance improvement, research, policy development, system reporting and governance controls.

In 2024–25 the NBA began some early activities in relation to our consideration of the next generation of blood sector systems to deliver modern technologies that support the sector. Our ICT Strategy includes timeframes for commencing the development of these systems. It focuses on modern, maintainable applications and usability while retaining the existing core capabilities, including:

- ◆ product ordering and managing inventory
- ◆ governing product use
- ◆ tools to support the treatment of patients using blood products.

Interface with laboratory information systems

In 2024–25 we focused on accelerating the integration and sharing of data between NBA systems and health provider systems. The NBA has an electronic interface that allows dispensing facilities – such as hospital pharmacies, laboratories and nursing home pharmacies – to directly connect their laboratory information system (LIS) to the BloodNet system to automate the exchange of data.

The connecting of systems enables the sharing of richer data and near real-time visibility of the national blood supply to the dispensing pathology teams, while also providing time savings on duplicate data entry and reduction of administrative errors.

The NBA continued to support facilities with connecting their health provider systems to our BloodNet system in 2024–25, seeing 105 new facilities added across several public and private networks. This included the Hunter Area Pathology Service with 81 facilities, Australian Clinical Labs with 21 facilities and Mater Laboratory Services with 3 facilities.

In September 2024, Australian Clinical Labs were the first private pathology providers to have connected their systems, adding 21 facilities across several states.

We continue to work with other pathology networks and LIS vendors to connect their systems and facilities to our BloodNet system, with some connections expected to be finalised in mid to late 2025 and others on track for connection in 2026.

More information about the NBA's electronic interface and how to make use of this capability is available on the [BloodNet system interface](#) page of our website.

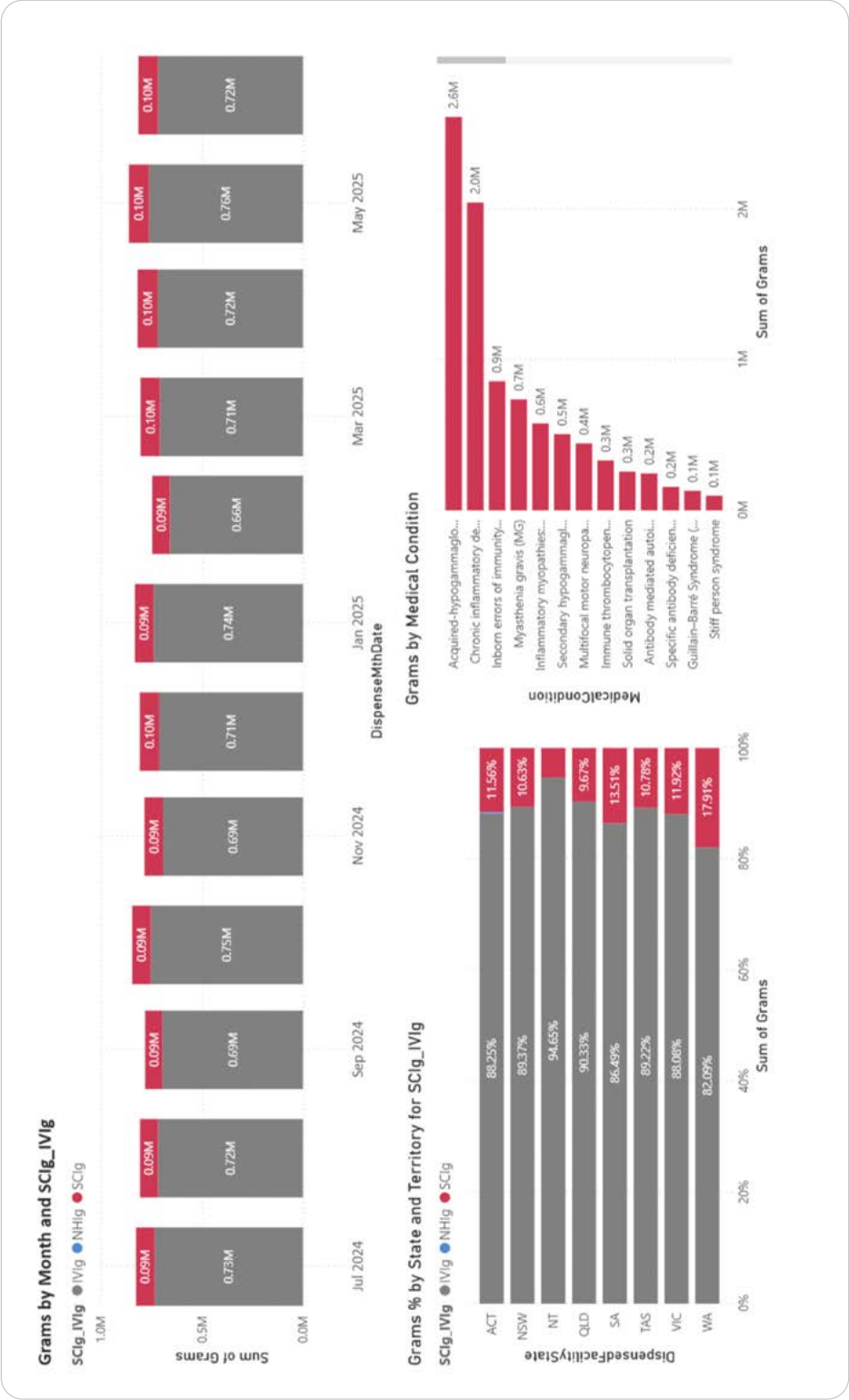
Data services

A substantial amount of data and information exists in the blood sector. In 2024–25 the NBA continued to build its data collection and analysis capabilities across all aspects of the supply chain. Enhancing data quality improves the overall efficiency and sustainability of the sector, including by providing measurements for improvement.

During 2024–25 the NBA:

- continued to provide monthly and quarterly reporting both internally and externally as business-as-usual activities
- continued to refine existing monthly and quarterly reports for stakeholders and implemented additional reporting
- initiated the development of a draft Data Strategy and reworked the Data Governance Framework for the NBA for the next 5 years, to be published in 2025–26
- collected, analysed and distributed discard data from BloodNet to support the establishment of revised targets for discard rates
- published the National Report on the Issue and Use of Immunoglobulin: Annual Reports for 2022–23 and 2023–24 from BloodSTAR
- provided BloodSTAR reporting to jurisdictions and monthly Ig data for publication on the NBA website
- received 166 data and other requests from internal and external stakeholders, and resolved 170 requests
- published the ABDR Annual Reports for 2022–23 and 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 2023–24
- completed the NSP&B and monthly reporting models and continually updated the models through this process
- provided state and territory reports for red blood cell trends from 2024–25 and for red blood cell ABO groups, for discussion with jurisdictions
- published the 2020–21 and 2021–22 haemovigilance reports and drafted the 2022–23 report for review by the Haemovigilance Advisory Committee working group
- continued to implement the Data Improvement Program and engaged a contractor to assist staff in the Data and Blood Services team to implement Microsoft Fabric and Power BI to transition a number of standard monthly reports previously run in Microsoft Excel. Phase 1 was completed in May 2025 and planning has commenced for phase 2 of the project, which will continue into 2025–26 as we transition the rest of our reports. Figure 2.12 shows an example of a dashboard that the team has developed.

FIGURE 2.12 Example of a dashboard using Power BI



The Blood Operations Centre – a lifeline for Australian healthcare professionals



The Blood Operations Centre (BOC) plays a critical role in maintaining the integrity and reliability of Australia's blood and blood product supply. By supporting the systems used to manage ordering, distribution and inventory across the country, the BOC helps ensure that hospitals and healthcare providers receive the right products at the right time. This support includes urgent out-of-hours work which is critical to ensuring 24-hour access to products and support. This directly impacts patient care and supports the broader goal of a safe, efficient and sustainable national blood supply.

BOC employees come from different backgrounds with varying experiences. Joan and Hannah are 2 of our BOC team members who came to the NBA with call centre and retail management experience. Their past roles equipped them with skills to effectively support users of the system, particularly in the medical field, where timely access to blood and blood products is critical.

A typical day in the life of Joan and Hannah involves responding to calls and emails from

external stakeholders who use the blood sector systems and require support, or calls from the public who may have queries about the NBA. As well as responding to calls, Joan and Hannah find themselves producing patient cards for clients of the Australian Bleeding Disorders Registry, creating reports for internal and external stakeholders, triaging level one ICT Service Desk tickets, and creating enhancement requests for improvements to the blood sector systems.

A crucial element of the BOC's work is the system dashboards which display real-time data from each system. These dashboards allow the team to ensure operations for ordering, authorising and distribution of blood and blood products across Australia are running smoothly.

BOC staff also contribute to various projects across the Information Technology Services area and collaborate with other teams within the NBA. This allows BOC staff to build capability in other areas of the NBA's business and broaden their career advancement opportunities.

Joan and Hannah describe their roles as being extremely rewarding. They know that the support they provide in ensuring systems run smoothly and giving timely and accurate advice directly contributes to life-saving outcomes. 'Being part of that critical process gives a strong sense of purpose and impact in our everyday work.'

Blood Operations Centre

The BOC is the front line of the NBA, providing 24/7 support and advice across the Australian blood sector. The BOC team supports over 16,790 active blood sector system users – patients and health workers – around Australia to access fresh blood and other blood products, and information about treatment for their conditions. In September 2024 the BOC introduced multi-factor authentication for system logins and applied new security controls, which has enhanced the security of information and access.

In 2024–25 the BOC:

- provided regular NBA news and alerts to users
- ensured that the systems regularly and accurately monitored national inventory levels
- received more than 6,550 calls, including over 1,050 high-priority calls after normal support hours
- made more than 1,750 calls to the sector, following up with facilities to ensure the ongoing operation of the blood systems
- completed over 9,800 support tickets
- facilitated ordering of important and life-saving products through Lifeblood.

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

Blood conference awards sponsorship

Young Investigator Award – Ms Stacie O'Brien



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 2024 the NBA sponsored awards for:

- ♦ best oral or poster abstract with a transfusion focus by a young investigator (Young Investigator Award)
- ♦ best oral or poster abstract on haemovigilance or patient blood management (Blood Management Award).

In 2024 the recipient of the \$500 Young Investigator Award was Ms Stacie O'Brien for her research 'Rethinking D-positivity: molecular testing guidelines and clinical implications'. The study aimed to accurately determine RhD status in pregnant women, guiding effective management and prevention of alloimmunisation-related complications. The findings of the research may support a review of the ANZSBT guidelines for weak D molecular testing.

Ms O'Brien has worked as a multi-skilled scientist in short turn-around time (STAT) laboratories in regional Queensland and Brisbane for over a decade. Her interest in transfusion medicine and blood product safety developed while she was working at St Andrew's Hospital. Following this she held a supervisory role at QML Pathology's central blood bank department while working on a research project with Queensland University of Technology on blood group genomics. She is passionate about all aspects of transfusion medicine and anticipates seeing bioinformatics eventually guiding the blood bank discipline.

Blood Management Award – Associate Professor Tina Noutsos



In 2024 the recipient of the \$500 Blood Management Award was Associate Professor Tina Noutsos for her research 'Red cell alloimmunisation and haemolytic disease of the fetus and newborn in First Nations, rural and remote mothers and babies in the NT'. The research was a 5-year (2015–2020) retrospective cohort study of all births to mothers aged 16 years and older admitted to public hospitals in the Northern Territory, funded by an NBA Research and Development Program grant (Round 5).

The research concluded that red cell alloimmunisation and non-ABO haemolytic disease of the foetus and newborn (HDFN) affects First Nations mothers and babies in the remote Northern Territory disproportionately, with an associated increased need for tertiary care further away from Country.

Associate Professor Noutsos is the Head of the Division of Global and Tropical Health, Senior Research Fellow at the Menzies School of Health Research, Senior Specialist Clinical and Laboratory Haematologist at Royal Darwin Hospital, and an Associate Professor at Flinders University. Her research focuses on First Nations peoples in rural and remote populations.

Strategy 3:

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

To support improved patient outcomes, the NBA delivers programs to promote best-practice models of the management and use of blood and blood-related products.

Our work under Strategy 3 in 2024–25 focused on:

- supporting reductions in blood wastage
- improving guidelines, tools and resources for clinicians
- administering grants for high-quality research
- ensuring that the criteria for access to and use of Ig are in line with the best evidence and clinical advice.

Table 2.11 summarises our results against the performance measures for Strategy 3.

TABLE 2.11 Performance measures: Promote a best-practice model of the management and use of blood and blood-related products and services

Summary of results against 2024–25 performance measures	
Indicator	Outcome
Sustained improvements in the management and use of blood products through:	
improved clinical guidelines, clinical practice tools and resources developed and promoted	Met Patient blood management and the clinical guidelines were promoted at several national sector conferences throughout 2024–25. All existing clinical guidelines have now been published (as is) on MAGICapp, enhancing access. Work continued on progressing a more sustainable methodology to maintain the clinical practice guidelines.
increased publications linked to NBA grants	Met There are now 64 publications directly linked to the outcomes of the National Blood Sector Research and Development Program, an increase of 11 from the last report.
changes to the Ig criteria are consistent with quality information, evidence and clinical advice.	Met Changes to the Criteria for the Clinical Use of Ig in Australia were informed by published evidence and advice from specialist working groups of clinicians with relevant experience in haematology, neurology, immunology and transplant medicine.

Performance criteria source: NBA Corporate Plan 2024–25 to 2027–28, p. 28.

The NBA achieved 3 of the 3 performance measures for Strategy 3.

Delivery of Strategy 3

In 2024–25 the NBA promoted best practice in the management and use of blood. We:

- ◆ promoted patient blood management through the National Patient Blood Management Program
- ◆ updated guidelines for medical professionals and consumers
- ◆ delivered education and training through BloodSafe eLearning Australia
- ◆ supported the implementation of the National Safety and Quality Health Service (NSQHS) Blood Management Standard
- ◆ continued to implement the National Blood Product Management Improvement Strategy
- ◆ developed process improvements for the National Supply Plan and Budget
- ◆ delivered the National Immunoglobulin (Ig) Governance Program
- ◆ refined the Criteria for the Clinical Use of Immunoglobulin in Australia
- ◆ delivered the National Blood Sector Research and Development Program.

Promoting patient blood management

Promoting safe, high-quality management and use of blood and blood products is a primary objective of the National Blood Agreement. Patient blood management (PBM) improves patient outcomes by ensuring that optimising and conserving the patient's own blood is a focus of their medical and surgical management.

The NBA's National PBM Program is informed by the PBM Advisory Committee (PBMAC). This group provides advice to the NBA about implementing patient blood management in Australia. More information on the PBMAC is under 'Statutory committees' in Part 3 of this report.

In 2024–25 our PBM activities included:

- ◆ commencing the review of the Patient Blood Management Implementation Strategy
- ◆ refining the PBM implementation audit tool for national use
- ◆ promoting PBM by exhibiting at national conferences.

Updating guidelines

The NBA funds and manages the development of evidence-based guidelines for medical professionals and consumers. The guidelines are developed by multi-disciplinary clinical committees and are based on the results of a systematic review of relevant literature and consensus among clinical experts.

In 2024–25 the Patient Blood Management Guidelines: Modules 2 Perioperative, 3 Medical, 4 Critical Care, 5 Obstetrics and Maternity and 6 Neonatal and Paediatrics were published (as is) on MAGICapp. This followed the NBA's publication in 2023–24 of the *Patient blood management guideline for adults with critical bleeding* and the *Guideline for the prophylactic use of Rh D immunoglobulin in pregnancy care* on MAGICapp.

MAGICapp is an online platform for developing, publishing and updating guidelines. It is accessible on all devices, improving the guidelines' availability for both medical professionals and consumers.

During 2024–25 the NBA continued to work on progressing a more sustainable methodology to maintain the clinical practice guidelines. A stakeholder survey was completed, seeking views on all research questions across all guidelines, potential new questions and prioritisation. We have continued to refine our requirements and intend to begin a program of work to inform and develop updates to all guidelines in the second half of 2025.

BloodSafe eLearning Australia

BloodSafe eLearning Australia provides online education and training resources for health professionals in Australia to improve their knowledge of PBM and clinical transfusion practice and thereby to improve patient outcomes. BloodSafe eLearning is funded by the NBA on behalf of all Australian governments, with expenditure of approximately \$1.3 million annually.

In 2024–25 BloodSafe eLearning gained 65,379 new users during the year. Since 2007 the total number of Australian users has grown to over 946,915.

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 45 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.

In 2024–25, 4 Critical Bleeding courses were released:

- ◆ Essentials (August 2024) aims to increase the learner's knowledge and understanding of the principles of management of an adult with critical bleeding.
- ◆ Pathophysiology (February 2025) aims to increase the learner's knowledge of critical bleeding pathophysiology, including the physiological response to blood loss, development of hypovolaemic shock and the lethal triad.
- ◆ Recognising Critical Bleeding (February 2025) aims to increase the learner's knowledge and understanding of the identification and assessment of an adult patient with critical bleeding.
- ◆ Managing Critical Bleeding (May 2025) builds on the previous courses and is designed to support healthcare staff in improving patient outcomes through evidence-based best practice.

The courses are based on the *Patient blood management guideline for adults with critical bleeding* (2023) (excluding pathophysiology) and other relevant guidelines and information. They have been developed in collaboration with leading clinical experts in Australia.

BloodSafe eLearning also has 5 podcasts available and several standalone videos to view or download for later use. Most of the videos are under 5 minutes long and are 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 were developed by the Australian Commission on Safety and Quality in Health Care (ACSQHC). They are a set of 8 standards used to accredit all health service organisations (HSOs) across a broad range of healthcare areas.

The purpose of the standards is to increase safety, improve the quality of health care and protect patients from harm. The standards describe the level of care that HSOs should provide, and the systems needed to deliver such care.

The NBA joined with the ACSQHC to develop the Blood Management Standard, which aims to improve patient outcomes by:

- ◆ identifying risks
- ◆ using strategies that optimise and conserve a patient's own blood
- ◆ 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. It also defines 3 criteria and 10 actions that HSOs must meet in:

- ◆ clinical governance and quality improvement to support blood management
- ◆ prescribing and clinical use of blood and blood products
- ◆ managing the availability and safety of blood and blood products.

During 2024–25 the NBA continued to work with the ACSQHC and other stakeholders to implement the second edition of the NSQHS Standards.

The NBA is focused on helping Australian health providers to meet the requirements of the NSQHS Blood Management Standard. The ACSQHC has commenced a review of the current standards with the aim to implement a revision in 2027.

Blood product management

The focus of blood product management is to ensure blood and blood products are available when and where they are clinically needed. The NBA's blood product management program supports the NSQHS Blood Management Standard and includes activities to assist Australian health providers with:

- ◆ practising good inventory management
- ◆ reducing unnecessary discards (wastage)
- ◆ ensuring appropriate use of blood and blood products.

The National Patient Blood Management Implementation Strategy 2017–24 and the National Blood Product Management Improvement Strategy 2018–24 detail our support for better blood management. This focus has continued through the challenges to blood inventory levels experienced in recent years.

In 2024–25 the NBA continued to implement the National Blood Product Management Improvement Strategy through a wide range of activities:

- ◆ We developed a new BloodNet report to support the implementation of the National RBC Statement and *National guidance for the management of red blood cell inventory* (RBC Inventory Guidance) for publication in 2025–26.
- ◆ We developed an inventory review report to accompany the RBC Inventory Guidance in BloodNet to help Australian health providers examine their inventory with consideration to issues, transfers, transfusion, discards and ABO RhD blood groups.
- ◆ We continued to progress 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*. This ensures that the barcoding policy requirements are embedded in supply contracts and implemented by all suppliers by an agreed date.
- ◆ We continued to work with Metro North Hospital Health Service (Queensland) to pilot the development of a blood management dashboard to assist with meeting the NSQHS Blood Management Standard. This will be a user-friendly interactive dashboard that has a 'drill-down' capability by hospital, department and clinician data. It will be capable of assessing and reporting on anaemia management, inventory management, appropriate ABO issues, transfusion compliance, and haemophilia treatment data, with a focus on trends and identifying outliers for blood management. The blood management dashboard will be available for adaptation nationally.

- ◆ We worked with the jurisdictional working group for the Demand and Inventory Management Improvement Project and managed 4 smaller expert working groups to implement agreed short- and long-term initiatives to manage demand and inventory improvement. The initiatives are to:
 - identify the reasons for increased demand and the potential for data sharing
 - manage blood product demand and improve inventory management practices
 - implement a plan to develop the activities from the initiatives
 - provide regular data and analysis of fresh blood product issues, transfers and discard patterns to support activities at the national and jurisdictional levels.

Governance of use of immunoglobulin

In 2024–25 the NBA continued to drive, improve and support the appropriate use of Ig, through the National Immunoglobulin Governance Program, with advice from the National Ig Governance Advisory Committee (NIGAC) and its specialist working groups. Since the implementation of the Ig Governance Program, a moderation in the annual growth of Ig usage has been observed. The annual growth rate has reduced from an average of 12% (before 2018–19) to an average of 7.1% each year (since 2018–19). The reduction in the growth rate is estimated to have saved governments over \$392 million in 2024–25, and over \$1.282 billion since 2018–19.

National Immunoglobulin Governance Program

The National Immunoglobulin Governance Program aims to ensure that Ig product use and management reflects appropriate clinical practice and represents efficient, effective and ethical expenditure of government funds. For more on this program, see 'Governance of access to immunoglobulin' under Strategy 2.

Through the Ig Governance Program, in 2024–25 we:

- ◆ continued to monitor Ig usage and promote awareness of usage by reporting on data and usage patterns to a range of stakeholders
- ◆ published our annual report on Ig usage, which is available on the NBA website
- ◆ continued to monitor and review new research and canvass clinical opinion on the appropriate use of Ig
- ◆ continued to work with NIGAC and its specialist working groups to consider issues in relation to Ig usage and drive improvements in the use of Ig nationally.

National Ig Governance Advisory Committee

NIGAC and its associated specialist working groups considered evidence on and appropriate use of Ig for:

- ◆ acquired hypogammaglobulinaemia secondary to haematological malignancies
- ◆ allogeneic haemopoietic stem cell transplantation
- ◆ haemolytic disease of the newborn
- ◆ inborn errors of immunity
- ◆ pregnant patients
- ◆ blistering skin conditions
- ◆ long COVID
- ◆ recurrent miscarriage
- ◆ solid organ transplantation
- ◆ chronic inflammatory demyelinating polyneuropathy (CIDP)
- ◆ inflammatory myopathies (IM)
- ◆ erythromelalgia.

Criteria for immunoglobulin use

In 2024–25 the NBA evolved the Criteria for the Clinical Use of Immunoglobulin in Australia (Criteria) to continue to support appropriate access to Ig. We made changes to the Criteria on:

- ◆ paediatric autoimmune neuropsychiatric disorder associated with streptococcal infections (PANDAS) and paediatric acute neuropsychiatric disorders (PANS). Changes included information about age limits in the description and diagnostic criteria, updates to the qualifying and review preamble, and resolution of an error in the qualifying criterion
- ◆ inborn errors of immunity, to support patients who have a primary immunodeficiency to access Ig before hypogammaglobulinaemia develops. This includes newborns who are diagnosed with severe combined immunodeficiency through newborn screening who have not yet developed low immunity, due to immunity passed on from their mother. This change ensures consistency with criteria internationally
- ◆ various other medical conditions to update references and content and improve clarity.

