



NATIONAL
BLOOD
AUTHORITY
AUSTRALIA

ANNUAL
REPORT
2019–20



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TABLE 1.1 Aids to access details current report period (2019-20)

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Entity website (URL)	www.blood.gov.au

LETTER OF TRANSMITTAL



The Hon Greg Hunt MP
Minister for Health
Minister Assisting the Prime Minister for the Public Service and Cabinet
Parliament House Canberra ACT 2600

Dear Minister

I am pleased to present the 2019-20 Annual Report of the National Blood Authority (NBA) and the NBA Board.

This document has been prepared in accordance with sub-sections 44(1) and 44(2) of the *National Blood Authority Act 2003*, sections 63 and 70 of the *Public Service Act 1999*, and section 46 of the *Public Governance, Performance and Accountability Act 2013 (PGPA Act)*.

As the accountable authority of the NBA, I also present the 2019-20 annual performance statements of the NBA as required under paragraph 39(1)(a) of the *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*.

I certify that the requirements of the Department of Finance Resource Management Guide No. 135, Annual Reports for non-corporate Commonwealth entities, have been met.

I certify that 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 also certify that the NBA has taken all reasonable measures to appropriately deal with fraud.

Yours sincerely

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

John Cahill
Chief Executive

28 September 2020

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PART



1

PART 1

OVERVIEW

ORGANISATION AT A GLANCE

CHIEF EXECUTIVE REVIEW

NBA BOARD AND REPORT

ORGANISATION AT A GLANCE

Our Vision

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

Our role

The National Blood Authority (NBA) is a statutory agency within the Australian government health portfolio that manages and coordinates arrangements for the supply of blood and blood products and services on behalf of all Australian governments.

All Australian governments are parties to the National Blood Agreement. The primary objectives of the National Blood Agreement are to:

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

The NBA

- works with all Australian governments to determine the clinical requirements for blood and blood products and develop an annual supply plan and budget
- negotiates and manages national contracts with suppliers of blood and blood products to obtain the products needed
- assesses blood supply risk and develops commensurate contingency planning
- supports the work of all Australian governments to improve the way blood products are governed, managed and used – including developing and facilitating strategies and programs that will improve the safety, quality and effectiveness of blood usage, particularly in the areas of national standards, criteria, guidelines and data capture and analysis
- works collaboratively with key stakeholders to provide expert advice to support government policy development, including identification of emerging risks, developments, trends and new opportunities
- manages the evaluation of proposals for blood sector improvements, including proposals for new products, technologies and system changes
- provides secretariat support to the Jurisdictional Blood Committee (JBC).

Authority

The NBA was established by the *National Blood Authority Act 2003* (NBA Act) following the signing of the National Blood Agreement by all state and territory Health Ministers in November 2002. 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*, along with a responsibility to meet ministerial, parliamentary and financial reporting requirements.

Accountable Authority

Details of the NBA's Accountable Authority during the current report period (2019-20) appear in Table 1.2 below.

TABLE 1.2 **Details of Accountable Authority during the current report period (2019-20)**

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

Responsible Ministers and Portfolio

The NBA exists within the portfolio responsibilities of the Minister for Health. The NBA General Manager is the Chief Executive of the NBA and is a statutory officer responsible to the Commonwealth Minister for Health and the Council of Australian Governments (COAG) Health Council.

On 29 May 2020 the Prime Minister announced that the Council of Australian Governments (COAG) will cease and a new National Federation Reform Council (NFRC) will be formed, with a National Cabinet at the centre of the NFRC. More information is available on the Department of the Prime Minister and Cabinet website.

Our Outcome

Providing 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.

Funding

The National Blood Agreement provides for shared funding of NBA activities, with 63 per cent provided by the Commonwealth and the remaining 37 per cent provided by the state and territory governments. The funding covers both the national blood supply and the operations of the NBA.

During the last ten years, governments have provided funding of \$10,677.6 million for the supply of blood and blood products as summarised in Table 1.3. In 2019-20, the total amount provided was \$1,210.8 million. Governments provided funding of \$10.0 million in 2019-20 for the operation of the NBA.

TABLE 1.3 Government funding for the supply of blood and blood products, 2010-11 to 2019-20

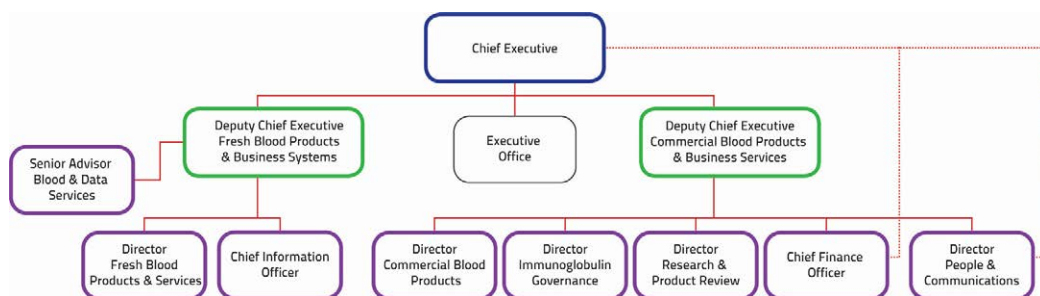
Year	Amount (\$M)	Growth (%)
2010-11	939.2	6.9
2011-12	1,015.6	8.1
2012-13	1,049.3	3.3
2013-14	1,095.9	4.4
2014-15	922.7	-15.8
2015-16	1,040.9	12.8
2016-17	1,046.3	0.5
2017-18	1,153.3	10.2
2018-19	1,203.6	4.4
2019-20	1,210.8	0.6
Total	10,677.6	3.0 (average)

Note: Figures balance to the Audited Financial Statements

Our Staff

As at 30 June 2020 the NBA had an average staffing level (full time equivalent) of 58.58 staff. At this date, it also employed 26 contract staff. The organisational structure at 30 June 2020 is shown at Figure 1.1.

FIGURE 1.1 NBA Organisation as at 30 June 2020



Location

The NBA is located in Canberra at 243 Northbourne Avenue, Lyneham, ACT.

Key Events in the NBA's History by Financial Year

2003	<ul style="list-style-type: none"> Established by the <i>National Blood Authority Act 2003</i> following the signing of the National Blood Agreement by all State and Territory Health Ministers in November 2002
2003-04	<ul style="list-style-type: none"> Commencement of national supply arrangements for imported intravenous immunoglobulin (IVIg) to ensure sufficiency of supply in all jurisdictions
2004-05	<ul style="list-style-type: none"> Commencement of an adequate supply of recombinant Factors VIII and IX to fully meet demand
2005-06	<ul style="list-style-type: none"> NBA executed a Deed of Agreement with the Australian Red Cross Society for the provision of fresh blood products and plasma for fractionation NBA won the Prime Minister's Silver Award for Excellence in Public Sector Management for procurement of recombinant (manufactured) products
2006-07	<ul style="list-style-type: none"> First edition of Criteria for the clinical use of IVIg in Australia was approved
2007-08	<ul style="list-style-type: none"> Launch of the National Blood Supply Contingency Plan (NBSCP) to provide clear governance for managing blood shortages Launch of the redeveloped Australian Bleeding Disorders Registry (ABDR) to better support planning and clinical management of people with bleeding disorders
2008-09	<ul style="list-style-type: none"> Establishment of the Australian National Haemovigilance Program to report on serious transfusion related adverse events NBA was awarded the Australian Government Comcover Award for Excellence in Risk Management for the NBSCP
2009-10	<ul style="list-style-type: none"> New CSL Australian Fractionation Agreement came into effect NBA won a United Nations Public Service Award in the Advancing Knowledge Management in Government category
2010-11	<ul style="list-style-type: none"> National rollout of BloodNet, an online web based blood ordering system Release of the first module (Critical Bleeding/Massive Transfusion) of the Patient Blood Management (PBM) Guidelines
2011-12	<ul style="list-style-type: none"> Release of PBM Guidelines Module 2 Perioperative and Module 3 Medical Second edition of the Criteria for the clinical use of Ig in Australia was published
2012-13	<ul style="list-style-type: none"> Release of PBM Guidelines Module 4 Critical Care Inaugural National Blood Symposiums conducted in Sydney, Melbourne and Adelaide
2013-14	<ul style="list-style-type: none"> National rollout of MyABDR Inaugural PBM Conference held in Perth Immunoglobulin governance program and National Immunoglobulin Governance Advisory Committee (NIGAC) established

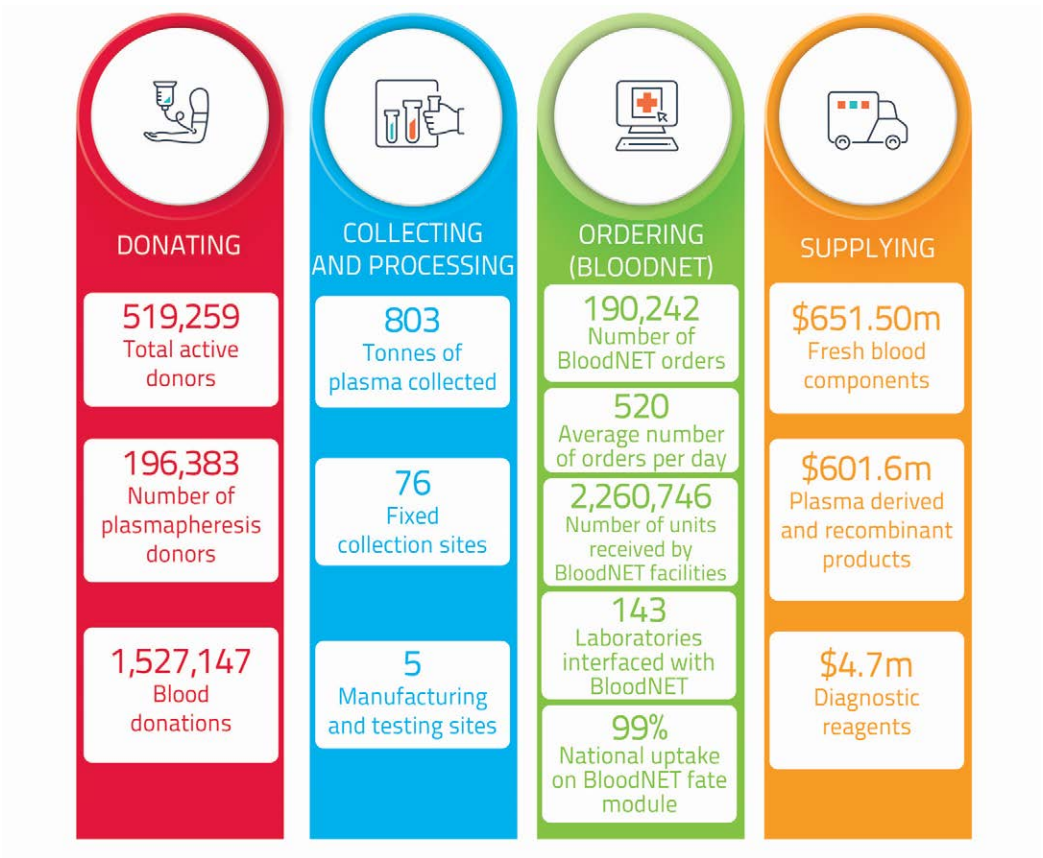
2014-15	<ul style="list-style-type: none"> ▪ NBA won ACT iAwards in three categories for innovation surrounding the development of BloodNet interfaces with health provider laboratory information systems ▪ National Blood Symposium held in Brisbane, including the presentation of the inaugural National Blood Awards for Excellence in the Management of Blood ▪ Release of PBM Guidelines Module 5 Obstetrics and Maternity
2015-16	<ul style="list-style-type: none"> ▪ A new Deed of Agreement was finalised with the Australian Red Cross Society for the provision of fresh blood products and plasma for fractionation supplied by the Australian Red Cross Blood Service ▪ Release of PBM Guidelines Module 6 Neonatal and Paediatrics ▪ Release of National Haemophilia Guidelines developed with the Australian Haemophilia Centre Directors' Organisation (AHCDO) ▪ National Blood Sector Research and Development Pilot commenced ▪ BloodSTAR launched for registration by hospitals and clinicians
2016-17	<ul style="list-style-type: none"> ▪ The Deed of Agreement with the Australian Red Cross Society for the provision of fresh blood products and plasma for fractionation supplied by the Australian Red Cross Blood Service implemented on 1 July 2016 ▪ BloodSTAR implemented in most states and territories ▪ Round 2 of the National Blood Sector Research and Development Pilot commenced ▪ Redevelopment of BloodNet commenced (BloodNet 5) ▪ Negotiations to replace CSL Australian Fractionation Agreement commenced
2017-18	<ul style="list-style-type: none"> ▪ National Fractionation Agreement for Australia (NaFAA) commenced on 1 January 2018 and continues until 31 December 2026 subject to a review in 2022 ▪ National Blood Sector Research and Development Program continued with two further funding rounds ▪ BloodSafe eLearning delivered more than 1 million courses and celebrated its ten year (10th) anniversary ▪ Consultation for potential future arrangements for imported plasma and recombinant products completed ▪ Limited interim arrangements for extended half-life clotting factor products ▪ Redevelopment of BloodNet completed with go-live on 1 July 2018
2018-19	<ul style="list-style-type: none"> ▪ Implementation of redeveloped BloodNet on 1 July 2018 ▪ National implementation of BloodSTAR completed in all states and territories with NSW going live in October 2018 ▪ Interim access arrangements for extended half-life clotting factor products continued ▪ Revised <i>Criteria for the clinical use of intravenous immunoglobulin in Australia</i> (the Criteria) implemented and available in BloodSTAR for users in all states and territories ▪ National Blood Sector Research and Development Program continued and round four grant funding commenced ▪ NBA organisation restructured and additional Deputy Chief Executive position filled

2019-20

- Conclusion of the tender process for the supply of standard half-life and extended half-life recombinant Factor VIII and Factor IX products
- Finalisation of the first Health Technology Assessment for Immunoglobulin for the treatment of acquired hypogammaglobulinaemia secondary to haematological malignancies or post-haemopoietic stem cell transplantation
- Review of the efficiency of Australian Red Cross Lifeblood
- Consideration and review of the Australian Red Cross Lifeblood Plasma Business Case proposal
- National Blood Sector Research and Development Program continued and round four grant funding awarded
- The emergence and implications of the COVID-19 pandemic on the responsibilities and operations of the NBA
- The NBA received three prestigious awards, including the Prime Minister's Silver Award for Excellence in Public Sector Management

Year at a Glance:

Snapshot of the blood sector in 2019-20



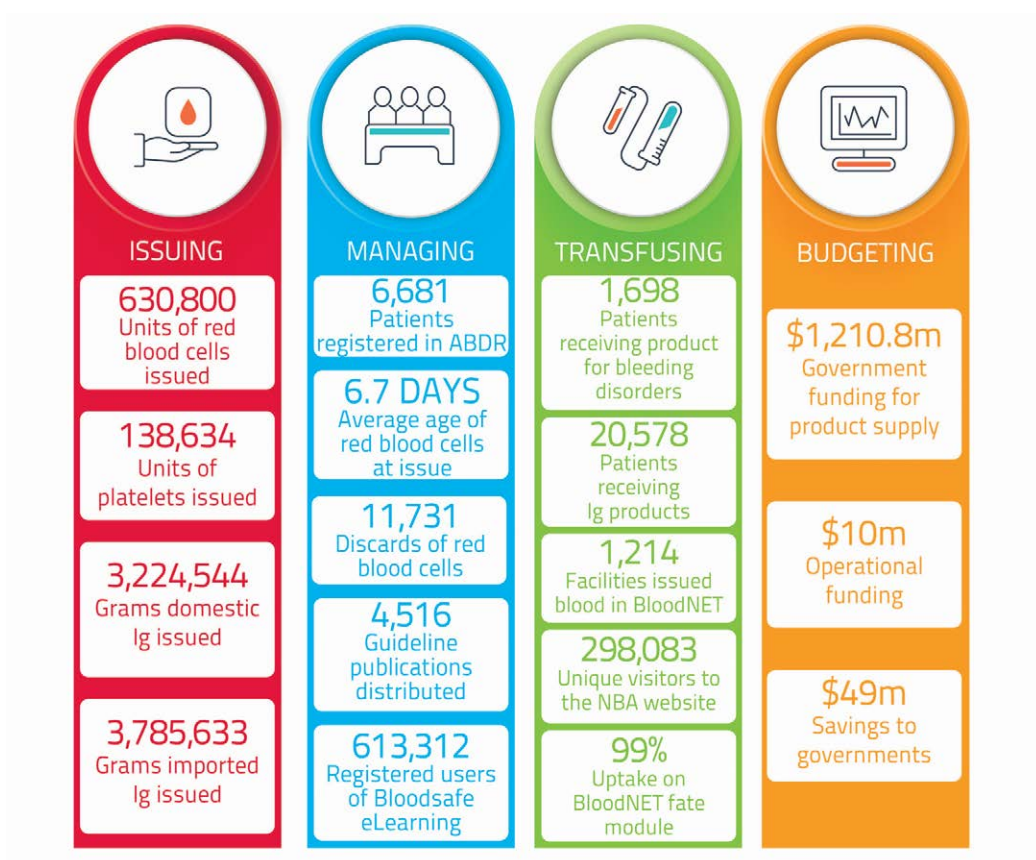
-----KEY ACHIEVEMENTS-----

DELIVERY OF UNINTERRUPTED SUPPLY TO MEET CLINICAL DEMAND AT A SAVING OF \$49 MILLION

CLOSE PARTNERSHIP WITH SUPPLIERS OF BLOOD AND BLOOD PRODUCTS TO MANAGE NATIONAL BLOOD ARRANGEMENTS DURING COVID-19 AND WITHOUT THE NEED TO ACTIVATE THE NATIONAL BLOOD SUPPLY CONTINGENCY PLAN

GROWTH OF IMMUNOGLOBULIN DEMAND REDUCED TO 6.7% IN 2019-20 COMPARED WITH LONG TERM ANNUAL GROWTH RATE OF AROUND 11%

REVIEW OF THE OPERATIONS OF THE AUSTRALIAN RED CROSS LIFEBLOOD



-----KEY ACHIEVEMENTS-----

RED BLOOD CELL WASTAGE AT 1.9%

NATIONAL BLOOD SECTOR RESEARCH AND DEVELOPMENT PROGRAM FUNDING FOR ROUND FOUR
AWARDED TO RESEARCHERS

TENDER CONCLUDED FOR STANDARD HALF-LIFE AND EXTENDED HALF-LIFE CLOTTING FACTOR PRODUCTS

PRIME MINISTER'S AWARD FOR EXCELLENCE

CHIEF EXECUTIVE REVIEW



The National Blood Authority (NBA) has had another very busy, challenging and rewarding year. We have continued to successfully manage the delivery of a safe, secure and affordable supply of blood, blood products and services for Australia.

The emergence of COVID-19 continues to challenge all of us personally, professionally and organisationally. The bushfires during the summer of 2019-20 also challenged aspects of our work and the continuity of the blood supply and, for many of us, also our personal and working lives. Like other organisations and their people, we have had to adapt to different ways of working and, in particular, how we can continue to engage most effectively with our very wide range of stakeholders, many of whom are understandably preoccupied with the immediacy of managing the health issues arising from COVID-19.

Our mission to save and improve the lives of all Australians remains unchanged. Our core business to manage the adequate safe, secure and affordable supply of blood and blood products remains our focus. We are continuously reviewing our contingency planning and working even more closely with the Australian Red Cross Lifeblood (Lifeblood) in relation to fresh blood and plasma supplies, with CSL Behring in relation to the fractionation of Australian plasma, and with our commercial suppliers in relation to imported products and associated supply chains.

Australia is currently in a good position for the availability of blood and blood products and we will continue to work hard to strengthen this position in the years ahead. This year, we have again worked closely with governments, patients, patient groups, clinicians, suppliers and others to achieve the best outcome possible within available funding for all Australians who need blood, blood products and services. Governments have spent almost \$1.3 billion to achieve this outcome this year.

The clinical demand for blood and blood related products in Australia was met without interruption. There has been no requirement to activate the National Blood Supply Contingency Plan despite the risks to supply chains and logistics arising from COVID-19 and bushfires.

The NBA delivered savings during 2019-20 of \$49.0 million against the annual budget approved and funded by all Australian governments. This brings the total amount of funding returned to governments over the last seven years to \$673.8 million.

Improvements in supply performance and efficiency under the long-term Deed of Agreement for products and services provided by Lifeblood once again achieved a financial surplus to be returned to governments in 2019-20. This year, the surplus was approximately \$31.7 million.

We have developed and rolled-out new and improved national systems to directly assist patients, clinicians and others to help manage and monitor health, supply and performance issues. We have accelerated the consideration of new blood products that have the potential to improve the health and quality of life for Australians with bleeding disorders. We have also continued with our work internally to improve the Agency's management systems, processes, governance and accountability arrangements.

There have been a number of other very important activities undertaken during 2019-20 that are highlighted in this Annual Report. In particular, the NBA has successfully concluded a tender process for the supply of standard half-life and extended half-life recombinant Factor VIII and Factor IX blood products. These products are critical for the treatment of Australian patients with bleeding disorders.

The outcome of this procurement gives Australian patients optimal access to products through nationally supplied and funded blood arrangements at very competitive prices. Australia imports these products through the NBA, as they are not made in Australia. The tender outcome is expected to deliver savings on product costs in the order of \$155.8 million across five years, while continuing to ensure a safe and secure supply of these important treatments in Australia. The new arrangements commence on 1 July 2020 for a period of up to five years.

The safe, secure and affordable supply of blood and blood products in Australia is influenced by both the domestic and international context, including global developments and issues. The NBA has therefore maintained active international engagement activities since its inception in 2003 and also maintains active horizon scanning across the blood sector. These activities reflect the importance of understanding and influencing global issues, understanding commercial networks and markets in the blood sector, building and maintaining networks and intelligence across the sector, setting and influencing strategic directions where we can, and obtaining the best possible prices and contracts for products on behalf of governments. The engagement includes participation in both domestic and international bilateral and multi-lateral meetings, discussions, conferences and other forums involving patients, patient groups, clinicians, suppliers, governments and others.

While our engagement in these forums has been curtailed during 2019-20 due to travel restrictions arising from COVID-19, the information and intelligence the NBA gathers from participating in a global market for the supply of blood products remains vitally important. This is even more so during current challenging times, and the NBA has therefore continued to maintain a close watch of relevant issues and worked even more closely with our partners, stakeholders and suppliers to ensure Australia remains in a strong and secure position.

The NBA completed a significant project during 2019-20, with a major review of the efficiency of Lifeblood being finalised. The NBA engaged Pricewaterhouse Coopers Consulting (Australia) Pty Ltd (PwC) to assist with this review. PwC consulted with key stakeholders and considered a number of factors to objectively assess Lifeblood's efficiency, noting it is a sole supplier of fresh blood and plasma in Australia. This included the efficiency of Lifeblood's end to end supply chain; comparisons with similar commercial manufacturing and processing operations; interconnected factors that governments could consider in making decisions on the future path for domestic plasma supply; and opportunities for improvements and efficiencies. Overall, the review found that Lifeblood is efficient and delivering value for money to governments. This is a great credit to Lifeblood as well as to the very effective partnership between Lifeblood and the NBA.

The findings of the review will also inform future decisions to be made by governments regarding the implementation of policy objectives, including domestic plasma collection levels and the potential for Lifeblood to increase plasma supply. This is even more important in the context of potential domestic sovereignty issues arising from COVID-19, supply security more generally, and budgets going forward. The NBA and governments will finalise consideration of domestic plasma collection levels in 2020-21.

The NBA has ensured uninterrupted supply of immunoglobulin (Ig) products in Australia since 2004. The continuous and increasing demand for Ig has presented challenges for secure supply and affordability. These challenges have been met through the National Immunoglobulin Governance Program, supported by the national implementation of the NBA's BloodSTAR system, which provides the sole channel for clinicians to seek authorisation for access to Ig products, and the revised Criteria for the clinical use of intravenous immunoglobulin in Australia (Version 3 of the Criteria).

The program is the first of its kind in the world, bringing together a number of disparate processes with new approaches to improve the use of high cost Ig products made from blood plasma.