Immunoglobulin knowledge resources

In 2024–25 we published a range of resources to support the appropriate use of Ig, which are available on the NBA website.

We created an Ig treatment page on our website for both patients and health professionals, which ensures all the relevant information is in one place. The webpage provides:

- ◆ 10 resources, including 3 videos for patients receiving Ig treatment and their support networks
- ◆ links to additional resources through 3 support organisations: the Australasian Society of Clinical Immunology and Allergy, Australia Primary Immunodeficiency Patient Support (AusPIPS), and the Immune Deficiencies Foundation Australia
- ◆ 13 resources for health professionals who treat patients with Ig
- ◆ links to 5 BloodSafe eLearning courses on Ig.

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, over 5 rounds, totalling around \$6 million.

The program 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.

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 NBA ensures that the program facilitates and funds research that focuses on the identified priorities, which are patient blood management and the appropriate use of Ig. We also take opportunities to support translation of research findings into policy and advice on use of blood and blood products.

In 2023–24 the NBA commissioned an evaluation of the National Blood Sector Research and Development Program. Following the positive findings of the evaluation, the NBA opened Round 6 for applications in March 2025, closing in May 2025. The applications are to be assessed by blood sector experts, with grants expected to be awarded late 2025.

Existing grantees have continued to provide regular status updates on their projects so that the NBA can track their progress against agreed outcomes. The contribution of NBA grantees to research in the blood sector this year is evidenced by:

- ◆ the completion of one of the 5 remaining NBA grant projects in 2024–25: ID504 – Dr Celina Jin – Melbourne Health – VISAD study
- ◆ invitations to selected grantees to present at the 2024 Haematology in Obstetrics and Women’s Health Meeting, the Western NSW Local Health District Haematology and Transfusion Conference 2024, and the upcoming Blood 2025 conference
- ◆ an increasing number of grant-funded researchers using collaboration on a national and international level
- ◆ several instances of grant-funded research translating into better clinical outcomes.

As at 30 June 2025 an increase in outcomes from the program is evidenced by 64 associated publications, with several more planned or currently under peer review.

Strategy 4:

Develop and provide policy advice to support a sustainable blood sector in Australia

The NBA works with Australian Red Cross Lifeblood and state and territory governments to develop 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.

Our focus areas under Strategy 4 in 2024–25 included:

- managing the Output Based Funding Model (OBFM) with Lifeblood and negotiating new funding arrangements which commenced on 1 July 2025
- supporting Lifeblood to grow and diversify the blood donor panel
- advising governments on issues and potential responses to emerging challenges to the sustainable supply of blood and blood products
- supporting a Commonwealth-initiated review of the national blood arrangements to ensure they are modern and fit for purpose.

Table 2.12 summarises our results against the 2024–25 performance measures for Strategy 4.

TABLE 2.12 Performance measures: Develop and provide policy advice to support a sustainable blood sector in Australia

Summary of results against 2024–25 performance measures	
Indicator	Outcome
New funding arrangements managed.	Met The new OBFM was negotiated for the period of the extended Deed of Agreement with Lifeblood.
Advice provided to governments and others on blood supply and demand issues.	Met Advice was regularly provided to all jurisdictions and Commonwealth ministers on a range of topics, including via direct briefing, engaging with individual jurisdictions, and regular reporting and advice to the Jurisdictional Blood Committee.
Consideration of the outcome of the review of national blood arrangements.	The Commonwealth managed review was not completed in 2024–25.

Performance criteria source: NBA Corporate Plan 2024–25 to 2027–28, p. 29.

The NBA achieved 2 of the 3 performance measures for Strategy 4.

Delivery of Strategy 4

In 2024–25 the NBA delivered:

- ◆ renewed funding arrangements with Lifeblood
- ◆ support to increase the size and diversity of the blood donor panel
- ◆ information, briefings and advice to government
- ◆ support for the review of national blood arrangements.

Renewal of Lifeblood funding arrangements

The NBA's Deed of Agreement with the Australian Red Cross Society for Lifeblood to supply fresh blood products and services commenced on 1 July 2016 and was set to expire on 30 June 2025, a 9-year term.

The Deed was varied on 27 March 2025 to extend the agreement for a further 3 years, now expiring on 30 June 2028. The estimated funding for the additional 3 years is \$2.4 billion.

The varied Deed continues the original agreement's cyclical 3-year Funding and Services Agreement (FSA). Funding is determined using the OBFM.

The FSA and OBFM Principles were also updated in 2024–25 to align with the Deed extension.

Increase in blood donor panel

The NBA continued to support Lifeblood in 2024–25 to increase the donor panel through a range of activities:

- ◆ Lifeblood launched its Life Is the Reason marketing campaign in October 2024, aiming to increase the donor panel by 100,000 new donors each year by asking the community to find their individual reasons to donate.
- ◆ Lifeblood opened 2 new static donor centres, in Hurstville (New South Wales) and Camberwell (Victoria), increasing the number of suburban locations where donors can donate and supporting a more diversified donor panel.
- ◆ In September 2024 Lifeblood began trialling a new pop-up donor centre in Western Australia, which is travelling to 8 sites around the state on a rolling basis over 12 months, to test community support for donations.
- ◆ Lifeblood conducted further research into donor behaviour and needs; one example is running workshops with the University of Queensland to help people who want to donate but have needle and donation phobia to overcome their fear (the BRAVE workshops).

- ◆ In June 2025 Lifeblood announced the launch of the Plasma Pathway in July. This removes most sexual activity deferrals, allowing more people – including gay and bisexual men and transgender women – to donate plasma with no wait time. This announcement was the culmination of extensive work between Lifeblood, the Therapeutic Goods Administration, CSL Behring and the NBA.

Advice to government

The NBA provides advice to the Commonwealth Government and to state and territory governments on a range of matters relating to blood products and services. This includes the relationship between supply and demand for fresh and commercial products; the global operating environment affecting secure supply arrangements; the types of new commercial products coming through the pipeline, and the impacts that new products may have on usage of products currently available to patients; 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 2024–25 the NBA provided information, briefings and advice to jurisdictions, Health Ministers, Health Chief Executives, Chief Health Officers and others.

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. We also engaged 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.

Hurstville donor centre



As well as building the donor panel by attracting new donors, Lifeblood works to increase donations by making it easier for people to access Lifeblood centres where they can make blood and plasma donations conveniently, in a setting that works for them.

In 2024–25 Lifeblood opened a new donor centre in the Sydney suburb of Hurstville. One of the interesting aspects of Australia's diverse multicultural community is that people from different ethnic backgrounds may have different blood variations. Because of this, the donor panel needs to be similarly diverse to find the best match for recipients. One of the reasons why Lifeblood chose Hurstville as the site for its most recent new donor centre is that the local community is ethnically diverse. Hurstville was selected as an ideal location because almost a third of its population identified in the most recent Census as having Chinese ancestry.

The Hurstville centre is ideally located to boost the diversity and number of donors, which could help to save up to 48,000 lives a year. It is in a 'shopfront' setting on the main shopping strip, adjacent to public transport and a major shopping centre. It is also a state-of-the-art donor centre, set in the heart of the busy Hurstville commercial area, and provides an excellent venue for blood donors to make their generous and life-saving donations.



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.

Strategy 5 encompasses human resources and professional development, information technology, financial resources, governance, corporate planning and reporting, internal and external communication, and other essential elements of organisational performance.

Table 2.13 summarises our results against the 2024–25 performance measures for Strategy 5.

TABLE 2.13 Performance measures: Be a high-performing organisation

Summary of results against 2024–25 performance measures	
Indicator	Outcome
NBA remains an employer of choice with a staff engagement score of 75% or more.	Met
A safe and healthy working environment is maintained with a reportable incident rate of less than 2%.	Met
Staff completion of mandatory annual online learning and development modules by not less than 90% of staff.	Met

Performance criteria source: NBA Corporate Plan 2024–25 to 2027–28, p. 31.

The NBA achieved 3 of the 3 performance measures for Strategy 5.

Adam Hartnett – Giving back to the community



The ACT State Emergency Service (ACTSES) is a volunteer-led organisation that provides vital emergency management services to the community, including during storms and floods. The NBA has proudly supported the involvement of staff members in the ACTSES and other volunteer and Defence Reserve activities. In 2025, one of our employees, Adam Hartnett, was recognised for sustained and distinguished service to the community by being awarded the 2025 ACT Community Protection Medal.

Adam joined the NBA in 2006 and works in the Commercial Blood Products team, which is responsible for ensuring the supply of Australia's plasma and recombinant products.

Adam started volunteering with the ACTSES in 2019 and is now a Commander in the service. The ACT Community Protection Medal recognises Adam's contribution to the Canberra community.

Adam has significantly increased membership participation and ensured that there are robust teams ready for emergency callouts. His active participation in all aspects of the ACTSES, from frontline operations, to training and community engagement, exemplifies his commitment to service. Adam has fostered a culture of preparedness and resilience, ensuring his team is always ready to provide critical assistance to the ACT community during storms, floods and land searches.

[\(Emergency personnel recognised with Community Protection Medal | ACT Emergency Services Agency\)](#)

The knowledge, training and experience that can be gained through the kind of volunteer work that Adam has been exposed to develops enormously transferable skills and is beneficial not just to individuals and the community but also to their employing agencies such as the NBA.

Delivery of Strategy 5

In 2024–25 the NBA delivered:

- ♦ agreement to the 2025–26 National Supply Plan and Budget
- ♦ continued high levels of engagement from NBA staff, maintaining our ability to be an employer of choice
- ♦ a safe and healthy working environment with no reportable incidents
- ♦ access to and support for flexible working arrangements
- ♦ modernisation of performance management systems
- ♦ meaningful and timely agency-wide communication and ongoing engagement between senior executives and staff of all levels within the NBA
- ♦ continued ICT modernisation
- ♦ blood sector knowledge development – conferences, networks and engagement with the sector, training.

National Supply Plan and Budget agreed by governments

The NBA successfully developed and secured agreement from all Health Ministers for the 2025–26 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 working with each state and territory government to inform accurate estimates and understand variations in the operating environment. More discussion of the NSP&B is included above under Strategy 1.

Supporting our people

In 2024–25 the NBA continued to be an employer of choice, demonstrating high levels of engagement from staff as reflected in the 2025 Australian Public Service (APS) Employee Census results.

Following the commencement of the National Blood Authority Enterprise Agreement 2004–2027 in March 2024, the NBA continued to develop and implement new policies and processes to support access to various new employment conditions, including in the implementation of a flexible work policy to support hybrid work arrangements involving office and home-based work that all NBA staff access at various times. As a result of these changes, in the 2025 census results our staff reported significantly increased confidence that requests for flexible work arrangements would be given reasonable consideration.

In line with the APS Strategic Commissioning Framework, the NBA continued to focus on prioritising APS employment and capability to deliver the core work of the agency. In 2025 we further reduced our labour hire from 18 to 15. This activity, bringing 2 roles responsible for delivery of core work in house, met and exceeded the NBA's target of one for 2024–25. This reduction follows sustained action in reducing our reliance on outsourced expertise to deliver core work that has seen our external workforce reduce from 26 three years ago.

We also looked to uplift many of our operational tools to support staff engagement, including introducing an electronic performance management system and an all-staff Microsoft Teams channel for informal, agency-wide communication and engagement.

Staff engagement

The results of the 2025 Australian Public Service (APS) Employee Census, to which 89% of our staff responded, allow us access to meaningful insights into what is important to our NBA workforce. The NBA's employee engagement score was 79, maintaining the same strong engagement score achieved in 2024.

Recruitment

As at 30 June 2025, the NBA comprised a highly capable, connected, and dedicated workforce of 97 employees. Over the course of 2024–25 we welcomed 30 new starters, and 11 employees departed the agency. Notably, 15 of the new starters were new to the APS, highlighting the NBA's role in attracting fresh talent.

In 2025 the NBA continued to actively uplift and promote our employee value proposition through redesigning job descriptions and job advertisements. The NBA conducted 16 recruitment rounds. Our recruitment processes are designed to be people focused, offering induction sessions that allow new starters to meet our executive staff and gain insights into the agency's operations.

Professional development

During 2024–25 our employees had access to a range of formal and informal professional development opportunities. Staff were offered learning programs across a range of topics and formats, in online self-paced, virtual and face-to-face formats. Training modules include mandatory requirements that all employees must complete, as well as additional modules to support professional development. They include:

- ◆ Privacy Awareness
- ◆ Fraud Awareness
- ◆ Bullying and Harassment
- ◆ Commonwealth Child Safe Framework
- ◆ Security Awareness
- ◆ Work Health and Safety for Workers and Managers
- ◆ Introduction to Psychological Safety
- ◆ Phriendly Phishing
- ◆ Integrity awareness.

To support the core procurement work of the NBA, 2 Commonwealth procurement classroom courses were made available to our staff to support confidence and compliance in the core work carried out by many of our business areas.

The NBA offers financial support and/or study leave to employees for formal studies. This education contributes to the growing capability of the NBA and of the APS more broadly.

Our culture

Outcomes from the NBA Census Action Plan

Since 2012 the NBA has participated in the APS Employee Census, an annual employee perception survey of the Australian Public Service workforce. The survey collects employee opinions and perspectives on a range of topics, such as employee engagement, leadership, communication, innovation and wellbeing. All NBA employees who are engaged under the *Public Service Act 1999* and had been with the agency for 3 months or more in May 2025 were invited to participate.

In 2025, 89% of NBA staff responded to the survey. Overall, the results showed the NBA to be a highly engaging workplace that supports and actively promotes an inclusive workplace culture. Building on the positive results of the previous year, staff were invited to participate in developing the NBA's 2024 APS Employee Census Action Plan. The Census Action Plan identified 4 focus areas for investment and ongoing improvement:

- ◆ Communication and change management
- ◆ Performance
- ◆ Leadership
- ◆ Innovation.

We regularly reviewed progress on implementing the Census Action Plan and provided updates to all staff, as well as reporting to the NBA Board and Business Committee.

Engagement and communication

In response to the positive feedback on all-staff engagement with leaders in the NBA, we implemented more regular scheduling of all-staff engagement in 2025. All-staff engagement sessions are led by our Chief Executive and include an opportunity for the NBA workforce of all levels to engage with the NBA Board members. In addition, the Deputy Chief Executives introduced APS staff forums on topics of interest, including APS careers, caretaker (pre-election) processes and government processes.

Having identified the need for more consistent and timely communication of NBA milestones and changes, we made more active use of communication channels including intranet announcements. We also introduced an all-staff Microsoft Teams channel for quick, informal agency-wide communications.

We maintained leadership visibility and presence across internal channels and meetings, including regular all-staff meetings.

Performance cycle and onboarding

In 2024–25 the NBA moved from a manual, document-based Development and Performance Agreement process to a more automated system to support our performance cycle management. In addition to this the NBA provided upgraded laptops to improve the working experience of staff and increase employee satisfaction by providing the latest and most effective technology to support work performance.

We progressed improvements in our onboarding process, providing managers with an updated onboarding checklist and assigning an agency 'buddy support person' for new starters at the NBA.

Tools and technology

Access to tools and technology continued to grow with the rollout of Jira (issue-tracking and project management software) across our corporate areas and Blood Operations Centre team support. The Deputy Chief Executives and other staff members who volunteered to do so facilitated regular innovation circles promoting discussion and sharing views on technology-related matters relevant to the NBA.

Previous census actions

Previous initiatives from earlier census actions were embedded, including regular knowledge forums and the NBA's Team for Inclusive and Diverse Events (TIDE).

Information management and technology

ICT modernisation

Under our current ICT Strategy, we have already delivered significant improvements in the NBA's ICT environment as we go through a program of modernisation.

In 2022–23 the NBA's ICT team extended the Microsoft Teams environment into all meeting rooms as part of our new office fit-out, and into email campaign management and mobile device management.

In 2023–24 the modernisation project continued under our ICT Strategy by delivering a modern Microsoft Teams telephony solution, a new modern collaborative intranet solution, the new NBA website and significant infrastructure and security enhancements. We also continued the extension of the Microsoft environment, expanding into Microsoft Power Apps to assist in contract management through an automated register. This register increases visibility of contracts and provides effective contract management that reduces risks to the NBA.

In 2024–25 this modernisation journey continued as we focused on delivering a range of corporate solutions:

- ◆ We implemented a new data management and reporting solution with the Microsoft Fabric and Power BI ecosystem. We have also begun migrating legacy NBA reporting workloads to this new solution and will continue this work into 2025–26.
- ◆ We migrated our JIRA service management tool to the latest Atlassian JIRA and Confluence cloud-based products, improving support processes and reporting in the process. While this project focused on the migration of existing support processes in the ICT, finance and website management spaces, we will be looking to extend this capability across the NBA as a truly enterprise toolset in 2025–26.
- ◆ We migrated legacy Microsoft DevOps tools that are used to maintain the code base for our blood sector systems from our own managed ICT infrastructure to the cloud, again positioning our systems for improvements in the quality and security of our solution code.
- ◆ We acquired new security capabilities with the implementation of a security information and event management solution that is giving us greater insights into the ICT environment, and greatly improved our security posture.
- ◆ We consolidated the NBA's legacy ICT infrastructure. We have significantly reduced the number of old versions of operating systems and databases running in the NBA's ICT environment, improving our ability to support and maintain legacy systems.

As we head into 2025–26 the NBA has further modernisation activities underway:

- ◆ Implementation of a new laptop solution for the whole organisation (which will also include upgrades to Windows 11 and further security improvements) is expected in the first quarter.
- ◆ Migration of our remaining on-premises infrastructure to a cloud-based solution, reducing complexity in our ICT environment and reducing support costs, is also expected in the first quarter.
- ◆ Modernisation of our electronic document and records management system and associated records management processes and policies is in progress.

The NBA will also continue to consider future blood sector systems and engage with government enterprise resource planning programs.

Security

The NBA continued to monitor and enhance the protective security and cyber resilience of our ICT systems and infrastructure in 2024–25. We continued to improve the agency's security posture through improvements to our systems and ICT infrastructure and provided training for all staff to improve awareness and detection of phishing and ransomware cyber threats. We finished the implementation of a security information and event management solution to help detect and address potential security threats and vulnerabilities before they disrupt business operations, and we continue to improve this its implementation as we integrate further systems into this tool. We also continued to implement the Australian Signals Directorate (ASD) recommended Essential Eight controls as part of our ongoing active management of cyber security, as well as a series of other security controls and detection mechanisms based on technical advice from ASD.

Blood sector knowledge development

A wide range of work contributed to blood sector knowledge development across the NBA in 2024–25. For example, NBA staff:

- ♦ attended (or attended virtually) Australian and international meetings and conferences to share current information and knowledge of domestic and global blood sector issues
- ♦ visited blood product manufacturing facilities and distribution centres to increase their understanding of the blood and blood products supply chain
- ♦ monitored and reported on international issues and trends relevant to the management of blood arrangements in Australia
- ♦ attended tours of the NBA's Blood Operations Centre
- ♦ completed blood sector systems training provided by the Blood Operations Centre
- ♦ completed BloodSafe eLearning training.

The NBA was fortunate to host national and international visitors including representatives from the United States Department of Defence.

All of these activities have the additional benefit of expanding the networks of NBA staff and increasing our engagement – as individuals and as an organisation – with our colleagues in the blood sector and our counterparts internationally.

David's story

"Haemochromatosis is the most common genetic condition in Australia. It causes the body to store dangerously high levels of iron. To avoid long-term damage, people with haemochromatosis need to have blood drawn regularly. Many people with haemochromatosis can make their therapeutic donations at Lifeblood and, if they are otherwise well, their blood donations can then be used as life-saving supply for patients in need. "

David's story highlights the importance of diagnosing haemochromatosis. It also showcases the need for greater awareness that many haemochromatosis patients can make their therapeutic donations at Lifeblood for free, and help save lives.

I'm a lifelong blood donor, starting when I was at university in Scotland. I'm of Scottish heritage, which is an important detail in this story, and have lived in Australia since 2004.

In 2010 or 2011 my teenage daughter was having symptoms that seemed like iron deficiency. We had a very good clinical doctor and she did various tests, including gene testing for haemochromatosis. She knew about my Scottish heritage, and haemochromatosis is sometimes called the Celtic curse. It's an international condition but is more prevalent in those from Scotland and Ireland than anywhere else.

Haemochromatosis is caused by having 2 copies of a defective gene. Around 1 in 200 people in Australia have it. They won't necessarily know about it though, because the condition can be asymptomatic. And a lot of people look at the symptoms, which are lethargy, joint pain and depression, assume it's iron deficiency and treat it with iron tablets, which is the last thing you need.

Our doctor discovered that my daughter has 2 copies of the defective gene, which explained her symptoms. Testing showed I also had 2 copies of the gene. I then had blood tests looking specifically for signs of haemochromatosis. They found that my ferritin level was over 540 µg/L. At the time, the maximum suggested safe level for men was considered to be 500 µg/L. That top end is now 300 µg/L. So I was significantly above the safe level and it was dangerous. To bring the level down, I had blood removed by a nurse at the doctor's surgery. Medicare covered some but not all of the cost. To get down from 540 µg/L to just over 300 µg/L initially cost me \$600 back in 2011, and the blood went straight down the drain.

Because of the cost, I wasn't getting my blood drawn often enough, which meant my ferritin level returned to the danger zone. When this happened, I had to go back to the surgery and pay the same kind of money again to have blood drawn and thrown away.

In 2021 I discovered through a nurse friend that Lifeblood would take the blood for free.

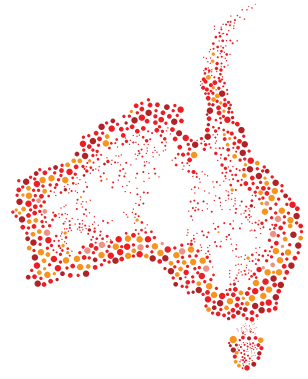
Like a lot of doctors, mine hadn't known that this was an option. Now I have an annual blood test and when it says 'You're over the level', I pop along to Lifeblood and donate.

Last time I looked, Australia needs around 33,000 donations every week to meet demand. So why don't we do what's efficacious for everyone? You can donate plasma every 2 weeks. When my level gets too high, I just donate and it goes back to normal. I'm in a routine. And the people at the Lifeblood donor centres are just fantastic and so well practised at giving needles – you hardly feel it.

The risks of haemochromatosis include liver disease, kidney disease and arthritis, so it's not a good thing and it's difficult to get rid of. An Exeter University study found that men with untreated haemochromatosis are around 10 times more like to get liver cancer than men in the general population. The costs of haemochromatosis to Australia have been estimated to be at least \$250 million a year. So it's something that the doctors need to be aware of as a problem, especially for people with northern European heritage. Doctors have to know that it's a simple blood test to check for it, then they have to know that Lifeblood will take your blood for free – it won't cost the patient anything – and that the blood will then be used to help save up to 3 lives every donation.

If I can do something good which does me good, why wouldn't I do it? This is a simple thing to do and it's good for me too.

Part 3



Management and accountability

Corporate governance

External scrutiny

Fraud control

Our people

Corporate governance

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, Disability and Ageing.

Funding for the national blood arrangements is jointly provided by all Australian governments, with the Australian Government providing 63% of funding and the states and territories 37%.

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

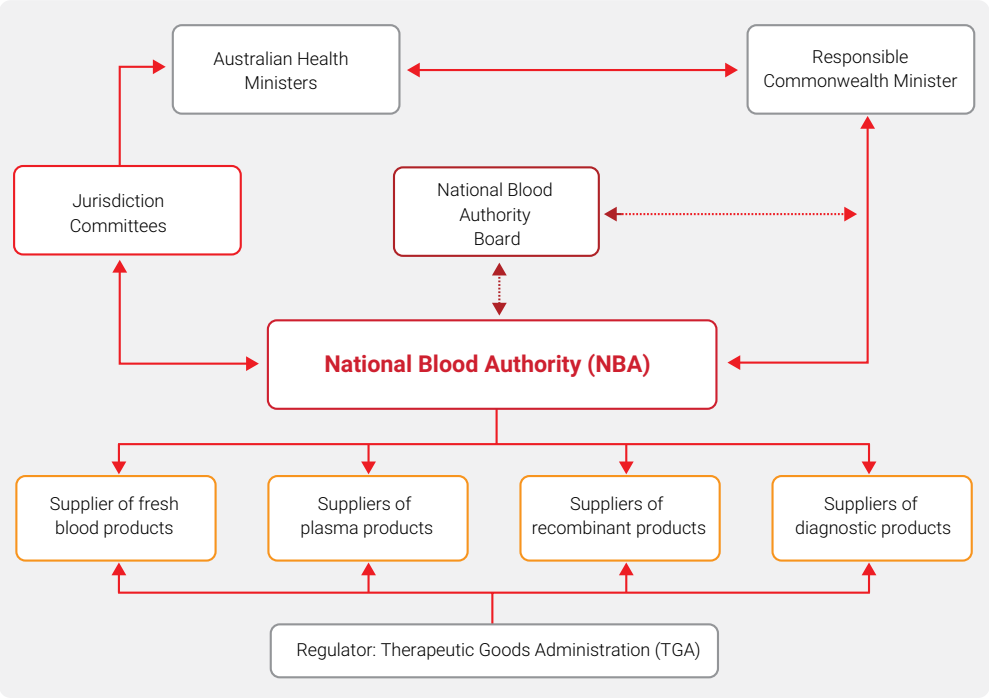
- ◆ nationally agreed objectives of governments for the blood sector
- ◆ governance arrangements for the sector
- ◆ administrative arrangements for the management of the national blood supply
- ◆ financial arrangements for the national blood supply.

Figure 3.1 summarises the key governance arrangements for the Australian blood sector.

National blood sector arrangements

FIGURE 3.1 Blood sector governance

Placeholder figure (from Corporate Plan):

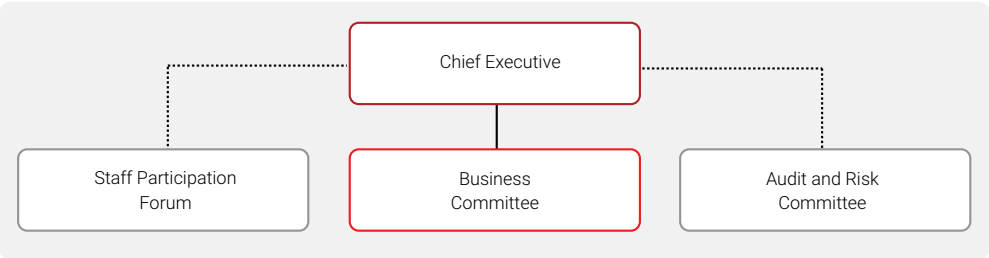


NBA governance arrangements

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

Placeholder figure (from Corporate Plan):



NBA Business Committee

The Business Committee is the main governance body for the NBA. It provides strategic oversight and direction for the overall management of the NBA. This includes our business, finance, human resources, technology, audit, risk, information management and corporate 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 Audit and Risk Committee (ARC) advises the Chief Executive on strategies to improve governance and risk management. It helps to plan and conduct the internal audit program, and supports financial and legislative compliance. Its members are independent experts from outside the NBA.

The committee met 5 times in 2024–25.

As at 30 June 2025, the ARC membership comprised:

- ◆ Mrs Roslyn Jackson (Chair)
- ◆ Mr Greg Fraser
- ◆ Ms Terina Brierley
- ◆ Mr Peter Lewinsky AM.

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 is on the NBA website at www.blood.gov.au/audit-and-risk-committee-arc-charter.

The NBA Chief Executive, Deputy Chief Executives and Chief Financial Officer maintain active engagement with the ARC and attend ARC meetings. They provide relevant organisational input and context to help the ARC's deliberations, and this enhances the advice provided by the ARC.

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

The ARC Charter describes 4 primary areas of focus. In 2024–25, 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
- ◆ review of financial outcomes and budgets
- ◆ performance reporting
- ◆ Corporate Plan, Business Plan and Operational Scorecard
- ◆ annual performance KPIs and reporting
- ◆ systems of risk oversight and management
- ◆ consideration of corporate issues and emerging risks affecting the organisation
- ◆ fraud and risk management
- ◆ reviewed accounting policies and frameworks
- ◆ annual legislative compliance statement
- ◆ risk roadmap and governance overview of blood supply
- ◆ overview of IT security arrangements
- ◆ systems of internal control
- ◆ annual internal audit work plan, reports and implementation of recommendations.

Internal audit and risk

During 2023–24 the NBA commenced and completed a series of thematic internal audits to support its risk management and assurance activities. Using information and intelligence gathered in consultation with a range of internal stakeholders, the NBA worked with its incoming audit provider, EY, to develop the 2024–25 audit plan.

Internal audits commenced by EY in 2024–25 looked at the NBA's ICT asset management and disposal processes, financial payment processes, and commercial blood product contract management arrangements. The ICT and financial payment audits were completed during the year, as were audits (commenced by the previous audit provider in the previous reporting period) of the NBA's procurement processes and fraud control framework.

The NBA accepted and adopted a range of recommendations from audits to strengthen its internal governance and risk exposure. These outcomes are reported to and discussed in the NBA Business Committee and the Audit and Risk Committee.

Program Review Committee

The Program Review Committee systematically reviews how the NBA is implementing and delivering individual program commitments. It assesses each program's priorities, progress and outlook.

The committee is chaired by the Chief Executive and comprises 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 and provides a formal way for NBA management to consult directly with employees about significant employment matters. The forum comprises staff representatives, management representatives and a work health and safety representative.

The Staff Participation Forum met 4 times during 2024–25 and discussed:

- ◆ consultation and communication on new policies, including the new Working Hours and Arrangements Policy to support flexible work arrangements within the NBA
- ◆ work health and safety, including outcomes from Comcare's proactive engagement and updates from the NBA's health and safety representatives
- ◆ development of and progress on the NBA's APS Employee Census Action Plan
- ◆ matters raised by staff representatives and updates on ongoing work in the human resources team, including workforce planning activities.

Statutory committees

The NBA Chief Executive has established 4 committees 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 NIGAC provides expert advice on the clinical use of Ig and governance-related issues to support the National Immunoglobulin Governance Program. Members are appointed based on expertise and experience.

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

The NIGAC is supported by specialist working groups (SWGs) for immunology, haematology, neurology and transplant medicine.

In 2024–25 we completed the NIGAC and SWG committee refresh, with 8 new members being appointed to NIGAC, and 7 new members being appointed across the 4 SWGs. Details of the current NIGAC and SWG membership are available on the NBA website at [National immunoglobulin governance committees | National Blood Authority](#).

The NIGAC met twice in 2024–25 and provided:

- ◆ recommendations on changes to the Criteria for the Clinical Use of Immunoglobulin in Australia
- ◆ advice on governance issues identified in relation to access to Ig and ideas on addressing these issues and evolving the National Ig Governance Program
- ◆ advice on the draft Immunoglobulin Prioritisation Framework and proposed consultation processes
- ◆ advice on implementation of recommendations to improve access to subcutaneous immunoglobulin (SCIg).

Australian Bleeding Disorders Registry Steering Committee

Clinicians use the ABDR daily 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 met once in 2024–25, however considered several items out of session throughout the year. The committee 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.

Work is underway to transition the functions performed by the ABDR Steering Committee to oversight by the NBA under the NBA Data Governance Framework in collaboration with the AHCDO Executive.

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, who has been involved in medical education across the healthcare sector since 1985. She is a member of the Australian College of Rural and Remote Medicine and provides GP services at the Matthew Talbot Hostel Primary Health Clinic in Woolloomooloo, Sydney. She is a member of the Macquarie University Humanities and Social Sciences Human Research Ethics Committee and of the Institute of Aboriginal and Torres Strait Islander Studies Research Ethics Committee. She is a board director with Leaders in Indigenous Medical Education (LIME) Network Ltd and the Far West Local Health District NSW.

Haemovigilance Advisory Committee

The HAC informs the NBA's National Haemovigilance Program. The HAC provides advice and guidance to the NBA on adverse event reporting from health service organisations, on national transfusion safety priorities and on the development and implementation of the Strategic Framework for the National Haemovigilance Program.

HAC members have expertise and knowledge in the health sector, blood management, quality and safety, and consumer issues. The HAC met via videoconference in July 2024 and April 2025.

In October 2024, members of the committee and the PBM team farewelled the outgoing HAC Chair, Associate Professor Alison Street AO, who had served as a member from 2009 and as chair from 2013. Another longstanding HAC member, Ms Linley Bielby, was also farewelled, with her contributions and commitment to the HAC also being acknowledged.

The NBA welcomed incoming HAC Chair Professor Erica Wood AO, a past president (2020–2022) and former member of the Board of the International Society of Blood Transfusion.



(Left to right) Associate Professor Alison Street, Mr John Cahill, NBA Chief Executive, Ms Linley Bielby

External scrutiny

There were no judicial decisions, decisions of administrative tribunals or decisions of the Australian Information Commissioner in 2024–25 that had, or may have had, a significant impact on the NBA's operations.

There were no legal actions lodged against the NBA in 2024–25.

There were no reports on operations of the NBA by the Auditor-General, a parliamentary committee or the Commonwealth Ombudsman in 2024–25.

There were no capability reviews of the NBA released during 2024–25.

Fraud control

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

The comprehensive independent review of the NBA's fraud control framework completed in 2023–24 did not substantially change the organisation's fraud and corruption control arrangements; however, fraud and corruption risk assessments were reviewed. The NBA's updated Fraud and Corruption Control Plan, approved by the accountable authority in July 2024, sets out the organisation's strategies to prevent, detect and respond to these risks.

Increasing awareness of fraud and corruption risks, legislative and policy frameworks, individual obligations, and reporting mechanisms have been a focus in 2024–25, with an all-staff knowledge forum delivered in addition to annual mandatory training. Staff received access to self-paced learning tools and resources to complement the training, including an interactive online tool on fraudster techniques, information on the APS Reform agenda, and Commonwealth Fraud Prevention Centre publications.

Learning opportunities promoted to staff across the agency include the APS Academy MasterCraft Series 'Integrity in the APS' event, with the Program Assurance and Risk function participating in Commonwealth-wide communities of practice and expert forums. Information published on the NBA's 'Fraud and Corruption Control' intranet page was refreshed with increased emphasis on the National Anti-Corruption Commission (NACC) and the Public Interest Disclosure Scheme, supported by a new anonymous and publicly available reporting channel.

A large proportion of staff participated in the NACC's Commonwealth Integrity Survey. The results demonstrated strong confidence in NBA controls and staff capability to identify and report fraud and corruption or misconduct.

No instances of fraud or corruption were reported or 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, response 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 2025 the NBA had 96 staff employed under the *Public Service Act 1999* (PS Act). The NBA's average staffing level for 2024–25 was 91.24. The Australian Public Service (APS) workforce was complemented by 15 contract staff.

Most staff work out of the NBA's office in Canberra, with 4 staff members outposted in New South Wales and 2 in Victoria.

Of the NBA's APS staff, 76% are female, 14% work part time, 100% are ongoing APS employees, and 62% are at APS 6 or EL 1 level. In the 2025 APS Employee Census, no staff identified as Australian Aboriginal and/or Torres Strait Islander, 22% identified as culturally and linguistically diverse, 11% identified as having an ongoing disability and 8% identified 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 2024–25 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.

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

TABLE 3.1 Australian Public Service Act employment arrangements as at 30 June 2025

	SES	Non-SES	Total
National Blood Authority Enterprise Agreement 2024–27	-	94	94
<i>Public Service Act 1999</i> section 24(1) determinations	2	-	2
Individual flexibility arrangements	-	16	16
Total	2	110	112

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

The terms and conditions of employment for non-SES employees are covered by the National Blood Authority Enterprise Agreement 2024–27. The NBA implements individual flexibility arrangements with non-SES employees for additional entitlements to meet the genuine needs of the agency and individual employees.

Remuneration and benefits

TABLE 3.2 Australian Public Service Act employment by classification and NBA salary range as at 30 June 2025

	Minimum salary (\$)	Maximum salary (\$)
SES 1	271,793	271,793
EL 2	143,434	161,482
EL 1	120,844	137,123
APS 6	98,086	110,535
APS 5	89,002	93,886
APS 4	81,904	86,490
APS 3	72,399	80,151
APS 2	62,777	68,419
APS 1	54,516	60,358

TABLE 3.3 Executive remuneration 2024–25

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	394,592	-	-	38,649	9,520	-	-	442,761
Kate McCauley	Deputy Chief Executive	272,1722	-	-	48,229	7,857	-	-	328,257
Benjamin Noyen	Deputy Chief Executive	254,745	-	-	40,350	-	-	-	301,641

The reported remuneration differential for the Deputy Chief Executives reflects different durations of employment during the reporting period.

Performance pay

Performance pay was not a component of any remuneration for NBA staff during 2024–25.

Non-salary benefits

NBA staff had access to a range of non-salary benefits in 2024–25, including:

- ◆ Christmas close-down
- ◆ Employee Assistance Program
- ◆ healthy lifestyle assistance enabling staff to be reimbursed for health and wellbeing initiatives
- ◆ studies assistance and training
- ◆ influenza vaccinations for staff and their immediate family members
- ◆ flexible working arrangements
- ◆ reimbursement of reasonable expenses associated with performed duties
- ◆ reimbursement for financial advice associated with a voluntary redundancy
- ◆ salary packaging
- ◆ flextime for APS 1 to APS 6 level staff, and executive level time off in lieu of flextime
- ◆ access to purchased additional annual leave
- ◆ cultural, ceremonial and NAIDOC leave
- ◆ professional development, mentoring and counselling
- ◆ laptop computers, peripherals, internet access and mobile phones
- ◆ reasonable time away to donate blood, plasma or platelets.

Building capability

Employee development in the APS is an important contributor to a productive, progressive, innovative and engaged workforce. The NBA recognises the importance of ensuring staff members continue to develop their skills and capabilities. We facilitate this through sourced internal training, e-learning training, knowledge forums, innovation circles and development opportunities such as studies assistance, stakeholder engagement and participation in conferences.

The NBA's learning 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. In 2025 the NBA enabled access to APS Academy shared partner content through Learnhub. Selected APSLearn content was made available to NBA staff as an additional learning and development resource.

For information about training provided to NBA staff in 2024–25, see Part 2, Delivery of Strategy 5.

Work health and safety

Work health and safety matters are standing agenda items that are routinely discussed at the NBA's various governance 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 2024–25.

Employees completed Comcare's 'Introduction to psychological health and safety in the workplace' training as part of the mandatory annual learning program for NBA staff. In May, staff were invited to participate in a discussion circle on psychosocial hazards to support awareness and identification of psychosocial hazards and risks under the Work Health and Safety Regulations 2011.

We completed ergonomic workstation assessments for 17 staff in 2024–25 and sourced additional workstation equipment following these assessments as required.

The 2025 Influenza Vaccination Program, administered by the Pharmacy Guild of Australia, was available to all NBA employees and their families. As at 30 June 2025, a total of 95 people had used the program.

Other NBA initiatives to maintain a healthy, safe and secure workplace during 2024–25 included:

- continuing access to the Employee Assistance Program
- reviewing workplace health and safety processes and incident reporting mechanisms
- supporting the training requirements of first aid officers and health and safety representatives, including new appointees
- delivering a knowledge forum on 'Neurodivergence in the workplace' with a guest speaker
- consistent internal communications sharing available webinars and wellness resources.

Signing of extension of Lifeblood Deed



Andrew Colvin AO APM, Chief Executive Officer Australian Red Cross, Adjunct Professor Stephen Cornelissen AM, Chief Executive Officer Australian Red Cross Lifeblood, Kate McCauley, Deputy Chief Executive and Mr John Cahill, NBA Chief Executive.

The NBA manages a large suite of contracts with suppliers in Australia and overseas to ensure the supply of blood and blood products. By far the largest single contract is a Deed of Agreement between the NBA and the Australian Red Cross Society, for the services provided by Lifeblood.

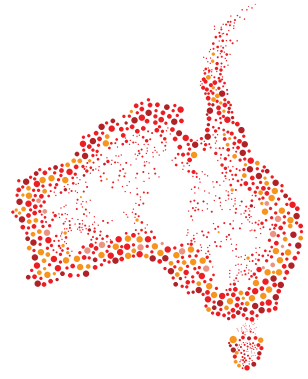
Under the Deed, Lifeblood is responsible for all blood and plasma collection from donors in Australia, and for supplying plasma to CSL Behring for fractionation.

The current Deed commenced on 1 July 2016 and was due to expire on 30 June 2025.

A variation to the Deed was executed on 27 March 2025, extending the agreement for a further 3 years, until 30 June 2028. Funding for the 3 years is estimated at \$2.4 billion.

The associated Funding and Services Agreement, Output Based Funding Model Principles, and Statement of Expectations were also updated in 2024–25 to align with the Deed extension.

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% of funding is provided by the Commonwealth and the remaining 37% 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 2024–25.

TABLE 4.1 High-level summary: departmental and administered funding and expenditure 2024–25

	Funding (\$m)	Expenditure (\$m)
Departmental – NBA operations	14.870	16.414
Administered – national blood and blood products supply	1,849.173	1,757.609

Special accounts

The NBA operates its financial arrangements through 2 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 2017 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 2024–25. 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 unmodified audit report for 2024–25.

Departmental finances

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

Operating result

The NBA's income statement reports a 2024–25 loss of \$1.54 million, compared with a loss of \$0.65 million in 2024–25. This loss is expected; it is due to the accounting treatment of capital appropriations to fund non-financial assets (\$0.86 million) and an adjustment to depreciation associated with a prior period error (\$0.60 million). After adjusting, which only impacts depreciation, the NBA has a minor operating loss of \$0.08 million, less than 1% of revenue after adding back depreciation.

There was also a correction to accounting errors from prior periods to correctly record the leasehold improvement (non-financial asset) start date and useful life, with the useful life being longer than the current lease term. Further detail is provided in the financial statements in this report.

TABLE 4.2 Key financial performance 2019–20 to 2024–25

Revenue and expenses	2019–20 (\$m)	2020–21 (\$m)	2021–22 (\$m)	2022–23 (\$m)	2023–24 (\$m)	2024–25 (\$m)
Contributions from the Australian Government	5.681	5.510	5.513	5.479	8.945	8.410
Contributions from states and territories, and other revenue	4.769	5.242	5.031	4.339	4.298	6.475
Total revenue	10.451	10.752	10.544	9.818	13.243	14.885
Employee expenses	7.689	7.605	7.683	8.054	8.671	10.979
Supplier expenses	1.855	2.433	2.003	2.686	2.842	3.283
Other expenses	1.129	1.189	1.382	1.526	2.381	2.167
Total expenses	10.763	11.227	11.068	12.266	13.894	16.429
Operating result	(0.154)	(0.475)	(0.524)	(2.448)	(650)	(1.544)

Revenue

Total departmental revenue received in 2024–25 amounted to \$14.885 million: \$8.910 million in funding from the Commonwealth Government; and \$6.475 million in contributions received from the states and territories and other revenue. This represents an increase of \$1.642 million (12.4 per cent) on revenue received in 2023–24.

In 2023–24 the NBA received an additional one-off \$3.296 million in sustainability funding from the Commonwealth Government. In 2024–25 the NBA received an additional \$4.169 million in ongoing sustainability funding with a 63% contribution from the Commonwealth Government and 37% from states and territories. Other revenue increased by \$0.596 million mostly due to entitlements of staff transferring from other agencies.

Expenses

The NBA's expenses for 2024–25 amounted to \$16.429 million. This represents an increase of \$2.535 million (18.2 per cent) on total expenses from 2023–24. This is predominantly due to increased average staffing levels and contract management and stakeholder engagement travel.

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 \$6.786 million at 30 June 2025. This included funds received from all jurisdictions and unspent appropriations drawdown with the Official Public Account held by the Department of Finance. The cash balance increased due to the timing of appropriation drawdowns.

The balance of trade and other receivables was \$0.574 million at 30 June 2025; this consists predominantly of goods and services receivables. The decrease from the prior period is due to the timing of appropriation drawdowns.

Non-financial assets

The NBA had non-financial assets of \$5.316 million at 30 June 2025. The carrying amount of non-financial assets decreased during the financial year predominantly due to the depreciation on the office refurbishment completed in late 2022.

Payables

The NBA had payables of \$0.986 million at 30 June 2025, which consists of trade creditors, accrued salaries and superannuation, and deferred revenue, with minor increases in each category in the year.

Interest-bearing liabilities

The interest-bearing liability is the 243 Northbourne Avenue NBA office. The current year decrease is due to the current year lease payments.

Provisions

Employee provisions, which cover annual and long-service leave entitlements, increased by \$0.874 million to \$3.431 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 2024–25 the NBA did not returned any funds (compared with \$29.247 million in 2023–24) to governments for the 2023–24 end-of-year reconciliation as part of the National Blood Agreement.

Revenue

Total revenue for 2024–25 is summarised in Table 4.3. Total revenue increased by \$174.568 million (a 10.4% increase, up from the 7.4% increase in the prior year) for 2024–25.

TABLE 4.3 Summarised administered revenue 2019–20 to 2024–25

Administered revenue	2019–20 (\$m)	2020–21 (\$m)	2021–22 (\$m)	2022–23 (\$m)	2023–24 (\$m)	2024–25 (\$m)
Funding for supply of blood and blood products	1,211.007	1,303.983	1,468.979	1,555.744	1,666.829	1,842.575
Other revenue	3.419	2.437	1.686	3.023	5.776	6.598
Total administered revenue	1,214.426	1,306.420	1,470.655	1,558.767	1,674.605	1,849.173

Expenses

Total administered expenses for 2024–25, including grants and rendering of goods and services, are summarised in Table 4.4. Administered expenses for 2024–25 increased by 5.1% from 2024–25.