I am very pleased to note that the National Blood Authority received three prestigious awards in recognition of the work of the National Immunoglobulin Governance Program, including the Prime Minister's 2019 Silver Award for Public Sector Excellence. These awards acknowledge the work of NBA staff in collaboration with a diverse group of stakeholders to develop improved arrangements for the appropriate use of this precious and costly blood product.

The NBA Advisory Board was regularly updated by the NBA during 2019-20 on progress against strategic and operational plans, and the Board provided advice and guidance to inform the development of future programs and plans. In August 2019 Lifeblood hosted the Joint Board Meeting between the two organisations at its headquarters in Melbourne. This annual joint meeting provides for valuable strategic and informative discussions at Board level that support the work of the individual organisations and strengthens the partnership and relationship enormously. Members of the NBA Board, with officers from the Department of Health and the NBA, also visited the substantial Lifeblood Processing Centre in Melbourne as well as the CSL Behring Australia Base Fractionation Facility at Broadmeadows.

Ms Roslyn Jackson was appointed as the Chair of the NBA Audit and Risk Committee (ARC) in September 2019 following the resignation of Mr Ken Barker from the committee. Ms Jackson has been a member of the committee since September 2017. The NBA farewellled and thanked Mr Barker for his valued input as Chair of the ARC and his many years of collaboration with the NBA. Mr Barker was appointed to the NBA Interim Board in 2003 and served as a full Board member until 2013. He has been a member of the ARC since its inception in 2003, which included three terms as Chair.

The NBA's research and development grants program continued with Round 4 funding finalised that provided grants in early 2019-20 to address evidence gaps in patient blood management and funding for research relating to Immunoglobulin issues. The NBA R&D program will continue, with the assessment of Round 5 grant applications being finalised towards the end of 2020, and decisions to be made in the first part of 2021. New and growing work is also emerging with the NBA's increased involvement with health technology assessments and processes for new products and reviewing the utilisation of existing products.

In November 2019, the Medical Services Advisory Committee (MSAC) considered an application relating to the supply of replacement Ig for the treatment of acquired hypogammaglobulinaemia secondary to haematological malignancies or post-haemopoietic stem cell transplantation. This is the first of the Ig medical conditions to have had this assessment process completed. Through a public summary document, MSAC advised that no immediate changes were required to the eligibility criteria, but that there should be more research to determine the specific patient groups and best-practice Ig use for greatest benefit. The NBA will consider the MSAC's recommendations from this and subsequent reviews, as well as performing a review of international eligibility criteria to inform future Ig Criteria updates.

The NBA made significant progress in the review of the national guidelines for the use of Anti-D immunoglobulin, in continuing the complex review and update of the suite of Patient Blood Management (PBM) Guidelines, and in continuing the PBM implementation and wastage reduction programs. The NBA is exploring increased international collaboration with its world leading PBM arrangements. Governments continued funding of \$1 million annually in 2019-20 for the BloodSAFE eLearning Australia (BEA) program to continue relevant clinical education. BEA received 59,935 new user registrations in 2019-20 and, by June 2020, it had 599,226 learners registered who had completed 1,350,501 courses. This equates to more than 2.1 million hours of education with courses provided without charge to participants and a suite of short videos being available to participants.

The NBA continued to make critical contributions to the revision of the National Quality and Safety Health Service Standards, including by ensuring the continuation of the Blood Management Standard, and with the development of supporting materials for implementation. There has also been substantial work to refresh the Haemovigilance Advisory Committee and its important work in supporting the national haemovigilance program, including the collection, analysis and publication of national haemovigilance data.

Maintaining effective relationships and communication with all stakeholders and interests is a vital part of the NBA's work and a key challenge for a small Agency in the time and effort required to achieve proper engagement. This became more challenging in the second part of 2019-20 but we continued to meet virtually and share information with patient and clinical representative groups and individuals, with supplier partners and prospective suppliers, with professional bodies and many others.

I would like to once again recognise the very substantial contributions that many of our stakeholders across the blood sector make through generously giving their time, expertise, professionalism and passion to work on some very important issues with the NBA during the year. We look forward to working with you again in 2020-21.

I would also like to thank my executive management group for their ongoing support, commitment and dedication, and also thank the NBA Advisory Board for the very strong support and advice it has provided throughout the year. I want to conclude by giving a very special thank you to all of the staff of the NBA who have had to really step-up to continue to seamlessly deliver the national blood arrangements at such a high standard in the face of such enormous challenges to Australia during 2019-20. It has been a great pleasure to lead the organisation with such strength, commitment and professionalism behind me during this period.



John Cahill
Chief Executive

THE NBA ADVISORY BOARD

On 20 August 2019 the NBA Advisory Board convened in Melbourne for its 72nd meeting and the annual joint meeting with the Board of Australian Red Cross Lifeblood.

Lifeblood hosted the 2019 Joint Board Meeting at its headquarters in Melbourne. The annual Joint Board Meeting provides for valuable strategic and informative discussions at Board level that support the work of the individual organisations.



L to R: Mr John Cahill Chief Executive NBA, Professor Lyn Beazley AO NBA Board, Ms Shelly Park Chief Executive Lifeblood, Mr Geoffrey Bartle NBA Board, Ms Lyndal Moore Lifeblood Board, Mr Jim Birch AM Chair Lifeblood Board, Ms Jenni Mack AM Lifeblood Board, Adjunct Professor Chris Brook NBA Board, Dr Amanda Rischbeith Chair NBA Board, Mr Paul Bedbrook PSM NBA Board, Associate Professor Alison Street AO NBA Board, Ms Penny Shakespeare NBA Board, Dr Lance Emerson Lifeblood Board.

Lifeblood and CSL Behring facility tours

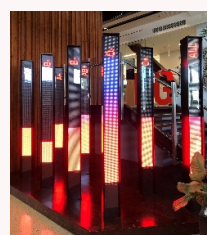
On 21 August 2019 members of the NBA Board, with officers from the Commonwealth Department of Health and the NBA, visited the Lifeblood Processing Centre and the CSL Behring Australia Base Fractionation Facility at Broadmeadows. The CSL Behring facilities are currently used to manufacture the broad range of domestic plasma products contracted for supply under the National Fractionation Agreement for Australia. The group also saw new facilities, including some under construction, which will be used in the future to manufacture Australia's domestic plasma products.

The group also visited Lifeblood's West Melbourne state-of-the-art blood processing and distribution facility. The processing centre includes research laboratories, warehousing of materials for donor centres, donor medical support services offices and the Victorian Transplantation and Immunogenetics Services, which provides testing to facilitate organ transplantation.

Each day up to 1,500 units of blood from collection centres in Victoria, South Australia and Tasmania are processed and tested before life-saving blood products are distributed around Australia.



L to R: Mr Stone NBA, Ms O'Connor NBA, Mr Behm Department of Health, Ms Arthurson NBA, Associate Professor Alison Street AO NBA Board, Mr John Cahill Chief Executive NBA, Mr Brown Lifeblood, Ms Quinn NBA, Ms Haycraft Department of Health, Mr Goeldner NBA, Mr Geoffrey Bartle NBA Board, Dr Amanda Rischbeith Chair NBA Board, Mr Richards Lifeblood and Professor Lyn Beazley AO NBA Board.



NBA BOARD AND REPORT

Established under the NBA Act, the NBA Board provides advice to the Chief Executive about the performance of the NBA's functions. The NBA Board is not a decision making body and has no formal or direct role in the governance or management of the NBA.

The NBA Board considers key strategic issues facing the NBA and provides advice to the NBA Chief Executive.

The NBA also liaises with stakeholders to strengthen relationships, promote the role of the NBA and contribute to the development of the organisation in a manner that furthers stakeholders' requirements.

The NBA Board members are appointed by the Australian Government Minister for Health, following nominations through the intergovernmental framework.

The Board's functions are as follows:

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

Board Membership

- Dr Amanda Rischbieth – Chair from March 2019
- Mr Geoffrey Bartle – Community Representative
- Professor Lyn Beazley AO – State and Territory Representative (Small Jurisdiction)
- Mr Paul Bedbrook – Financial Expert
- Professor Chris Brook PSM – State and Territory Representative (Large Jurisdiction)
- Ms Penny Shakespeare – Australian Government Representative
- Associate Professor Alison Street AO – Public Health Expert.

Year in Review

The NBA Board met four times during 2019-20 and considered a number of significant issues and reports relating to the blood sector and the work of the NBA generally. The Board was able to provide advice to the Chief Executive and NBA across a range of priority areas, including but not limited to:

- the emergence and implications of the COVID-19 pandemic on the operations of the NBA
- the dynamics of plasma and immunoglobulin demand and supply
- the review of the efficiency of Australian Red Cross Lifeblood
- the Lifeblood plasma business case proposal
- subcutaneous immunoglobulin issues
- convalescent plasma donated by recovering COVID-19 patients for use in potential development of hyperimmune therapies and treatments for COVID-19 in Australia

- the Immunoglobulin (Ig) Governance Program, revised Ig access criteria, and performance improvement activities
- management of expiring contracts for imported Ig
- haemovigilance activities
- clotting factor procurement
- consideration of new products under the national blood arrangements
- product utilisation reviews
- Patient Blood Management guidelines
- stakeholder engagement.

The Board received reports from the NBA on progress against strategic and operational plans and provided advice and input to develop future plans, strategies, actions, budgets and organisational arrangements. This work included consideration and input into the:

- National Supply Plan and Budget for 2019-20
- National Blood Supply Contingency Plan
- Business Continuity Management Policy
- Research and Development program
- NBA Corporate Plan and Business Plan, future strategic priorities and budget matters
- critical importance of the NBA's continuing international engagement.

The Board's engagement with stakeholders during 2019-20 included receiving a valuable presentation from CSL Behring on its activities and operations, in addition to high level presentations from key scientific experts from the NBA's advisory committee leads and others.

The regular joint meeting between the Boards of the NBA and Lifeblood was held in August 2019 in Melbourne and discussed the following issues of mutual interest:

- the Australian Red Cross Blood Service brand transformation to Australian Red Cross Lifeblood (Lifeblood)
- the Lifeblood efficiency review
- the Lifeblood plasma business case.

The Board was pleased to have an opportunity to visit the Lifeblood and CSL Behring's Processing Centres in Melbourne.

The Board was also pleased to have an opportunity to visit the Lifeblood pilot plasma collection centre in Canberra. This is a new centre and is one of two pilot facilities funded by governments, with the other being located in Townsville.



Lifeblood's Adelaide Office Opening – L to R: Professor Chris Baggoley, AO, Ms Shelly Park, CEO Lifeblood, Dr Amanda Rischbieth, NBA Board Chair, Ms Sue Ireland, SA Health.

On 30 January 2020, Lifeblood officially opened its new Adelaide Office at 30 Currie St, Adelaide. As NBA Board Chair, I attended and spoke to acknowledge and thank key stakeholders for their part in the project going live. The city office accommodates the National Contact Centre (NCC) and represents the first time NCC staff have been physically under the same roof with other Lifeblood teams.

On the same day, Lifeblood also formally opened its Adelaide Customer Service Delivery Centre at Hindmarsh, a purpose built standalone distribution hub which has become the home of Lifeblood Milk.

2020-21 Priorities

The NBA's core focus is to ensure the safe, secure, adequate and affordable supply of blood and blood products and services in Australia. The NBA has done this extremely well since its inception, and the focus of the Board is to therefore continue to support and advise the NBA in achieving this in the most appropriate and effective way.

There are a number of material 'headwinds' emerging in the blood sector during 2020-21 and the Board expects to provide input across a range of important issues relating to the NBA's work program, including:

- implications of COVID-19 on NBA operations
- progressing the major review of Lifeblood and the consideration of any issues arising from this
- the consideration of domestic plasma collection arrangements, the evolving global dynamics affecting Ig supply and demand, and issues relating to the NBA's contracts for imported Ig and associated procurement arrangements
- national supply and funding issues
- national risk assessment and management
- Ig governance performance improvement
- the continuing development and revision of national guidelines
- patient blood management, including the potential for international collaboration
- national supply efficiency and continued efforts to achieve reduced wastage of blood and blood products
- the funding and implementation of systems to support the work of the NBA and performance improvement in the blood sector
- research and development issues
- issues relating to the availability and supply of new products
- corporate governance and management
- NBA management and leadership development.

In closing, I would like to acknowledge and thank my fellow Board members for their invaluable contributions on all matters considered throughout the year. The Board looks forward to working with the NBA to continue to add value to the important work of the NBA in the year ahead and in providing support and advice to the Chief Executive and the NBA team as required.



NBA Board Members at 30 June 2020 (L to R) Mr Geoffrey Bartle, Ms Penny Shakespeare, Dr Amanda Rischbieth (Chair), Mr Paul Bedbrook, Professor Chris Brook PSM, Professor Lyn Beazley AO and Associate Professor Alison Street AO.

Finally, and most importantly, on behalf of the Board, I wish to acknowledge the extraordinary work of all the NBA staff in successfully delivering the Authority's program in 2019-20. I commend them for their professionalism and collegiality and their expertise, service and excellence.

Amanda Rischbieth

Chair

National Blood Authority Board

ACKNOWLEDGEMENTS

The NBA is grateful for the valuable and continuing support of the clinical, scientific and consumer community.

The NBA would also like to acknowledge the support it receives from the many colleges, societies and individuals who contribute to the publications, resources and tools produced by the NBA.

There are many stakeholders involved in the blood sector who provide expert advice to the NBA, which assists us to meet the objectives of the national blood arrangements.



Thank You!

Thank you to all of our advisors for your commitment and dedication throughout the year, including:

- ❖ Patient Blood Management Guidelines Clinical Consumer Reference Groups and Expert Reference Group
- ❖ Rh D Immunoglobulin (Anti-D) Guideline Expert Reference Group
- ❖ National Immunoglobulin Governance Advisory Committee and the Specialist Working Groups for Immunology, Haematology, Neurology and Transplantation Medicine
- ❖ Australian Bleeding Disorders Registry Steering Committee
- ❖ Blood Sector Systems User Reference Groups
- ❖ Australian Haemophilia Centre Directors' Organisation
- ❖ Patient Blood Management Advisory Committee
- ❖ Haemovigilance Advisory Committee
- ❖ BloodNet User Reference Group
- ❖ National Immunoglobulin Interest Group
- ❖ Complex Patient Advisory Group
- ❖ Patient Blood Management Guidelines Jurisdictional Blood Committee Working Group
- ❖ National Blood Authority Audit and Risk Committee
- ❖ Stakeholders involved in the development of educational material to support Immunoglobulin governance activities
- ❖ National Blood Sector Research and Development Expert Panel.



PART

2

ANNUAL PERFORMANCE

ANNUAL PERFORMANCE REPORTING STATEMENT

PERFORMANCE RESULTS

OBJECTIVE 1. SECURE THE SUPPLY OF BLOOD AND BLOOD PRODUCTS

OBJECTIVE 2. IMPROVE RISK MANAGEMENT AND BLOOD SECTOR PERFORMANCE

OBJECTIVE 3. PROMOTE THE SAFE AND EFFICIENT USE OF BLOOD AND
BLOOD PRODUCTS

ANNUAL PERFORMANCE REPORTING STATEMENT

In 2019-20 the National Blood Authority performance reporting format reflects the annual performance statement structure (Resource Management Guide No. 135 Annual Reports for non-corporate Commonwealth entities).

Accountable Authority statement

I, as the accountable authority of the National Blood Authority, present the 2019-20 Annual Performance Statements of the National Blood Authority, as required under paragraph 39(1)(a) of the *Public Governance, Performance and Accountability Act 2013* (PGPA Act). In my opinion, these annual performance statements are based on properly maintained records, accurately reflect the performance of the entity, and comply with subsection 39(2) of the PGPA Act.

John Cahill
Chief Executive
National Blood Authority

Introductory statement

The enhanced Commonwealth performance framework¹, established under the *Public Governance, Performance and Accountability Act 2013*, requires a Commonwealth entity such as the National Blood Authority (NBA) to include an annual performance statement in its annual report.

The purpose of the annual performance statement, as a key element of the enhanced Commonwealth performance framework, is to explain the extent to which the agency has achieved its objectives in the relevant year, against the measures for assessing performance set out in both the entity's Corporate Plan and its Portfolio Budget Statement.

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

The role of the National Blood Authority is to:

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

The National Blood Authority represents the interests of the Australian and State and Territory governments, and is established within the Australian Government's Health portfolio.

In 2019-20 the National Blood Authority aligned the performance criteria published in the National Blood Authority's Corporate Plan and Portfolio Budget Statement. The annual performance statements in this annual report are mapped to the Corporate Plan and the Portfolio Budget Statement by way of a reference at the end of each performance criteria.

¹ The enhanced Commonwealth performance framework, as relevant for the NBA, is set out in Part 2-3 of the *Public Governance, Performance and Accountability Act 2013* and Part 2-3 of the *Public Governance, Performance and Accountability Rule 2014*, together with the following Resource Management Guides: RMG No. 130 Enhanced Commonwealth performance framework, RMG No. 131 Developing good performance information, RMG No. 132 Corporate plans for Commonwealth entities, RMG No. 134 Annual Performance Statements for Commonwealth entities RMG No. 135 Annual Reports for non-corporate Commonwealth entities and RMG No. 136 Annual reports for Commonwealth entities (<http://www.finance.gov.au/resource-management/performance/>).

CHAIRING THE NBA AUDIT AND RISK COMMITTEE

Welcome to Ms Roslyn Jackson



Ms Roslyn Jackson

Ms Jackson was appointed as the chair of the Audit and Risk Committee (ARC) in September 2019 following the resignation of Mr Barker from the committee. Ms Jackson has been a member of the committee since September 2017.

Ms Jackson brings more than 30 years' experience as a Chartered Accountant working in both public practice and in 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 a number of not-for-profit companies, primarily in the health sector and is currently Deputy Chair of Capital Health Network (CHN), the Primary Health Network for the ACT and Director of the Australian Nursing and Midwifery Accreditation Council (ANMAC).

We welcome Ms Jackson to the chair of the ARC.

Farewell to Mr Ken Barker

The Chief Executive, on behalf of the NBA, farewelled and thanked Mr Barker for his valued input as Chair of the ARC and his many years of collaboration with the NBA. This is demonstrated through the important contributions Mr Barker made to the work of this committee that shaped the current Australian blood sector, including:

- the Stephen Review of the Australian Blood Banking and Plasma Product Sector;
- the establishment of the Australian Red Cross Blood Service and the NBA;
- provision of national indemnity arrangements for blood and blood products; and
- the 2008 KPMG business study of the Blood Service.

Mr Barker was appointed to the NBA Interim Board in 2003 and served as full Board member until 2013. He has been a member of the ARC since its inception in 2003 which included three terms as chair.



Mr John Cahill, Mr Ken Barker

PERFORMANCE RESULTS

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

The NBA worked with state and territory governments and suppliers so that requirements for day-to-day product supply and future demand were well managed. Supply of blood and blood products has been uninterrupted with no periods of shortage.

TABLE 2.1 Performance Criteria Qualitative Deliverable - provide a safe, secure and affordable supply of blood and blood related products and services

Qualitative Deliverable	2019-20 Reference Point or Target	2019-20 Results Against Performance Criteria
A safe, secure and affordable supply will be delivered through a national, collaborative approach to blood and blood product management. The NBA will work with jurisdictions and key stakeholders	Determine the clinical requirements for blood and blood products	The NBA collaborated with blood sector stakeholders to secure and supply blood and blood products in 2019-20.
	Develop and manage a national supply plan and budget	The National Supply Plan and Budget (NSP&B) was endorsed by all Health Ministers through the COAG Health Council.
	Assess blood supply risk and develop and manage blood supply contingency plans	In 2019-20 the NBA reviewed the arrangements under the National Blood Supply Contingency Plan (NBSCP) endorsed by JBC in 2017-18. The review highlighted the need to develop and design a test plan or program including simulation exercises, to further strengthen the NBSCP. This work will be continued in 2020-21.
	Negotiate and manage national contracts with suppliers of blood and blood products	In 2019-20 the NBA managed 15 blood and blood product supply contracts and arrangements. The NBA successfully conducted a tender process for the supply of standard half-life and extended half-life recombinant Factor VIII and Factor IX products to commence on 1 July 2020.
	Blood products are available to meet clinical need	Blood and blood products were available to meet clinical demand.
	No event or crisis occurred that has activated the National Blood Supply Contingency Plan	There were no contingency events during the reporting period that required the National Blood Supply Contingency Plan to be activated, including arising from COVID-19.

Qualitative Deliverable	2019-20 Reference Point or Target	2019-20 Results Against Performance Criteria
		The NBA together with key stakeholders closely monitored the supply of blood and blood products in Australia and mitigated risk issues in response to COVID-19.
	Collection and production yield for domestic immunoglobulin maximised	Lifeblood met the targets for the collection of plasma for fractionation at 803 tonnes. CSL Behring produced 3,282.7 kgs of domestic immunoglobulin during 2019-20.
	Improvements in the hospital-based SCIg program are implemented	The NBA supported BloodSTAR and multiple enhancements, including the implementation of SCIg dosing functionality, with systems releases implemented in October 2019 and March 2020.

Performance Criteria Source: Portfolio Budget Statements, p.318-319 NBA Corporate Plan 2019-20 to 2022-23, p.16-17

TABLE 2.2 Performance Criteria Quantitative Deliverable - provide a safe, secure and affordable supply of blood and blood related products and services

Quantitative Indicator	2018-19 Actual	2019-20 Budget Target	2020-21 Forward Year 1	2021-22 Forward Year 2	2022-23 Forward Year 3	2019-20 Results Against Performance Criteria
Discards as a percentage of net issues of red blood cells is minimised	1.9%	<2.5%	<2.5%	<2.5%	<2.5%	Discards as a percentage of net issues of red blood cells was 1.9%
Variance between actual and estimated demand for the supply of blood and products	<3.3%	<5%	<5%	<5%	<5%	Variance between actual and budget is kept to a minimum both in monetary and product volumes. Actual results were \$49.0 million or 3.8% below the National Supply Plan and Budget

Performance Criteria Source: Portfolio Budget Statements, p.318-319 NBA Corporate Plan 2019-20 to 2022-23, p.16-17

2. Drive performance improvement in the Australian blood sector

In 2019-20 the NBA undertook a number of initiatives to assess and improve the efficiency and effectiveness of the blood supply network.

In particular, the NBA completed a substantial review of the efficiency of the operations of the Australian Red Cross Lifeblood. The Review was finalised with consideration by governments in September 2019. The Review concluded that Lifeblood is efficient and delivering value for money for governments.

The NBA is continuing to progress consideration of inter-related issues of performance improvement and sustainable and secure supply issues in relation to the collection of domestic plasma. This consideration has become even more important with the emergence of COVID-19. This work will be completed in early 2020-21.

TABLE 2.3 Performance Criteria Qualitative Deliverable - drive performance improvement in the Australian blood sector

Qualitative Deliverable	2019-20 Reference Point	2019-20 Results Against Performance Criteria
An efficient and sustainable supply will be delivered by improving the way blood and blood products are governed, managed and used	National data capture and analysis to improve performance reporting and benchmarking	In 2019-20 the NBA published two National Reports on the Issue and Usage of Immunoglobulin for 2016-17 and 2017-18 data. The NBA also published a selected set of immunoglobulin usage data on a regular basis on the website.
	Developing and enhancing blood sector ICT systems and tools	The NBA continued to support the blood sector ICT systems, with a number of system and functional enhancements delivered in October 2019 and March 2020.
	Immunoglobulin and clotting factor usage performance data are published each year	The NBA worked with jurisdictions, expert groups and stakeholders in 2019-20 to identify and establish performance indicators and reporting.
	Haemovigilance reports are published when data is complete and validated	The NBA worked with jurisdictions in 2019-20 to develop the 2016-17 and 2017-18 Haemovigilance reports for publication on the NBA website in July 2020.
National performance reporting and benchmarking across the Australian blood sector	Published performance reporting and benchmarking information available for the blood sector community	Monthly wastage comparator benchmarks published with jurisdictions. Annual performance scorecards provided as part of annual reporting.