In accordance with the Output Based Funding Model, Lifeblood returned no funds to the NBA in 2024–25, compared with \$7.5 million in 2023–24.

TABLE 4.4 Summarised administered expenses 2019–20 to 2024–25

Administered expenses	2019–20 (\$m)	2020–21 (\$m)	2021–22 (\$m)	2022–23 (\$m)	2023–24 (\$m)	2024–25 (\$m)
Rendering of goods and services – external entities	1,174.839	1,365.007	1,396.321	1,543.971	1,669.757	1,753.189
Grants to the private sector – non-profit organisation	0.745	0.582	0.372	1.057	0.344	0.294
Other	2.058	2.724	2.802	4.782	3.564	4.126
Total administered expenses	1,177.642	1,368.313	1,399.495	1,549.710	1,673.665	1,757.609

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 2024–25, net administered assets increased by \$128.398 million due to an operating surplus of \$91.564 million, timing of supplier payments, receipt of interest equivalency appropriations and National Managed Fund growth.

Administered liabilities comprise payables to suppliers and deferred revenue.

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.

The NBA has transitioned to a digital system for portable and attractive assets and a comprehensive revision of the NBA Asset Management Policy and Procedures.

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. This has included piloting a new Procurement and Contract Management Framework, and testing of this framework by a newly created NBA Procurement Community of Practice.

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 2024–25 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 contracts. Information on the value of reportable consultancy contracts is available on the AusTender website.

The NBA selects consultants by using panel arrangements or making an open approach to market. Decisions to engage consultants during 2024–25 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, one new reportable consultancy contract was entered into during 2024–25, involving total actual expenditure of \$81,550. In addition, one ongoing reportable consultancy contract was active during the period, involving total actual expenditure of \$200,388.

TABLE 4.5 Expenditure on reportable consultancy contracts 2024–25

	Number	Expenditure \$ (GST incl.)
New contracts entered into during the reporting period	1	81,550
Ongoing contracts entered into during the previous reporting period	1	200,388
Total	2	281,938

TABLE 4.6 Organisations receiving a share of reportable consultancy contract expenditure 2024–25

Name of organisation	Expenditure \$ (GST incl.)
KPMG (51 194 660 183)	81,550
HealthConsult Pty Ltd (67 118 337 821)	200,388

TABLE 4.7 Expenditure on reportable non-consultancy contracts 2024–25

	Number	Expenditure \$ (GST incl.)
New contracts entered into during the reporting period	20	2,990,917
Ongoing contracts entered into during the previous reporting period	40	1,918,404,858
Total	60	1,921,395,775

TABLE 4.8 Organisations receiving a share of reportable non-consultancy contract expenditure 2024–25

Name of organisation	Expenditure \$ (GST incl.)
Australian Red Cross Lifeblood (50 169 561 394)	857,646,372
CSL Behring (Australia) Pty Ltd (48 160 734 761)	687,158,292
Grifols Australia Pty Ltd (35 050 104 875)	108,267,387
Roche Products Pty Ltd (70 000 132 865)	63,579,988
Takeda Pharmaceuticals Australia Pty Ltd (71 095 610 870)	59,750,503

Note: a share of non-reportable consultancy contract expenditure refers to contracts that are the top 5 highest expenditure or greater than 5% 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's website.

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's website.

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 Ageing

Opinion

In my opinion, the financial statements of the National Blood Authority (the Entity) for the year ended 30 June 2025:

- (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 2025 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 2025 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 material accounting policy information 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 their 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

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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



Michael Bryant

Senior Director

Delegate of the Auditor-General

Canberra

29 September 2025

NATIONAL BLOOD AUTHORITY
FINANCIAL STATEMENTS
for the year ended 30 June 2025

STATEMENT BY THE ACCOUNTABLE AUTHORITY AND CHIEF FINANCIAL OFFICER

In our opinion, the attached financial statements for the year ended 30 June 2025 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
25 September 2025

Signed



Paul Southcott
Chief Finance Officer
25 September 2025

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

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 2025

	Notes	2025 \$'000	2024 restated \$'000
NET COST OF SERVICES			
Expenses			
Employee benefits	1.1A	10,979	8,671
Suppliers	1.1B	3,283	2,841
Depreciation and amortisation	3.2A	2,161	2,316
Finance costs	1.1C	4	5
Write-down and impairment of Non Financial Assets		2	61
Total expenses		16,429	13,894
Own-Source Income			
Own-source revenue			
Revenue from contracts with customers	1.2A	5,549	3,957
Other revenue	1.2B	926	342
Total own-source revenue		6,475	4,299
Gains			
Gains from asset sales		-	-
Total gains		-	-
Total own-source income		6,475	4,299
Net cost of services		(9,954)	(9,595)
Revenue from government	1.2C	8,410	8,945
Deficit		(1,544)	(650)
OTHER COMPREHENSIVE INCOME			
Items not subject to subsequent reclassification to net cost of services			
Changes in asset revaluation surplus		-	-
Total comprehensive loss		(1,544)	(650)

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

NATIONAL BLOOD AUTHORITY
STATEMENT OF FINANCIAL POSITION
as at 30 June 2025

	Notes	2025 \$'000	2024 restated \$'000
ASSETS			
Financial assets			
Cash and cash equivalents	3.1A	6,786	892
Trade and other receivables	3.1B	574	5,426
Total financial assets		7,360	6,318
Non-financial assets			
Buildings	3.2A	1,517	2,218
Leasehold improvements	3.2A	2,930	4,137
Plant and equipment	3.2A	695	239
Computer software	3.2A	-	-
Other non-financial assets	3.2B	174	206
Total non-financial assets		5,316	6,800
Total assets		12,676	13,118
LIABILITIES			
Payables			
Suppliers	3.3A	199	128
Other payables	3.3B	341	226
Deferred revenue	3.3C	446	313
Total payables		986	667
Interest bearing liabilities			
Leases	3.4A	2,186	3,135
Total interest bearing liabilities		2,186	3,135
Provisions			
Employee provisions	6.1A	3,431	2,557
Total provisions		3,431	2,557
Total liabilities		6,603	6,359
Net assets		6,073	6,759
EQUITY			
Contributed equity		9,105	8,413
Reserves		166	-
Retained surplus		(3,198)	(1,654)
Total equity		6,073	6,759

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 2025

	Retained Earnings		Asset revaluation reserve		Contributed equity/capital		Total equity	
	2025 \$'000	2024 restated \$'000	2025 \$'000	2024 restated \$'000	2025 \$'000	2024 restated \$'000	2025 \$'000	2024 restated \$'000
Opening balance								
Balance carried forward from previous period	(1,654)	(1,623)	-	619	8,413	7,740	6,759	6,736
Opening balance	(1,654)	(1,623)	-	619	8,413	7,740	6,759	6,736
Comprehensive Income								
Revaluation adjustment	-	619	166	(619)	-	-	166	-
Deficit for the period	(1,544)	(650)	-	-	-	-	(1,544)	(650)
Total comprehensive income attributable to Australian Government	(1,544)	(31)	166	(619)	-	-	(1,378)	(650)
Transactions with owners								
<i>Contributions by owners</i>								
Departmental capital budget	-	-	-	-	692	673	692	673
Total transactions with owners	-	-	-	-	692	673	692	673
Closing balance as at 30 June attributable to Australian Government	(3,198)	(1,654)	166	-	9,105	8,413	6,073	6,759

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 2025

	Notes	2025 \$'000	2024 restated \$'000
OPERATING ACTIVITIES			
Cash received			
Appropriations		12,899	8,468
Sale of goods and rendering of services		6,339	3,558
Net GST received		272	323
Other cash received		-	-
Total cash received		19,510	12,349
Cash used			
Employees		9,895	8,640
Suppliers		2,368	2,431
Section 74 receipts transferred to the OPA		970	402
Interest payments on lease liabilities		4	5
Total cash used		13,237	11,477
Net cash from operating activities		6,273	872
INVESTING ACTIVITIES			
Cash used			
Purchase of plant and equipment		543	113
Purchase of intangibles		-	-
Total cash used		543	113
Net cash used by investing activities		(543)	(113)
FINANCING ACTIVITIES			
Cash received			
Contributed equity - departmental capital budget		1,207	477
Lease incentive received		-	-
Total cash received		1,207	477
Cash used			
Principal repayment of lease liabilities		1,043	1,007
Total cash used		1,043	1,007
Net cash from/(used by) financing activities		164	(530)
Net (decrease)/increase in cash held		5,894	229
Cash and cash equivalents at the beginning of the reporting period		892	663
Cash and cash equivalents at the end of the reporting period	3.1A	6,786	892

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 2025

		2025	2024
	Notes	\$'000	\$'000
NET COST OF SERVICES			
Expenses			
Employee benefits	2.1A	3,498	2,237
Suppliers	2.1B	1,753,189	1,669,757
Grants - non-profit organisations	2.1C	294	344
Depreciation and amortisation	4.2A	628	1,327
Total expenses		1,757,609	1,673,665
Income			
Revenue			
Non-taxation revenue			
Revenue from contracts with customers	2.2A	1,842,575	1,668,829
Interest income		6,598	5,776
Other revenue		-	-
Total non-taxation revenue		1,849,173	1,674,605
Total revenue		1,849,173	1,674,605
Total income		1,849,173	1,674,605
Net contribution by services		91,564	940
(Deficit)/Surplus		91,564	940
OTHER COMPREHENSIVE INCOME			
Items not subject to subsequent reclassification to net cost of services			
Changes in asset revaluation surplus		-	-
Total comprehensive (loss)/income		91,564	940

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 2025

		2025	2024
	Notes	\$'000	\$'000
ASSETS			
Financial assets			
Cash and cash equivalents	4.1A	316,895	152,503
Trade and other receivables	4.1B	31,481	83,851
Other investments	4.1C	152,373	142,203
Total financial assets		500,749	378,557
Non-financial assets			
Plant and equipment	4.2A	77	151
Intangibles	4.2A	1,571	1,475
Inventories	4.2B	147,589	145,275
Prepayments	4.2C	95,184	91,314
Total non-financial assets		244,421	238,215
Total assets administered on behalf of Government		745,170	616,772
LIABILITIES			
Payables			
Suppliers	4.3A	74,298	58,262
Deferred revenue	4.3B	153,627	141,373
Other payables	4.3C	103	52
Total payables		228,028	199,687
Total liabilities administered on behalf of Government		228,028	199,687
Net assets		517,142	417,085

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

NATIONAL BLOOD AUTHORITY
ADMINISTERED RECONCILIATION SCHEDULE
as at 30 June 2025

	2025 \$'000	2024 \$'000
Opening administered assets less administered liabilities as at 1 July 2024	417 085	410,132
Net (cost of) / contribution by services		
Income	1,849,173	1,674,605
Expenses		
Payments to entities other than corporate Commonwealth entities	(1,757,609)	(1,673,665)
Other comprehensive income		
Revaluations transferred to reserves	64	-
Transfers (to) / from the Australian Government:		
Appropriation transfers from Official Public Account:		
Annual appropriations	8,429	6,013
Closing assets less liabilities as at 30 June 2025	517,142	417,085
Accounting Policy <u>Administered cash transfers to and from the Official Public Account</u> 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 2025

	Notes	2025 \$'000	2024 \$'000
OPERATING ACTIVITIES			
Cash received			
Revenue from contracts with customers		1,906,679	1,621,560
Interest		6,348	3,600
Net GST received		175,103	170,406
Total cash received		2,088,130	1,795,566
Cash used			
Employees		3,447	2,238
Grants		294	344
Suppliers		1,917,670	1,878,889
Total cash used		1,921,411	1,881,471
Net cash (used by)/ from operating activities		166,719	(85,905)
INVESTING ACTIVITIES			
Cash received			
Maturity of investments		65,230	61,800
Total cash received		65,230	61,800
Cash used			
Purchase of plant & equipment and intangibles		586	203
Acquisition of investments		75,400	63,930
Total cash used		75,986	64,133
Net cash (used by) investing activities		(10,756)	(2,333)
Net (decrease)/increase in cash held		155,963	(88,238)
Cash and cash equivalents at the beginning of the reporting period		152,503	234,728
Cash from the Official Public Account			
Appropriations		8,429	6,013
Total cash from the Official Public Account		8,429	6,013
Cash to the Official Public Account			
Special accounts ¹		-	-
Total cash to the Official Public Account		-	-
Cash and cash equivalents at the end of the reporting period	4.1A	316,895	152,503

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

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

NATIONAL BLOOD AUTHORITY
OVERVIEW NOTE

for the year ended 30 June 2025

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 2024-25 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

NBA has identified an error in the leasehold improvement asset's start date and useful life, with the useful life calculation being longer than the current lease term. This resulted in the understatement of depreciation expense from 2022-23 onwards. The NBA has corrected the Leasehold Improvement depreciation expense and Net Book Value in accordance with AASB 116 and NBA Asset Management Policy and Procedure.

This error has been corrected by restating each of the affected financial statement line items for the prior periods presented, as required under AASB 108 *Accounting Policies, Changes in Accounting Estimates and Errors*.

Financial Statement	Line Item	Note	2024 (\$'000)	2024 Restated (\$'000)	Adjustment (\$'000)
Statement of Comprehensive Income	Depreciation Expense	n/a	1,719	2,316	597
	Deficit	n/a	(53)	(650)	(597)
Statement of Financial Position	Leasehold Improvements	3.2A	5,352	4,137	(1,215)
	Retained Earnings	n/a	(439)	(1,654)	(1,215)
Statement of Changes in Equity	Retained Earnings - Opening Balance	n/a	(1,004)	(1,623)	(619)
	Retained Earnings - Deficit for the Period	n/a	(53)	(650)	(597)
	Retained Earnings - Closing Balance	n/a	(439)	(1,654)	(1,215)

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:

- a) where the amount of the GST incurred is not recoverable from the Australian Taxation Office; and
- b) 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

The NBA Chief Executive (specified as the General Manager in the NBA Act), John Cahill retires on 26th September 2025 and arrangements for the new Chief Executive are being finalised.

Administered

The NBA Chief Executive, John Cahill retires on 26th September 2025 and arrangements for the new Chief Executive are being finalised.

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 2025.

1.1 Expenses

	2025 \$'000	2024 restated \$'000
1.1A: Employee benefits		
Wages and salaries	7,236	6,163
Superannuation:		
Defined contribution plans	812	653
Defined benefit plans	513	382
Leave and other entitlements	2,243	1,289
Separation and redundancies	-	-
Other employee benefits	175	184
Total employee benefits	10,979	8,671

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	106	107
Contractors	1,299	1,092
Travel	410	209
IT services	613	639
Other	815	758
Total goods and services supplied or rendered	3,243	2,805

Goods supplied	119	130
Services rendered	3,124	2,675
Total goods and services supplied or rendered	3,243	2,805

Other suppliers

Workers compensation expenses	40	36
Operating lease rentals	-	-
Total other suppliers	40	36
Total suppliers	3,283	2,841

NBA has no short-term lease commitments as at 30 June 2025.

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	4	5
Total finance costs	4	5

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 2025

1.2 Own-Source Revenue and Gains		
	2025 \$'000	2024 restated \$'000
Income		
1.2A: Revenue from contracts with customers		
Rendering of services	5,549	3,957
Total revenue from contracts with customers	5,549	3,957
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:		
State and Territory Governments	5,549	3,957
	5,549	3,957

Accounting Policy		
The following is a description of principal activities from which NBA generates its revenue:		
1. State and Territory Governments		
<i>Nature</i> - 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 <i>paragraph 9</i> of AASB15.		
<i>Timing</i> - the agreement is an enforceable contract with specific performance obligations and once the obligations are met an invoice is issued and revenue recognised.		
<i>Payment terms</i> - 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 2025

	2025 \$'000	2024 restated \$'000
1.2B: Other Revenue		
Resources received free of charge		
Remuneration of auditors - Audit Fees	154	139
Other revenue - Misc	772	203
Total other revenue	926	342

Accounting Policy
<u>Resources Received Free of Charge</u>
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.
<u>Other Revenue</u>
Revenue received from leave liabilities transferred to NBA and on site carpark cost reimbursement.

1.2C: Revenue from Government		
Appropriations		
Departmental appropriations	8,410	8,945
Total revenue from Government	8,410	8,945

Accounting Policy
<u>Revenue from Government</u>
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

	2025 \$'000	2024 \$'000
2.1A: Employee benefits		
Wages and salaries	2,693	1,717
Superannuation		
Defined contribution plans	351	209
Defined benefit plans	119	98
Leave and other entitlements	334	211
Other employee benefits	1	2
Total employee benefits*	3,498	2,237

Accounting Policy:

Employee Benefits

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

2.1B: Suppliers

Goods and services supplied or rendered

Purchases of blood and blood products	1,746,747	1,663,066
Consultants	331	926
Contractors	4,307	4,625
Travel	39	25
IT services	1,569	981
Other	196	134
Total goods and services supplied or rendered	1,753,189	1,669,757

Goods supplied

	1,746,787	1,663,146
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Services rendered

	6,402	6,611
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Total goods and services supplied or rendered

	1,753,189	1,669,757
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Accounting Policy:

Suppliers

Under the Deed of Agreement with the Australian Red Cross Lifeblood (ARCL or Lifeblood), Lifeblood will return any operating surplus to the NBA, unless otherwise agreed by the NBA. In 2024-25, Nil (2023-24: \$7.5m) was returned by Lifeblood which related to the 2023-24 financial year.

	2025 \$'000	2024 \$'000
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2.1C: Grants

Private sector		
Not-for-profit organisations	294	344
Total grants	294	344

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 was opened for applications late in the 2024-25 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 2025

2.2 Administered - Income		
	2025	2024
	\$'000	\$'000
Revenue		
Non-Taxation Revenue		
2.2A: Revenue from contracts with customers		
Rendering of services	1,842,575	1,668,829
Total revenue from contracts with customers	1,842,575	1,668,829
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	1,160,620	1,051,623
State and Territory Governments	681,874	617,125
External entities	81	81
	1,842,575	1,668,829

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:
<u>1. State & Territory Contributions</u>
<i>Nature</i> - 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 <i>paragraph 9</i> of AASB15.
<i>Timing</i> - the contract is enforceable with specific performance obligations and once the obligations are met an invoice is issued and revenue recognised.
<i>Payment terms</i> - the receivable for the rendering of services has 30 day payment terms.
<u>2. McMaster University</u>
<i>Nature</i> - 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.
<i>Timing</i> - the contract is enforceable with specific performance obligations and once the obligations are met an invoice is issued and revenue recognised.
<i>Payment terms</i> - 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 Relationships section.

3.1 Financial Assets

	2025 \$'000	2024 restated \$'000
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3.1A: Cash and cash equivalents

Cash in special accounts - held in the OPA	6,785	595
Cash in special accounts - on hand or on deposit	1	297
Total cash and cash equivalents	6,786	892

Accounting Policy

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

- a) cash on hand;
- b) cash in special accounts

3.1B: Trade and other receivables

Goods and services receivables

Goods and services	446	1,302
Total goods and services receivables	446	1,302

Appropriations receivables

Appropriation receivable

	61	4,095
Total appropriations receivables	61	4,095

Other receivables

Statutory receivables - GST receivable

	67	29
Total other receivables	67	29

Total trade and other receivables (gross)

Total trade and other receivables (net)	574	5,426
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Credit terms for goods and services were within 30 days (2023-24: 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 2025

3.2. Non-Financial Assets

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

	Buildings - Right of Use Asset ¹ \$'000	Leasehold Improvements \$'000	Plant and equipment \$'000	Intangibles - Computer Software \$'000	Total \$'000
As at 1 July 2024					
Gross book value	4,203	6,743	985	3,360	15,291
Accumulated depreciation, amortisation and impairment	(1,985)	(2,604)	(746)	(3,360)	(8,695)
Total as at 1 July 2024	2,218	4,139	239	-	6,596
Recognition of right of use asset on initial application of AASB 16	-	-	-	-	-
Adjusted total as at 1 July 2024	2,218	4,139	239	-	6,596
Additions					
Purchase or internally developed	-	-	543	-	543
Right-of-use assets	-	-	-	-	-
Revaluations and impairments recognised in other comprehensive income	-	97	69	-	166
Depreciation and amortisation	-	(1,306)	(154)	-	(1,460)
Depreciation on right-of-use assets	(701)	-	-	-	(701)
Disposals	-	-	(2)	-	(2)
Total as at 30 June 2025	1,517	2,930	695	-	5,142
Net book value as of 30 June 2025 represented by:					
Gross book value	4,203	6,840	1,595	3,360	15,998
Accumulated depreciation, amortisation & impairment	(2,686)	(3,910)	(900)	(3,360)	(10,856)
	1,517	2,930	695	-	5,142

No indicators of impairment were found for leasehold improvements or intangibles, write down or impairment of Plant and equipment. No leasehold improvements, plant and equipment, or intangibles are expected to be sold or disposed of within the next 12 months. Asset stocktake occur annually across all asset class.

Plant and equipment includes Artwork valued at \$8k

Revaluations of non-financial assets

All revaluations are conducted in accordance with the revaluation policy stated on the overview note.

Contractual commitments for the acquisition of plant, equipment and intangible assets

The NBA has committed to the purchase and deployment of new ICT hardware in the 2025-26 financial year, with an estimated residual cost of \$158k.

3.2B: Other non-financial assets

	2025 \$'000	2024 restated \$'000
Prepayments	174	206
Total other non-financial assets	174	206

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 2025

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.

Plant and Equipment

Asset Recognition Threshold

Purchases of 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
Plant and equipment	\$2,000
Purchased software	\$5,000
Leasehold improvements	\$10,000
Internally developed software	\$50,000
Artwork	\$2,000

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
Plant & equipment	Market selling price
Artwork	Depreciated replacement cost

Following initial recognition at cost, 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 30 June 2025.

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 proportionately with the change in the gross carrying amount of the asset so that the carrying amount of the asset after revaluation equals its revalued amount.

Depreciation

Depreciable 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	2025	2024
Plant & equipment	3 to 7 years	3 to 7 years
Leasehold improvements	Lease term	Lease term
Artwork	100 years	Not Applicable

Impairment

All assets were assessed for impairment at 30 June 2025. 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 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	2025	2024
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 2025.

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 2025

	2025	2024 restated
	\$'000	\$'000

3.3 Payables

3.3A: Suppliers

Trade creditors and accruals	199	128
Total suppliers	199	128

3.3B: Other payables

Salaries and wages	296	193
Superannuation	45	33
Total other payables	341	226

3.3C: Deferred revenue

Deferred revenue	446	313
Total deferred revenue	446	313

3.4 Interest Bearing Liabilities

3.4A: Leases

Lease liabilities:		
Buildings	2,186	3,135
Total leases	2,186	3,135

Total cash outflow for leases for the year ended 30 June 2025 was \$954,282 (2023-24 \$919,790).

3.4B: Maturity analysis - contractual undiscounted cash flows

Within 1 year	990	954
Between 1 to 5 years	1,196	2,189
Total leases	2,186	3,143

The NBA in its capacity as lessee has one (2023-24: 1) agreement for the leasing of premises at 243 Northbourne Avenue Lyneham.

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

	2025	2024
	\$'000	\$'000
4.1A: Cash and cash equivalents		
Cash in special accounts - held in the OPA	316,916	152,141
Cash in special accounts - on hand or on deposit	(21)	362
Total cash and cash equivalents	316,895	152,503

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.

4.1B: Trade and other receivables

Goods and services receivables	23,683	76,306
Total goods and services receivables	23,683	76,306
Other receivables		
Interest	4,087	3,837
Statutory receivables - GST receivable	3,711	3,708
Total other receivables	7,798	7,545
Total trade and other receivables (gross)	31,481	83,851
Less impairment loss allowance	-	-
Total trade and other receivables (net)	31,481	83,851

Credit terms for goods and services were within 30 days (2023-24: 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 2024-25.

4.1C: Other investments

Deposits ¹	152,373	142,203
Total other investments	152,373	142,203
Other investments expected to be recovered		
No more than 12 months	54,900	57,730
More than 12 months	97,473	84,473
Total other investments	152,373	142,203

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 2025 is \$152,429,508 (30 June 2024: \$145,654,475), and is a combination of investments (\$152,373,000) and the balance of the special account (\$56,508).

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

4.2 Administered - Non-Financial Assets

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

	Plant and equipment \$'000	Computer Software \$'000	Total \$'000
As at 1 July 2024			
Gross book value	528	13,784	14,312
Accumulated depreciation, amortisation and impairment	(377)	(12,309)	(12,686)
Total as at 1 July 2024	151	1,475	1,626
Additions			
Purchase or internally developed	-	586	586
Revaluations and impairments recognised in other comprehensive income	64	-	64
Depreciation and amortisation	(138)	(490)	(628)
Disposals			
Other	-	-	-
Total as at 30 June 2025	77	1,571	1,648
Net book value as at 30 June 2025 represented by:			
Gross book value	592	14,370	14,962
Accumulated depreciation, amortisation & impairment	(515)	(12,799)	(13,314)
	77	1,571	1,648

No plant and equipment or computer software 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 3.2A.

Following initial recognition at cost, plant and equipment 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 30 June 2025.

Contractual commitments for the acquisition of plant and equipment and intangible assets

The NBA has no significant contractual commitments for the acquisition of plant, equipment and intangible assets

	2025 \$'000	2024 \$'000
4.2B: Inventories		
National reserve inventory held for distribution	72,970	64,839
Other inventory held for distribution	74,619	80,436
Total Inventories	147,589	145,275

During 2024-25, \$653,947 of inventory held for distribution related to a net write-off of damaged and expired stock and was recognised as an expense (2023-24: \$739,500). The amount of inventories held for distribution as an expense in 2024-25 was \$1,136,809,316 (2023-24: \$1,116,034,843), noting a minor correction in 2023-24. 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:

- 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
- finished goods and work-in-progress – cost of direct materials and labour plus attributable costs that can be allocated on a reasonable basis.

Inventories acquired at no cost or nominal consideration are initially measured at current replacement cost at the date of acquisition.

4.2C: Prepayments

Prepayments	95,184	91,314
Total Prepayments	95,184	91,314

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 2025

4.3 Administered - Payables		
	2025	2024
	\$'000	\$'000
<u>4.3A: Suppliers</u>		
Trade creditors and accruals	74,298	58,262
Total suppliers	74,298	58,262
Suppliers expected to be settled		
No more than 12 months	74,298	58,262
More than 12 months	-	-
Total suppliers	74,298	58,262
Settlement was usually made within 30 days.		
<u>4.3B: Deferred revenue</u>		
Deferred revenue	153,627	141,373
Total deferred revenue	153,627	141,373
<u>4.3C: Other payables</u>		
Salaries and Wages	103	52
	103	52

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 2025

	2025 Annual Appropriation \$'000	2025 Adjustments to appropriation ¹ \$'000	2025 Total Appropriation \$'000	Appropriation applied in 2025 (current and prior years) \$'000	Variance \$'000
DEPARTMENTAL					
Ordinary annual services	8,410	970	9,380	12,899	(3,519)
Capital Budget ²	692	-	692	1,207	(515)
Total departmental	9,102	970	10,072	14,106	(4,034)
ADMINISTERED					
Ordinary annual services					
Administered items	8,429	-	8,429	8,429	-
Total administered	8,429	-	8,429	8,429	-

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 2025.

Annual Appropriations for 2024

	2024 Annual Appropriation \$'000	2024 Adjustments to appropriation ¹ \$'000	2024 Total appropriation \$'000	Appropriation applied in 2024 (current and prior years) \$'000	Variance \$'000
DEPARTMENTAL					
Ordinary annual services	8,945	402	9,347	8,468	880
Capital Budget ²	673	-	673	477	196
Total departmental	9,618	402	10,020	8,945	1,076
ADMINISTERED					
Ordinary annual services					
Administered items	5,829	-	5,829	6,013	(184)
Total administered	5,829	-	5,829	6,013	(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.

5.1B: Unspent annual appropriations (recoverable GST exclusive)

	2025 \$'000	2024 restated \$'000
DEPARTMENTAL		
Cash	1	297
Appropriation Act (No. 1) - Operating 2023-24	-	223
Appropriation Act (No. 5) - Operating 2023-24	-	3,296
Appropriation Act (No. 1) - (DCB) 2023-24	-	576
Appropriation Act (No. 1) - (DCB) 2024-25	61	-
Total	62	4,392

5.1B: Unspent annual appropriations (recoverable GST exclusive)

	2025 \$'000	2024 \$'000
ADMINISTERED		
Cash	-	-
Supply Act (No.1) - Operating 2024-25	-	-
Supply Act (No.3) - Operating 2024-25	-	-
Total	-	-

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

5.2 Special Accounts

	The National Blood Account ¹		NMF Blood and Blood Products Special Account 2017 ²	
	2025 \$'000	2024 \$'000	2025 \$'000	2024 \$'000
Balance brought forward from previous period	149,647	232,840	145,654	142,318
Increases				
Appropriation credited to special account	7,596	-	-	-
Departmental				
Other receipts - State and territory contributions	6,217	3,669	-	-
Other receipts	5,284	2,530	-	-
Total departmental increases	19,097	6,199	-	-
Administered				
Investment Income not reinvested	-	-	57	1,206
Other receipts - Commonwealth contributions	1,176,847	1,063,540	-	-
Other receipts - State and territory contributions	738,260	563,630	-	-
New Investments	-	-	71,949	63,930
Total administered increases	1,915,107	1,627,170	72,006	65,136
Total increases	1,934,204	1,633,369	72,006	65,136
Available for payments	2,083,851	1,866,209	217,660	207,454
Decreases:				
Departmental				
Payments made to employees & suppliers	12,907	5,961	-	-
Total departmental decreases	12,907	5,961	-	-
Administered				
Payments made to employees	3,447	2,238	-	-
Payments made to suppliers	1,743,874	1,708,363	-	-
Investments matured	-	-	65,230	61,800
Total administered decreases	1,747,321	1,710,601	65,230	61,800
Total decreases	1,760,228	1,716,562	65,230	61,800
Total balance carried forward to the next period	323,623	149,647	152,430	145,654
Balance represented by:				
Cash held in entity bank accounts Admin	(21)	362	-	-
Cash held in the Official Public Account Admin	316,859	148,690	-	-
Cash held in the Official Public Account Dept	6,785	595	-	-
Cash held in the NMF	-	-	152,430	145,654
Total balance carried forward to the next period	323,623	149,647	152,430	145,654

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 oversighted 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).

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 2025

5.3 Net Cash Appropriation Arrangements

	2025 \$'000	2024 restated \$'000
Total comprehensive income/(loss) - as per the Statement of Comprehensive Income	(1,544)	(650)
<i>Plus</i> : depreciation/amortisation of assets funded through appropriations (departmental capital budget funding and/or equity injections)	1,460	1,018
<i>Plus</i> : depreciation of right-of-use assets ¹	701	701
<i>Less</i> : lease principal repayments ¹	954	920
Net Cash Operating Surplus/ (Deficit)	(337)	149

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

	2025	2024 restated
	\$'000	\$'000
6.1A: Employee provisions		
Leave	3,431	2,557
Total employee provisions	3,431	2,557

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. <u>Leave</u> 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. <u>Separation and redundancy</u> 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. <u>Termination Benefits</u> No provision for termination benefits was recognised by the NBA as at 30 June 2025. <u>Superannuation</u> 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.		
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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 2025

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:

	2025 \$	2024 restated \$
Short-term employee benefits	921,510	880,955
Post-employment benefits	127,227	117,448
Other long-term benefits	23,923	29,100
Total key management personnel compensation expenses	1,072,660	1,027,503

The total number of key management personnel that are included in the above table are 3 (2023-24: 5).

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 (2023-24: nil).

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

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

	2025	2024
	\$'000	\$'000
Contingent liabilities		
Indemnities	71,321	83,711
Total contingent liabilities	71,321	83,711
Net administered contingent liabilities	71,321	83,711

Quantifiable administered contingencies

The contingent liabilities in respect to the Deed of Indemnity between the Australian Red Cross Society (ARCS) and the NBA is \$71,321,336 (2023-24: \$83,710,733). Through the Deed, the NBA indemnifies the ARCS in respect of the ARCS's liability to meet a funded obligation relating to the Sydney Processing Centre(SPC) or Melbourne Processing Centre(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 2025, the NBA had three unquantifiable contingencies (2023-24: 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.

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 2025

7.2 Departmental - Financial Instruments

7.2A: Categories of Financial Instruments

	2025 \$'000	2024 restated \$'000
Financial Assets		
Financial assets at amortised cost		
Cash and cash equivalents	6,786	892
Trade and other receivables	446	1,302
Total financial assets at amortised cost	7,232	2,194
Financial Liabilities		
Financial liabilities measured at amortised cost		
Trade and other creditors	199	128
Total financial liabilities measured at amortised cost	199	128

Accounting Policy:

Financial assets

The entity classifies its financial assets in the following categories:

- a) financial assets at fair value through profit or loss;
- b) financial assets at fair value through other comprehensive income; and
- c) 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:

- a) the financial asset is held in order to collect the contractual cash flows; and
 - b) 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

	2025 \$'000	2024 \$'000
Financial Assets		
Financial assets at amortised cost		
Deposits	152,373	142,203
Cash and cash equivalents	316,895	152,503
Trade and other receivables	27,770	80,143
Total financial assets	497,038	374,849
Financial Liabilities		
Financial liabilities at amortised cost		
Trade and other creditors	74,298	58,262
Total financial liabilities at amortised cost	74,298	58,262

7.3B: Net Gains or Losses on Financial Assets

Financial assets at amortised cost		
Interest revenue	6,598	5,776
Net gain on financial assets at amortised cost	6,598	5,776

Accounting Policy:

Financial assets

The entity classifies its financial assets in the following categories:

- a) financial assets at fair value through profit or loss;
- b) financial assets at fair value through other comprehensive income; and
- c) 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:

- a) the financial asset is held in order to collect the contractual cash flows; and
 - b) 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 2025

7.4 Departmental - Fair Value Measurement

Fair value measurements at the end of the reporting period

	2025	2024 restated
	\$'000	\$'000
Non-financial assets		
Leasehold improvements	2,930	4,137
Plant and equipment	695	239

7.5 Administered - Fair Value Measurement

Fair value measurements at the end of the reporting period

	2025	2024
	\$'000	\$'000
Non-financial assets		
Plant and equipment	77	151

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. Independent valuations are carried out every five years in line with the NBA asset management policy. On 30 June 2025 an independent valuation was conducted by Jones Lang Lasalle of leasehold improvements and 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

	2025 \$'000	2024 restated \$'000
Assets expected to be recovered in:		
No more than 12 months		
Cash and cash equivalents	6,786	892
Trade and other receivables	574	5,426
Other non-financial assets	174	206
Total no more than 12 months	7,534	6,524
More than 12 months		
Buildings	1,517	2,218
Leasehold improvements	2,930	4,137
Plant and equipment	695	239
Computer software	-	-
Total more than 12 months	5,142	6,594
Total assets	12,676	13,118
Liabilities expected to be settled in:		
No more than 12 months		
Suppliers	199	128
Employee Provisions	1,049	936
Other Payables	341	226
Deferred Revenue	446	313
Leases	991	951
Total no more than 12 months	3,026	2,554
More than 12 months		
Leases	1,195	2,184
Employee Provisions	2,382	1,621
Other Provision	-	-
Total no more than 12 months	3,577	3,805
Total liabilities	6,603	6,359

8.1B: Administered - Current/non-current distinction for assets and liabilities

	2025 \$'000	2024 \$'000
Assets expected to be recovered in:		
No more than 12 months		
Cash and cash equivalents	316,895	152,503
Trade and other receivables	31,481	83,851
Other investments	54,900	57,730
Inventories	147,589	145,275
Other non-financial assets	95,184	91,314
Total no more than 12 months	646,049	530,673
More than 12 months		
Plant and equipment	77	151
Other intangibles	1,571	1,475
Other investments	97,473	84,473
Total More than 12 months	99,121	86,099
Total assets	745,170	616,772
Liabilities expected to be settled in:		
No more than 12 months		
Suppliers	74,298	58,262
Other payables	103	52
Deferred Revenue	153,627	141,373
Total no more than 12 months	228,028	199,687
More than 12 months		
Total more than 12 months	-	-
Total liabilities	228,028	199,687

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 2025

8.2: BUDGETARY REPORTS AND EXPLANATIONS OF MAJOR VARIANCES

The following tables provide a comparison of the original budget as presented in the 2024-25 Portfolio Budget Statements (PBS) to the 2024-25 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 2025	2025 Actual \$'000	2025 Budget \$'000	2025 Variance \$'000
NET COST OF SERVICES			
Expenses			
Employee benefits	10,979	10,060	919
Suppliers	3,283	3,490	(207)
Depreciation and amortisation	2,161	1,710	451
Finance costs	4	3	1
Losses from asset disposal	2	-	2
Total expenses	16,429	15,263	1,166
Own-source income			
Own-source revenue			
Revenue from contracts with customers	5,349	5,349	(0)
Other revenue	972	450	522
Total own-source revenue	6,321	5,799	522
Gains			
Resources received free of charge - remuneration of auditors	154	66	88
Gains from asset sales	-	-	-
Total gains	154	66	88
Total own-source income	6,475	5,865	610
Net (cost of)/contribution by services	(9,954)	(9,398)	(556)
Revenue from government	8,410	8,410	0
Surplus/(Deficit) before income tax on continuing operations	(1,544)	(988)	(556)
Income tax expense			
Surplus/(Deficit) after income tax on continuing operations	(1,544)	(988)	(556)
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)	(1,544)	(988)	(556)

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 2025

STATEMENT OF FINANCIAL POSITION as at 30 June 2023	2025 Actual \$'000	2025 Budget \$'000	2025 Variance \$'000
ASSETS			
Financial assets			
Cash and cash equivalents	6,786	1,233	5,553
Trade and other receivables	574	3,048	(2,474)
Total financial assets	7,360	4,281	3,079
Non-financial assets			
Buildings	1,517	1,497	20
Leasehold improvements	2,930	4,910	(1,980)
Plant and equipment	695	1,022	(327)
Computer software	-	-	-
Other non-financial assets	174	145	29
Total non-financial assets	5,316	7,574	(2,258)
Total assets	12,676	11,855	821
LIABILITIES			
Payables			
Suppliers	199	201	(2)
Other payables	341	-	341
Deferred revenue	446	498	(52)
Total payables	986	699	287
Interest bearing liabilities			
Leases	2,186	2,628	(442)
Total interest bearing liabilities	2,186	2,628	(442)
Provisions			
Employee provisions	3,431	2,519	912
Other provisions	-	10	(10)
Total provisions	3,431	2,529	902
Liabilities included in disposal groups held for sale	-	-	-
Total liabilities	6,603	5,856	747
Net assets	6,073	5,999	74
EQUITY			
Contributed equity	9,105	9,105	-
Reserves	166	-	166
Retained surplus/(Accumulated deficit)	(3,198)	(3,106)	(92)
Total equity	6,073	5,999	74

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 2025

Statement of Changes in Equity for the NBA for the year ended 30 June 2025													
	Retained Earnings			Asset revaluation reserve			Contributed equity/capital			Total equity			
	2025 Actual \$'000	2025 Budget \$'000	2025 Variance \$'000	2025 Actual \$'000	2025 Budget \$'000	2025 Variance \$'000	2025 Actual \$'000	2025 Budget \$'000	2025 Variance \$'000	2025 Actual \$'000	2025 Budget \$'000	2025 Variance \$'000	2025 \$'000
Opening balance													
Balance carried forward from previous period	(1,654)	(2,118)	464	-	-	-	8,413	8,413	-	6,759	6,295	464	464
Adjusted opening balance	(1,654)	(2,118)	464	-	-	-	8,413	8,413	-	6,759	6,295	464	
Comprehensive income													
Revaluation adjustment	-	-	-	166	-	166	-	-	-	166	-	166	166
Surplus / (Deficit) for the period	(1,544)	(988)	(556)	-	-	-	-	-	-	(1,544)	(988)	(556)	(556)
Total comprehensive income attributable to Australian Government	(1,544)	(988)	(556)	166	-	166	-	-	-	(1,378)	(988)	(390)	
Transactions with owners													
<i>Contributions by owners</i>													
Departmental capital budget	-	-	-	-	-	-	692	692	-	692	692	-	-
Total transactions with owners	-	-	-	-	-	-	692	692	-	692	692	-	
Closing balance as at 30 June 2025 attributable to Australian Government	(3,198)	(3,106)	(92)	166	-	166	9,105	9,105	-	6,073	5,999	74	

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 2025

Cash Flow Statement for the NBA	2025	2025	2025
for the year ended 30 June 2025	Actual	Budget	Variance
	\$'000	\$'000	\$'000
OPERATING ACTIVITIES			
Cash received			
Appropriations	12,899	8,410	4,489
Sale of goods and rendering of services	6,339	6,029	310
Net GST received	272	-	272
Total cash received	19,510	14,439	5,071
Cash used			
Employees	9,895	9,942	(47)
Suppliers	2,368	2,969	(601)
Section 74 receipts transferred to the OPA	970	450	520
Interest payments on lease liabilities	4	3	1
Total cash used	13,237	13,364	(127)
Net cash from/(used by) operating activities	6,273	1,075	5,198
INVESTING ACTIVITIES			
Cash used			
Purchase of plant and equipment	543	692	(149)
Purchase of intangibles	-	-	-
Total cash used	543	692	(149)
Net cash from/(used by) investing activities	(543)	(692)	149
FINANCING ACTIVITIES			
Cash received			
Contributed Equity - departmental capital budget	1,207	692	515
Lease incentive received	-	-	-
Total cash received	1,207	692	515
Cash used			
Principal repayment of lease liabilities	1,043	722	321
Total cash used	1,043	722	321
Net cash from/(used by) financing activities	164	(30)	194
Net increase/(decrease) in cash held	5,894	353	5,541
Cash and cash equivalents at the beginning of the reporting period	892	880	12
Cash and cash equivalents at the end of the reporting period	6,786	1,233	5,553

3.1A

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

8.2B: Departmental Major Budget Variances for 2025

Explanations of major variances	Affected line items (and statement)
Statement of Comprehensive Income	
<u>Expenses</u>	
<i>Employee benefits</i> - The overspend is predominantly due to recognising leave provision for a significant number of staff joining the NBA in the financial year, this is offset by the increase in other revenue.	<i>Employee Benefits (Statement of Comprehensive Income)</i> <i>Own-source revenue (Statement of Comprehensive Income) Employee Provisions (Statement of Financial Position)</i> <i>Cash and cash equivalents (Statement of Financial Position)</i>
<i>Depreciation and amortisation</i> - The overspend is due to the correction of the useful life of Leasehold Improvement non-financial assets, refer to Overview note.	<i>Depreciation and amortisation (Statement of Comprehensive Income)</i> <i>Leasehold Improvements (Statement of Financial Position)</i>
<u>Own-source revenue</u>	
<i>Other Revenue</i> - Over budget due to a large number of staff transfers into the NBA in the financial year, with revenue received to fund leave provisions for staff transferred from other Government agencies.	<i>Employee Benefits (Statement of Comprehensive Income)</i> <i>Own-source revenue (Statement of Comprehensive Income) Employee Provisions (Statement of Financial Position)</i> <i>Cash and cash equivalents (Statement of Financial Position)</i>
Statement of Financial Position	
<u>Financial Assets</u>	
<i>Cash and cash equivalents</i> - The NBA Appropriations have been drawdown into the Special Account, the budget assumes part of the Appropriations remained as a Appropriation receivable at year end.	<i>Cash and cash equivalents (Statement of Comprehensive income)</i> <i>Trade and other receivables (Statement of Financial Position)</i> <i>Appropriations (Statement of Cash Flow)</i>
<i>Trade and other receivables</i> - This variance is due to Appropriations being drawdown into the Special Account in the financial year whilst the budget assumes part of the Appropriations remained a receivable at year end.	<i>Cash and cash equivalents (Statement of Comprehensive income)</i> <i>Trade and other receivables (Statement of Financial Position)</i> <i>Appropriations (Statement of Cash Flow)</i>
<u>Non-financial assets</u>	
<i>Buildings, Leasehold improvements and Plant and equipment</i> - the 2025 actuals are lower than budget for two reasons, primarily due to the change in the useful life of the Leasehold improvements (refer to Overview note) and timing of the acquisition of new laptops which will partially occur in the 2025-26 financial year, whilst budgeted in the current year.	<i>Depreciation and amortisation (Statement of Comprehensive income)</i> <i>Leasehold Improvements (Statement of Financial Position)</i> <i>Plant and equipment (Statement of Financial Position)</i>
<u>Payables</u>	
<i>Leases</i> - the variance is due to the budget being overstated.	<i>Cash and cash equivalents (Statement of Financial Position)</i> <i>Leasehold improvements (Statement of Financial Position)</i>
<i>Employee provisions</i> - the employee provision s greater than budget due to the significant APS staff transferring from other Government agencies to the NBA in the financial year, this was partially budgeted.	<i>Employee Benefits (Statement of Comprehensive Income)</i> <i>Cash and cash equivalents (Statement of Financial Position)Employee 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 revenue and expenses.	<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 2025