Performance Criteria Source: Portfolio Budget Statements, p.318-319 NBA Corporate Plan 2019-20 to 2022-23, p.18-19

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

In 2019-20 the NBA continued to research and investigate different methodologies for updating clinical practice guidelines to identify a more sustainable methodology for reviewing and updating the Patient Blood Management (PBM) Guidelines.

The NBA continued to implement the National Patient Blood Management Implementation Strategy 2017-21 and review the current tools and resources.

In 2019-20 the NBA continued to develop materials that promote the safe and efficient use of products, informed by close engagement with clinicians. The NBA continued the revision of updated editions of the PBM Guidelines modules. The revised guideline for the use of Anti-D was drafted and was released for public consultation in 2019-20 and is expected to be published in September 2020.

In addition, the NBA continued to work with the Australian Commission on Safety and Quality in Health Care (ACSQHC) to develop resources for the implementation of the second edition of the National Safety and Quality Health Service (NSQHS) Standard for Blood Management.

TABLE 2.4 Performance Criteria Qualitative Deliverable - promote a best practice model of management and use of blood and blood related products and services

Qualitative Deliverable	2019-20 Reference Point	2019-20 Results Against Performance Criteria
An efficient and sustainable supply will be delivered by improving the way blood and blood products are governed, managed and used	Developing and facilitating national standards, criteria and guidelines	Progressive changes to the <i>Criteria for the clinical use of intravenous immunoglobulin in Australia</i> were published in August 2019, October 2019 and March 2020.
Contemporary national standards, criteria and guidelines for the Australian blood sector	Update, develop and promote a number of clinical guidelines, clinical practice tools and resources for use within the sector	In 2019-20 a multi-disciplinary Expert Reference Group (ERG) finalised the draft <i>Guideline on the prophylactic use of Rh D Immunoglobulin in pregnancy care</i> and it was released for public comment. All comments were considered by the ERG and the Guideline was updated accordingly. It will be published early in 2020-21.

Qualitative Deliverable	2019-20 Reference Point	2019-20 Results Against Performance Criteria
	<p>Sustain improvements in the management and use of blood products by:</p> <ul style="list-style-type: none"> continued reduction in wastage from the 2018-19 result the number, quality, relevance and impact of publications of NBA grants commencing programmed revision of selected medical conditions within the <i>Clinical Criteria for the use of Ig in Australia</i> 	<p>A continued and sustained improvement in the management and use of blood products demonstrated by:</p> <ul style="list-style-type: none"> Discards as a percent of net issues (DAPI) for red blood cells was 1.9% for both 2019-20 and 2018-19. DAPI for platelets in 2019-20 was 11.8% down from 12.1% in 2018-19. Six projects completed successfully in 2019-20 with one publication being accepted in a peer reviewed journal and eight journal manuscripts are in draft. Funded research has been presented at conferences within Australia and overseas. Outcomes from the R&D Program support future research, the evolution of the Criteria and the PBM Guidelines. In August 2019 access to subcutaneous Ig for chronic inflammatory demyelinating polyneuropathy (CIDP) was approved pending the outcomes of the health technology assessment (HTA) evaluating the use of Ig in the treatment of CIDP.

Performance Criteria Source: Portfolio Budget Statements, p.318-319 NBA Corporate Plan 2019-20 to 2022-23, p.20-21

4. Develop policy and provide policy advice on the sustainability of the blood sector

The NBA continued to work with state and territory governments providing advice and guidance in developing strategies to ensure the sustainability of the blood sector so that requirements for blood and blood products for product supply and future demand are well managed.

TABLE 2.5 Performance Criteria Qualitative Deliverable - develop policy and provide policy advice on the sustainability of the blood sector

Qualitative Deliverable	2019-20 Reference Point	2019-20 Results Against Performance Criteria
Output Based Funding Model (OBFM) with Australian Red Cross Lifeblood is in place	Output Based Funding Model (OBFM) with Australian Red Cross Lifeblood principles agreed are implemented	The principles agreed for the fourth Lifeblood OBFM (2019-22) are implemented and used in the preparation of the National Supply Plan and Budget.
An efficient and sustainable supply will be delivered by improving the way blood and blood products are governed, managed and used	Providing expert advice to support government policy development, including; identification of emerging risks, developments, trends and new opportunities	The NBA provided product information and data were used to inform health technology assessments and utilisation reviews.
	Effective policy advice is provided by the NBA to support policy decision-making on the sustainability of the blood sector	The NBA continues to provide advice on the interrelationship between supply availability, demand and cost of plasma for fractionation, and domestic and imported immunoglobulin (Ig) and other plasma derived products, which relate to a number of key policy settings and is central to the NBA's management of the national blood supply on behalf of all Australian governments.
	Outcomes of health technology assessment reviews are provided to JBC and inform decision-making in relation to national policy and access criteria	In November 2019, the Medical Services Advisory Committee (MSAC) completed the assessment relating to the supply of replacement Ig for the treatment of acquired hypogammaglobulinaemia secondary to haematological malignancies or post-haemopoietic stem cell transplantation. MSAC advised that no immediate changes were required to the eligibility criteria, but that there should be more research to determine the specific patient groups and best-practice Ig use for greatest benefit.

Performance Criteria Source: Portfolio Budget Statements, p.318-319 NBA Corporate Plan 2019-20 to 2022-23, p.22

5. The National Blood Authority is a high performing organisation

The NBA continued to develop capability across a broad range of business programs and activities. In 2019-20, the NBA continued to attract and retain high quality staff for the range of required disciplines across the agency, provided professional and personal development opportunities for staff, maintained strong internal and external relationships and began improving business processes to digitise and enhance performance, governance and compliance.

The performance of the NBA was acknowledged with the 2019 Prime Minister's Silver Award for Excellence in Public Sector Management.

TABLE 2.6 Performance Criteria Qualitative Deliverable - the National Blood Authority is a high performing organisation

Qualitative Deliverable	2019-20 Reference Point	2019-20 Results Against Performance Criteria
Undertake horizon scanning and continue to monitor and report on international trends that may influence the management of blood and blood products in Australia	Report international trends relevant to Australia's management of blood and blood products monthly on the NBA website	<p>The NBA has a comprehensive horizon scanning process that underpins a number of program deliverables, such as contract management, national standards, criteria and guidelines.</p> <p>The NBA publishes a summary report on international Trends each month on the NBA website.</p>

Performance Criteria Source: Portfolio Budget Statements, p.318-319 NBA Corporate Plan 2019-20 to 2022-23, p.24

TABLE 2.7 Performance Criteria Quantitative Deliverable - the National Blood Authority is a high performing organisation

Quantitative Indicator	2018-19 Actual	2019-20 Budget Target	2020-21 Forward Year 1	2021-22 Forward Year 2	2022-23 Forward Year 3	2019-20 Results Against Performance Criteria
Continue to be an employer of choice with a staff retention rate of >80 per cent	88.9%	>80.0%	>80.0%	>80.0%	>80.0%	80.0%

Quantitative Indicator	2018-19 Actual	2019-20 Budget Target	2020-21 Forward Year 1	2021-22 Forward Year 2	2022-23 Forward Year 3	2019-20 Results Against Performance Criteria
Maintain a safe and healthy work environment with a reportable incident rate of < 2 per cent	2%	<1%	<1%	<1%	<1%	0.0%
Ensure that 100% of all annual APS mandatory learning and development modules can be completed online by NBA staff	100%	100%	100%	100%	100%	100%

Performance Criteria Source: Portfolio Budget Statements, p.318-319 NBA Corporate Plan 2019-20 to 2022-23, p.24

OBJECTIVE 1. SECURE THE SUPPLY OF BLOOD AND BLOOD PRODUCTS

It is the responsibility of the NBA to manage the national blood supply to ensure that healthcare providers have sustainable, reliable and efficient access to blood and blood products needed for patient care. The NBA ensures blood supply security by working with states and territories to determine and manage an annual supply plan and budget, and by negotiating and managing blood supply contracts and arrangements with domestic and overseas suppliers.

National Supply Plan and Budget

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

This is achieved by:

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

Performance against the 2019-20 NSP&B

Throughout 2019-20 products were supplied to meet clinical demand and supply risks were effectively managed. The approved budget for 2019-20 covering the supply and management of blood and blood products and services under contract was \$1,289.60 million. This comprised \$656.08 million for fresh blood products and plasma collection and \$614.47 million for plasma and recombinant products. There is also an additional \$19.05 million included for items such as support for the publication of PBM Guidelines, maintenance of the Australian Haemophilia Centre Directors' Organisation (AHCDO), administration of the Australian Bleeding Disorders Registry (ABDR), BloodSafe eLearning, Blood Sector ICT Systems and the operations of the NBA. Table 2.8 identifies the NBA's expenditure for the supply of products in each product category by supplier in 2019-20 and prior years.

TABLE 2.8 Blood and blood products purchased, by supplier, 2015-16 to 2019-20

Supplier	Products Purchased	2015-16 (\$M)	2016-17 (\$M)	2017-18 (\$M)	2018-19 (\$M)	2019-20 (\$M)
CSL Behring (Australia) Pty Ltd	Plasma Products	282.49	351.83	376.61	397.45	427.09
	<ul style="list-style-type: none"> • Albumin • Immunoglobulin products (Ig) (including Intravenous Immunoglobulin (IVIg), Subcutaneous Immunoglobulin (SCIg) and hyperimmune products) • Plasma derived clotting factors 					
	Imported Plasma and Recombinant Products					
	<ul style="list-style-type: none"> • Rh(D) Ig • Factors XI and XIII • Fibrinogen Concentrate • C1 Esterase Inhibitor Concentrate 					
Australian Red Cross Lifeblood	Fresh Blood Products	588.40	582.40	620.69	667.94	651.50
	<ul style="list-style-type: none"> • Whole blood • Red blood cells • Platelets • Clinical fresh frozen plasma • Cryoprecipitate • Cryo-depleted plasma • Plasma for fractionation • Serum eye drops • Therapeutic venesections 					
Shire Australia Pty Limited	Imported Plasma and Recombinant Products	36.62	31.45	34.25	39.11	37.09
	<ul style="list-style-type: none"> • Protein C Concentrate • Activated Prothrombin Complex Concentrate • Recombinant Factor VIII and IX 					
	Imported IVIg	28.35	0.00	0.00	0.00	0.00

Supplier	Products Purchased	2015-16 (\$M)	2016-17 (\$M)	2017-18 (\$M)	2018-19 (\$M)	2019-20 (\$M)
Bayer Australia Limited	Imported Plasma and Recombinant Products <ul style="list-style-type: none">• Recombinant Factor VIII	1.07	0.00	0.00	0.00	0.00
Pfizer Australia Pty Ltd	Imported Plasma and Recombinant Products <ul style="list-style-type: none">• Recombinant Factor VIII• Recombinant Factor IX	56.48	56.89	49.43	37.56	36.60
Novo Nordisk Pharmaceuticals Pty Ltd	Imported Plasma and Recombinant Products <ul style="list-style-type: none">• Recombinant Factor VIIa• Recombinant Factor XIII	36.39	24.20	35.28	35.57	36.73
Sanofi-aventis Australia Pty Ltd	Imported Plasma and Recombinant Products <ul style="list-style-type: none">• Recombinant Factor VIII• Recombinant Factor IX	0.00	0.00	3.68	19.72	21.28
Octapharma Pty Ltd	Imported IVIg	47.05	0.00	0.00	0.00	0.00
Grifols Australia	Imported IVIg	11.58	36.30	44.72	38.70	44.87
	Diagnostic Reagent Products <ul style="list-style-type: none">• Blood grouping sera• Reagent red cell products	0.36	0.33	0.37	0.38	0.36
Immulab Pty Ltd	Diagnostic Reagent Products <ul style="list-style-type: none">• Blood grouping sera• Reagent red cell products	0.00	0.00	3.44	3.00	2.98
Ortho-Clinical Diagnostics (Johnson & Johnson Medical Pty Ltd)	Diagnostic Reagent Products <ul style="list-style-type: none">• Blood grouping sera• Reagent red cell products	0.43	0.44	0.71	0.79	0.81
Bio-Rad Laboratories Pty Ltd	Diagnostic Reagent Products <ul style="list-style-type: none">• Blood grouping sera• Reagent red cell products	0.48	0.54	0.28	0.54	0.58
Total Purchases of Blood and Blood Products		1,089.70	1,084.40	1,169.45	1,240.77	1,259.89

Fresh blood products

The list of fresh blood products supplied in 2019-20 is at Appendix 2 *Fresh blood components supplied under contract by Lifeblood in 2019-20*. The four main products were:

1. red blood cells
2. platelets
3. clinical fresh frozen plasma
4. plasma for fractionation.

As summarised in Table 2.9, the increase in fresh blood expenditure has moderated during the last ten years, primarily as a result of improved efficiencies in Lifeblood operations together with a significant reduction in demand for some fresh blood products due to improved appropriate use and reduced wastage.

TABLE 2.9 **Fresh blood expenditure: increases over the last 10 years**

Year	Amount (\$M)	Growth (%)
2010-11	496.6	8.9
2011-12	526.3	6.0
2012-13	549.3	4.4
2013-14	583.1	6.2
2014-15	547.1	-6.2
2015-16	588.4	7.5
2016-17	582.4	-1.0
2017-18	620.7	6.6
2018-19	667.9	7.6
2019-20	651.5	-2.5
Total	5,813.3	3.8 (average)

Fresh blood expenditure in 2019-20 decreased by 2.5 per cent compared to 2018-19. Key factors that have influenced this include:

- an increased emphasis on the collection of plasma for fractionation, which increased from 736 tonnes to 803 tonnes at no increased cost
- annual price indexation of 1.95 per cent
- moderation in demand for some fresh products as a result of improved appropriate use and reduced wastage.

For each of the last five years, the NBA has seen funds returned to governments as highlighted in Figure 2.1. In 2019-20, \$35.2 million was returned including \$31.7 million for the Lifeblood operating surplus and a saving from the decrease in red blood cell demand of 1.8 per cent against the budget.

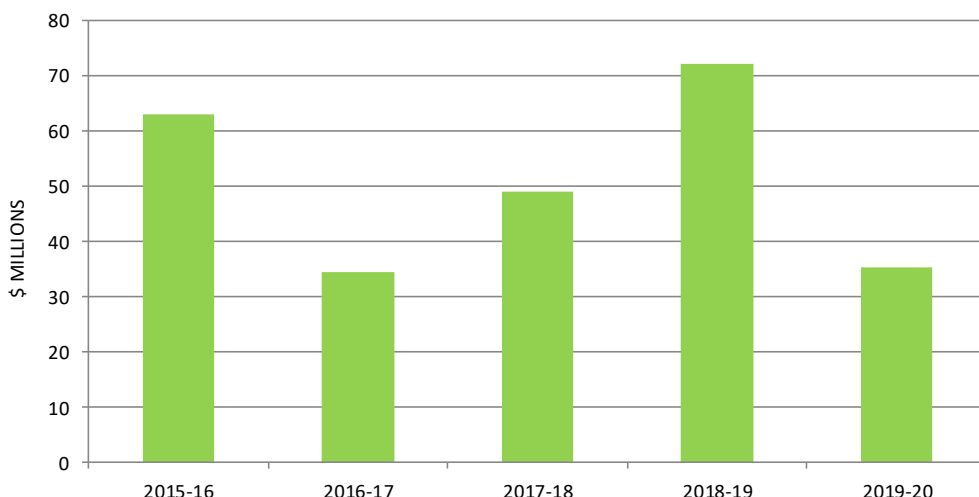


FIGURE 2.1 Returns to government 2015-16 to 2019-20

Red blood cells

Red blood cells comprise approximately 20.5 per cent of total blood and blood product expenditure and are the second largest item of cost in fresh products behind plasma for fractionation. Figure 2.2 illustrates that there was no change in issues of red blood cells compared to 2018-19, with continuation of the steady decline in issues per 1,000 head of population nationally from 26.9 in 2015-16 to 24.7 in 2019-20. In the last five years, demand for red cells has declined by 6.5 per cent, realising a saving to governments of more than \$38.7 million. The decline in red cell demand is the result of the ongoing success of programs to improve appropriate use and reduce wastage. These programs encompass a range of health provider and clinical engagement activities, development of best practice guidelines and tools, improved data collection and analysis and improved education and training arrangements. The publication and implementation of the Patient Blood Management Guidelines underpins much of the success in improving appropriate use of fresh blood products.

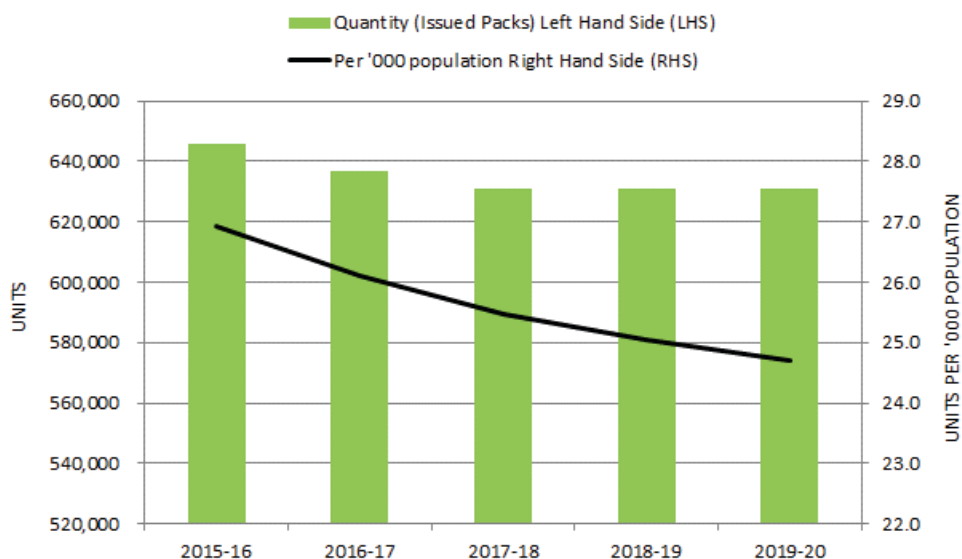


FIGURE 2.2 Red Cells issued by Lifeblood 2015-16 to 2019-20 per '000 population

Platelets

Platelets comprise 4.6 per cent of total blood and blood product expenditure. Figure 2.3 illustrates that there was a 1.3 per cent increase in issues of platelets from 2018-19. Platelets are either derived from an apheresis collection or a whole blood collection. In 2019-20 platelets issued were 64 per cent whole blood pooled (66 per cent in 2018-19) and 36 per cent apheresis (34 per cent in 2018-19).

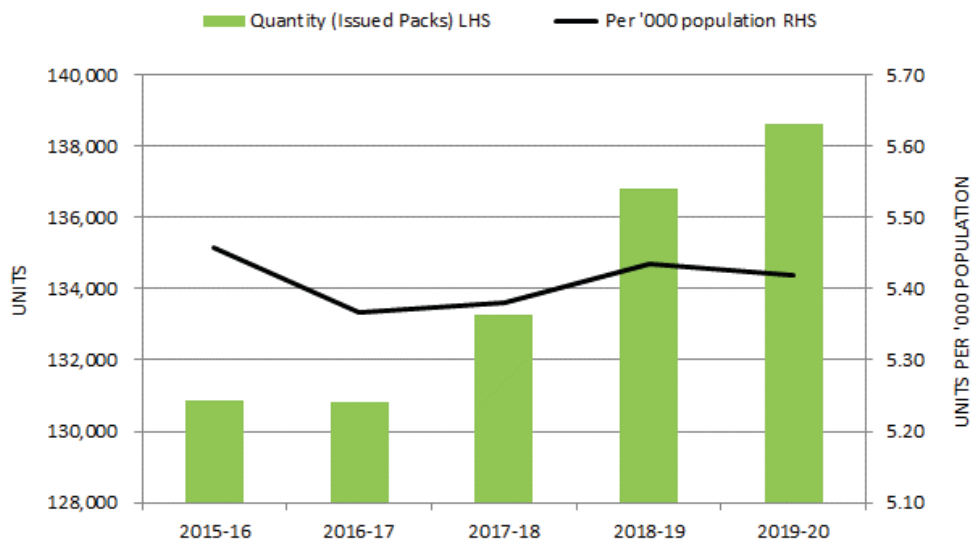


FIGURE 2.3 Platelets issued by Lifeblood 2015-16 to 2019-20 per '000 population

Plasma for fractionation

Lifeblood collects plasma for fractionation to supply to CSL Behring (Australia) Pty Ltd for the manufacture of plasma derived products. In 2019-20 the target quantity agreed by governments of plasma to be collected by Lifeblood was 730.5 tonnes, noting that Lifeblood could collect up to 802.6 tonnes at no additional cost to governments. Lifeblood achieved the maximum collection of 802.6 tonnes or 72.1 tonnes over the target. The growth in apheresis plasma collection by Lifeblood over the last five years is shown in Figure 2.4.

In 2015-16 the ratio of whole blood to apheresis plasma for fractionation was 29:71 and in 2019-20, 22:78. This is in part due to the decline in red blood cell demand.

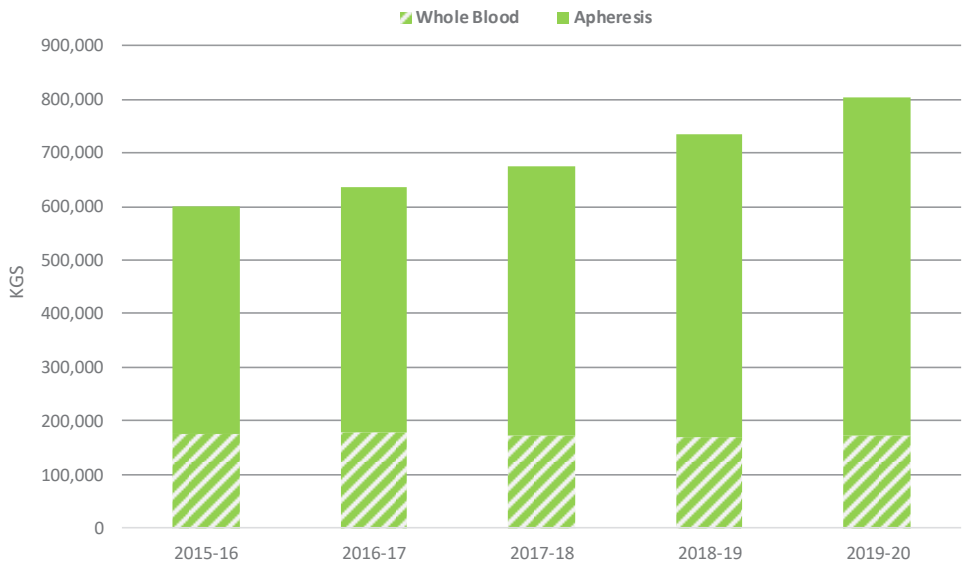


FIGURE 2.4 Whole blood and apheresis plasma for fractionation 2015-16 to 2019-20

Plasma and recombinant products

The cost of plasma derived and recombinant blood products issued under NBA arrangements in 2019-20 totalled \$601.6 million, an increase of \$33.5 million (5.9 per cent) from 2018-19. A decline in demand growth for Immunoglobulin (Ig) resulted in a \$26.4 million or 7.0 per cent overall cost reduction against the NSP&B. Lower demand for Prothrombinex (\$2.25 million) and plasma derived clotting factors (\$4.38 million) offset increases in demand of recombinant Factor IX and recombinant Factor VIIa resulting in an increase of \$7.11 million over the NSP&B. In addition, the demand for C1 Esterase Inhibitor increased by 5.8 million IUs or \$4.0 million over the NSP&B.

In the 15 years to 2019-20, expenditure on plasma and recombinant products issued under the national blood arrangements has increased from \$205.2 million to \$611.1 million. Key drivers of this increase are:

- \$441.7 million from increased demand
- \$51.8 million to fund recombinant clotting factor products (rFVIII and rFIX).

The combined effect of demand and price drivers on expenditure can be seen in Figure 2.5. It is of note that significant improvements in price have driven a large increase in savings that has reduced the impact of increases in demand.