8.2C: Administered Budgetary Reports

**Administered Schedule of Comprehensive Income for the NBA
for the period ended 30 June 2024**

	2025 Actual \$'000	2025 Budget \$'000	2025 Variance \$'000
NET COST OF SERVICES			
Expenses			
Employee benefits	3,498	3,670	(172)
Suppliers	1,753,189	1,840,419	(87,230)
Grants - non-profit organisations	294	-	294
Depreciation and amortisation	628	1,515	(887)
Total expenses	1,757,609	1,845,604	(87,995)
Income			
Revenue			
Non-taxation revenue			
Other sources of non-taxation revenues	1,849,173	1,852,380	(3,207)
Other revenue	-	-	-
Total non-taxation revenue	1,849,173	1,852,380	(3,207)
Total revenue	1,849,173	1,852,380	(3,207)
Total income	1,849,173	1,852,380	(3,207)
Net (cost of)/contribution by services	91,564	6,776	84,788
Surplus/(Deficit)	91,564	6,776	84,788
OTHER COMPREHENSIVE INCOME			
Items not subject to subsequent reclassification to net cost of services			
Changes in asset revaluation surplus	-	-	-
Total comprehensive income/(loss)	91,564	6,776	84,788

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

NATIONAL BLOOD AUTHORITY			
NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS			
<i>for the year ended 30 June 2025</i>			
Administered Schedule of Assets and Liabilities for the NBA as at 30 June 2025	2025 Actual \$'000	2025 Budget \$'000	2025 Variance \$'000
ASSETS			
Financial assets			
Cash and cash equivalents	316,895	262,977	53,918
Trade and other receivables	31,481	24,570	6,911
Other investments	152,373	150,618	1,755
Total financial assets	500,749	438,165	62,584
Non-financial assets			
Plant and equipment	77	151	(74)
Other intangibles	1,571	1,271	300
Inventories	147,589	132,424	15,165
Prepayments	95,184	84,106	11,078
Total non-financial assets	244,421	217,952	26,469
Total assets administered on behalf of Government	745,170	656,117	89,053
LIABILITIES			
Payables			
Suppliers	74,298	65,327	8,971
Other payables	103	-	103
Deferred revenue	153,627	155,111	(1,484)
Total payables	228,028	220,438	7,590
Total liabilities administered on behalf of Government	228,028	220,438	7,590
Net assets/(liabilities)	517,142	435,679	81,463

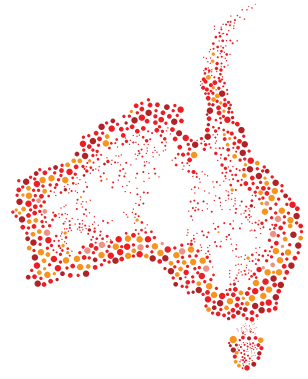
The above statement should be read in conjunction with the accompanying notes

8.2D: Administered Major Budget Variances for 2025

Explanations of major variances	Affected line items (and statement)
Administered Schedule of Comprehensive Income	
<u>Expenses</u>	
<i>Suppliers</i> - the blood and blood-related products and services are less than budgeted due to prices assumptions being marginally overstated on imported Immunoglobulin Products, and demand being less than budget.	<i>Suppliers (Administered Schedule of Comprehensive Income) Cash and cash equivalents (Administered Schedule of Assets and Liabilities)</i>
<i>Depreciation and amortisation</i> - the budget was overstated as it did not take into consideration assets reaching end of useful life in the current financial year.	<i>Expenses - Depreciation and Amortisation (Administered Schedule of Comprehensive Income)</i>
Administered Schedule of Assets and Liabilities	
<u>Financial Assets</u>	
<i>Cash and cash equivalents</i> - over budget due to surplus result and timing of supplier payments, which is evidenced by the increased suppliers payable and prepayments.	<i>Cash and cash equivalents, (Administered Schedule of Assets and Liabilities) Suppliers (Administered Schedule of Comprehensive Income)</i>
<i>Trade receivables</i> - timing of payments for quarter four invoices from governments.	<i>Trade and other receivables, (Administered Schedule of Assets and Liabilities) Cash and cash equivalents (Administered Schedule of Assets and Liabilities)</i>
<u>Non-financial assets</u>	
<i>Inventories</i> - the budget was understated, it did not include the increases from the National Reserve from the prior financial year.	<i>Inventories (administered Schedule of Assets and Liabilities) Cash and cash equivalents (Administered Schedule of Assets and Liabilities)</i>
<i>Prepayments</i> - the actual prepayments is above budget due to a year end adjustment of Fresh Blood product expenditure.	<i>Prepayments (Administered Schedule of Assets and Liabilities) Cash and cash equivalents (Administered Schedule of Assets and Liabilities)</i>
<i>Plant and equipment</i> - over budgeted due to nil additions in the year.	<i>Plant an equipment (Administered Schedule of Assets and Liabilities) Expenses - Depreciation and Amortisation (Administered Schedule of Comprehensive Income)</i>
<u>Liabilities</u>	
<i>Suppliers</i> - this variance is as a result of timing of payments at year end.	<i>Suppliers (Administered Schedule of Comprehensive Income) Cash and cash equivalents (Administered Schedule of Assets and Liabilities)</i>

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

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 2024–25

Appendix 4: Plasma and recombinant products supplied under contract in 2024–25

Appendix 5: Other mandatory reporting

Appendix 6: List of requirements

Appendix 7: Acronyms and abbreviations

The journey of blood

Index

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 Initiative (ALI) Fellow in 2017. She was also an invited as an ALI Impact Leader in 2024.

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 6 years.

Dr Rischbieth is 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 board advisory work focusing on corporate governance; sustainability; environmental, social and governance (ESG) reporting and upskilling; health; cyber; and AI.

Dr Rischbieth's previous directorships include Duxton Farms (ASX:DBF), the Australian Organ and Tissue Authority Advisory Board, 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 reappointed 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.

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.

Mr Bartle was reappointed to the NBA Board as the community representative in November 2021.

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.

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 reappointed to the NBA Board in June 2023.

Peter Lewinsky AM – Financial Expert

Mr Lewinsky brings over 30 years of leadership experience as chair and member of boards and of audit and risk and other governance committees across the private sector, ASX-listed and private companies, government organisations, and not-for-profits. Mr Lewinsky is currently on the boards of Healthdirect Limited, Early Childhood Management Systems, Holmesglen Foundation and Emmy Monash Aged Care. He recently concluded positions on the board of Ambulance Victoria and as Chair of TAL Superannuation and has served on community-based boards including the Australian Red Cross Society and the Australian Centre for the Moving Image.

Mr Lewinsky provides strategic guidance on governance, financial management, planning, stakeholder engagement, and government relations. He has advised companies and government bodies on governance structures, audit committees and compliance frameworks. Mr Lewinsky's expertise extends to financial oversight, project management, organisational reviews, and procurement processes.

Mr Lewinsky is also the Board representative member of the Audit and Risk Committee.

Mr Lewinsky was appointed to the Board in November 2024.

Audit and Risk Committee members

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 5 ARC meetings during 2024–25 and was remunerated \$10,500.00.

Mr Greg Fraser

Mr Greg Fraser is a Fellow of the Governance Institute of Australia.

Mr Fraser is a 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 5 ARC meetings during 2024–25 and was remunerated \$8,250.00.

Ms Terina Brierley

Ms Terina Brierley was appointed to the ARC in March 2024. Ms Brierley is a Fellow Chartered Accountant (FCA), non-executive director and audit chair with over 30 years' experience in both the public and private sectors, nationally and internationally. This includes senior management positions in chartered accounting firms, in corporate and quasi-public sector organisations, and as managing director of a consulting and financial management training business specialising in Australian Government reforms.

Since 2011, Ms Brierley has operated in the international public financial management arena, delivering USAID-sponsored financial management reform projects for Deloitte US in Africa and the Middle East. Ms Brierley has also been engaged by the International Monetary Fund and the World Bank.

Ms Brierley attended 5 ARC meetings during 2024–25 and was remunerated \$8,250.00

Mr Peter Lewinsky AM – NBA Board Representative

Mr Lewinsky's biography can be found under 'NBA Board members' above.

Mr Lewinsky attended 2 ARC meetings during 2024–25 and was remunerated \$3,300.00

Appendix 2

Workforce statistics

TABLE 5.1 All ongoing employees 2024–25

	Male			Female			Indeterminate			Total
	Full time	Part time	Total male	Full time	Part time	Total female	Full time	Part time	Total	
Total	24	1	25	60	12	72	-	-	-	97

TABLE 5.2 All non-ongoing employees 2024–25

	Male			Female			Indeterminate			Total
	Full time	Part time	Total male	Full time	Part time	Total female	Full time	Part time	Total	
Total	-	-	-	-	-	-	-	-	-	-

TABLE 5.3 All ongoing employees 2023–24

	Male			Female			Indeterminate			Total
	Full time	Part time	Total male	Full time	Part time	Total female	Full time	Part time	Total	
NSW	-	-	-	1	1	2	-	-	-	2
VIC	1	-	1	1	-	1	-	-	-	2
ACT	20	1	21	44	7	51	-	-	-	72
Total	21	1	22	46	8	54	-	-	-	76

TABLE 5.4 All non-ongoing employees 2023–24

	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 2024–25

	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	1	-	1	-	-	-	3
EL 2	3	-	3	7	2	9	-	-	-	12
EL 1	10	-	10	19	2	21	-	-	-	31
APS 6	8	-	8	14	5	19	-	-	-	27
APS 5	1	1	2	7	2	9	-	-	-	11
APS 4	-	-	-	12	1	13	-	-	-	13
Total	24	1	25	60	12	72	-	-	-	97

TABLE 5.6 Australian Public Service Act non-ongoing employees 2024–25

	Male			Female			Indeterminate			Total
	Full time	Part time	Total male	Full time	Part time	Total female	Full time	Part time	Total	
Total	-	-	-	-	-	-	-	-	-	-

TABLE 5.7 Australian Public Service Act ongoing employees 2023–24

	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	-	1	-	-	-	2
EL 2	3	-	3	7	1	8	-	-	-	11
EL 1	9	-	9	13	3	16	-	-	-	25
APS 6	4	-	4	10	2	12	-	-	-	16
APS 5	3	1	4	7	2	9	-	-	-	13
APS 4	1	-	1	8	-	8	-	-	-	9
Total	21	1	22	46	8	54	-	-	-	76

TABLE 5.8 Australian Public Service Act non-ongoing employees 2023–24

	Male			Female			Indeterminate			Total
	Full time	Part time	Total male	Full time	Part time	Total female	Full time	Part time	Total	
APS 5	1	-	1	-	-	-	-	-	-	1
APS 4	-	-	-	1	-	1	-	-	-	1
Total	1	-	1	1	-	1	-	-	-	2

TABLE 5.9 Australian Public Service Act employees by employment status 2024–25

	Ongoing			Non-ongoing			Total
	Full time	Part time	Total	Full time	Part time	Total	
SES 1	3	-	3	-	-	-	3
EL 2	10	2	12				12
EL 1	29	2	31	-	-	-	31
APS 6	22	5	27	-	-	-	27
APS 5	8	3	11	-	-	-	11
APS 4	12	1	13				13
Total	84	13	97	-	-	-	97

TABLE 5.10 Australian Public Service Act employees by employment status 2023–24

	Ongoing			Non-ongoing			Total
	Full time	Part time	Total	Full time	Part time	Total	
SES 1	2	0	2	-	-	-	2
EL 2	10	1	11	-	-	-	11
EL 1	22	3	25	-	-	-	25
APS 6	14	2	16	-	-	-	16
APS 5	10	3	13	1	-	1	14
APS 4	9	-	9	1	-	1	10
Total	67	9	76	2	-	2	78

TABLE 5.11 Australian Public Service Act employment type by location 2024–25

	Ongoing	Non-ongoing	Total
NSW	-	-	-
VIC	-	-	-
ACT	97		97
Total	97	-	97

TABLE 5.12 Australian Public Service Act employment type by location 2023–24

	Ongoing	Non-ongoing	Total
NSW	2	-	2
VIC	2	-	2
ACT	72	2	74
Total	76	2	78

TABLE 5.13 Australian Public Service Act Indigenous employment 2024–25

	Total
Ongoing	-
Non-ongoing	-
Total	-

TABLE 5.14 Australian Public Service Act Indigenous employment 2023–24

	Total
Ongoing	-
Non-ongoing	-
Total	-

Appendix 3

Fresh blood components supplied under contract by Lifeblood in 2024–25

TABLE 5.15 Fresh blood components supplied under contract by Lifeblood 2024–25

Product type	Name	JBC price (\$)
Red blood cells	Whole blood (WB) red cells leucodepleted	370.07
	WB paediatric red cells leucodepleted (set of 4)	456.32
	WB washed red cells leucodepleted	445.74
Platelets	WB platelet pool leucodepleted	255.68
	Apheresis platelet leucodepleted	554.85
	Paediatric apheresis platelet leucodepleted (set of 3)	716.25
Clinical fresh frozen plasma (FFP)	WB clinical FFP	159.21
	WB paediatric clinical FFP (set of 4)	186.00
	Apheresis clinical FFP	225.19
Cryoprecipitate	WB cryoprecipitate	170.33
	Apheresis cryoprecipitate	349.14
	Split apheresis cryoprecipitate	171.87
Cryo-depleted plasma	WB cryo-depleted plasma	158.44
	Apheresis cryo-depleted plasma	326.41
	Split apheresis cryo-depleted plasma	159.49
Other products	Autologous donation	393.11
	Therapeutic venesections for WB for discard	545.46
	Serum eye drops	229.82
Plasma for fractionation	Plasma for fractionation	363.06

Note: Lifeblood's Blood Component Information, 2023 specifies the presentation volume for a typical unit content.

Appendix 4

Plasma and recombinant products supplied under contract in 2024–25

TABLE 5.16 Plasma and recombinant products supplied under various contracts for 2024–25

Product type	Name	Presentation	Supplier	Published price (\$)
Albumin (plasma derived – domestic)	Alburex 20 AU	10g/250mL	CSL Behring (Australia) Pty Ltd	94.55
		20g/500mL		74.56
	Alburex 5 AU	12.5g/250mL		118.18
		25g/500mL		93.21
Antithrombin III concentrate (plasma derived – domestic)	Thrombotrol VF	1,000 IU	CSL Behring (Australia) Pty Ltd	1,715.77
CMV Ig (plasma derived – domestic)	CMV Ig	1.5 million units	CSL Behring (Australia) Pty Ltd	1,467.13
Emicizumab (bi-functional monoclonal antibody)	Hemlibra	30mg/1ml	Roche Australia Pty Ltd	#
		60mg/0.4ml		#
		105mg/0.7ml		#
		150mg/1ml		#
Factor IX (plasma derived – domestic)	MonoFIX	1,000 IU	CSL Behring (Australia) Pty Ltd	1,064.04
Factor IX (recombinant – imported)	Alprolix	250 IU	Sanofi-Aventis Australia Pty Ltd	#
		500 IU		#
		1,000 IU		#
		2,000 IU		#
		3,000 IU		#
		4,000 IU		#
	BeneFIX	250 IU	Pfizer Australia Pty Ltd	#
		500 IU		#
		1,000 IU		#
		2,000 IU		#
		3,000 IU		#

Product type	Name	Presentation	Supplier	Published price (\$)
Factor VIIa (recombinant – imported)	NovoSeven	1mg	Novo Nordisk Pharmaceuticals Pty Ltd	1,250.00
		2mg		2,500.00
		5mg		6,250.00
		8mg		10,000.00
Factor VIII (plasma derived – domestic)	Biostate	250 IU	CSL Behring (Australia) Pty Ltd	266.00
		500 IU		532.03
		1,000 IU		1,064.04
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		#
		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	1,140.00
		2,500 IU		5,700.00
Factor XI (plasma derived – imported)	Factor XI	1 IU	CSL Behring (Australia) Pty Ltd	16.56
Factor XIII (plasma derived – imported)	Fibrogammin	250 IU	CSL Behring (Australia) Pty Ltd	226.21
		1,250 IU		1,131.04

Product type	Name	Presentation	Supplier	Published price (\$)
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	911.24
Hepatitis B Ig (plasma derived – domestic)	Hepatitis B Ig	100 IU	CSL Behring (Australia) Pty Ltd	53.63
		400 IU		122.78
Human C1 esterase inhibitor concentrate (plasma derived – imported)	Berinert IV	500 IU	CSL Behring (Australia) Pty Ltd	#
		1,500 IU		#
	Berinert SC	2,000 IU		#
		3,000 IU		#
Human prothrombin complex (plasma derived – domestic)	BERIPLEX AU	500 IU	CSL Behring (Australia) Pty Ltd	339.19
Human prothrombin complex (plasma derived – domestic)	Prothrombinex	500 IU	CSL Behring (Australia) Pty Ltd	339.19
Human prothrombin complex (plasma derived – imported)	Beriplex P/N	500 IU	CSL Behring (Australia) Pty Ltd	339.19
IVIg (plasma derived – domestic)	Privigen AU	5g/50ml	CSL Behring (Australia) Pty Ltd	309.30
		10g/100ml		618.60
		20g/200ml		1,237.21

Product type	Name	Presentation	Supplier	Published price (\$)
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		#
		10g/100ml		#
		20g/200ml		#
		40g/400ml		#
	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 Ltd	#
		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 (0.32gm)	CSL Behring (Australia) Pty Ltd	38.60
		5ml (0.80gm)		63.28
Protein C concentrate (plasma derived – imported)	Ceprothin	1,000 IU	Takeda Pharmaceuticals Australia Pty Ltd	2,490.00
Rh (D) Ig (plasma derived – domestic)	Rh (D) Ig VF	250 IU	CSL Behring (Australia) Pty Ltd	36.32
		625 IU		90.77
Rh (D) Ig (plasma derived – imported)	Rhophylac	1,500 IU	CSL Behring (Australia) Pty Ltd	476.84
SCIg (plasma derived – domestic)	Hizentra AU	1g/5mL	CSL Behring (Australia) Pty Ltd	61.86
		4g/20mL		247.44

Product type	Name	Presentation	Supplier	Published price (\$)
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		#
	Xembify	1g/5ml	Grifols Australia Pty Ltd	#
		2g/10ml		#
		4g/20ml		#
		10g/50ml		#
Tetanus Ig (plasma derived – domestic)	Tetanus Ig VF	250 IU	CSL Behring (Australia) Pty Ltd	53.02
		4,000 IU		848.08
Zoster Ig (plasma derived – domestic)	Zoster Ig VF	200 IU	CSL Behring (Australia) Pty Ltd	336.25

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 2024–25.

The NBA did not conduct any advertising campaigns in 2024–25.

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 2024–25 this included:

- ♦ continued use of audio and video conferencing and online collaboration in meetings to reduce interstate or international travel
- ♦ recycling into 5 streams of waste – co-mingled material, container deposit scheme, 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% recycled paper wherever possible
- ♦ running the air conditioning systems on timers and occupancy sensors for lighting 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.

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 Net Zero in Government Operations Strategy, all non-corporate Commonwealth entities, corporate Commonwealth entities and Commonwealth companies are required to publicly report on the emissions from their operations.

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 5.17 and 5.18 present the NBA's greenhouse gas emissions report for 2024–25.

TABLE 5.17 NBA greenhouse gas emissions report (location-based approach) 2024–25

2024–25 Greenhouse gas emissions inventory – location-based approach				
Emission source	Scope 1t CO ₂ -e	Scope 2t CO ₂ -e	Scope 3t CO ₂ -e	Total t CO ₂ -e
Electricity (location-based approach)	N/A	67.56	4.09	71.65
Natural gas	-	N/A	-	-
Solid waste	-	N/A	7.41	7.41
Refrigerants		N/A	N/A	
Fleet and other vehicles	-	N/A	-	
Domestic commercial flights	N/A	N/A	44.06	44.06
Domestic hire car	N/A	N/A	0.1	0.1
Domestic travel accommodation	N/A	N/A	7.8	7.8
Other energy	-	N/A	-	-
Total t CO₂-e	-	67.56	63.47	131.02

Note: The table above presents emissions related to electricity usage using the location-based accounting method. CO₂-e = Carbon Dioxide Equivalent.

TABLE 5.18 Electricity greenhouse gas emissions report (location-based approach) 2024–25

2024–25 Electricity greenhouse gas emissions				
Emission Source	Scope 2 t CO ₂ -e	Scope 3 t CO ₂ -e	Total t CO ₂ -e	Electricity kWh
Electricity (location-based approach)	67.56	4.09	71.65	102,358.15
Market-based electricity emissions	1.9	0.26	2.16	2,349.12
Total renewable energy consumed	N/A	N/A	N/A	100,009.03
Renewable power percentage	N/A	N/A	N/A	18,624.06
Jurisdictional renewable power	N/A	N/A	N/A	81,384.96
Green Power ²	N/A	N/A	N/A	
Large-scale generation certificates ²	N/A	N/A	N/A	
Behind the meter solar ⁴	N/A	N/A	N/A	
Total renewable electricity produced				
Large-scale generation certificates ²	N/A	N/A	N/A	
Behind the meter solar ⁴	N/A	N/A	N/A	

Note: The table above presents emissions related to electricity usage using both the location-based and the market-based accounting methods. CO₂-e=Carbon Dioxide Equivalent. Electricity usage is measured in kilowatt hours (kWh).

1 Listed as Mandatory renewables in 2023–24 Annual Reports. The renewable power percentage (RPP) accounts for the portion of electricity used, from the grid, that falls within the Renewable Energy Target (RET).

2 Listed as Voluntary renewables in 2023–24 Annual Reports

3 The Australian Capital Territory is currently the only state with a jurisdictional renewable power percentage (JRPP).

4 Reporting behind the meter solar consumption and/or production is optional. The quality of data is expected to improve over time as emissions reporting matures.

Grants

The NBA awarded no grants during the period 1 July 2024 to 30 June 2025.

Information on grants awarded by the NBA in previous years is available at www.blood.gov.au/grants-reporting.

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 at <https://www.apsc.gov.au>.

Copies of the NBA IPS Plan and associated published documents are available at www.blood.gov.au/ips.

Compliance reporting

The National Blood Authority (NBA) recorded no significant breaches of finance law during 2024–25. The NBA will report any instances of non-compliance reported to the ARC and to the Executive Management Group. The NBA minimises non-compliance through effective controls, including training and publication of legislation and rules, delegation schedules and Accountable Authority Instructions, which are available to staff to inform decision making.

Agency resource statement

The agency resource statement (Table 5.19) provides details of the sources of funding for the NBA in 2024–25 together with information about special accounts balances to be carried over to 2025–26.

TABLE 5.19 Agency resource statement

	Actual available appropriation for 2024–25 \$'000	Payments made 2024–25 \$'000	Balance 2024–25 \$'000
	(a)	(b)	(a) – (b)
Ordinary Annual Services¹			
Departmental appropriation ²	14,167	14,105	62
Total	14,167	14,105	62
Administered expenses	-	-	0
Outcome ¹	8,429	8,429	0
Total	8,429	8,429	0
Total ordinary annual services	22,596	22,534	62
Special accounts⁴			
Opening balance	295,301	-	-
Appropriation receipts ⁵	16,025	-	-
Non-appropriation receipts to special accounts	1,990,185	-	-
Payments made	-	1,825,459	-
Total special accounts	2,301,511	1,825,459	476,052
Total resourcing and payments	2,324,107	1,847,993	476,114

1 Appropriation Act (No. 1) 2024–25 and prior year Departmental Appropriation.

2 Includes an amount of \$0.692 million in 2024–25 for the Departmental Capital Budget. For accounting purposes this amount has been designated as 'contributions by owners'.