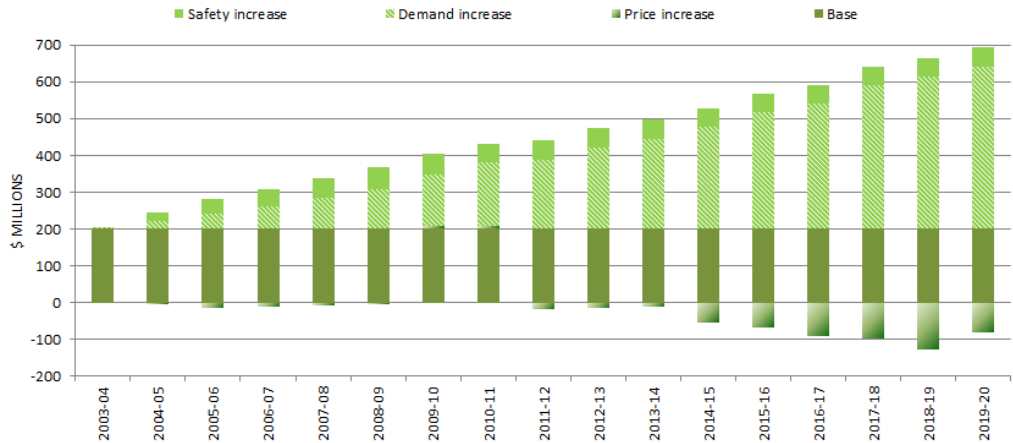


FIGURE 2.5 Plasma derived and overseas product expenditure: cumulative increases on 2003-04 base year

Issues of clotting factors

In 2019-20 clotting factors comprised 14.5 per cent of total blood and blood product expenditure. Figure 2.6 indicates that the demand for Factor VIII products increased by 0.4 per cent when compared to 2018-19. The demand for recombinant Factor VIII increased by 1.2 per cent in 2019-20. Demand for plasma derived Factor VIII decreased by 5.2 per cent.

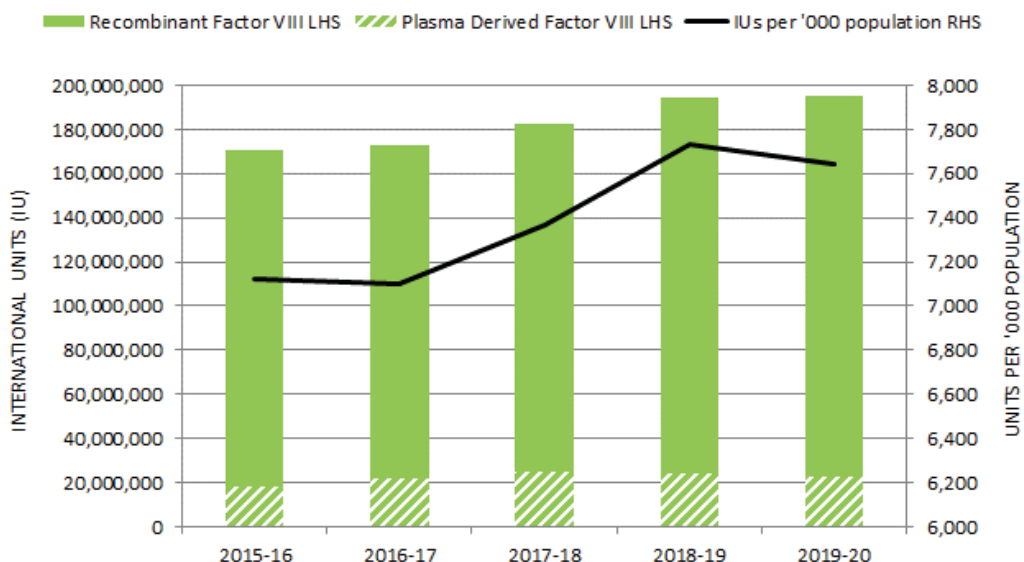


FIGURE 2.6 Issues of Factor VIII products 2015-16 to 2019-20 per '000 population

The demand for Factor IX products in 2019-20 increased by 1.0 per cent compared to 2018-19 (Figure 2.7). Plasma derived Factor IX demand decreased by 3.9 per cent in 2019-20 due to a reduction in specific patient requirements. Demand for recombinant Factor IX decreased by 1.1 per cent in 2019-20. Continuation of limited interim arrangements to provide temporary access to Extended Half Life recombinant Factor IX clotting factor products under the national supply arrangements contributed to the variability of year-to-year growth for these products.

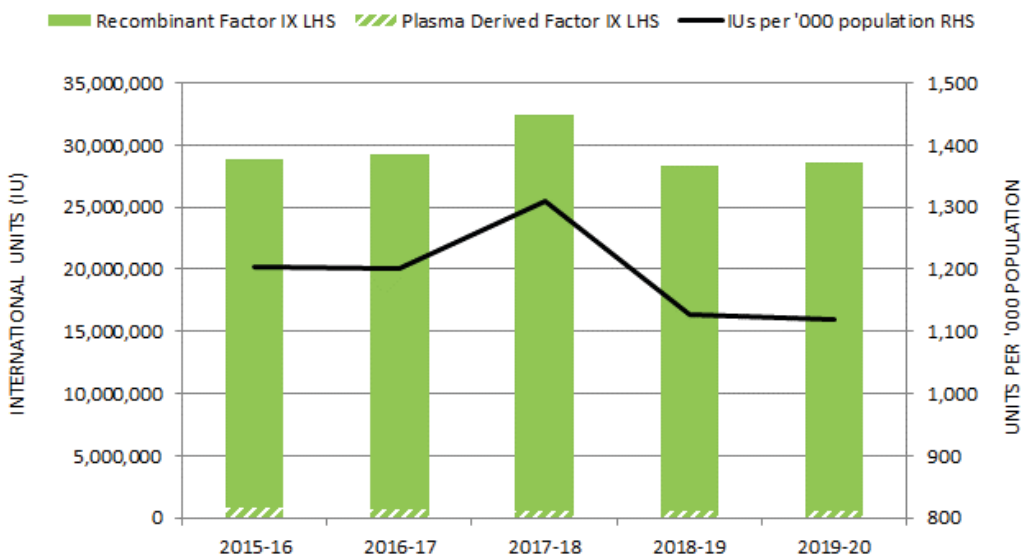


FIGURE 2.7 Issues of Factor IX products 2015-16 to 2019-20 per '000 population

The 2019-20 level of demand for recombinant Factor VIIa increased by 2.4 per cent and Factor VIII Anti-Inhibitor (FEIBA) decreased by 23.5 percent compared to 2018-19.

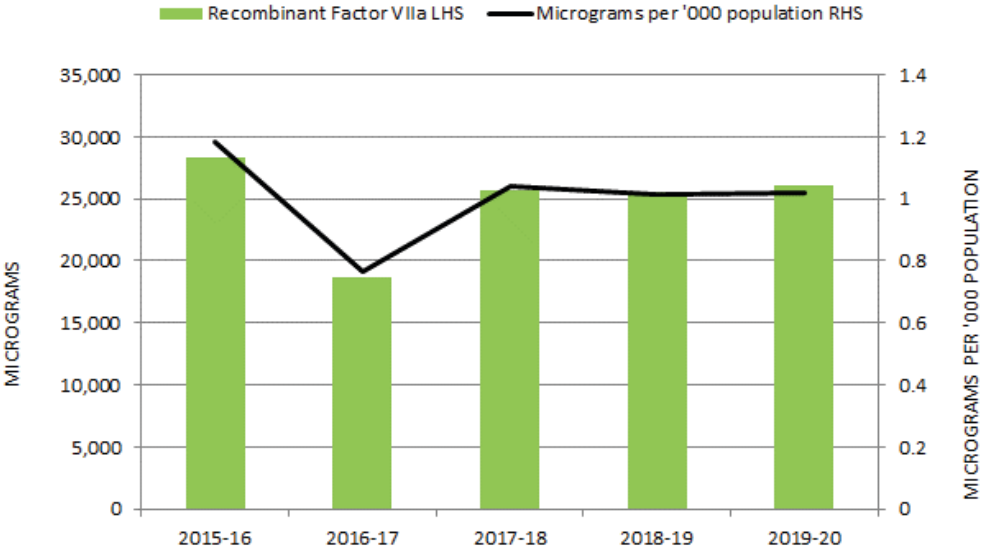


FIGURE 2.8 Issues of Factor VIIa products 2015-16 to 2019-20 per '000 population

Demand for recombinant Factor VIIa and FEIBA can change significantly from year to year as a result of the variable needs of a small number of patients. These products have also been variable due to ongoing clinical trials of new products for haemophilia therapies.

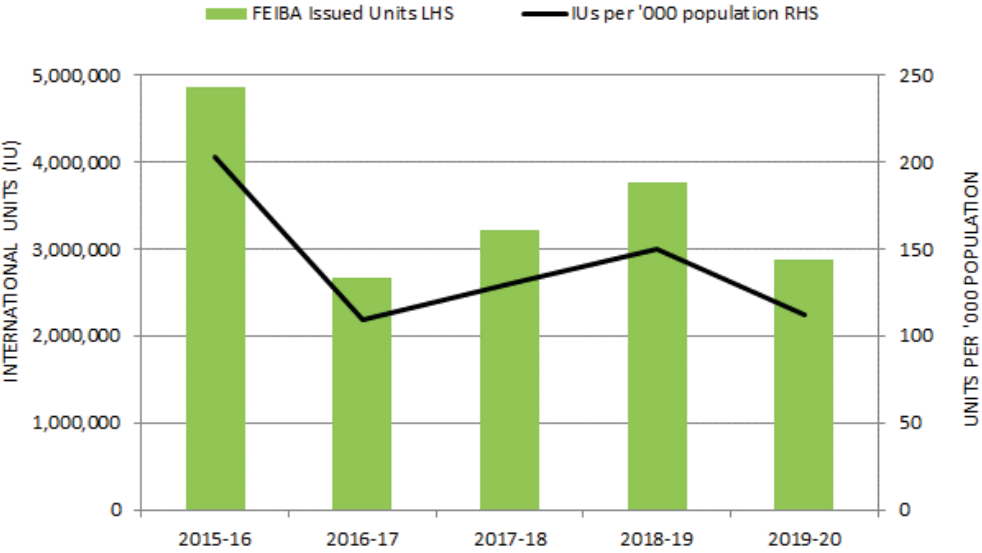


FIGURE 2.9 Issues of FEIBA, 2015-16 to 2019-20 per '000 population

Issues of immunoglobulin (Ig)

Demand for Ig was growing at a consistent annual rate of more than 10 per cent up to and including 2017-18. This rate of growth has slowed to 6.7 per cent in 2019-20 compared to 7.2 per cent in 2018-19. This is the lowest annual rate of increase since 2004-05 when Australia first secured supply sufficiency through national importation of Ig by the NBA. The National Fractionation Agreement for Australia (NaFAA) with CSL Behring commenced on 1 January 2018 for the continued manufacture and supply of fractionated blood plasma products and delivered savings in 2019-20 of \$4.26 million for domestic immunoglobulin.

TABLE 2.10 Immunoglobulin growth

2015-16	2016-17	2017-18	2018-19	2019-20
12.4%	11.2%	10.6%	7.2%	6.7%

In 2019-20 a total of 7.01 million grams of Ig was issued nationally representing a cost of \$637.1 million (including the cost of plasma for fractionation) or 51.8 percent of total blood and blood product issues. Of this amount, 46.0 per cent was Ig produced in Australia and 54.0 per cent was imported. Figure 2.10 shows the total growth of Ig per year and the relative proportion of imported Ig compared to domestic Ig.

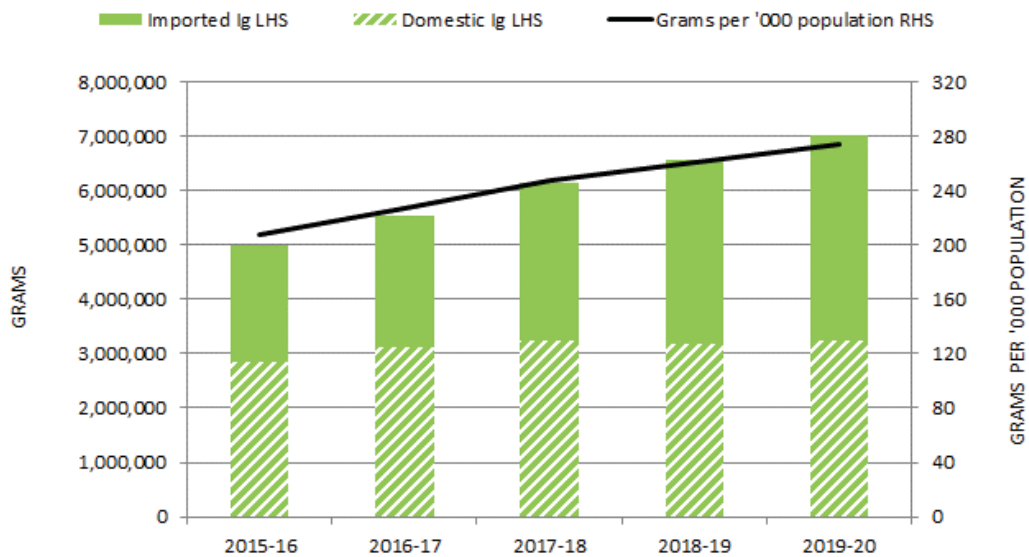


FIGURE 2.10 Issues of Immunoglobulin products, 2015-16 to 2019-20 per '000 population

LIFEBLOOD REVIEW

In May 2019, Pricewaterhouse Coopers Consulting (Australia) Pty Ltd (PwC) was engaged by the National Blood Authority to conduct a review of the efficiency of Australian Red Cross Lifeblood (formerly known as the Blood Service).

The Review, requested by the Jurisdictional Blood Committee, was established as an 'Extraordinary Review' under clause 56 of the Deed of Agreement between the NBA and Lifeblood.

The objectives of the Review were to:

- give confidence to governments on the efficient operations of Lifeblood, and
- assess and report on other opportunities for improvements and efficiencies in the delivery of blood and blood-related services (i.e. plasma and non-Deed activities).

PwC consulted with key stakeholders across the Review, which included an efficiency assessment of Lifeblood's end to end supply chain; identification of improvement opportunities to lift efficiency; and the interconnected factors that could inform governments' decisions around policy settings governing the domestic plasma and Ig supply, and Ig imports. These interconnected factors are shown below.



Figure Source: PwC report on the Review of the Australian Red Cross Blood Service, August 2019

Overall, the Review found that Lifeblood is efficient and delivering value for money to governments.

Assessment of Lifeblood's own international benchmarking, and key performance measurements found that the Lifeblood operates efficiently and performs well across a range of measures.

PwC's independent benchmarking of Lifeblood's 2017-18 performance against 12 organisations, chosen for comparison based on industry, product, scale and supply chain similarity, compared favourably across most measures.

The Review findings will also inform future decisions to be made by governments regarding the implementation of policy objectives, including domestic plasma collection levels and the potential for Lifeblood to lift plasma supply, and budgets going forward.

The NBA and governments are to consider Lifeblood's Plasma Business Case in 2020-21, which proposes an increase in the domestic collection of plasma to support the increasing demand for immunoglobulin (Ig) products. Governments are expected to make a decision on domestic plasma collection levels in the second half of 2020.

Contract Management

The NBA manages contracts with suppliers of blood and blood products to ensure efficient, effective and secure supply. Contracts are developed in accordance with the Commonwealth Procurement Rules, and managed in accordance with Best Practice Guidance for contract management, including the guideline from the Department of Finance on Developing and Managing Contracts.

In 2019-20 the NBA managed 15 blood and blood product supply contracts and arrangements. The contracts managed by the NBA included:

- fresh blood product procurement - Australia's fresh blood component requirements through the Deed of Agreement with the Australian Red Cross Society
- plasma and recombinant product procurement - Australia's plasma product and recombinant product requirements through:
 - the National Fractionation Agreement for Australia (NaFAA) with CSL Behring
 - contracts for the provision of imported IVIg, imported recombinant factors VIIa, VIII, IX, and XIII, and other imported plasma and recombinant products from commercial suppliers
 - red cell diagnostic reagent products.

Deed of Agreement with the Australian Red Cross Society

The Deed of Agreement (Deed) with the Australian Red Cross Society for the supply of fresh blood products and plasma for fractionation by Lifeblood is one of the most important contracts managed by the NBA. Lifeblood is the sole supplier of fresh blood products. The provision of fresh blood products under the Deed is an essential clinical service that saves lives every day. The NBA has an ongoing program with Lifeblood to assure contract performance and accountability under the Deed.

The NBA implemented a nine-year Deed with the Australian Red Cross Society on 1 July 2016, including a three-year funding and services agreement. The current funding and services agreement commenced on 1 July 2019 and runs until 30 June 2022.

Funding provided to Lifeblood is based on an Output Based Funding Model (OBFM) arrangement agreed by governments. Funding in 2019-20 was \$651.50 million, a reduction of \$16.4 million from 2018-19.

Performance

The performance of Lifeblood is a key element in meeting blood sector objectives. Governments expect Lifeblood to deliver effective services and value for money. Governments outline their expectations of Lifeblood in relation to performance through the Deed and the Lifeblood Statement of Expectations. Lifeblood performance against selected indicators is outlined in Table 2.11.

TABLE 2.11 **Lifeblood: selected key performance indicators, 2019-20**

Domain	Indicator	2018-19 result	2019-20 Lifeblood target	2019-20 result*
Donor management	New Donors	100,096	99,000	107,673
	Whole Blood and apheresis (combined)			
Supply chain management	Number of days within inventory bands	331	365	331
	Red cell yield (proportion of collections converted to supply)	92.0%	≥90%	92.3%
	Age of red cells at issue (days)	6.4	≤8	6.7
	Order fulfilment red cells	98.4%	≥95% ¹	98.5%
Quality and level of service	Health provider satisfaction with Lifeblood (mean score out of 10)	9		9.2
Finance	Main operating program financial result	\$74.8M	\$27.7M	\$31.7M ²

* As measured by Lifeblood as at August 2020.

¹ Target increased from ≥90% to ≥95% in 2019-20, with the commencement of 2019-20 to 2021-22 Statement of Expectations.

² Result unlikely to change however subject to audit clearance.

Implementing improvements to current arrangements

A number of initiatives were progressed under the Deed during 2019-20, including:

- completion of an independent external review of the efficiency of Lifeblood
- consideration of Lifeblood's Plasma Business Case and recommendations developed for future domestic plasma collection targets
- implementation of a new Lifeblood Statement of Expectations for 2019-22, including updated key performance indicators (KPIs)
- implementation of the second Funding and Services Agreement covering the period 2019-20 to 2021-22
- implementation of the fourth cycle of the OBFM for the period 2019-20 to 2021-22.

The second half of 2019-20 was challenging for all Australians due to the COVID-19 pandemic. Despite these challenges, including periodic transport and supply-chain disruptions, Lifeblood met its annual targets for the supply of blood and plasma, and maintained a strong donor panel.

COVID-19 Convalescent Plasma

In May 2020 with the agreement of governments, Lifeblood commenced collecting convalescent plasma from donors who have recovered from COVID-19 infections. This is for use by CSL Behring for the development of a potentially lifesaving plasma-derived treatment for people with COVID-19. In addition, Lifeblood will also supply convalescent plasma to a number of clinical trials investigating the effectiveness of convalescent plasma as a direct treatment in patients with COVID-19. The NBA is facilitating the work in accordance with existing arrangements under the current Deed of Agreement and the current contract with CSL Behring.

Lifeblood research and development

Lifeblood and the NBA have a Research and Development Framework that was introduced on 1 July 2016. In 2019-20 Lifeblood received funding under the Deed of approximately \$9.8 million for its research and development program in the following five strategic research areas:

- donor behaviour
- donor health and wellbeing
- product development and storage
- product safety
- product usage.

Lifeblood's research and development business outcomes were on track with most of the research projects completed in 2019-20 being translated into changed business practices or learnings.

This year, research and development at Lifeblood remained focused on understanding what motivates current and future donors, the safety and quality of blood components, development of sensitive, specific and cost-effective testing capabilities, enhancement of knowledge of transfusable blood components and their interactions with patients, and improvement of practice. A strong emphasis is placed on translational research through close interaction between the research and development and operational arms of the business through all stages of a research project's life cycle.

REBRANDING OF THE BLOOD SERVICE TO LIFEBLOOD

On 15 November 2019, the Australian Red Cross Blood Service changed its name to Australian Red Cross Lifeblood (Lifeblood).

Lifeblood is a division of the Australian Red Cross Society (Red Cross). The National Blood Authority and the Red Cross are parties to a Deed of Agreement through which the NBA funds the operations of Lifeblood, on behalf of Australian governments.

The name Lifeblood was chosen as it was considered to encompass all of the organisation's contemporary business activities. While continuing to provide blood and blood products, the name Lifeblood also covers a broader range of activities such as human milk banks, tissue typing and testing.



Figure: Blood Service Signage



Figure: Lifeblood Signage

Lifeblood's main reasons for the change were to:

- reduce brand fragmentation and inconsistency
- expand business definition and accommodate diversified services
- retain 'Blood' in the brand to preserve recognition
- retain 'Australian Red Cross' in the name to leverage and contribute to the national objectives and strong equity of the Red Cross.

Lifeblood reported very positive responses to the change, including increases in its donor panel.

National Fractionation Agreement for Australia (NaFAA)

Many of the plasma derived products used in Australia are manufactured under the NaFAA by CSL Behring (Australia) Pty Ltd (CSL Behring) from plasma collected by the Lifeblood. CSL Behring is the sole manufacturer of plasma derived blood products in Australia and the NBA is responsible for negotiating and managing the NaFAA.

The NaFAA came into force on 1 January 2018 and will continue until 31 December 2026, subject to a review in 2022.

In 2019-20 802.6 tonnes of Australian plasma was pooled for fractionation under the agreement, and expenditure totalled \$273.3 million.

Performance

The 2019-20 performance by CSL Behring against the NaFAA key performance indicators (KPIs) is shown in Table 2.12. Sufficient supply of all products was maintained at all times. The performance of CSL Behring was within defined tolerances for each of the KPIs.

TABLE 2.12 CSL Behring performance under the NaFAA, 2019-20

Description of performance measure			Results 2019-20				
			Q1	Q2	Q3	Q4	Annual
KPI1	Plasma stewardship		Achieved	Achieved	Achieved	Achieved	Achieved
KPI2	Production yield	IVlg	4.905 g/kg	5.040 g/kg	4.980 g/kg	5.120 g/kg	5.016 g/kg
		SClg	4.555 g/kg	4.593 g/kg	4.818 g/kg	4.722 g/kg	4.681 g/kg
KPI3	Management of required inventory levels						
	Minimum starting plasma inventory		Not active in 2019-20				
	Products in CSL Behring (Australia) Pty Ltd inventory		100%	100%	100%	100%	100%
	Products in CSL Behring (Australia) Pty Ltd reserve		100%	100%	100%	100%	100%
KPI4	Fulfilment of orders						
	Orders by distributor (Lifeblood) and non-distributor		100%	100%	100%	100% #	100%
KPI5	Shelf life of national reserve products		100%	100%	100%	100%	100%

Note: Values of less than 100 per cent but greater than 90 per cent are considered to be achieved

Subject to reconciliation

Imported Immunoglobulin (Ig)

Ig is imported to meet the shortfall in domestic Ig production against clinical demand in Australia. In addition, the NBA contracts also support the purchase of small amounts of imported Ig when necessary through direct orders by individual jurisdictions.

Two contracts are in place for the supply of imported Ig under the national blood arrangements. The contracts commenced in September 2015 and the base term expired on 31 December 2018. The NBA exercised the available extension options and the contracts will expire on 31 December 2020. The suppliers are CSL Behring and Grifols Australia Pty Ltd (Grifols). In 2019-20 the NBA expended \$179.3 million for both contracts.

Performance

The 2019-20 performance of both CSL Behring and Grifols against the contractual KPIs is shown in Table 2.13. Sufficient supply of products was maintained to meet demand during the year and was not adversely affected by transient or administrative KPI deviations.

TABLE 2.13 Imported Ig: key performance indicators, by supplier, 2019-20

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

In some instances, performance deviated from contracted requirements at some periods during the year and was managed by the NBA.

PROCUREMENT OF FACTOR VIII AND FACTOR IX PRODUCTS

The National Blood Authority (NBA) has successfully concluded the tender process for the supply of standard half-life and extended half-life recombinant Factor VIII and Factor IX products.

During 2019-20 the NBA negotiated successful purchase arrangements through a tender process for a number of suppliers to be able to provide these important products to Australian patients.

The new arrangements will commence on 1 July 2020 for a period of up to five years.

These products are critical for the treatment of Australian patients with bleeding disorders. Australia imports these products through the NBA, as they are not made in Australia.

The outcome of the tender gives Australian patients optimal access to products through nationally supplied and funded blood arrangements at very competitive prices. The tender outcome is also expected to deliver savings on product costs in the order of \$155.8 million across five years, while continuing to ensure a safe and secure supply of these important treatments in Australia.

Home delivery arrangements will continue to be available for suitable patients under the oversight of the patient's Haemophilia Treatment Centre.

The NBA has consulted with the Australian Haemophilia Centre Directors' Organisation (AHCDO), Haemophilia Foundation Australia (HFA) and Australian Haemophilia Nurses Group (AHNG), on transition arrangements where it is considered appropriate for patients to commence using extended half-life products. The prescription of appropriate treatments for patients with haemophilia is a clinical matter which should be discussed between a patient (or their carer) and a specialist clinician.

As a consequence of COVID-19 restrictions, where considered appropriate, some patients have been transitioned to extended half-life products according to clinical prioritisation by the local Haemophilia Treatment Centre, based on each centre's capacity throughout this period.

The Australian Bleeding Disorders Registry (ABDR) and the MyABDR patient application are used to record the use of clotting factor products and associated therapies by patients in Australia. Data can be utilised from the ABDR for supply planning purposes, and to monitor utilisation and cost, patient outcomes and to confirm the realisation of the benefits of extended half-life products.

Changes to the products available as a result of the tender outcomes are identified in the table below:

	Previous Arrangements Product name (Supplier)	New Arrangements Product name (Supplier)
Standard half-life rFVIII	Advate (Shire)	Advate (Shire)
	Xyntha (Pfizer)	Xyntha (Pfizer)
Standard half-life rFIX	BeneFIX (Pfizer)	BeneFIX (Pfizer)
	Rixubis (Shire)	Not available after a transition period
Extended half-life rFVIII	Adynovate (Shire)*	Adynovate (Shire)
	Eloctate (Sanofi)*	Eloctate (Sanofi)
Extended half-life rFIX	Alprolix (Sanofi)*	Alprolix (Sanofi)

* Previously available under limited interim arrangements for EHL products.

Imported plasma derived and recombinant blood products

The NBA has contracts with suppliers for the importation of selected plasma derived and recombinant blood products to augment domestic supply where these products are not produced in Australia or domestic production cannot meet demand.

In 2019-20 the NBA managed supply contracts for imported plasma and recombinant products with the following five companies:

- CSL Behring (Australia) Pty Ltd
- Novo Nordisk Pharmaceuticals Pty Ltd
- Pfizer Australia Pty Limited
- Sanofi-aventis Australia Pty Ltd formerly Bioverativ Australia Pty Ltd
- Shire Australia Pty Limited.

Expenditure on the above contracts in 2019-20 amounted to \$187.18 million.

Performance

The 2019-20 performance of suppliers of imported plasma and recombinant blood products for each performance measure is shown in Table 2.14. All suppliers satisfactorily met required performance levels.

TABLE 2.14 Imported plasma and recombinant blood products: key performance indicators, by supplier, 2019-20

Performance measure Supplier	KPI 1 In-country reserve product inventory	KPI 2 Shelf life on products delivered	KPI 3 Delivery performance	KPI 4 Reporting accuracy and timelines
Sanofi-aventis Australia Pty Ltd (Alprolix, Elocate)	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
Shire Australia Pty Limited (FEIBA, Ceprotin)	Achieved	Achieved	Achieved	Achieved
Shire Australia Pty Limited (Advate, Rixubis, Adynovate)	Achieved	Achieved	Achieved	Achieved

In some instances, performance deviated from contracted requirements at some periods during the year and was managed by the NBA.

Red cell diagnostic reagent products

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

The NBA established a standing offer arrangement with the following four suppliers for the period 1 July 2016 to 30 June 2019. The NBA has exercised available extension options extending the term of the standing offer arrangements to 30 June 2021.

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

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

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

AWARDS FOR EXCELLENCE

The NBA has ensured the uninterrupted supply of immunoglobulin (Ig) products in Australia since 2004. The continuous and increasing demand for Ig has presented challenges for supply security and affordability. The NBA met these challenges by developing the National Immunoglobulin (Ig) Governance Program and BloodSTAR, a national online management and reporting system. Together, the program and BloodSTAR delivered an integrated, dynamic, rules-based system that is based on revised criteria for the clinical use of Ig in Australia. The program is the first of its kind in the world, bringing together a number of disparate processes with new approaches to improve the use of high cost Ig products made from blood plasma.

In 2019 the National Blood Authority received three prestigious awards that recognised this work. These awards acknowledge the work of NBA staff in collaboration with a diverse group of stakeholders to develop improved arrangements for the appropriate use of this precious and costly blood product.

2019 Prime Minister's Award

The Prime Minister's Silver Award for Excellence in Public Sector Management was awarded to the NBA for developing and implementing Australia's National Immunoglobulin Governance Program. Awarded by the Institute of Public Administration Australia (IPAA), this achievement recognises Australia's National Immunoglobulin Governance Program as an innovative initiative to improve the use and management of government-funded Ig through nationally coordinated health sector governance arrangements.



L to R: Dr Steven Kennedy PSM, Secretary of the Treasury and IPAA ACT President, the Hon Ben Morton MP, Assistant Minister to the Prime Minister and Cabinet, Mr Cahill, Ms Cameron, Ms Wall, Ms Roberts, Mr Stone.

The award was presented by the Hon Ben Morton MP, Assistant Minister to the Prime Minister and Cabinet, and Dr Steven Kennedy PSM, Secretary of the Treasury and IPAA ACT President, at a ceremony at Parliament House in Canberra on 13 November 2019.

2019 Australian Business Awards for Business Innovation and Supply Chain Management

The Australian Business Awards are an annual comprehensive awards program which recognises organisations that demonstrate the core values of business innovation, product innovation, technological achievement and employee engagement via a set of established business and product award categories.

In 2019, the NBA received two Australian Business Awards. The Award for Business Innovation recognised the implementation of the National Immunoglobulin Governance Program as an innovative solution for new and existing business needs.

The Australian Business Award for Supply Chain Management was awarded in recognition of outstanding results achieved through the National Immunoglobulin Governance Program for excellence in supply chain management.

OBJECTIVE 2. IMPROVE RISK MANAGEMENT AND BLOOD SECTOR PERFORMANCE

In 2019-20 the NBA achieved a range of objectives to improve blood sector performance and risk management, particularly in the areas of immunoglobulin governance, evaluation of new products, ICT developments, data availability and analysis, risk management and knowledge management.

Ig Governance

Work on the NBA Immunoglobulin (Ig) Governance Program throughout 2019-20 continued to improve the governance and management of publicly funded Ig. This program aims to ensure:

- Ig product use and management reflects appropriate clinical practice and represents efficient, effective and ethical expenditure of government funds, in accordance with relevant national safety and quality standards for health care
- access to Ig products is consistent with the Criteria for access determined by governments
- improved capture of information on the need for, use of, and outcomes of treatment with Ig products (including adverse events) to inform future changes to the Criteria.

In 2018-19 the NBA published a Performance Improvement Strategy (the Strategy) to strengthen Ig governance, drive improvement in the prescription, use and management of Ig products and support the Ig Governance Program to continue to deliver against agreed objectives. During 2019-20 the NBA progressed activities listed in the Strategy. The key activities undertaken under the five pathways identified in the Strategy facilitate improvement in each of the key performance management areas. These activities have supported a decrease in the rate of growth of Ig use to the lowest level since 2004-05.

The five key performance management areas which set the objectives for the strategy are:

- provision of Ig reflects appropriate clinical practice
- uniform compliance with the National Policy
- local Ig governance arrangements are robust and align with relevant standards, guidelines and legislative requirements
- service delivery provided to support appropriate management and use of Ig (by the NBA and agencies contracted by the NBA) is efficient and effective
- collection of data supports future work.

The pathways that will drive improvement across the performance areas listed above are:

- Education and Support
- Communications and Relationships
- Program Assurance and Policy Compliance
- Knowledge Development
- Enhancement of Policy and Access Arrangements.

Education and Support

The NBA is working collaboratively with educational designers to develop tools and resources to enhance understanding of Ig governance arrangements in Australia and to promote compliance with the National Policy.

BloodSafe eLearning Australia is developing a suite of courses about the National Policy. There are five courses planned in total of which three are close to finalisation and are expected to be released in 2020-21. The courses will complement the NPS Medicinewise courses. The courses are:

- Introduction to Immunoglobulin
- Accessing Immunoglobulin
- Prescribing Immunoglobulin
- Administering Immunoglobulin
- Adverse Events.

The NBA is also working with the Commonwealth Department of Health to administer a grant to NPS Medicinewise under the Value in Prescribing (ViP) Program which aims to deliver improvements in the prescription and use of immunoglobulin, in line with the objectives of the Ig Governance Program. In 2019-20 NPS Medicinewise consulted with a wide range of stakeholders to identify the knowledge gaps, scoped a suite of behavioural interventions, tools and activities such as fact sheets, webinars, and educational videos targeted towards an audience of clinicians, consumers, nurses, dispensers and other relevant health professions. They also commenced development of the first tranche of these interventions.

Communications and Relationships

In 2019-20 the NBA continued to work with the Ig Governance Program's network of committees to deliver program activities. In December 2018, the NBA began a process of refreshing the membership of National Immunoglobulin Governance Advisory Committee (NIGAC) and the Specialist Working Groups (SWGs) in Neurology, Immunology, Haematology and Transplant Medicine. The first stage of the refresh was undertaken in March 2020 with half the membership for both NIGAC and SWGs completed. The complete list of SWG members is available on the NBA website <https://www.blood.gov.au/ig-committees>.

NIGAC met twice during 2019-20 to provide advice to the NBA on particular aspects of the Ig Governance Program and to oversee the work of SWGs. Key projects that involved NIGAC and SWGs in 2019-20 included ongoing review of the Criteria and performance improvement activities.

The Health Department Liaison Group has been refreshed as a Jurisdictional Ig Performance Improvement Group to provide further support for various performance improvement activities.

Program Assurance and Policy Compliance

The NBA is supporting the Commonwealth Department of Health in undertaking Health Technology Assessment (HTA) reviews of Ig use for specific medical conditions. The reviews are based on evidence of clinical safety, effectiveness and cost-effectiveness, consistent with how other pharmaceutical and medical technologies are assessed for government funding. The outcomes of the reviews will inform the ongoing activities within the Ig Governance Program.

Data and reporting activities remain a focus for the Ig Governance Program. BloodSTAR is exclusively utilised to manage Ig authorisations. Through BloodSTAR, the NBA has the ability to capture better quality data to inform future planning and policy development, and provide those responsible for supporting Ig governance compliance with information that will identify:

- differences in treatment between conditions, hospitals, clinicians and jurisdictions
- accurate stock level requirements
- consistency of Ig use across conditions, hospitals, clinicians and jurisdictions.

The development of enhanced reporting capability is necessary to maximise the benefits of this improved data and ensure nationwide transparency. In 2019-20 the NBA published two National Reports on the Issue and Usage of Immunoglobulin. The reports covered Australia's issue and use of Ig for 2016-17 and 2017-18.

The NBA publishes a selected set of Ig usage data on a regular basis on the NBA website at <https://www.blood.gov.au/ig-usage-data-and-statistics>.

An initial tranche of reports on Ig use was also developed during 2019-20 to provide jurisdictions with information to draw out factors from each of the key performance areas. They will inform future reporting, promote discussion, and highlight areas for improvement, both for the NBA and external stakeholders.

Further work to define stakeholder performance indicators and benchmarks under the Ig Governance Performance Improvement Strategy has been progressed and a dashboard for key performance measures is being developed to support external reporting. Other key activities currently underway are:

- developing the 2018-19 National Report on the Issue and Use of Immunoglobulin
- scoping and developing audit tools to measure and address local governance and inventory management issues.

Knowledge Development

Knowledge development activities support policy development, promoting a sustainable Ig Governance Program and enabling the program to be responsive to change, including in response to new advances in research. Identifying and closing knowledge gaps are key activities within the performance improvement strategy.

During 2019-20 the NBA continued to fund research through the National Blood Sector Research and Development Program which is one mechanism to actively close identified knowledge gaps.

Enhancing Current Policy and Access Arrangements

Publication of Version 3 of the National Policy

The National Policy: Access to Government Funded Immunoglobulin Products in Australia (National Policy) was first published in November 2014 and revised in July 2016 to include the implementation of BloodSTAR. The National Policy sets out the process, rules and requirements that must be complied with to ensure appropriate access to government-funded Ig products in Australia.

The National Policy was updated in 2018-19 and Version 3 was published in July 2019. Version 3 takes into account the release of Version 3 of the Criteria and the completion of the BloodSTAR rollout. Feedback received from stakeholders about the National Policy was carefully considered as part of the ongoing monitoring and review activities.

The National Policy comprises the following information:

Background	Captures information relevant to patient access to government-funded Ig products and may assist readers to understand the various policies and processes associated with the National Policy and the Ig Governance Program more broadly
Principles	Provides the foundation for the provision of Ig products under the National Blood Agreement and the remaining sections in the policy
Access Arrangements	Describes the processes, rules and requirements that must be followed to access Ig products under the National Blood Agreement
Roles and Responsibilities	Identifies those directly involved in the prescription, use and management of government-funded Ig products throughout the supply chain and within health services and describes the responsibilities, authority and accountability of each of those roles
Tools and Resources	Provides guidance on where to find useful tools and resources
Glossary	Identifies and defines terms and acronyms relevant to the policy and associated processes

Evolution of the Criteria

The Criteria identifies the conditions and circumstances for which the use of Ig is clinically appropriate and accessible to patients under the [National Blood Agreement](#) and within the [National Policy](#).

Version 1 of the Criteria was published in 2007 and was updated to Version 2 in 2012. The development and implementation of Version 3 of the Criteria in BloodSTAR was a major project spanning four years and involved wide public consultation to allow community consideration of proposed revisions.

Version 3 of the Criteria was published in 2018 and the transition of patients from Criteria Version 2 to Criteria Version 3 was completed in December 2019. Updates to the Criteria are now implemented through a continuous review cycle to ensure the qualifying, exclusion and review criteria and indicative dosages for each condition remain appropriate and in keeping with an evidence-based approach. Two mechanisms for updating the Criteria have been developed: progressive change; and programmed changes.

Programmed changes will provide for a formal periodic review of a condition in relation to the Criteria while progressive changes address clarifications, minor corrections and implement administrative improvements.

Progressive changes to the Criteria were published in August 2019, October 2019 and March 2020. Where clinical advice was needed to develop the appropriate change to the Criteria it was obtained from the relevant Specialist Working Group and was approved by JBC. In August 2019 access to subcutaneous Ig for chronic inflammatory demyelinating polyneuropathy (CIDP) was approved pending the outcomes of the HTA assessment which is evaluating the use of Ig in the treatment of CIDP.

Updates were made to the following conditions in 2019-20:

- Acquired hypogammaglobulinaemia secondary to haematological malignancies or post-haemopoietic stem cell transplant (HCST)
- Acute disseminated encephalomyelitis (ADEM)
- Autoimmune congenital heart block
- Autoimmune encephalitis mediated by antibodies targeting cell-surface antigens (AMAE)
- Childhood epileptic encephalopathy
- Chronic inflammatory demyelinating polyneuropathy (CIDP) (including IgG and IgA paraproteinaemic demyelinating neuropathies)
- Guillain-Barré Syndrome (GBS)
- Haemolytic disease of the fetus (HDF)
- Inflammatory myopathies: polymyositis (PM), dermatomyositis (DM) and necrotising autoimmune myopathy (NAM)
- Neonatal haemochromatosis (NH)
- Paediatric autoimmune neuropsychiatric disorder associated with streptococcal infections (PANDAS) or paediatric acute neuropsychiatric disorders (PANS)
- Primary immunodeficiency diseases (PID) with antibody deficiency
- Pyoderma Gangrenosum
- Secondary hypogammaglobulinaemia unrelated to haematological malignancy or haemopoietic stem cell transplant (HCST)
- Specific antibody deficiency
- Susac syndrome.

The revised Criteria will undergo regular review to ensure the qualifying, exclusion and review criteria and indicative dosages for each condition remain appropriate and in keeping with an evidence-based approach. While some changes meant that many patients could transition seamlessly from Version 2 to Version 3, others required additional information and assessments in order to be able to continue to receive product.

BloodSTAR

The BloodSTAR system was developed by the NBA on behalf of governments to support health providers in managing their Ig governance obligations as set out in the National Policy. The system standardises and manages access to the supply of Ig products by enabling authorisation requests to be submitted electronically and work-flowed to an authoriser for assessment and approval. The NBA has continued to enhance BloodSTAR so that functionality supports the Criteria and the Ig Governance Program objectives in general, as well as improving system usability. Updates were released in October 2019 and March 2020 and further enhancement work is underway.

Immunoglobulin Governance Program

The National Immunoglobulin Governance Program (the Program) is a world-first holistic national governance program for the supply, prescription and use of government funded immunoglobulin products.

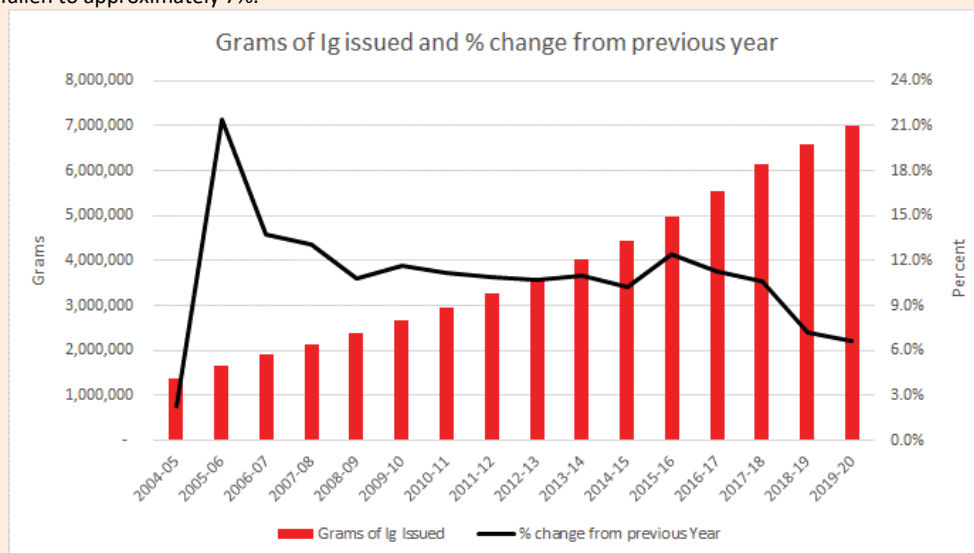
Immunoglobulin or “Ig” is a low risk treatment for a wide range of medical conditions including life-threatening autoimmune conditions, debilitating consequences of malignancy, serious complications of organ transplantation, and chronic genetic deficiencies. Many recognised uses of Ig are for the treatment of rare conditions beyond formally registered clinical indications.

The NBA has ensured uninterrupted supply of Ig products in Australia since 2004. In 2019-20, governments provided access to Ig products for over 20,000 Australians.

The Program ensures that the significant clinical needs of patients can be met more sustainably into the future, by ensuring that access to Ig products:

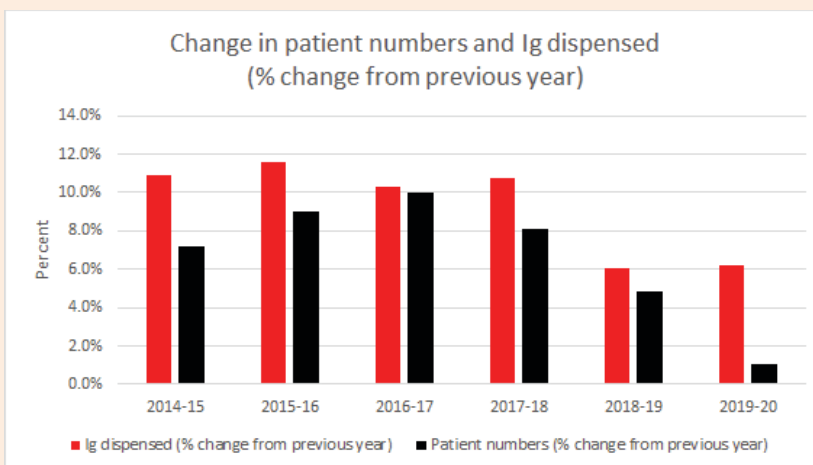
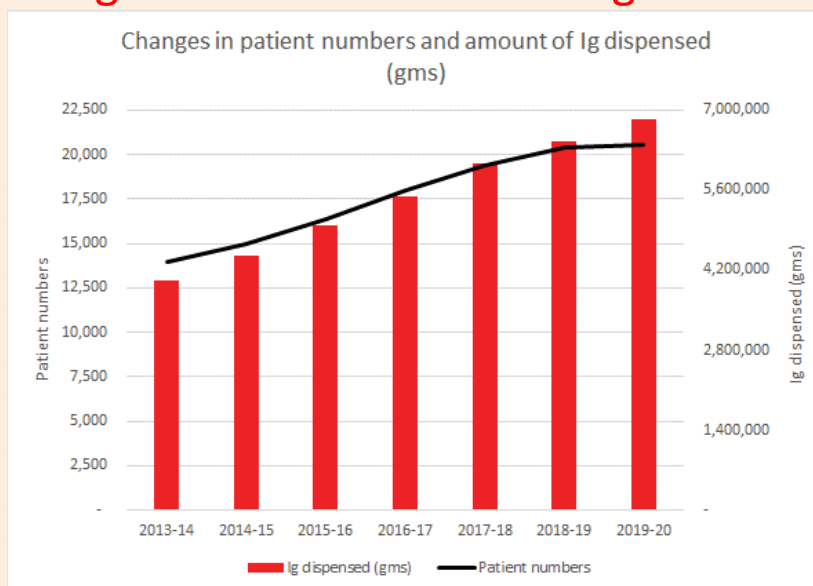
- delivers optimal benefit to patients with various chronic and acute medical conditions;
- reflects appropriate clinical practice;
- represents efficient, effective and ethical expenditure of government funds; and
- is in accordance with relevant national safety and quality standards for health care.

Ig use had been rising at 10-12% each year since 2004-05. Over the last two years the increase in Ig has fallen to approximately 7%.



Parallel decreases in the rates of growth in patient numbers and in the grams of Ig dispensed have also been observed. In 2016-17, the annual increase in patient numbers peaked at 10%. The rate of growth in patient numbers has since declined to 4.9% in 2018-19 and to only 1.1% in 2019-20. The growth in grams of Ig dispensed also steadily declined from 10.7% in 2017-18 to 6.1% in 2018-19 and 6.2% in 2019-20. A similar and steady decline in the grams of Ig dispensed per 1000 population was also observed from 2017-18 to 2019-20.

Immunoglobulin Governance Program



The observed decline in grams of Ig dispensed was not uniform for all the medical conditions. For example, the rate of growth for patients with acquired-hypogammaglobulinaemia (haematological malignancy or post haemopoietic stem cell transplantation) (AHG) declined from 10.4% in 2018-19 to 6.5% in 2019-20. In contrast the rate of growth for CIDP patients for the corresponding years were 5.3% and 9.9%, respectively. AHG had the most grams of Ig dispensed in 2019-20, while CIDP ranks third.

Evaluation of new products

Applications for new blood and blood related products to be listed on the National Product Price List (NPPL) are received by the NBA for evaluation, to be undertaken under Schedule 4 of the National Blood Agreement. Evaluations are not exclusive to new products, and may include existing products for an additional or new indication.