3 Includes an amount of \$nil in 2024–25 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 2024–25 included above.

Resources for outcomes

Table 5.20 provides details of the total funding for each outcome approved by government for the NBA. In 2024–25 the NBA operated under a single outcome.

TABLE 5.20 Agency expenses by outcome

Outcome1: Access to a secure supply of safe and affordable blood products	Budget 2024–25 \$'000	Actual expenses 2024–25 \$'000	Variation 2024–25 \$'000
	(a)	(b)	(a) – (b)
Program 1.1: National Blood Agreement management			
Administered expenses			
Ordinary annual services (appropriation Bill No.1)	8,429	8,429	0
Ordinary annual services (appropriation Bill No.1 to special accounts)	-8,429	-8,429	0
Special accounts	1,845,604	1,757,609	87,995
Departmental expenses			
Departmental appropriation ¹	8,410	8,410	0
Departmental Appropriation to Special accounts	-8,410	-8,410	0
Special accounts	13,759	13,845	364
s74 retained revenue receipts	450	970	-520
expense not requiring appropriation in the budget year	1,054	1,614	-560
Total for Program 1.1	1,861,317	1,774,038	87,279
Total expenses for Outcome 1	1,861,317	1,774,038	87,279
	2024–25	2024–25	2024–25
Average staffing level (number)	75	91	-16

1 Departmental appropriation combines ordinary annual services (Appropriation Act No.1).

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 2025.

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.	Mandatory	iv
17AJ(b)	Index	Alphabetical index.	Mandatory	199–206
17AJ(c)	Appendix 7	Glossary of abbreviations and acronyms.	Mandatory	197–198
17AJ(d)	Appendix 6	List of requirements.	Mandatory	190–196
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	1–8
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	12
17AE(1)(a)(iii)	Part 1	A description of the outcomes and programmes administered by the entity.	Mandatory	10
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	11
17AE(1)(aa)(ii)	Part 1	Position title of the accountable authority or each member of the accountable authority.	Mandatory	11

PGPA Rule Reference	Part of Report	Description	Requirement	Page
17AE(1)(aa) (iii)	Part 1	Period as the accountable authority or member of the accountable authority within the reporting period.	Mandatory	11
17AE(1)(b)	Part 1	An outline of the structure of the portfolio of the entity.	Portfolio departments – mandatory	11
17AE(2)	N/A	Where the outcomes and programmes 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			
	Annual performance Statements			
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	30–94
17AD(c)(ii)	Report on Financial Performance			
17AF(1)(a)	Part 4	A discussion and analysis of the entity's financial performance.	Mandatory	116–119
17AF(1)(b)	Part 4	A table summarising the total resources and total payments of the entity.	Mandatory	114
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	116
17AD(d)	Management and Accountability			
	Corporate Governance			
17AG(2)(a)	Part 3	Information on compliance with section 10 (fraud and corruption systems)	Mandatory	105
17AG(2)(b)(i)	Part 3	A certification by accountable authority that fraud and corruption risk assessments have been conducted and fraud and corruption control plans have been prepared.	Mandatory	105
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 and corruption that meet the specific needs of the entity are in place.	Mandatory	105

PGPA Rule Reference	Part of Report	Description	Requirement	Page
17AG(2)(b)(iii)	Part 3	A certification by accountable authority that all reasonable measures have been taken to deal appropriately with fraud and corruption relating to the entity.	Mandatory	105
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	96–103
17AG(2)(d) – (e)	Appendix 5	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	187
Audit Committee				
17AG(2A)(a)	Part 3	A direct electronic address of the charter determining the functions of the entity's audit committee.	Mandatory	99
17AG(2A)(b)	Part 3	The name of each member of the entity's audit committee.	Mandatory	98
17AG(2A)(c)	Appendix 1	The qualifications, knowledge, skills or experience of each member of the entity's audit committee.	Mandatory	172–173
17AG(2A)(d)	Appendix 1	Information about the attendance of each member of the entity's audit committee at committee meetings.	Mandatory	172–173
17AG(2A)(e)	Appendix 1	The remuneration of each member of the entity's audit committee.	Mandatory	172–173
External Scrutiny				
17AG(3)	Part 3	Information on the most significant developments in external scrutiny and the entity's response to the scrutiny.	Mandatory	104
17AG(3)(a)	Part 3	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	104
17AG(3)(b)	Part 3	Information on any reports on operations of the entity by the Auditor-General (other than report under section 43 of the Act), a Parliamentary Committee, or the Commonwealth Ombudsman.	If applicable, Mandatory	104
17AG(3)(c)	Part 3	Information on any capability reviews on the entity that were released during the period.	If applicable, Mandatory	104
Management of Human Resources				
17AG(4)(a)	Part 2	An assessment of the entity's effectiveness in managing and developing employees to achieve entity objectives.	Mandatory	87–88

PGPA Rule Reference	Part of Report	Description	Requirement	Page
17AG(4)(aa)	Appendix 2	Statistics on the entity's employees on an ongoing and non-ongoing basis, including the following: (a) statistics on full time employees; (b) statistics on part time employees; (c) statistics on gender; (d) statistics on staff location.	Mandatory	87–88
17AG(4)(b)	Appendix 2	Statistics on the entity's APS employees on an ongoing and non-ongoing basis; including the following: (a) statistics on staffing classification level; (b) statistics on full time employees; (c) statistics on part time employees; (d) statistics on gender; (e) statistics on staff location; (f) statistics on employees who identify as Indigenous.	Mandatory	174
17AG(4)(c)	Part 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	175–177
17AG(4)(c)(i)	Part 3	Information on the number of SES and non-SES employees covered by agreements etc identified in paragraph 17AG(4)(c).	Mandatory	107
17AG(4)(c)(ii)	Part 3	The salary ranges available for APS employees by classification level.	Mandatory	107
17AG(4)(c)(iii)	Part 3	A description of non-salary benefits provided to employees.	Mandatory	107
17AG(4)(d)(i)	Part 3	Information on the number of employees at each classification level who received performance pay.	If applicable, Mandatory	109
17AG(4)(d)(ii)	N/A	Information on aggregate amounts of performance pay at each classification level.	If applicable, Mandatory	109
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

PGPA Rule Reference	Part of Report	Description	Requirement	Page
Assets Management				
17AG(5)	Part 4	An assessment of effectiveness of assets management where asset management is a significant part of the entity's activities.	If applicable, Mandatory	120
Purchasing				
17AG(6)	Part 4	An assessment of entity performance against the Commonwealth Procurement Rules.	Mandatory	120
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	121
17AG(7)(b)	Part 4	A statement that "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]".	Mandatory	121
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	121
17AG(7)(d)	Part 4	A statement that "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."	Mandatory	121
Reportable non-consultancy contracts				
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	122

PGPA Rule Reference	Part of Report	Description	Requirement	Page
17AG(7A)(b)	Part 4	A statement that "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."	Mandatory	121
17AD(daa)	Additional information about organisations receiving amounts under reportable consultancy contracts or reportable non-consultancy contracts			
17AGA	Part 4	Additional information, in accordance with section 17AGA, about organisations receiving amounts under reportable consultancy contracts or reportable non-consultancy contracts.	Mandatory	121–122
Australian National Audit Office Access Clauses				
17AG(8)	Part 4	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 Auditor-General 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	120
Exempt contracts				
17AG(9)	Part 4	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	120
Small business				
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	123
17AG(10)(b)	Part 4	An outline of the ways in which the procurement practices of the entity support small and medium enterprises.	Mandatory	123

PGPA Rule Reference	Part of Report	Description	Requirement	Page
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	123
Financial Statements				
17AD(e)	Part 4	Inclusion of the annual financial statements in accordance with subsection 43(4) of the Act.	Mandatory	124–166
Executive Remuneration				
17AD(da)	Part 3	Information about executive remuneration in accordance with Subdivision C of Division 3A of Part 23 of the Rule.	Mandatory	108
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	184
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	187
17AH(1)(c)	Appendix 5	Outline of mechanisms of disability reporting, including reference to website for further information.	Mandatory	187
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	187
17AH(1)(e)	N/A	Correction of material errors in previous annual report	If applicable, Mandatory	N/A
17AH(2)	Appendix 5	Information required by other legislation	Mandatory	184–189

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
ACTSES	ACT State Emergency Service
AHCDO	Australian Haemophilia Centre Directors' Organisation
AHMDS	Australian Haemovigilance Minimum Data Set
ANAO	Australian National Audit Office
ANZSBT	Australian and New Zealand Society of Blood Transfusion
APS	Australian Public Service
ARC	Audit and Risk Committee
ASD	Australian Signals Directorate
BloodNet	Australia's online blood ordering and inventory management system
BloodSafe eLearning	transfusion practice and patient blood management education online system
BloodSTAR	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
FFP	fresh frozen plasma
FSA	Funding and Services Agreement
FOI Act	<i>Freedom of Information Act 1982</i>
GST	goods and services tax
HAC	Haemophilia Advisory Committee
HSO	health services organisation
ICT	information and communications technology
Ig	immunoglobulin
IPRP Deeds	contracts for supply of imported plasma-derived and recombinant blood products
IPS	Information Publication Scheme

ISBT	International Society of Blood Transfusion
IT	information technology
IU	international units
IVIg	intravenous immunoglobulin
JBC	Jurisdictional Blood Committee
KPI	key performance indicator
Lifeblood	Australian Red Cross Lifeblood
LIS	laboratory information system
MyABDR	secure app for smartphones and websites for people with bleeding disorders or their 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
NPPL	National Product Price List
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
PCC	prothrombin complex concentrate
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
RCDP	red cell diagnostic product
Red Cross	Australian Red Cross Society
SCIg	subcutaneous immunoglobulin
SES	Senior Executive Service
SWG	specialist working group
WB	whole blood

Index

A

abbreviations and acronyms, 197–198
 ABDR *see* Australian Bleeding Disorders Registry (ABDR)
 Aboriginal and/or Torres Strait Islander staff, 106, 177
 accountability *see* management and accountability
 accountable authority *see* Chief Executive
 achievements in 2024–25, 15
 see also performance (NBA)
 acknowledgements, 4, 5
 acronyms and abbreviations, 197–198
 ACT Community Protection Medal, 85
 ACT State Emergency Service (ACTSES), 85
 administered finances, 114, 115, 118–119
 administrative tribunal decisions, 104
 adverse events, 15, 23, 62
 advertising and market research, 184
 advice to government, policy, 80–82
 agency resource statement, 114, 188–189
 AHCDO (Australian Haemophilia Centre Directors' Organisation), 5, 38, 102
 AHMDS (Australian Haemovigilance Minimum Data Set), 15, 22, 62
 ANAO (Australian National Audit Office), 99, 104, 120, 124–125
 Annual Performance Statements *see* performance (NBA)
 anti-D, 8
 ANZSBT (Australian and New Zealand Society of Blood Transfusion), 22–23, 69
 APS Academy, 105, 109
 APS Code of Conduct, 106
 APS Employee Census, 4, 20, 87, 89, 90, 100, 106
 APS Employment Principles, 106
 APS Net Zero 2030 reporting, 185–186
 APS Statistical Bulletin, 187
 APS Strategic Commissioning Framework, 87
 APS Values, 106
 APSLearn, 109
 Arthurson, Emmy, 4, 21
 assets management, 120
 Assistant Minister for Health and Aged Care, 11
 Audit and Risk Committee (ARC), 4, 5, 31, 97, 98–100, 172–173
 Auditor-General *see* Australian National Audit Office (ANAO)
 audits
 financial statements, 116, 124–125
 internal audit and risk programs, 99–100, 120
 AusTender, 120, 121

Australian and New Zealand Society of Blood Transfusion (ANZSBT), 22–23, 69
 Australian Bleeding Disorders Registry (ABDR), 5, 17, 38, 65, 102
 Steering Committee, 5, 102
 Australian Clinical Labs, 64
 Australian Commission on Safety and Quality in Health Care (ACSQHC), 74
 Australian Haemophilia Centre Directors' Organisation (AHCDO), 5, 38, 102
 Australian Haemovigilance Minimum Data Set (AHMDS), 15, 22, 62
 Australian Health Ministers, 38, 82, 86, 97, 118
 Australian Information Commissioner, 104, 187
 Australian National Audit Office (ANAO), 99, 104, 120, 124–125
 Australian Public Service Commission (APSC), 187
 Australian Public Service Employee Census, 4, 20, 87, 89, 90, 100, 106
 Australian Public Service Net Zero 2030 reporting, 185–186
 Australian Red Cross Lifeblood *see* Lifeblood
 Australian Red Cross Society, 22, 40, 46, 81, 111
 see also Lifeblood
 Australian Signals Directorate (ASD), 26, 92
 Australia's Disability Strategy 2021–2031, 187
 awards sponsorship, Blood conference, 69–70

B

Bandler, Dr Lilon, 102
Barcode specifications for blood and blood products funded under the national blood arrangements, 75
 Bartle, Geoffrey, 19, 21, 169
 Beazley, Professor Lyn, 19, 21
 benefits *see* remuneration and benefits
 Beriplex AU, 40, 41, 48, 181
 Bielby, Linley, 103
 Bio-Rad Laboratories Pty Ltd, 39, 57
 blood and blood-related products and services, supply of and demand for, 1–4, 15, 24–25
 see also Strategy 1: Provide a safe, secure and affordable supply of blood and blood-related products and services
 Blood conference, 22–23, 69–70
 blood donor panel, increase in, 3, 81–83
 Blood Management Award (Blood conference), 69, 70
 blood management dashboard, 75
 Blood Management Standard, 74, 75
 Blood Operations Centre (BOC), 67–68, 90, 92

blood sector
 governance arrangements, 97
 knowledge development, 92
 National Blood Sector Research and Development Program, 70, 71, 78–79
 snapshot of, 16–17
 systems and system upgrades, 38, 63, 91
 see also Strategy 2: Drive performance improvement in the Australian blood sector;
 Strategy 4: Develop and provide policy advice to support a sustainable blood sector in Australia
 blood supply see blood and blood-related products and services, supply of and demand for
 BloodNet, 16, 17, 64, 65, 75
 BloodSafe eLearning Australia, 17, 38, 73–74, 78, 92
 BloodSTAR (Blood System for Tracking Authorisations and Reviews), 3, 61, 65
 Board see NBA Board
 BOC (Blood Operations Centre), 67–68, 90, 92
 Brierley, Terina, 98, 173
 Business Committee, 97, 98, 100, 110
 Business Continuity Framework, 25

C

C1 esterase inhibitor, 56, 181
 Cahill, John, 1, 6–7, 11, 20, 21, 34, 103, 108, 111
 profile, 13
 see also Chief Executive
 capability reviews, 104
 case studies (Cameos)
 Adam Hartnett – Giving back to the community, 85
 Associate Professor Alison Street AO – Ruth Sanger Oration at the Blood 2024 conference, 22–23
 Blood conference awards sponsorship, 69–70
 The Blood Operations Centre – a lifeline for Australian healthcare professionals, 67
 Danielle's story (immune thrombocytopenia), 59
 David's story (haemochromatosis), 93–94
 Hurstville donor centre, 83
 Life Is the Reason marketing campaign, 27
 Signing of extension of Lifeblood Deed, 111
 Vale James Harrison, anti-D donor, 8
 Census, APS Employee, 4, 20, 87, 89, 90, 100, 106
 Census Action Plan, 89, 100
 Chair of the NBA Board, 4, 19
 report of Board's operations, 19–21
 see also Rischbieth, Dr Amanda
 Chief Executive, 11, 12, 18, 20, 89, 107, 120
 accountable authority, 11, 30, 105, 126
 governance, 97, 98, 99, 100, 101
 letter of transmittal, iii
 remuneration, 108
 review, 1–8
 see also Cahill, John

classification levels of staff, 106, 175–176
 clotting factor products, 3, 47, 51, 53–58, 179–180
 Code of Conduct, APS, 106
 Colvin, Andrew, 111
 Comcare, 100, 110
 commercial suppliers see suppliers of blood and blood products
Commonwealth Electoral Act 1918, 184
 Commonwealth Health Minister, 11, 18, 97
 Commonwealth Integrity Survey, 105
 Commonwealth Ombudsman, 104
 Commonwealth Procurement Rules, 40, 120, 121
 compliance reporting, 187
 consultancy and non-consultancy contracts, 121–122
 consultative arrangements, 89, 100
 contact officer, ii
 contract staff, 87, 106
 contracts see purchasing
 Cornelissen, Adjunct Professor Stephen, 7, 111
 corporate governance, 96–103
 national blood sector arrangements, 97
 NBA governance arrangements, 97–100
 statutory committees, 101–103
 Corporate Plan 2024–25 to 2027–28, 31–33
 Criteria for the Clinical Use of Immunoglobulin in Australia, 71, 77, 101
 Critical Bleeding courses (BloodSafe eLearning Australia), 73–74
 CSL Behring (Australia) Pty Ltd, 2, 3, 6, 35, 45, 48, 50, 51, 82, 111, 122
 manufacturing changes, 15, 40–41, 48
 products purchased from, 39, 179–183
 results against KPIs, 48–49, 52
 culture, 20, 89–90
 cyber security, 26, 68, 91, 92

D

Dale, Courtney, 4, 21
 Data Governance Framework, 65, 102
 data services, 60, 65–66, 75, 91
 Deed of Agreement between Australian Red Cross Society and Commonwealth of Australia, 15, 19, 40, 41, 46–47, 80, 81, 111
 Demand and Inventory Management Improvement Project, 76
 demand for and supply of blood and blood products, 1–4, 15, 24–25
 see also Strategy 1: Provide a safe, secure and affordable supply of blood and blood-related products and services
 Department of Defence (United States), 92
 Department of Finance guidelines, 30, 40
 Department of Health, Disability and Ageing, 4, 62, 96
 Department of Home Affairs, 26
 departmental finances, 114, 116–118

Deputy Chief Executives, 12, 14, 89, 90, 98, 99, 108
 diagnostic reagent products, 15, 16, 36, 39, 57–58
 disability reporting mechanism, 187
 Disaster Recovery Plan (DRP), ICT, 26
 discards, 15, 17, 36, 65
 diversity, staff, 106
 domestic plasma products, transition of, 15, 40–41, 48
 donor centres, 15, 81, 83
 donor panel, increase in, 3, 81–83

E

ecologically sustainable development, 184
 education and training
 blood sector knowledge development, 92
 BloodSafe eLearning Australia, 17, 38, 73–74, 78, 92
 cyber security, 92
 fraud control, 105
 immunoglobulin knowledge resources, 78
 staff professional and personal development, 84, 88, 106, 109
 work health and safety, 110
 eLearning management system (Learnhub), 109
 emicizumab (Hemlibra), 3, 51, 55, 56–57, 60, 63, 179
 emissions, 185–186
 Employee Census, APS, 4, 20, 87, 89, 90, 100, 106
 employees see staff
 engagement, staff, 4, 15, 20, 84, 87, 89
 Enterprise Agreement 2024–27, 87, 100, 107
Environment Protection and Biodiversity Conservation Act 1999, 184, 185
 environmental performance, 184
 Ernst and Young (EY), 99–100
 Essential Eight controls, 92
Evaluate and develop options to improve access to subcutaneous immunoglobulin (SCIg) (report), 61
 evaluations see reviews and evaluations
 Executive Management team, 13–14
 Executive Office, 4, 98, 100
 exempt contracts, 120
 external scrutiny, 104
 EY (Ernst and Young), 99–100

F

factor IX products, 51, 54, 179
 factor VIIa products, 47, 55, 180
 factor VIII anti-inhibitor (FEIBA), 55, 180
 factor VIII deficiency (haemophilia A), 15, 51, 55, 56, 63
 factor VIII products, 47, 51, 53–54, 180
 Farrugia, Adjunct Professor Albert, 20
 FEIBA, 55, 180
 finance, 114–166
 agency resource statement, 114, 188–189
 arrangements, 114–115
 performance, 116–119, 124–166

finance law compliance, 187
 financial statements, 124–166
 flexible work arrangements, 87, 100
 Fraser, Greg, 98, 172
 Fraud and Corruption Control Plan, 105
 fraud risk and control, iii, 105
 freedom of information, 187
Freedom of Information Act 1982 (FOI Act), 187
 fresh blood products, 16, 38, 39, 40, 41–47, 178
 see also plasma for fractionation; platelets; red blood cells (RBCs)
 full time staff, 174–176
 functions see roles and functions
 funding
 of NBA, 2, 17, 96, 114, 188–189
 Output Based Funding Model (OBFM) for Lifeblood, 46, 80, 81, 111, 118
 see also National Supply Plan and Budget (NSP&B)
 future, 4

G

gender of staff, 106, 174–175
 General Manager see Chief Executive
 governance, blood sector, 97
 governance, corporate see corporate governance
 governance, immunoglobulin (Ig) see Immunoglobulin (Ig) Governance Program
 grants, 187
 greenhouse gas emissions, 185–186
 Grifols Australia Pty Ltd, 7, 39, 50, 57, 122, 182, 183
Guideline for the prophylactic use of Rh D immunoglobulin in pregnancy care, 5, 73
 guidelines, 5, 17, 34, 38, 71, 72–73, 74

H

HAC (Haemovigilance Advisory Committee), 5, 22, 62, 65, 103
 Haematology Society of Australia and New Zealand, 69
 haemochromatosis, 93–94
 haemophilia, 3, 15, 51, 55, 56
 Haemophilia Foundation Australia, 5
 haemovigilance see National Haemovigilance Program
 Haemovigilance Advisory Committee (HAC), 5, 22, 62, 65, 103
 Harrison, James, 8
 Hartnett, Adam, 85
 health and safety, 84, 100, 110
 Health Ministers, 38, 82, 86, 97, 118
 Hemlibra, 3, 51, 55, 56–57, 60, 63, 179
 Hong Kong Red Cross Blood Transfusion Service, 34
 human resources management, 87–88, 106
 see also staff
 Hurstville donor centre, 83

I

ICT see information management and technology
ICT Disaster Recovery Plan (DRP), 26
ICT Strategy, 63, 90
Ig see immunoglobulin (Ig) products
Immulab, 57
immune thrombocytopenia (ITP), 59
Immunoglobulin (Ig) Governance Program, 3, 15, 38, 61, 76, 101
immunoglobulin (Ig) products
 Criteria for the Clinical Use of Immunoglobulin in Australia, 71, 77, 101
 governance of access to, 61
 governance of use of, 76–78
 imported, 17, 39, 50, 53
 intravenous immunoglobulin (IVIg), 59, 181–182
 knowledge resources, 78
 supply and demand, 36, 42, 47, 52–53, 76
imported immunoglobulin products, 17, 39, 50, 53
imported plasma-derived and recombinant blood products, 15, 39, 51–52
incidents, reportable, 84, 110
Indigenous staff, 106, 177
individual flexibility arrangements, 107
Influenza Vaccination Program, 110
information management and technology, 90–92
 Australian Bleeding Disorders Registry (ABDR), 5, 17, 38, 65, 102
 Blood Operations Centre (BOC), 67–68, 90, 92
 blood sector systems and system upgrades, 38, 63, 91
 BloodNet, 16, 17, 64, 65, 75
 BloodSTAR (Blood System for Tracking Authorisations and Reviews), 3, 61, 65
 cyber security, 26, 68, 91, 92
 data services, 60, 65–66, 75, 91
 driving performance improvements in the Australian blood sector, 63–68
 ICT Disaster Recovery Plan (DRP), 26
 ICT modernisation, 90–91
 ICT Strategy, 63, 90
 internal audit, 100
 laboratory information systems, interface with, 64
 MAGICapp, 71, 73
Information Publication Scheme (IPS), 187
internal audit and risk programs, 99–100, 120
intravenous immunoglobulin (IVIg), 59, 181–182
IPRP Deeds, 51–52

J

Jackson, Roslyn, 4, 98, 172
Jira (issue-tracking and project management software), 90, 91
judicial decisions, 104

K

key achievements in 2024–25, 15
 see also performance (NBA)
key performance indicators (KPIs) see performance (NBA)
knowledge development see education and training
KPMG, 25, 121

L

laboratory information systems (LISs), 64
labour hire, 87, 106
lanadelumab, 56
Learnhub, 109
learning and development see education and training
Lee, Dr CK, 34
legal actions, 104
letter of transmittal, iii
Lewinsky, Peter, 19, 98, 171, 173
Life Is the Reason marketing campaign, 27, 81
Lifeblood, 2, 7, 122
 blood donor panel, increase in, 3, 81–83
 Deed of Agreement, 15, 19, 40, 41, 46–47, 80, 81, 111
 engagement with, 20, 21, 41
 fresh blood products, 39, 44, 45–46, 178
 Life Is the Reason marketing campaign, 27
 Output Based Funding Model (OBFM), 46, 80, 81, 111, 118
 performance, 47
 plasma and recombinant products, 36, 48
 and special account, 24, 115
 therapeutic donations, 93–94
location of staff, 106, 174, 176

M

MAGICapp, 71, 73
management and accountability, 96–111
 corporate governance, 96–103
 external scrutiny, 104
 fraud risk and control, iii, 105
 our people, 106–110
management and use of blood and blood-related products and services see Strategy 3: Promote a best-practice model of the management and use of blood and blood-related products and services
market research, 184
marketing campaign, Life Is the Reason, 27, 81
McCauley, Kate, 14, 21, 108, 111
 see also Deputy Chief Executives
Medical Services Advisory Committee (MSAC), 15, 62
Metro North Hospital Health Service (QLD), 75
Microsoft products, 65, 89, 90–91
Minister for Health, Disability and Ageing, 11, 18, 97
Morange, Jean-Marc, 6
Moulds, Emeritus Professor Robert, 101

N

- NaFAA (National Fractionation Agreement for Australia), 3, 40, 48–49
- National Anti-Corruption Commission (NACC), 105
- National Antibody Register, 62
- National Blood Account, 115
- National Blood Agreement, 1, 2, 20, 62, 96
 - funding of NBA, 114, 118
 - outcome and program, 31, 189
 - policy objectives, 10–11, 33, 72
- national blood arrangements, review of, 20, 80
- National Blood Authority Act 2003* (NBA Act), iii, 10, 18, 96, 101, 114, 115
- National Blood Authority Board see NBA Board
- National Blood Authority Enterprise Agreement 2024–2027, 87, 100, 107
- National Blood Authority (NBA), 10–27
 - accountable authority, 11
 - achievements in 2024–25, 15
 - authority under the Act, 10
 - Board and report of Board's operations, 18–21
 - executive management team, 13–14
 - funding of, 2, 17, 96, 114, 188–189
 - organisational structure, 12
 - outcomes and programs, 10, 31, 33, 189
 - responsible Minister and portfolio, 11, 96
 - roles and functions, 10–11
 - snapshot of blood sector in 2024–25, 16–17
 - vision, 10
- National Blood Product Management Improvement Strategy 2018–24, 75–76
- national blood sector see blood sector
- National Blood Sector Research and Development Program, 70, 71, 78–79
- National Blood Supply Contingency Plan (NBSCP), 15, 24–25, 33, 36
- National Fractionation Agreement for Australia (NaFAA), 3, 40, 48–49
- National guidance for the management of red blood cell inventory* (RBC Inventory Guidance), 75
- National Haemovigilance Program, 5, 62, 65, 103
- National Immunoglobulin (Ig) Governance Advisory Committee (NIGAC), 5, 76, 77, 101
- National Immunoglobulin (Ig) Governance Program, 3, 15, 38, 61, 76, 101
- National Managed Fund (Blood and Blood Products) Special Account 2017, 24, 115
- National Patient Blood Management Implementation Strategy 2017–24, 72, 75, 102
- National Policy: Access to Government-Funded Immunoglobulin Products in Australia, 61
- National Product Price List (NPPL), 62
- National RBC Statement, 75
- National Safety and Quality Health Service (NSQHS) Standards, 74, 75
- National Supply Plan and Budget (NSP&B), 15, 19, 36, 38–39, 42–43, 65, 86, 118
- NBA see National Blood Authority (NBA)
- NBA Act, iii, 10, 18, 96, 101, 114, 115
- NBA Board, 4, 5, 18–21, 89, 97, 110
 - Chair, 4, 19
 - functions, 18
 - membership and member profiles, 19, 22, 168–171
 - report of operations, 19–21
- NBSCP (National Blood Supply Contingency Plan), 15, 24–25, 33, 36
- Net Zero in Government Operations Strategy, 185
- Net Zero 2030 reporting, APS, 185–186
- NIGAC (National Immunoglobulin Governance Advisory Committee), 5, 76, 77, 101
- non-ongoing staff, 174–177
- non-salary benefits, 109
- notifiable incidents, 84, 110
- Noutsos, Associate Professor Tina, 70
- Novo Nordisk Pharmaceuticals Pty Ltd, 39, 51, 52, 180, 181
- Noyen, Ben, 7, 14, 21, 108
 - see also Deputy Chief Executives
- NSP&B (National Supply Plan and Budget), 15, 19, 36, 38–39, 42–43, 65, 86, 118
- NSQHS standards, 74, 75

O

- objectives, 10–11, 31, 33
- O'Brien, Stacie, 69
- Octapharma Australia Pty Ltd, 39, 50, 182
- Office of the Australian Information Commissioner, 104, 187
- Ombudsman, 104
- onboarding, 90
- ongoing staff, 106, 174–177
- organisational culture, 20, 89–90
- organisational structure, 12
- Ortho-Clinical Diagnostics Australia Pty Ltd, 39, 57
- outcomes and programs, 10, 31, 33, 189
- outlook, 4
- Output Based Funding Model (OBFM) for Lifeblood, 46, 80, 81, 111, 118
- overview, 10–27

P

- Paragon Care Group Australia Pty Ltd, 39, 57
- parliamentary committees, 104
- part time staff, 106, 174–176
- Patient Blood Management Advisory Committee (PBMAC), 5, 22, 72, 102
- Patient blood management guideline for adults with critical bleeding*, 73, 74
- patient blood management (PBM), 71, 72

Patient Blood Management (PBM) Guidelines, 5, 34, 38, 71, 72–73, 74
 patient stories, 59, 93–94
 pay see remuneration and benefits
 PBMAC (Patient Blood Management Advisory Committee), 5, 22, 72, 102
 PBS (Portfolio Budget Statements), 10, 31, 33
 people see staff
 performance (blood sector) see Strategy 2: Drive performance improvement in the Australian blood sector
 performance (NBA), 30–94
 environmental, 184
 financial, 116–119, 124–166
 framework, 31–33
 key achievements in 2024–25, 15
 results against performance measures and KPIs, 36, 47, 48–49, 50, 51–52, 60, 71, 80, 84
 Strategy 1: Provide a safe, secure and affordable supply of blood and blood-related products and services, 35–59
 Strategy 2: Drive performance improvement in the Australian blood sector, 60–70
 Strategy 3: Promote a best-practice model of the management and use of blood and blood-related products and services, 71–79
 Strategy 4: Develop and provide policy advice to support a sustainable blood sector in Australia, 80–83
 Strategy 5: Be a high-performing organisation, 84–94
 summary, 33
 performance pay, 109
 performance statements see performance (NBA)
 Pfizer Australia Pty Ltd, 39, 51, 52, 179, 180
 PGPA Act, iii, 10, 24, 30, 31, 114, 115, 120, 121
 PGPA Rule, 31, 105
 Pharmaceutical Benefits Scheme, 56
 Pharmacy Guild of Australia, 110
 pilot utilisation reviews, 60, 62–63
 plasma-derived and recombinant blood products, 38, 40, 47–58
 clotting factor products, 3, 47, 51, 53–58, 179–180
 domestic plasma products, transition of, 15, 40–41, 48
 emicizumab (Hemlibra), 3, 51, 55, 56–57, 60, 63, 179
 immunoglobulin supply and demand, 36, 42, 47, 52–53, 76
 imported immunoglobulin products, 17, 39, 50, 53
 imported plasma-derived and recombinant blood products, 15, 39, 51–52
 intravenous immunoglobulin (IVIg), 59, 181–182
 management of National Fractionation Agreement (NaFAA), 48–49
 plasma collection, 45–46
 red cell diagnostic reagent products, 15, 16, 36, 39, 57–58
 supplied under contract in 2024–25, 179–183
 plasma for fractionation, 36, 42, 45–46, 48–49, 178
 Plasma Pathway, 82
 platelets, 17, 44–45, 59, 178
 policy development and advice to government, 80–82
 Portfolio Budget Statements (PBS), 10, 31, 33
 portfolio membership, 11, 96
 Power BI, 65–66, 91
 procurement see purchasing
 Procurement and Contract Management Framework, 120
 Procurement Community of Practice, 120
 product reviews, 60, 62–63
 product transitions, domestic plasma, 15, 40–41, 48
 professional and personal development, staff see education and training
 Program Review Committee, 100
 programs and outcomes, 10, 31, 33, 189
 Prothrombinex-VF, 40, 41, 48, 181
Public Governance, Performance and Accountability Act 2013 (PGPA Act), iii, 10, 24, 30, 31, 114, 115, 120, 121
Public Governance, Performance and Accountability Rule 2014 (PGPA Rule), 31, 105
 Public Interest Disclosure Scheme, 105
Public Service Act 1999 (PS Act), 10, 89, 106, 107, 114
 publications, 17, 62, 65, 71, 72–73, 75, 79
 purchasing, 120–123
 advertising and market research, 184
 blood and blood products purchased by product category, 39
 consultancy and non-consultancy contracts, 121–122
 contract management to secure blood supply, 3, 36, 37, 40
 contracts for supply of imported Ig products, 50
 Deed of Agreement between Australian Red Cross Society and Commonwealth of Australia, 15, 19, 40, 41, 46–47, 80, 81, 111
 internal audit, 100
 IPRP Deeds, 51–52
 National Fractionation Agreement for Australia (NaFAA), 3, 40, 48–49
 procurement initiatives to support small business, 123
 procurement training, 88
 red cell diagnostic reagent products, 57–58

Q

QuidelOrtho, 57

R

RBC Inventory Guidance, 75
RBCs (red blood cells), 15, 17, 36, 42, 43–44, 47, 65, 178
recombinant blood products *see* plasma-derived and recombinant blood products
recruitment, 87
red blood cells (RBCs), 15, 17, 36, 42, 43–44, 47, 65, 178
red cell diagnostic reagent products, 15, 16, 36, 39, 57–58
remuneration and benefits, 107–109
 Audit and Risk Committee (ARC) members, 172–173
 non-salary benefits, 109
 performance pay, 109
 Senior Executive Service (SES) staff, 107, 108
reportable incidents, 84, 110
research and development, 70, 71, 78–79
resource statement, 114, 188–189
responsible Minister and portfolio, 11, 96
retention of staff, 87
reviews and evaluations, 104
 APS Employee Census, 4, 20, 87, 89, 90, 100, 106
 fraud risk and control, 105
 national blood arrangements, 20, 80
 National Blood Sector Research and Development Program, 79
 National Blood Supply Contingency Plan (NBSCP), 24–25
 National Safety and Quality Health Service (NSQHS) Standards, 74
 product utilisation reviews, 60, 62–63
Rischbieth, Dr Amanda, 4, 19, 21
 profile, 168
 see also Chair of the NBA Board
risk management, iii, 24–26, 99–100, 105
Risk Management Policy, 24
Roche Products Pty Ltd, 39, 51, 52, 122, 179
roles and functions
 of NBA, 10–11
 of NBA Board, 18
 of NBA governance committees, 98–100
 of statutory committees, 101–103
Rowell, Dr John, 19, 21, 170
Ruth Sanger Oration, 22–23

S

salaries *see* remuneration and benefits
Sanofi-Aventis Australia Pty Ltd, 39, 51, 52, 179, 180
security, cyber, 26, 68, 91, 92
Senior Executive Service (SES) staff, 13–14
 employment arrangements, 107
 remuneration, 107, 108
sexual activity deferrals (plasma donation), 82

Shakespeare, Penny, 19, 21, 171
small business participation in procurement, 123
special accounts, 24, 115
sponsorship, Blood conference awards, 69–70
Spurrier, Professor Nicola, 19, 170
staff, 87–88, 106–110
 APS Employee Census, 4, 20, 87, 89, 90, 100, 106
 in Blood Operations Centre (BOC), 67
 employment arrangements and conditions, 87, 107
 engagement and communication, 4, 15, 20, 84, 87, 89
 numbers and workforce composition, 87, 106, 174–177
 professional and personal development, 84, 88, 106, 109
 recruitment, 87
 remuneration and benefits, 107–109
 retention and turnover, 87
 values, 106
 volunteer work, 85
 see also Chair of the NBA Board; Chief Executive; human resources management; Senior Executive Service (SES) staff
staff consultation and communication, 89, 100
Staff Participation Forum, 97, 100, 110
staff training *see* education and training
Standards, National Safety and Quality Health Service (NSQHS), 74, 75
State of the Service Report, 187
statutory committees, 101–103
 Australian Bleeding Disorders Registry (ABDR) Steering Committee, 5, 102
 Haemovigilance Advisory Committee (HAC), 5, 22, 62, 65, 103
 National Immunoglobulin (Ig) Governance Advisory Committee (NIGAC), 5, 76, 77, 101
 Patient Blood Management Advisory Committee (PBMAC), 5, 22, 72, 102
stories, patient, 59, 93–94
Strategy 1: Provide a safe, secure and affordable supply of blood and blood-related products and services, 35–59
 contract for Lifeblood services, 46–47
 contract management to secure supply, 40
 delivery of, 37
 fresh blood products, 41–47
 National Supply Plan and Budget (NSP&B), 38–39
 plasma-derived and recombinant products, 47–58
 results against performance measures and KPIs, 36, 47, 48–49, 50, 51–52
 transition of Australia's domestic plasma products, 40–41
Strategy 2: Drive performance improvement in the Australian blood sector, 60–70
 Blood conference awards sponsorship (case study), 69–70

The Blood Operations Centre – a lifeline for Australian healthcare professionals (case study), 67

delivery of, 61

governance of access to immunoglobulin, 61

horizon scanning, 63

information management and technology, 63–68

National Haemovigilance Program, 62

product reviews, 62–63

results against performance measures, 60

Strategy 3: Promote a best-practice model of the management and use of blood and blood-related products and services, 71–79

blood product management, 75–76

BloodSafe eLearning Australia, 73–74

delivery of, 72

governance of use of immunoglobulin, 76–78

National Safety and Quality Health Service (NSQHS) Standards, 74

promoting patient blood management, 72

research and development, 78–79

results against performance measures, 71

updating guidelines, 72–73

Strategy 4: Develop and provide policy advice to support a sustainable blood sector in Australia, 80–83

advice to government, 82

blood donor panel, increase in, 81–83

delivery of, 81

Hurstville donor centre (case study), 83

renewal of Lifeblood funding arrangements, 81

results against performance measures, 80

Strategy 5: Be a high-performing organisation, 84–94

Adam Hartnett – Giving back to the community (case study), 85

blood sector knowledge development, 92

culture, 89–90

delivery of, 86

information management and technology, 90–92

National Supply Plan and Budget agreed by governments, 86

results against performance measures, 84

supporting our people, 87–88

Street, Associate Professor Alison, 22–23, 103

structure, 12

studies assistance, 88

suppliers of blood and blood products, 2, 15, 50, 51, 57–58, 97

performance, 36, 39, 50, 51–52

products supplied under contract in 2024–25, 179–183

see also CSL Behring (Australia) Pty Ltd; Lifeblood

supply of and demand for blood and blood products, 1–4, 15, 24–25

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)

Survey of Australian Government Payments to Small Business, 123

sustainability, blood sector see Strategy 4: Develop and provide policy advice to support a sustainable blood sector in Australia

Systems of Government Significance (SoGS) program, 26

T

Takeda Pharmaceuticals Australia Pty Ltd, 39, 50, 51, 52, 122, 180, 182, 183

Team for Inclusive and Diverse Events (TIDE), 90

Therapeutic Goods Administration (TGA), 82, 97

Thrombosis and Haemostasis Society of Australia and New Zealand, 69

Towler, Dr Simon, 19

training see education and training

transmittal letter, iii

tribunal decisions, 104

turnover of staff, 87

U

United Nations Convention on the Rights of Persons with Disabilities, 187

United States Department of Defence, 92

University of Queensland, 81

utilisation reviews, 60, 62–63

V

values, 106

vision, 10

volunteer work, staff, 85

W

wages see remuneration and benefits

website (NBA), ii, 60, 65, 78, 90, 99

Wood, Professor Erica, 103

work health and safety, 84, 100, 110

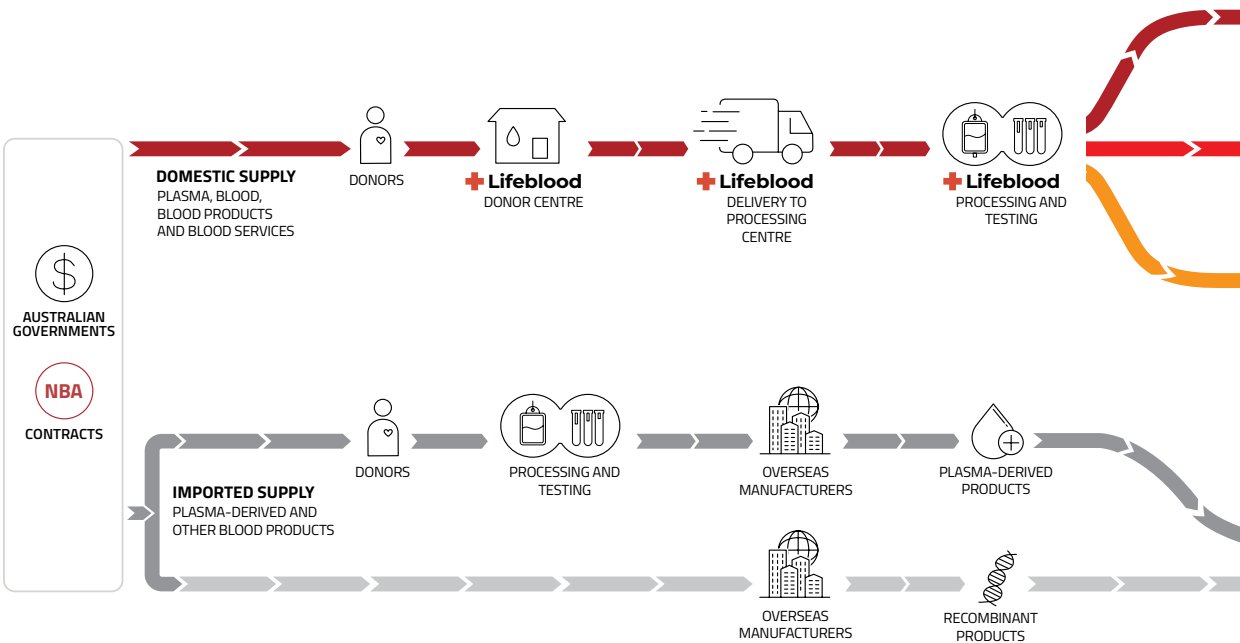
workforce statistics, 106, 174–177

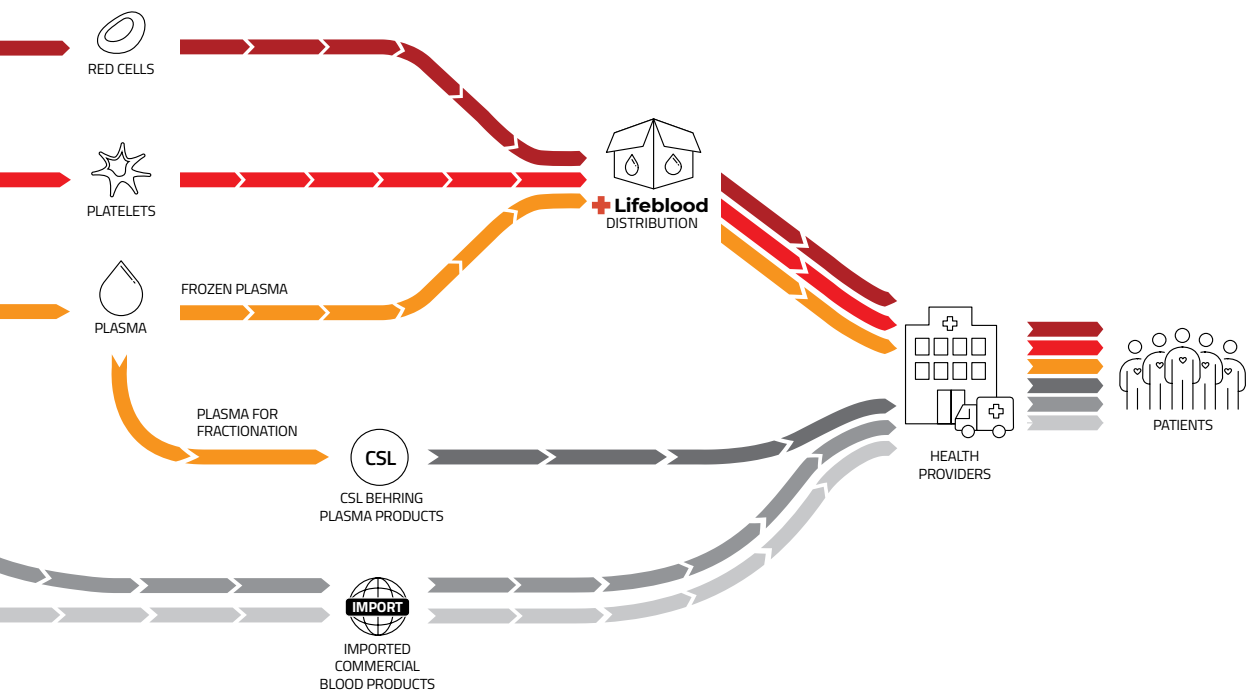
Working Hours and Arrangements Policy, 87, 100

Y

Young Investigator Award (Blood conference), 69

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