In 2019–20:

- MSAC conducted a cycle 2 assessment of emicizumab for routine prophylaxis in patients with congenital haemophilia A with Factor VIII inhibitors
- the NBA completed a cycle 1 assessment of Obizur for treatment of bleeding in acquired haemophilia A
- the NBA commenced a cycle 1 assessment of RiaSTAP for treatment of acquired fibrinogen deficiency.

Health Technology Assessment of Ig

All Australian Governments, through the Jurisdictional Blood Committee, have agreed to conduct robust Health Technology Assessments of immunoglobulin use (Ig Reviews) funded under the National Blood Agreement. Outcomes of Ig Reviews will ensure government-funded use within Australia for specific medical conditions is based on evidence of clinical safety, effectiveness and cost-effectiveness. This is consistent with how other pharmaceutical and medical technologies are assessed for government funding. The Ig Reviews will complement the NBA Immunoglobulin Governance Program.

Six initial Ig Reviews are being conducted as a pilot program. The medical conditions included in the pilot are:

- Acquired hypogammaglobulinaemia secondary to haematological malignancies, or post-haemopoietic stem cell transplantation
- Myasthenia gravis (MG)
- Chronic inflammatory demyelinating polyneuropathy (CIDP)
- Multifocal motor neuropathy (MMN)
- Primary immunodeficiency diseases (PID) with antibody deficiency
- Secondary hypogammaglobulinaemia unrelated to haematological malignancy or haemopoietic stem cell transplant.

In November 2019, the Medical Services Advisory Committee (MSAC) considered application number 1565 relating to the supply of replacement Ig for the treatment of acquired hypogammaglobulinaemia secondary to haematological malignancies or post-haemopoietic stem cell transplantation.

This is the first of the medical conditions to have had the process completed. Through the public summary document, MSAC advised that no immediate changes were required to the eligibility criteria, but that there should be more research to determine the specific patient groups and best-practice Ig use for greatest benefit. The NBA will consider these recommendations and look at international eligibility criteria to inform future Criteria updates.

Links to condition pages (including publically available documents) on the MSAC website are available at

<https://www.blood.gov.au/health-technology-assessment-reviews-immunoglobulin>

The six selected medical conditions make up 76% of total grams dispensed and 69% of patients in 2019-20.

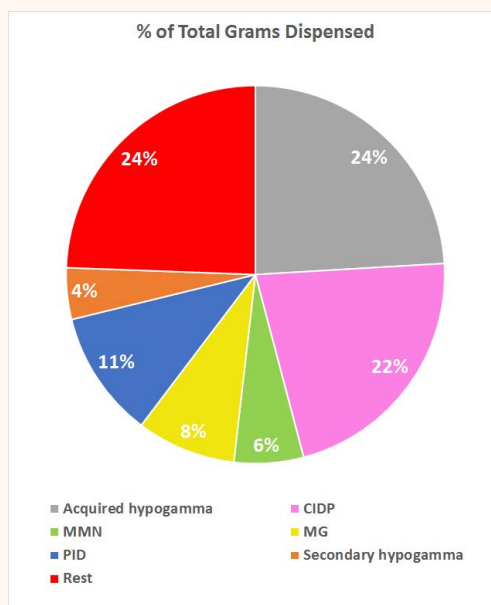


Figure: Percent of Total Grams Dispensed

Data developments

In 2019-20 the NBA continued to build its data capture and analysis capabilities across all aspects of the supply chain, in particular through system and reporting enhancements to BloodNet and BloodSTAR. Enhancing data quality and completeness is a key strategy to improve the overall efficiency and sustainability of the sector by providing a measurement for improvement.

A significant amount of data and information exists within the blood sector. The extent to which this data is currently available to those who need it, the quality of the data, and the capacity of the systems that hold it, varies widely. During 2019-20 the NBA progressed the following activities:

- commenced the Data Improvement Program, with the objectives of:
 - implementing common data standards across NBA systems
 - improving data accuracy, timeliness, consistency, availability, reliability, and relevance through new system capabilities
 - developing a strategic view of how data can support strategic corporate and program objectives
 - implementing new system capabilities for data reporting, analysis, analytics, and visualisation (data warehouse, visualisation tools) to support strategic corporate and program objectives
- refined existing and implemented additional monthly and quarterly issue reports for stakeholders
- collected, analysed and distributed discard data from BloodNet to support the establishment of revised targets for discard rates
- for Haemovigilance:
 - provided secretariat for the Haemovigilance Advisory Committee and the working groups
 - developed and published the annual National Haemovigilance Reports for 2016-17 and 2017-18 with data collected by states and territories, including donor vigilance data collected from Lifeblood
 - undertook activities as part of the work plan to support implementation of the Strategic Framework for the National Haemovigilance Program approved in 2014-15 and drafted a revised work plan and Strategic Framework for 2019-22
 - established working groups to continue to develop haemovigilance tools
 - reviewed the Australian Haemovigilance Minimum Data Set for haemovigilance reporting
- continued to implement the National Blood Product Management Improvement Strategy 2018-22 (Improvement Strategy)
- for Australian Bleeding Disorders Registry (ABDR):
 - refined and added to the ABDR Annual Report for 2018-19
 - continued to develop the set of data standards as part of the data integrity process for the ABDR for review by AHCDO Executive and the Data Managers
 - provided the 2018-19 ABDR Benchmarking Report to AHCDO
- initiated the development of the Ig Annual Report for 2018-19 from BloodSTAR and STARS
- provided BloodSTAR reporting to jurisdictions
- responded to 73 data requests from internal and external stakeholders.

CONTINGENCY PREPAREDNESS

National Blood Supply Contingency Plan

During 2018, the National Blood Supply Contingency Plan (NBSCP) was significantly updated and expanded. At the request of governments, the NBA engaged a consultant to conduct a review of the updated and extended plan, and develop a program of simulation exercises to test the plan. This included extensive consultation across all jurisdictions, relevant Commonwealth agencies and key suppliers of blood and blood products within Australia.

During the significant disruptions in late 2019 and early 2020 for bushfires, and through 2020 during the COVID-19 pandemic, no inventory levels have fallen to a level requiring the NBSCP to be activated. However, the latest events have brought the NBSCP to the front of risk management considerations for the NBA.

During 2020-21, using the learnings from the consultancy, the NBA will work with jurisdictions and relevant Commonwealth agencies, as well as key suppliers, to test, validate and further improve the national preparedness for issues that could impact on the Australian blood supply.

Business Contingency Plan

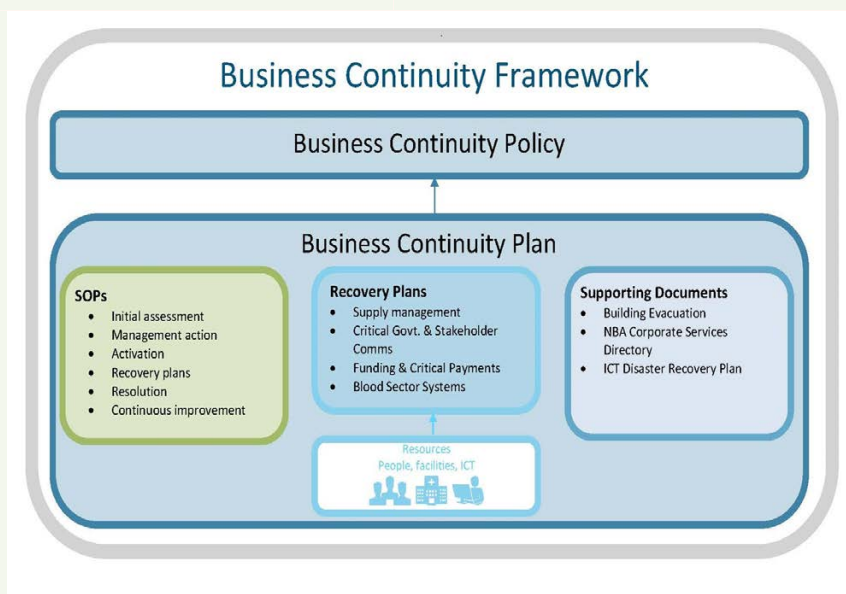
Early in 2020, the NBA's approach to business continuity planning and risk management was reviewed and restructured for currency, better access and ease of use. Whilst this update was a planned program, it became even more important during the period of 2019-20 bushfires and the emergence of the COVID-19 pandemic.

The newly approved Business Continuity Framework comprises a Business Continuity Policy and a Business Continuity Plan (BCP).

The BCP contains relevant business recovery plans which cover the NBA's core business processes, standard operating procedures (SOPs) and supporting documents such as the NBA Corporate Directory, ICT Disaster Recovery document and building evacuation procedures.

The BCP has not been activated during these recent events, however, consideration of the unique challenges that we have faced will be factored into future testing and updates to the Business Continuity Framework.

Figure: Business Continuity Framework



Risk management

The events of 2019 and 2020, including bushfires across Australia and the COVID-19 pandemic, have reinforced the importance of a focus on risk management processes within the NBA. The NBA recognises that risk is a critical and integral part of its business, and that issues faced by the NBA could directly impact on the core responsibility of 'Saving and improving Australian lives through a world-class blood supply'. Ongoing work continues across the risk management framework, ensuring the NBA is well placed to deal with present and future events.

National Blood Supply Contingency Plan (NBSCP)

The NBSCP is the specific risk plan covering a potential interruption to supply of blood and blood related products within Australia. Starting in late 2019, a detailed review of the NBSCP took place, conducted by an expert consultant, to assess the currency and viability of the NBSCP and internal NBA procedures. A report was provided in January 2020 which in part concluded that: *'The NBSCP provides a detailed, documented approach to responding to nationally significant disruptions to Australia's blood supply. The plan is designed to promote a joined-up approach to managing disruptions within the blood sector'*. Building on the report's findings, the NBA will form a working group with jurisdictional representatives as well as participants from relevant Commonwealth agencies and key suppliers to develop and design a test plan or program including simulation exercises, to further strengthen the NBSCP during 2020-21.

Business Continuity Plan (BCP)

The BCP Framework outlines continuity requirements and obligations for the NBA's efficient management of an event that has the potential to impact on the ability to deliver on key objectives during a business disruption. The BCP Framework was updated significantly in 2019-20 with:

- a new BCP Policy
- updated Business Recovery Plans - providing guidance for prioritising the re-establishment of the NBA's Critical Business Processes
- updated Resource Planning - outlining the resourcing requirements (ICT, people and facilities) needed to recover from a business disruption
- updated standard operating procedures (SOPs) and ongoing maintenance and improvement process for the BCP Framework.

Supply risk mitigation for plasma derived and recombinant products

Specific risk management strategies have been developed and implemented for individual plasma and recombinant products. The plasma and recombinant supply risk assessment is updated annually. The NBA completed the update for 2019-20. The update included the validation of existing stock and contractual supply reserves.

Preparation to refresh arrangements for some products in 2019-20 such as Intravenous Immunoglobulin (IVIg) has allowed the NBA to ensure a framework of risk mitigation arrangements is in place, including:

- notification and reporting processes to identify impending risks
- intensive product management mechanisms for products that may be in short supply
- commitments from suppliers to accord preferred customer status to supply for Australia

- intensive product management mechanisms for products that may be in short supply as well as required levels of in-country reserves.

As part of the management of the National Fractionation Agreement for Australia, an annual risk management workshop between CSL Behring and the NBA is held to take into account the present variety of potential risk issues when developing risk management plans for supply arrangements. The most recent workshop took place in November 2019 and provided opportunities to strengthen the NBA's overall risk management framework for plasma derived and recombinant products.

2019-20 sector monitoring

In 2019-20 the NBA continued its horizon scanning of international experience that may influence the management of blood and blood products in Australia. This monitoring activity informs the provision of current and proactive analysis to governments to enable the NBA to fulfil its functions under the National Blood Agreement.

The focus of this activity is on:

- new product developments and applications
- global regulatory and blood practice trends
- scientific and clinical research with implications for supply or demand in the sector
- business events that may have an impact on global supply, demand and pricing, such as changes in company structure, financial outlook, production capacity, organisation, ownership, and marketing and contractual arrangements
- diseases or pandemics that may affect supply or risk
- developments in testing methods, vaccines and disease control strategies that could potentially mitigate risks to supply
- any other emerging risks that could potentially put financial or other pressures on the Australian sector.

The NBA regularly posts to its website a selection of items from this horizon scanning process, illustrating the wide range of factors which may influence industry operations, clinical practice and patient outcomes. This information is available from www.blood.gov.au/monitoring-international-trends-blood-sector

During 2020, the COVID-19 pandemic has been an overwhelming global concern, and issues have arisen which have been of particular significance for blood and blood products, including the volume and safety of blood donations, the use of convalescent plasma as a treatment, and development, testing and manufacture of the relevant hyperimmune immunoglobulin.

CRITICAL EMERGING RISKS

The catastrophic bushfires across Australia in late 2019 and early 2020, followed by the outbreak of COVID-19 during early 2020 have been significant events, requiring close monitoring of blood product inventory levels to ensure there was no shortage of blood and blood products within Australia.

The bushfire outbreak caused various donor centre interruptions and temporary closures, as well as impacting donor availability.

Similarly, with the outbreak of COVID-19, supply levels and donor availability were at the forefront of daily monitoring and assessment, especially during lockdowns.

The NBA and Lifeblood worked closely to ensure that supply at a national level was not disrupted as a result of these unprecedented circumstances.

Blood donation was recognised as an essential service and formally identified by governments as a valid reason for blood donors to travel, even during the strictest lockdowns. The NBA and Lifeblood also worked closely to navigate solutions for various transport and logistic interruptions to ensure continuity of supply of blood products.

Some key observations and learnings were identified by the NBA which will form part of reviewing these events, including:

- the ability to moderate demand levels through suspension of elective surgery, and other careful review of transfusion need
- fewer people travelling appeared to impact the need for blood products in emergency situations

- the importance of providing timely and precise information to clinicians and the health sector
- the importance of liaison with whole of government communication processes in a situation with national and international impacts.

The NBA published information on the NBA website and via blood sector systems on blood management during COVID-19 that focused on:

- good Patient Blood Management - appropriate prescribing and clinical use practices to help maintain blood and blood product inventories
- good inventory management practices to avoid wastage and ensure product is available for appropriate use
- good contingency planning and management to minimise wastage and ensure products are available to meet clinical demand in times of shortage.

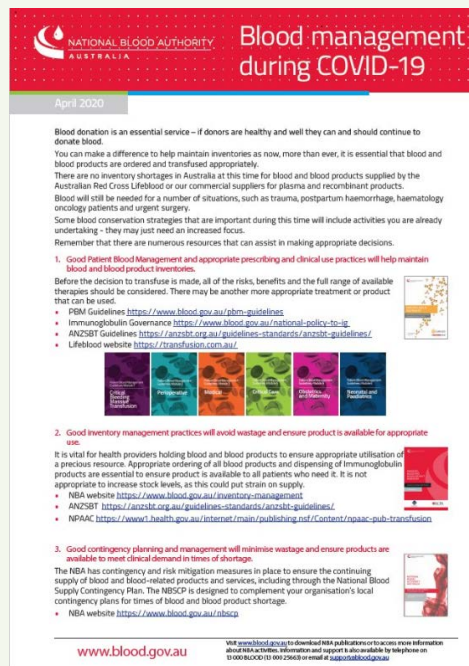


Figure: Blood management during COVID-19

Information Communication Technology (ICT)

The NBA operates a range of Information and Communications Technology systems that directly enable blood and blood product ordering, the management of product authorisations and the clinical management and treatment of patients with bleeding disorders. They are underpinned by infrastructure that has been designed to minimise service interruptions, and maximise system availability and performance.

ICT systems are also a key enabler of data collection and analysis to inform performance improvement, research, policy development, system reporting and governance controls. These systems enable us to provide a safe, secure and affordable blood supply for all Australians.

BloodNet

BloodNet is Australia's online blood and blood products ordering and inventory management system, providing Australian hospitals and laboratories with the ability to order blood and blood products. The NBA continued to support BloodNet, with a number of system and functional enhancements in October 2019 and March 2020.

BloodSTAR

BloodSTAR manages the authorisations to prescribe Ig products funded under the National Blood Agreement and in accordance with Version 3 of the *Criteria for the clinical use of immunoglobulin in Australia*. It provides full visibility of publicly funded immunoglobulin (Ig) usage across Australia in a sector which costs Australian governments over half a billion dollars annually.

The NBA continued to support BloodSTAR, and enhancements were implemented in October 2019 and March 2020 which included the implementation variable dosing functionality to better support the prescription of subcutaneous immunoglobulin.

BloodNet-Laboratory Information System (LIS) Interface

BloodNet interfaces with a number of Laboratory Information Systems (LIS) in Australian hospital systems, providing near real-time visibility of the national blood supply.

During 2019-20 the NBA continued to work with Laboratory Information System (LIS) vendors to deploy capability allowing BloodNet to interface with LIS. Several LIS vendors have completed, or are nearing completion of, BloodNet LIS vendor certification. Vendor certification allows pathology laboratories to achieve BloodNet-LIS facility certification that can be rapidly released into production environments. In 2019-20 Launceston General Hospital achieved facility certification.

The BloodNet LIS interface provides real time savings for pathology services and jurisdictions through the automated exchange of data. The interface also provides benefits in improved product management in real-time and the potential to further improve longer term business processes and product management practices through improved data quality and analysis.

Australian Bleeding Disorders Registry

The Australian Bleeding Disorders Registry (ABDR) is a clinical tool used on a daily basis by clinicians in all Australian haemophilia treatment centres to assist in the management and treatment of people with bleeding disorders. The associated patient portal (MyABDR) is used by patients to record and manage data relating to their bleeding disorders. The NBA supported and managed both ABDR and MyABDR in 2019-20.

ABDR and MyABDR will be used to record the use of clotting factor products and associated therapies by patients in Australia for extended half-life arrangements and will be the source of data for future health technology assessment reviews. The NBA can utilise data recorded in the ABDR for supply planning purposes, and to monitor utilisation and cost in order to confirm the realisation of the benefits of extended half-life products.

Canadian Bleeding Disorders Registry

In 2015, the NBA entered into a contract with McMaster University acting on behalf of the Association of Hemophilia Clinic Directors of Canada (AHCDC), to provide the Canadian Bleeding Disorder Registry (CBDR) and associated system support services. The CBDR is a modified form of the ABDR and comprises Bleeding Disorders Registry (BDR) functionality and a patient mobile interface (MyCBDR). This contract continues until 2020.

The NBA is currently engaged in consultations with AHCDC and McMaster University, the Australian Haemophilia Centre Directors' Organisation (AHCDO), and other stakeholders, in relation to the potential benefits of a continued engagement between the NBA and Australian and Canadian organisations in relation to CBDR, including the possibility of:

- continued NBA support for and further development of BDR-based platforms
- a greater emphasis on more “synergistic” software development between Australian and Canadian requirements
- collaboration to foster research.

NBA Statutory Committees

The NBA Chief Executive has constituted three advisory committees to assist with the performance of the NBA's functions under section 38 of the *National Blood Authority Act 2003 (Cth)* (NBA Act).



The National Immunoglobulin Governance Advisory Committee (NIGAC) was originally established in 2014 to support the NBA's Immunoglobulin Governance Program by providing advice and making recommendations to the NBA to support cost effective and appropriate clinical governance, management and use of immunoglobulin products. In October 2019, the NBA reconstituted NIGAC as a statutory committee under s38 of the NBA Act as part of a broader initiative to formally recognise NIGAC as one of the peak committees. The membership of NIGAC was also refreshed at this time.

NIGAC met twice during 2019-20 to support the work of the Immunoglobulin Governance Program. This included provision of advice on changes to the *Criteria for the Clinical use of Immunoglobulin in Australia* (Criteria), implementation of the Program's Performance Improvement Strategy, and BloodSTAR data enhancement and utilisation activities. A key policy considered by this group was expanding access to subcutaneous immunoglobulin products to include patients with Chronic Inflammatory Demyelinating Polyneuropathy.

NIGAC has also been appointed as the Steering Committee for the Department of Health's Value in Prescribing Immunoglobulin Program to support NPS MedicineWise to develop and deliver educational resources, tools and interventions to support prescribers to use government funded immunoglobulin products appropriately, and accord with the National Policy including the Criteria.



The NBA's national haemovigilance program is informed by the Haemovigilance Advisory Committee (HAC). This group provides advice to the NBA on adverse event reporting originating from health service organisations and on national transfusion safety priorities.

In 2018-19, membership of the HAC was refreshed and the new committee was established by the NBA Chief Executive under s38 of the NBA Act to provide advice and guidance in relation to the development and implementation of the Strategic Framework. The new membership is comprised of individuals with expertise and knowledge in the health sector, blood management, quality and safety, and consumer issues.

HAC met three times during 2019-20 and a number of working groups were also established to further the work plan activities identified for 2020-21.



The Patient Blood Management Advisory Committee (PBMAC) was established in 2019 by the NBA Chief Executive under section 38 of the NBA Act to provide advice and guidance to the NBA in relation to the implementation of PBM in Australia. This committee is comprised of individuals with expertise and knowledge in the health sector, blood management, education, quality and safety, and consumer issues and replaces the previous Patient Blood Management Steering Committee and the National Education and Training committee.

The PBMAC met once during 2019-20 and two working groups were established.

OBJECTIVE 3. PROMOTE THE SAFE AND EFFICIENT USE OF BLOOD AND BLOOD PRODUCTS

In 2019-20 the NBA continued its program to promote the safe and efficient use of blood and blood products through the identification and synthesis of new clinical evidence, development of draft clinical guidance in collaboration with clinical stakeholders, and research and analysis of methodologies capable of retaining the currency of clinical practice guidelines.

Patient Blood Management (PBM)

Over 160,000 hard copies of the PBM modules 1 to 6 have been issued. They have also been downloaded in over 60 countries. They provide evidence-based guidance on optimisation of the patient's own blood, non-transfusion strategies to minimise blood loss and bleeding, and strategies to manage anaemia.

In 2019-20 the nature and volume of evidence published since the release of the perioperative (Module 2), medical (Module 3), critical care (Module 4), obstetrics and maternity (Module 5) and neonatal and paediatric (Module 6) modules was identified. These findings were used to inform the development of a prioritised research question list. The update of the entire critical bleeding/massive transfusion module (Module 1) was paused in 2019-20. It will resume in 2020-21.

During 2019-20, the NBA continued to investigate a more sustainable methodology for updating clinical practice guidelines. Work commenced on the development of Standard Operating Procedures (SOPs) for more targeted updates in response to the emergence of practice-changing information. The SOPs are based on high-level process maps for the preferred guideline model agreed by clinical and government stakeholders in 2018-19.

While the review is underway, the original modules remain available to guide practice.

Guideline for the prophylactic use of Rh D Immunoglobulin in maternity care

In 2019-20 a multi-disciplinary Expert Reference Group (ERG) finalised the draft *Guideline on the prophylactic use of Rh D Immunoglobulin in pregnancy care* and it was released for public comment. All comments were considered by the ERG and the Guideline was updated accordingly. It will be published in 2020-21.

Implementation

A core element of ensuring reference material influences the safe and efficient use of blood and blood products are activities that support their implementation. In 2019-20 the NBA continued its focus on activities to support implementation of measures to reduce wastage of blood and improve appropriate use through the National Patient Blood Management Implementation Strategy 2017-2021 and the National Blood Product Management Improvement Strategy 2018-22. The strategies address a significant proportion of requirements identified in the 2010 Australian Health Ministers' Statement on National Stewardship Expectations on the Supply of Blood and Blood Products.

Promotion and communication

The NBA promotes improved inventory management and appropriate clinical use of blood and blood products at a range of relevant national and international forums.

In 2019-20 the NBA continued its promotion and communication campaign to increase awareness of the need to improve clinical practice and inventory management in relation to blood products. This included representation, promotion and education activities at a range of clinical and health sector conferences and events, including the following:

- International Society on Thrombosis and Haemostasis (ISTH) 2019 Congress, July 2019
- Australasian Society of Clinical Immunology and Allergy (ASCIA) 2019, September 2019
- Haemophilia Foundation Australia (HFA), October 2019
- National Immunohaematology Continuing Education (NICE), October 2019
- Blood 2019 (formally HAA), October 2019
- Rural Medicine Australia (RMA), October 2019
- Guidelines International Network (GIN), October 2019.

BloodSafe eLearning Australia

Education and training

The first course under this program, Clinical Transfusion Practice, was released in late 2007. The catalogue has since expanded to 31 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.

Some highlights from 2019-20 include:

New Courses

- Iron Deficiency Anaemia: Chronic and Complex
- Iron Deficiency Anaemia: Heavy Menstrual Bleeding
- Neonatal: major haemorrhage
- Intraoperative cell salvage.

Videos

- Consent for paediatrics: a shared decision
- Administering blood
- Pre-transfusion samples
- Transporting blood
- Specimen collection.

Courses currently under development include:

- Perioperative bleeding risk assessment
- Clinical Transfusion Practice Refresher (an update to include content on electronic medical records)
- Immunoglobulin therapy.

The average number of course completions per month is 14,803.

'Bloodsafe provides accessible and free education that is current and necessary for healthcare workers. It's a great learning resource.' Registered Nurse QLD June 2020.

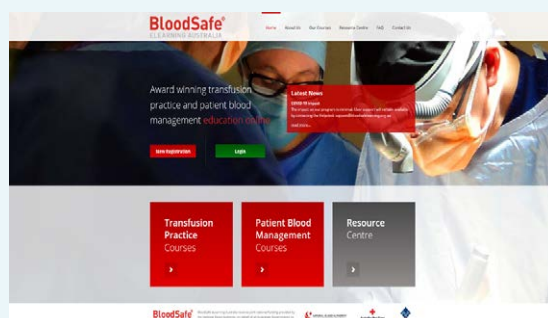
Immunoglobulin Courses

BEA is developing online immunoglobulin courses for the NBA which will provide an overview of immunoglobulin therapy in Australia. The courses will support over 15,000 healthcare professionals across Australia to learn more about immunoglobulin products, their role in treatment, governance arrangements and access, and appropriate usage and administration.

- Immunoglobulin: Essentials
- Immunoglobulin: Governance and Access
- Immunoglobulin: Prescribing
- Immunoglobulin: Administration
- Immunoglobulin: Adverse Events.

The courses are aimed at health care staff involved with the prescription, administration and reporting of immunoglobulin product use, including:

- specialists who prescribe immunoglobulin
- medical officers who are responsible for seeking authorisation for patient access to government funded immunoglobulin
- laboratory and pharmacy staff who store and dispense the products
- nurses and midwives responsible for ordering the product from the laboratory or pharmacy, and administering immunoglobulin treatment to patients.



Education and Training

BloodSafe eLearning Australia

BloodSafe eLearning Australia provides online education and training resources for health professionals in Australia. The program aims to improve knowledge of patient blood management and clinical transfusion practice in order to improve patient outcomes.

BloodSafe eLearning Australia is funded by the National Blood Authority on behalf of all Australian governments. During 2019-20 the BloodSafe eLearning Australia program:

- delivered 255,239 hours of education
- had 177,634 courses completed by users, with 14,803 courses completed on average each month, approximately one course completed every three minutes
- registered 62,185 new users
- was used by more than 1,500 Australian health care organisations including hospitals, pathology laboratories and staffing agencies to improve staff knowledge and assist them to meet their accreditation requirements
- promoted the courses in professional journals and at scientific, medical and nursing conferences, and provided resources for organisations to undertake their own promotions
- developed new courses on Iron Deficiency Anaemia: Chronic and Complex, Iron Deficiency Anaemia: Heavy Menstrual Bleeding, Neonatal: major haemorrhage and Intraoperative cell salvage
- produced a series of videos including Consent for paediatrics: a shared decision, Administering blood, Pre-transfusion samples, Transporting blood, and Specimen collection
- began a review and update of courses to include Lifeblood rebranding and started the development of electronic medical records content for the second Clinical Transfusion Practice Refresher.

National Safety and Quality Health Service Standards

The National Safety and Quality Health Service (NSQHS) Standards were developed by the Australian Commission on Safety and Quality in Health Care (ACSQHC) with the Australian government, state and territory partners, consumers and the private sector providing input and feedback.

The primary aim of the NSQHS Standards is to protect the public from harm and improve the quality of health care. They describe the level of care that should be provided by health service organisations and the systems that are needed to deliver such care.

The Blood Management Standard - Standard 7 aims to improve outcomes for patients by identifying risks and using strategies that optimise and conserve a patient's own blood, as well as 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 principles of patient blood management (PBM).

During 2019-20 the NBA continued to work with the ACSQHC and other stakeholders in the implementation of the second edition of the NSQHS Standards.

National Blood Sector Research and Development Program

In September 2015 the NBA received approval from funding governments to offer two grant rounds under a blood sector research and development pilot. Following success of the pilot, the grant scheme has continued under the National Blood Sector Research and Development Program.

In 2019-20 Round 4 of the program resulted in the funding of 11 projects across immunoglobulin and patient blood management streams.

The NBA assembled an expert panel to review the proposals from Round 4. The panel comprised:

- clinical experts
- academics
- researchers
- senior government personnel.

Applications for grant funding fall into one of the following categories:

- project grants (up to 3 years)
- seed grants (up to 1 year)
- scholarship grants (up to 1 year).

The expert review panel considered applications against the R&D Program's key criteria that focused on:

- research focus
- scope and potential value
- quality
- governance and ethics
- efficient and effective use of funds.

Strict management of actual or potential conflicts of interest continued during assessment of Round 4 applications.

Outcomes of completed grants, including publications and presentations, are promoted on the NBA website. Furthermore, an evaluation of the program is planned in 2020-21 to assess any impacts of funded projects on clinical practice.

The National Blood Sector Research and Development Program will continue with two further funding rounds (Round 5 in 2020 and Round 6 in 2021). Funding may be available for up to three years in each round. Projects of various types and durations are considered in the process.

Round 5 preparation continued in 2019-20 with the expected opening early in 2020-21. Consultation with the research community was undertaken and timing of the round adjusted to account for COVID-19 impacts.

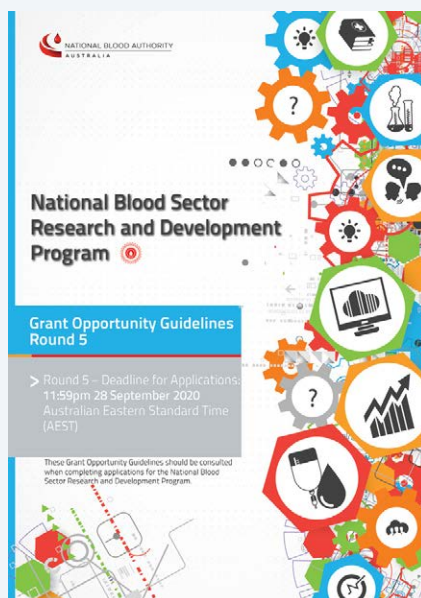


Figure: Round 5 Application Documentation

Research and Development

National blood sector research and development priorities

Under the National Blood Agreement, the NBA is required '...to facilitate and fund appropriate research, policy development or other action in relation to new developments by relevant government or non-government persons or bodies'. The National Blood Research and Development Strategic Priorities are under review. The identified priorities are intended to provide a useful resource to guide research proposals and may be used by researchers to support funding requests, including from the National Health and Medical Research Council, by identifying that their research aligns with priorities communicated by governments.

National blood sector research and development program

In September 2015 the NBA received approval from funding governments to implement a pilot program to directly fund some research and development activities in the blood sector.

The program targets the following topics, where the priority for research has been identified through pre-existing strategic programs of the NBA and governments in the blood sector:

- patient blood management evidence gaps, as identified in each module of the PBM Guidelines
- efficient and effective use of immunoglobulin products, as highlighted through the Ig Governance Program.

The overarching objectives are to identify and fund research that will:

- 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 by providing evidence or new knowledge to:
 - understand the biological action of blood products
 - identify optimum treatment, dosing or indications for use for blood products
 - compare the use of blood products with alternative strategies and treatments.

In 2018 an evaluation of the pilot confirmed the viability and value of research and development funding to support a National Blood Sector Research and Development Program. Round 5 is underway.

The NBA has received a substantial level of high quality input from clinical, academic, research and government experts who participated in the review process and assisted the NBA in determining the mix of research projects to be funded within the Program's limited budget. The NBA is confident that the funded research will be a valuable contribution towards achievement of the blood sector's research outcomes. The outcomes of each grant funding round are reported on the NBA's website.

Six projects were completed successfully in 2019-20, with one publication being accepted in a peer reviewed journal and eight journal manuscripts are in draft. Research funded under the R&D Program has been presented at conferences within Australia and overseas. Outcomes from the R&D Program support future research, the evolution of the Criteria and the PBM Guidelines.



PART



3

MANAGEMENT AND ACCOUNTABILITY

STRUCTURE, GOVERNANCE AND AUTHORITY IN THE BLOOD SECTOR

PLANNING FRAMEWORK

SERVICE CHARTER

EXTERNAL SCRUTINY

FRAUD CONTROL

HUMAN RESOURCES AND PEOPLE MANAGEMENT

STRUCTURE, GOVERNANCE AND AUTHORITY IN THE BLOOD SECTOR

Governance Arrangements

The key governing bodies in the Australian blood sector and their roles and relationships are set out in the National Blood Agreement and *National Blood Authority Act 2003*, and depicted in Figure 3.1.

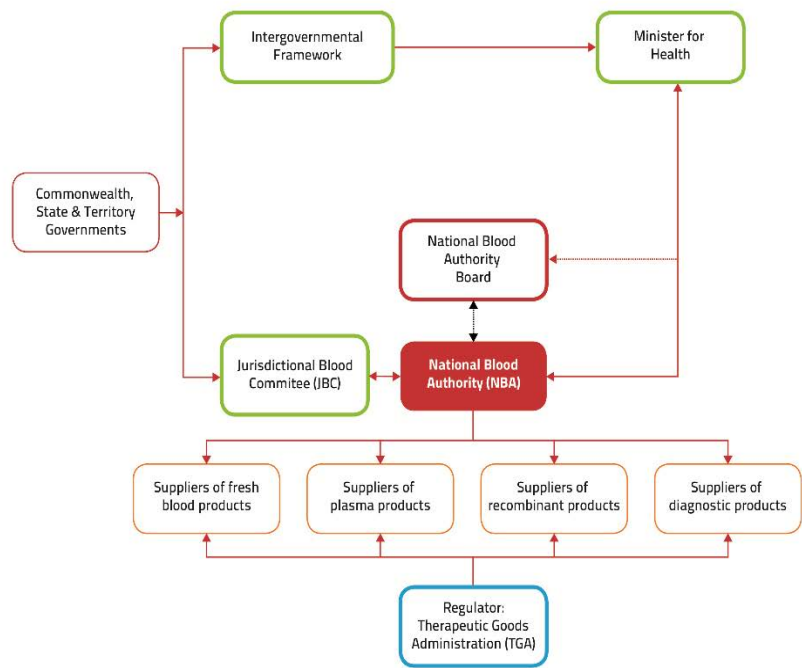


FIGURE 3.1 Governance and Authority in the Blood Sector

The NBA exists within the portfolio responsibilities of the Minister for Health. The NBA General Manager is the Chief Executive of the NBA and is a statutory officer responsible to the Commonwealth Minister for Health and the Council of Australian Governments (COAG) Health Council.

On 29 May 2020 the Prime Minister announced that COAG would cease and a new National Federation Reform Council (NFRC) would be formed, with a National Cabinet at the centre of the NFRC. More information is available on the Department of the Prime Minister and Cabinet website.

Establishment of the National Blood Authority

The National Blood Agreement between all funding governments outlines the policy framework for the current national blood arrangements. The Agreement outlines the:

- nationally agreed objectives of governments for the blood sector (primary and secondary)
- governance arrangements for the sector
- administrative arrangements for the management of the national blood supply
- financial arrangements for the national blood supply.

The NBA emerged from the 2001 Review of the Australian Blood Banking and Plasma Product Sector undertaken by Sir Ninian Stephen. The Stephen Review noted the need for changes to the inconsistent and fragmented arrangements that applied to the blood sector at that time. More specifically, there were 30 agreements in existence between the governments, the Blood Service (at the time, now Lifeblood) and CSL. In addition, supply costs had tripled between 1991 and 1999.

The Stephen Review recommended the strengthening of the arrangements for the coordination and oversight of Australia's blood supply, including the establishment of a National Blood Authority to manage Australia's blood supply at a national level.

Negotiations to develop a national management framework commenced in June 2001 in consultation with the states, territories and other key interest groups.

Commonwealth legislation allowing for the establishment of the NBA passed through both Houses of Parliament and the new Authority came into existence on 1 July 2003.

NBA Governance Committees

An overview of the NBA Governance structure is shown in Figure 3.2.



FIGURE 3.2 Governance and Authority in the NBA

Three committees assist the NBA Chief Executive to plan and manage corporate governance, outcome delivery, strategic projects and stakeholder interests:

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

The role of the NBA Business Committee is to:

- support and advise the Chief Executive
- provide strategic leadership, guidance and direction in relation to all business activities and processes and also in relation to people management, financial management and ICT issues
- review NBA business plans and activities, and monitor progress regularly against key milestones and deliverables
- consider NBA investment priorities and review these priorities 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 may be required to attend meetings for relevant agenda items.

- The **NBA Audit and Risk Committee (ARC)** provides independent advice and assurance to the Chief Executive on strategies to enhance the organisation's governance control and risk management framework, assist with planning and conducting the NBA internal audit program and support financial and legislative compliance. The Committee met six times in 2019-20.

The ARC membership in 2019-20 was as follows:

- Mr Ken Barker (Chair) resigned 18 September 2019
- Mr Paul Bedbrook (Board representative)
- Mrs Roslyn Jackson (Chair from 19 September 2019)
- Mr Greg Fraser.

Short biographies for each member can be found in Appendix 1: Committee and Board Member Profiles.

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

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

Representatives from the Australian National Audit Office (ANAO) and the NBA internal auditors (currently RSM (Australia)) also attend meetings as observers for most matters.

The ARC Charter defines four primary areas of focus. In 2019-20 matters considered by the ARC included:

- *Financial reporting*
 - NBA consideration of the implications of revised accounting standards
 - engagement with NBA management and ANAO in relation to the annual financial statements audit, including formal clearance of annual financial statements
 - *Performance reporting*
 - NBA Corporate Plan, Business Plan and Operational Scorecard
 - NBA annual performance KPIs and reporting
 - *Systems of risk oversight and management*
 - NBA strategic risk management and business continuity framework
 - NBA fraud control framework
 - Comcover benchmark reporting
 - National Managed Fund investment framework and performance
 - *Systems of internal control*
 - Annual internal audit work plan, reports, and implementation of recommendations, including internal audits in relation to:
 - > national blood sector research and development program review
 - > official travel allowances review.
- The **Staff Participation Forum (SPF)** provides a forum for the NBA to consult directly with its employees and representatives about significant decisions that affect their working lives. The SPF is a group comprised of NBA staff representatives, NBA management representatives and a Work Health and Safety representative. The SPF meets quarterly.

NBA Management

As at 30 June 2020, the NBA Executive Management team comprised the following:

- Chief Executive – Mr John Cahill
- Deputy Chief Executive, Commercial Blood Products and Business Services – Mr Michael Stone
- Deputy Chief Executive, Fresh Blood Products and Business Systems – Ms Elizabeth Quinn.

As at 30 June 2020, the NBA was comprised of two business streams, Commercial Blood Products and Business Services and Fresh Blood Products and Business Systems.

The teams in the two streams are:

Commercial Blood Products and Business Services:

- Commercial Blood Products
- Immunoglobulin Governance
- Research and Product Review
- Finance and Business Services
- People and Communications
- Legal Services.

Fresh Blood Products and Business Systems:

- Blood and Data Services
- Blood Operations Centre
- Fresh Blood Products and Services
- Information Technology Services
- Risk Management.

Internal Audit and Risk

The NBA's internal audit and risk program, guided by the ARC, plays a key part in risk mitigation. The ARC reviews the risk register on an annual basis as a key input in developing the internal audit and risk program.

RSM (Australia) conducted a range of audits and reviews in line with the work program developed in conjunction with the ARC. The 2019-20 work program encompassed reviews of the NBA's:

- National Blood Sector Research and Development Program
- official travel allowance
- employee remuneration.

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

PLANNING FRAMEWORK

The NBA has a comprehensive planning framework as depicted in Figure 3.3.

Current programs include:

- National Supply and Funding
- National Risk Assessment and Management
- Immunoglobulin Governance
- National Guidelines Development and Implementation
- National Supply Efficiency and Wastage Reduction
- Information Management and Technology
- Blood Sector Knowledge Development
- Research and Development
- Corporate Governance and Management.

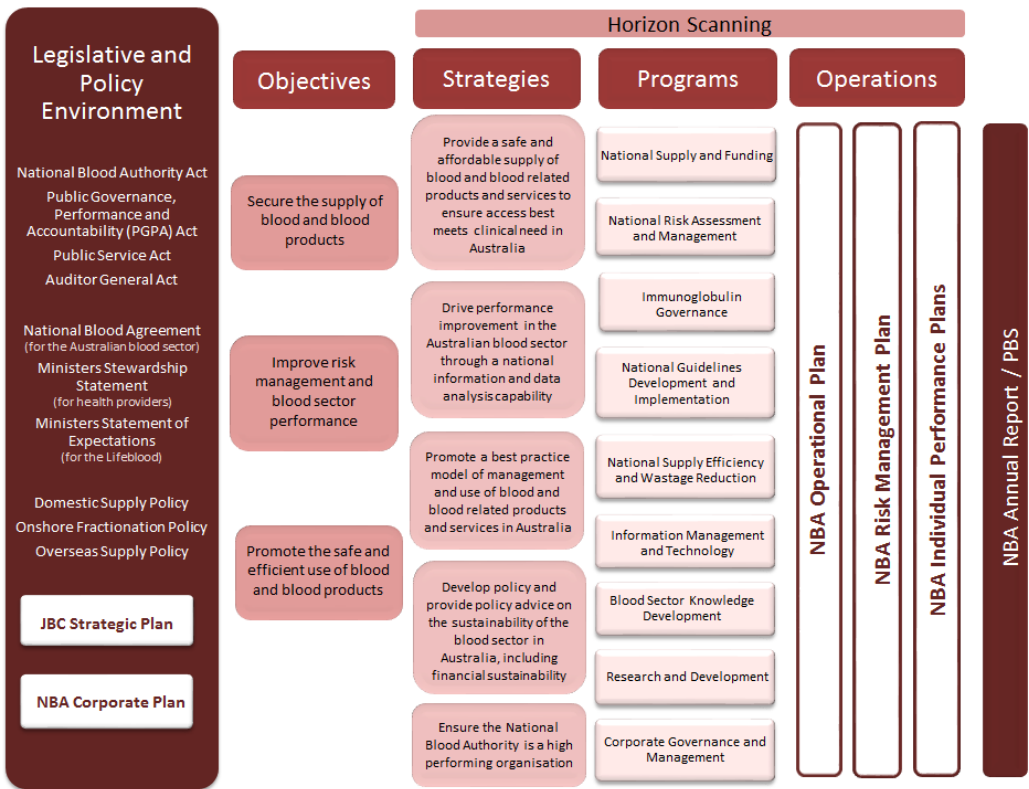


FIGURE 3.3 NBA Planning Framework

Progress against the Business Plan is monitored and reviewed by the NBA Business Committee. A quarterly report on progress against key actions is also provided to the NBA Board and the ARC.

In 2019-20 the NBA delivered 61 per cent of activities against the planned outcomes. Table 3.1 demonstrates the overall trend in the NBA's delivery against the business plan over the past five years. Some activities have been delayed or deferred due to revision of timelines and changing priorities due to COVID-19 as agreed by the NBA Executive.

TABLE 3.1 NBA's performance in achieving business plan objectives, 2015-16 to 2019-20

Year	2015-16	2016-17	2017-18	2018-19	2019-20
Performance (%)	97%	98%	70%	81%	61%

Key operational achievements for 2019-20 included the following:

- the uninterrupted supply of blood and blood products to meet all clinical demand in accordance with the approved National Supply Plan and Budget (NSP&B)
- closer management of blood supply issues and arrangements during bushfire emergency periods and as COVID-19 emerged
- the implementation of the fourth cycle of the Output Based Funding Model (OBFM) Funding and Services Agreement with Lifeblood
- efficiency review of Lifeblood completed
- clotting factors tender process completed in May 2020
- Round 4 research grants awarded and finalised, and Round 5 grants prepared for opening in 2020-21
- contingency planning arrangements reviewed
- BloodNet and BloodSTAR updates completed and successfully deployed in October 2019 and March 2020
- the transition of NBA staff to home-based employment promptly and efficiently during COVID-19, and continuing effective delivery of critical functions while working remotely
- worked with Lifeblood and CSL Behring as they rapidly commenced collecting and processing convalescent plasma from recovering COVID-19 patients to develop hyperimmunes and other potential therapies and treatments for COVID-19 in Australia and to support clinical trials.

SERVICE CHARTER

The NBA service charter provides an opportunity for further business improvement to enhance the way the NBA conducts its day-to-day business. In essence, the service charter outlines:

- the ongoing commitment to the high standard of service that stakeholders have come to expect from the NBA
- the expectations that the NBA has of its stakeholders so that they can help the NBA deliver the highest standards of service.

The service charter provides a streamlined feedback mechanism. The NBA is committed to providing a high level of service to all stakeholders and welcomes feedback on its level of service on an ongoing basis. Stakeholders can provide feedback directly to the NBA via the NBA website at www.blood.gov.au/feedback. Feedback is recorded, monitored and acted upon as appropriate, with a view to improving performance and, ultimately, the NBA's level of service.

The NBA received one compliment in 2019-20.

BLOOD 2019 AWARDS

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

The NBA actively participates in this meeting, and sponsors two key awards. Since 2014, the ANZSBT Council has been awarding a prize sponsored by the NBA for the best poster or oral presentation with a transfusion focus by a young investigator. In addition, since 2017, the NBA sponsors an award for the best poster or oral presentation on haemovigilance.

Young Investigator Award



In 2019, the recipient of the \$500 Young Investigator award was Mrs Alana Delaforce, who presented her research, "Assessing transfusion practice in elective surgical patients: a baseline audit to identify opportunities for

improvement".

Alana has a background in theatre nursing and now works as a quality coordinator at the Mater Hospital Brisbane. She is in the final year of her PhD, the focus of which is to investigate barriers to the implementation of patient blood management guidelines. The project aims to determine which interventions and implementation strategies best influence the uptake of evidence based patient blood management recommendations. The published paper details one strategy called "tailored audit and feedback". Following an audit, the challenge was to work out how to communicate the results to prescribers, and a flowchart was developed to help augment conversations explaining recommended practice. It enables prescribers to see clearly where they can focus their improvement work to enhance the care provided to patients.

Haemovigilance Award



In 2019, the recipient of the \$500 Best poster/oral presentation on haemovigilance award was Ms Debbie Pinchon for her poster

"Haemovigilance in WA – what does 3 years of state-wide reporting tell us?". Debbie has worked as a nurse and a midwife in the UK and Australia, specialising in haematology, transfusion and haemovigilance for the past 19 years. She completed her MSc in Health Professional Leadership in 2007 and has published papers in international peer-reviewed journals.

Previously, Debbie was responsible for the implementation of anaemia management throughout WA's tertiary Women and Newborn Hospitals, has led a large number of practice improvements in relation to patient blood management and the safe and appropriate use of blood products and its alternatives. Debbie currently works at the WA Department of Health and has a particular interest in the management of transfusion reactions and haemovigilance and is passionate about improving clinical transfusion practice.

Debbie attributes the award success to her colleagues, peers and the teams who continue to commit to reporting, investigating and submitting transfusion related adverse events over the years. She emphasised that success is the result of teamwork fundamental to WA's success and progress in haemovigilance.

EXTERNAL SCRUTINY

There have been no judicial decisions, decisions of administrative tribunals or decisions of the Australian Information Commissioner in 2019-20 that have had, or may have, a significant impact on the operations of the NBA. There were no legal actions lodged against the NBA in 2019-20.

There have been no reports on the operations of the NBA by the Auditor-General (other than the reports on financial statements), or a Parliamentary committee or the Commonwealth Ombudsman in 2019-20. There were no capability reviews released during 2019-20.

FRAUD CONTROL

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

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

No instances of fraud were detected during the reporting year.

Certification of fraud control arrangements

I, John Cahill, certify that I am satisfied that for 2019-20, the National Blood Authority has:

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

John Cahill
Chief Executive
National Blood Authority

HUMAN RESOURCES AND PEOPLE MANAGEMENT

NBA organisational structure

The structure of the NBA as at 30 June 2020 can be seen in Figure 3.4 below.

There are two business streams:

- Fresh Blood Products and Business Systems, and
- Commercial Blood Products and Business Services.

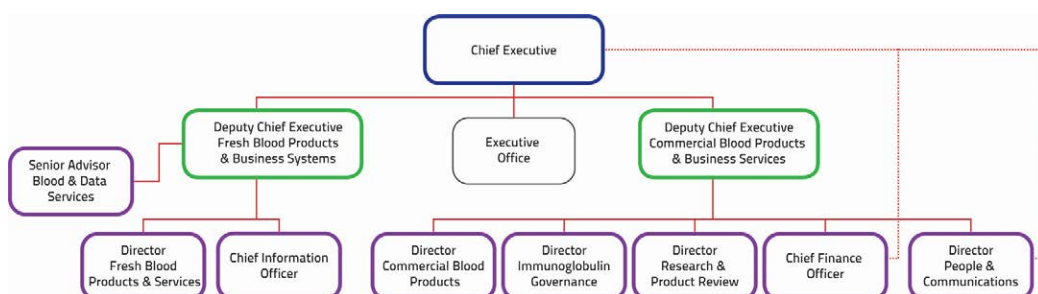


FIGURE 3.4 NBA Organisational Chart

During 2019-20 the NBA continued its commitment to managing and developing its employees to meet organisational objectives. The results of the 2019 Australian Public Service (APS) Employee Census highlighted the success of the NBA in continuing to be an organisation with a strong team culture focused on outcome delivery.

The overall employee census outcomes for the NBA were very pleasing, indicating the organisation has a stable, happy and motivated workforce. Areas for improvement relate to dealing more effectively with underperformance, increasing opportunities for mobility, talent management and career progression, and internal communication and change management. Throughout the year, the NBA has continued to celebrate the things being done well and investigate the areas that require improvement; and identify actions, by encouraging active discussion amongst staff and teams to understand the results and find longer term opportunities for further improvement.

Due to COVID-19, the 2020 APS Employee Census has been delayed until October 2020, with results expected in January 2021. The Census has been updated to better reflect the current environment focusing on working differently, breaking down barriers, collaboration, achieving outcomes and wellbeing.

NBA staff have shown great flexibility and adaptability in response to the significantly changed working environment arising from COVID-19. The NBA has continued to perform its work very effectively and staff have continued to be highly productive while maintaining a COVID-19 safe workplace and when working from home.

Our values

The NBA strongly endorses the APS Values, Employment Principles and Code of Conduct. This underpins expectations for the behaviour and conduct from all staff. Employees of the NBA understand their responsibilities as members of the APS and representing the NBA and the Australian government.

Workforce

The total number of APS staff employed in the NBA was 61 employees (58.58 full time equivalent) at the end of June 2020. The following tables provide a breakdown of NBA staff numbers by classification, gender and employment type for the current report period 2019-20 and the previous report period 2018-19.

TABLE 3.2 Australian Public Service Act ongoing employees current report period (2019-20)

	Male			Female			Total
	Full Time	Part Time	Total Male	Full Time	Part Time	Total Female	
SES 1	1	-	1	1	-	1	2
EL 2	5	-	5	4	-	4	9
EL 1	5	-	5	12	3	15	20
APS 6	2	-	2	10	3	13	15
APS 5	1	-	1	3	3	6	7
APS 4	-	-	-	2	-	2	2
Other	1	-	1	-	-	-	1
Total	15	-	15	32	9	41	56

Other includes Chief Executive

TABLE 3.3 Australian Public Service Act non-ongoing employees current report period (2019-20)

	Male			Female			Total
	Full Time	Part Time	Total Male	Full Time	Part Time	Total Female	
EL 1	1	-	1	-	2	2	3
APS 6	-	-	-	-	-	-	-
APS 4	-	-	-	2	-	2	2
Total	1	-	1	2	2	4	5

TABLE 3.4 Australian Public Service Act ongoing employees previous report period (2018-19)

	Male			Female			Total
	Full Time	Part Time	Total Male	Full Time	Part Time	Total Female	
SES 1	1	-	1	1	-	1	2
EL 2	4	-	4	4	-	4	8
EL 1	6	-	6	9	3	12	18
APS 6	-	-	-	9	3	12	12
APS 5	2	-	2	6	2	8	10
APS 4	-	-	-	1	-	1	1
Other	1	1	2	-	-	-	2
Total	14	1	15	30	8	38	53

Other includes Chief Executive and Legal 1

TABLE 3.5 Australian Public Service Act non-ongoing employees previous report period (2018-19)

	Male			Female			Total
	Full Time	Part Time	Total Male	Full Time	Part Time	Total Female	
EL 1	1	-	1	-	1	1	2
APS 5	-	-	-	2	-	2	2
APS 4	1	-	1	2	-	2	3
Total	2	-	2	4	1	5	7

TABLE 3.6 Australian Public Service Act employees by full time and part time status current report period (2019-20)

	Ongoing			Non-Ongoing			Total
	Full Time	Part Time	Total Ongoing	Full Time	Part Time	Total Non-Ongoing	
SES 1	2	-	2	-	-	-	2
EL 2	9	-	9	-	-	-	9
EL 1	17	3	20	1	2	3	23
APS 6	12	3	15	-	-	-	15
APS 5	4	3	7	-	-	-	7
APS 4	2	-	2	2	-	2	4
Other	1	-	1	-	-	-	1
Total	47	9	56	3	2	5	61

Other includes Chief Executive

TABLE 3.7 Australian Public Service Act Employees by full time and part time status previous report period (2018-19)

	Ongoing			Non-Ongoing			Total
	Full Time	Part Time	Total Ongoing	Full Time	Part Time	Total Non-Ongoing	
SES 1	2	-	2	-	-	-	2
EL 2	8	-	8	-	-	-	8
EL 1	15	3	18	1	1	2	20
APS 6	9	3	12	2	-	2	14
APS 5	8	2	10	-	-	-	10
APS 4	1	-	1	3	-	3	4
Other	1	1	2	-	-	-	2
Total	44	9	53	6	1	7	60

Other includes Chief Executive and Legal 1

The average age of NBA staff is 44.72 years. Table 3.8 provides a breakdown of the age demographic of NBA employees.

TABLE 3.8 Age demographic of NBA staff as at 30 June 2020

Age	Number of employees
20-25	1
26-30	4
31-35	10
36-40	7
41-45	9
46-50	13
51-55	6
56-60	8
61-65	1
66+	2
Total	61

We have 59 staff located in the Australian Capital Territory, one in New South Wales and one in Queensland. Both New South Wales and Queensland employees are part-time.

TABLE 3.9 All ongoing employees current report period (2019-20)

	Male			Female			Total
	Full Time	Part Time	Total Male	Full Time	Part Time	Total Female	
NSW	-	-	-	-	1	1	1
QLD	-	-	-	-	1	1	1
ACT	15	-	15	32	7	39	54
Total	15	-	15	32	9	41	56

TABLE 3.10 All non-ongoing employees current report period (2019-20)

	Male			Female			Total
	Full Time	Part Time	Total Male	Full Time	Part Time	Total Female	
ACT	1	-	1	2	2	4	5
Total	1	-	1	2	2	4	5

TABLE 3.11 All ongoing employees previous report period (2018-19)

	Male			Female			Total
	Full Time	Part Time	Total Male	Full Time	Part Time	Total Female	
NSW	-	-	-	-	1	1	1
QLD	-	-	-	-	1	1	1
ACT	15	-	15	30	6	36	51
Total	15	-	15	30	8	38	53

TABLE 3.12 All non-ongoing employees previous report period (2018-19)

	Male			Female			Total
	Full Time	Part Time	Total Male	Full Time	Part Time	Total Female	
ACT	2	-	2	4	1	5	7
Total	2	-	2	4	1	5	7

TABLE 3.13 Australian Public Service Act employment type by location current report period (2019-20)

	Ongoing	Non-Ongoing	Total
NSW	1	-	1
QLD	1	-	1
ACT	54	5	59
Total	56	5	61

THE NBA APPROACH TO PEOPLE

During 2019-20 the NBA focus was on continuing to support our people through nurturing and growing skills, cultivating leadership, embracing the benefits of diversity and facilitating a safe and healthy workplace.



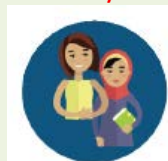
Staff Participation Forum

The NBA has a Staff Participation Forum (SPF) to consult with its employees and their representatives about significant decisions that affect their working lives. The SPF is a group comprised of NBA staff representatives, NBA management representatives and a Work Health and Safety representative.

Work health and safety (WHS)

The NBA recognises the value of encouraging a work environment that supports the health and wellbeing of its employees. Workplace health and safety matters are standing agenda items that are routinely discussed at a variety of organisational reporting meetings such as HR reporting to the senior executive management group, the Business Committee and the Staff Participation Forum. There were no reportable incidents lodged with Comcare and no investigations were conducted by Comcare during the reporting year.

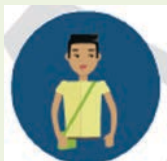
Diversity



74% of the workforce are women



62% of EL & SES leaders are women



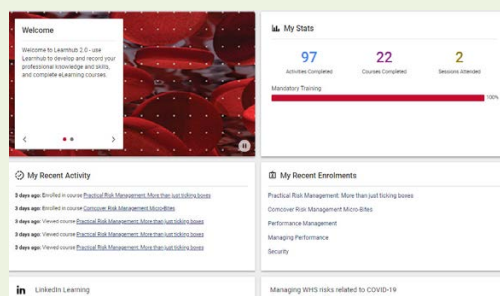
14% of employees from NES backgrounds

Learning and Development

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

Leadership development

Following on from the restructure in 2018-19, analysis of the 2019-20 APS employee census results and as part of the broader People Strategy, the NBA identified the need to build and develop the existing people capability within the agency, in particular at the executive level (EL). The EL cohort is a significant proportion of NBA staff numbers and is a key dependency in the delivery of the NBA's strategic and operational objectives. A pilot program was conducted in December 2019 and will continue to be a focus in 2020-21.



Learnhub version 2.0 – online training for all NBA staff

The NBA officially launched Learnhub, an e-learning management system designed to allow staff easy access to training courses and other development resources, in August 2018. Through this online learning portal, staff can access a range of content including Australian Public Service (APS) annual mandatory awareness training modules.

The NBA transitioned to Learnhub version 2.0 in January 2020. The upgrade has provided a new look, a faster operating speed and increased functionality for users.

TABLE 3.14 Australian Public Service Act employment type by location previous report period (2018-19)

	Ongoing	Non-Ongoing	Total
NSW	1	-	1
QLD	1	-	1
ACT	51	7	58
Total	53	7	60

The NBA has a diverse workforce with 14 per cent of NBA employees identifying as being from non-English speaking backgrounds and 27 per cent born outside of Australia. In 2019-20 the NBA did not have any employees who reported as identifying as indigenous.

In 2019-20 the NBA made efforts to attract indigenous employees through open/non-targeted recruitment and retention processes that included exploring alternate pathways such as the Australian Government Indigenous Program. In addition, previously established relationships with indigenous recruitment organisations have been strengthened.

Staff turnover and retention

Staff turnover increased from 11.1 per cent in 2018-19 to 20 per cent in 2019-20. Twelve people departed the NBA during 2019-20.

The average length of service for staff at the NBA is 5.12 years, which is consistent with the previous year.

NBA Enterprise Agreement

The current enterprise agreement (EA) was approved on 12 January 2016. On 24 December 2018 a Determination was made under Section 24(1) of the *Public Service Act 1999* to continue the current terms and conditions of employment for staff under the EA and increase salaries by 2 per cent per annum for each of the next three years. The second salary increase was effective on 19 January 2020.

On 9 April 2020, the Assistant Minister to the Prime Minister and Cabinet, the Hon Ben Morton MP, announced Government's decision to pause general wage increases in Commonwealth agencies for six months. It is the Government's expectation that over the next 12 months, remuneration proposals made by APS and non-APS agencies include a six-month pause on increases to salary and salary-related allowances over the period.

The Minister made a determination under subsection 24(3) of the *Public Service Act 1999* effective from 14 April 2020, which automatically pauses any wage increase occurring within the 12-month period.

TABLE 3.15 Australian Public Service Act employment arrangements current report period (2019-20)

	SES	Non-SES	Total
Common Law or Section 24 Agreement	2	-	2
Individual Flexibility Arrangements	-	14	14
Enterprise Agreement/Section 24 (1) Determination	-	44	44
Total	2	58	60

Chief Executive not included in above figures

The table below details salary ranges by classification level (reflecting the full span of salaries available under the Determination and in any Individual Flexibility Agreements).

**TABLE 3.16 Australian Public Service Act employment salary ranges by classification level
minimum/maximum) current report period (2019-20)**

	Minimum Salary	Maximum Salary
SES 1	194,397	222,638
EL 2	123,301	168,014
EL 1	103,755	125,312
APS 6	84,063	106,377
APS 5	76,203	80,428
APS 4	70,061	74,030
APS 3	61,837	68,545
APS 2	53,511	58,392
APS 1	45,768	51,419
Other	103,307	125,078
Other - Legal 1		

Non-salary benefits

The EA and other employment arrangements provide a range of non-salary benefits in addition to those consistent with national employment standards and the *Fair Work Act 2009*. The benefits provided are very similar to those provided by many other agencies and are detailed in the EA and available on the NBA website at <https://www.blood.gov.au/employment-benefits>.

Non-SES employees may have access to the following non-salary benefits:

- annual Christmas close-down
- Australian Defence Force Reserve leave
- breastfeeding facilities
- Employee Assistance Program (EAP)
- family and domestic violence leave
- financial and/or paid leave to support professional development
- flexible working arrangements with time off in lieu (TOIL) where appropriate (for EL employees)
- flex-time (for APS classified employees)
- home-based work, laptop computers, internet access, and mobile phones
- individual flexibility arrangements
- influenza vaccinations for staff and their immediate family members
- leave for compassionate purposes
- maternity and adoption leave
- NBA's health and wellbeing program
- parental leave
- provision of eyesight testing and reimbursement of prescribed eyewear costs specifically for use with screen-based equipment
- purchase up to an additional four week's annual leave per year
- recreation and personal leave at half pay
- salary packaging arrangements.

SES non-salary benefits include all of the above (except flex-time and TOIL) plus

- airport lounge membership
- executive vehicle allowance
- onsite car parking.

Productivity gains

During the year, the NBA continued to adjust staffing levels to meet program and resourcing demands and contribute to the government's efficiency dividend strategy.

The NBA continued the review of all governance processes, procedures and guidance materials to streamline practices, aimed at improving the utilisation of corporate and executive resources. The review includes HR, financial and reporting policies and practices ensuring they align with the NBA's appetite for risk and support the Agency's corporate strategy and business plan.

The NBA continued services through the Department of Health Shared Services Centre. The NBA also continued to use Commonwealth panel arrangements for the external provision of services such as recruitment, training, annual influenza vaccinations and the Employee Assistance Program (EAP).

Remuneration and performance pay

Total remuneration for senior executive officers is determined through negotiation between individual officers and the Chief Executive, taking into account the broader economic environment as well as APS and Remuneration Tribunal benchmark data. Performance pay is not available to NBA staff.

TABLE 3.17 Information about remuneration for key management personnel

Name	Position title	Short-term benefits		Post employment benefits	Other long-term benefits	Total remuneration
		Base salary	Other benefits	Super contributions	Long service leave	
John Cahill	Chief Executive	\$346,346	-\$3,814	\$34,751	\$7,628	\$384,911
Michael Stone	Deputy Chief Executive	\$236,611	-\$6,524	\$36,101	\$6,572	\$272,760
Elizabeth Quinn	Deputy Chief Executive	\$207,008	\$3,414	\$42,645	\$1,707	\$254,775

Amounts are reported on an accrual basis.

TABLE 3.18 Information about remuneration for senior executives

Total remuneration bands	Number of senior executives	Short-term benefits		Post employment benefits	Other long term benefits	Total remuneration
		Average base salary	Average other benefits and allowances	Average Super contributions	Average long service leave	Average total remuneration
\$250,000-\$275,000	2	\$221,809	-\$1,555	\$39,373	\$4,140	\$263,768
\$370,001-\$395,000	1	\$346,346	-\$3,814	\$34,751	\$7,628	\$384,911

Professional and personal development

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

The NBA implemented an eLearning management system, Learnhub, in August 2018 in support of ongoing professional and personal development for staff. Learnhub has strengthened and built upon existing staff skills as well as satisfying annual mandatory training requirements. The NBA transitioned to Learnhub version 2.0 in January 2020.

During the year, the NBA reintroduced a series of Knowledge Management (KM) Forums. KM Forums provide information sessions for staff members on a number of topics. KM Forums held included Employee Assistance Program (EAP) Awareness sessions; salary sacrifice information; Qantas Business Travel systems training and cyber security. The KM Forums have been placed on hold since the beginning of the COVID-19 pandemic.

Following on from the restructure in 2018-19, analysis of the 2019-20 APS employee census results and as part of the broader People Strategy, the NBA identified the need to build and develop the existing people capability within the agency, in particular at the executive level (EL). The EL cohort comprises a significant proportion of NBA staff numbers and is a key dependency in the delivery of the NBA's strategic and operational objectives. A pilot program was conducted in December 2019, however, due to COVID-19 this program has been placed on hold.

Work health and safety

Workplace health and safety matters are standing agenda items that are routinely discussed at a variety of organisational reporting meetings such as HR reporting to the senior executive management group, the Business Committee and the Staff Participation Forum.

There were no reportable incidents lodged with Comcare during the reporting year. No investigations were conducted by Comcare during the reporting year.

Initiatives that were undertaken by the NBA during the year to maintain its ongoing commitment to a safe and secure workplace included:

- the continued availability of workstation assessments for all new starters as well as assessments for existing staff who felt it necessary for their wellbeing
- access to the EAP
- expansion of ICT remote working capabilities to cover all staff, enabling staff to work remotely
- sit-to-stand desks
- implementation and ongoing management of the WHS governance framework.

Health and wellbeing

The NBA recognises the value of encouraging a work environment that supports the health and wellbeing of its employees. Some of the eligible activities which are open to staff members include:

- health memberships
- specialist advice and programs
- annual influenza vaccinations for staff and their immediate families.



PART

4

PART 4

FINANCIAL MANAGEMENT

FINANCIAL MANAGEMENT

FINANCIAL PERFORMANCE

ASSETS MANAGEMENT

PURCHASING

FINANCIAL STATEMENTS

FINANCIAL MANAGEMENT

Funding

The functions of the NBA are outlined in the *National Blood Authority Act 2003* and the National Blood Agreement. 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*, and the *Australian Public Service Act 1999*, along with a responsibility to meet ministerial, parliamentary and financial reporting requirements.

Under the National Blood Agreement between the Commonwealth and all states and territories, 63 per cent of NBA funding is provided by the Commonwealth and the remaining 37 per cent is provided 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:

- assets, liabilities, revenues and expenses controlled by the NBA for its operations are classified as departmental revenues and expenses
- activities and expenses controlled or incurred by the NBA on behalf of governments, mainly for the procurement of the requested products and services, are classified as administered revenues and expenses.

Transactions in the National Blood Account are separated into departmental and administered components. All balances in the National Managed Fund (Blood and Blood Products) Special Account are administered funds.

The NBA's agency resource statement and total resources for outcome tables are given in Appendix 4. Table 4.1 summarises the NBA's high level funding and expenditure for 2019-20.

TABLE 4.1 Departmental and Administered funding and expenditure 2019-20: a summary

	Funding (\$M)	Expenditure (\$M)
Departmental - NBA Operations	10.450	10.763
Administered - national blood and blood product supply	1,214.426	1,177.642

Special accounts

The NBA operates through two special accounts, the National Blood Account and the National Managed Fund (NMF) 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. Funding received from the Australian government and the states and territories is held within the special accounts and expended 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*.

The NMF Blood and Blood Products Special Account 2017 was established under section 78 of the *Public Governance, Performance and Accountability Act 2013* 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 2019-20. Details of departmental and administered results are shown in the audited financial statements, and this summary should be read in conjunction with those statements.

Audit report

The NBA received an unqualified audit report for 2019-20.

Departmental finances

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

Operating result

The NBA's income statement reports a 2019-20 operating loss of \$0.154 million, compared with an operating loss of \$0.677 million in 2018-19.

TABLE 4.2 Key results in financial performance, 2015-16 to 2019-20

Revenue & expenses	2015-16 (\$'000)	2016-17 (\$'000)	2017-18 (\$'000)	2018-19 (\$'000)	2019-20 (\$'000)
Contributions from the Australian government	5.719	5.636	5.590	5.682	5.681
Contributions from States and Territories and other revenue	3.877	4.376	4.087	4.469	4.769
Total revenue	9.596	10.012	9.677	10.151	10.450
Employee expenses	6.469	6.744	6.637	7.438	7.689
Supplier expenses	3.002	2.350	4.698	2.909	1.855
Other expenses	0.380	0.521	0.394	0.481	1.219
Total expenses	9.851	9.615	11.729	10.828	10.763
Operating result	(0.255)	0.397	(2.052)	(0.677)	(0.154)

Revenue

Total departmental revenue received in 2019-20 amounted to \$10.450 million: \$5.681 million in funding from the Australian government; \$4.769 million in contributions received from the states and territories and other revenue; and \$0.066 million for resources received free of charge. This represents an increase of \$0.299 million (2.95 per cent) on revenue received in 2018-19. Other revenue refers to contributions arising from officers transferring from other agencies.

Expenses

The NBA's expenses for 2019-20 amounted to \$10.763 million. This represents a decrease of \$0.065 million (1 per cent) on total expenses from 2018-19.

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 \$8.821 million at 30 June 2020. This included funds received from all jurisdictions and transferred to the Official Public Account held by the Department of Finance until required for expenditure. Trade and other receivables increased by \$0.292 to \$1.1502 million.

Non-financial assets

There was no significant change in the carrying amount of non-financial assets during the financial year.

Payables

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

Provisions

Employee provisions, which cover annual and long service leave entitlements, increased by \$0.328 million to \$2.742 million.

Administered finances

The NBA's administered finances include contributions from all states and territories and the Australian government for the supply of blood and blood products. Each year the Council of Australian Governments (COAG) Health Council approves an annual National Supply Plan and Budget, which is formulated by the NBA from demand estimates provided by the states and territories.

Revenue

Total revenue for 2019-20 is presented in Table 4.3. Total revenue increased by \$6.505 million (a 0.54 per cent increase, down from the 4.20 per cent increase the prior year) for the current financial year. In 2019-20 the NBA returned \$73.10 million (2018-19 \$52.00 million) to the Commonwealth, state and territory governments for the end of year reconciliation as part of the National Blood Agreement.

TABLE 4.3 Administered revenue, 2015-16 to 2019-20

Administered revenue	2015-16 (\$'000)	2016-17 (\$'000)	2017-18 (\$'000)	2018-19 (\$'000)	2019-20 (\$'000)
Funding for supply of blood and blood products	1,040.865	1,046.325	1,153.302	1,203.591	1,211.007
Total administered revenues	1,045.279	1,050.159	1,158.748	1,207.921	1,214.426

Expenses

Total administered expenses for 2019-20, including grants and rendering of goods and services, are presented in Table 4.4. Administered expenses for 2019-20 decreased 1.54 per cent over those for 2018-19. Lifeblood as part of the Output Based Funding Model returned \$69.80 million in 2019-20 (2018-19 \$39.70 million).

TABLE 4.4 Key results of administered expenses, 2015-16 to 2019-20

Administered revenue	2015-16 (\$'000)	2016-17 (\$'000)	2017-18 (\$'000)	2018-19 (\$'000)	2019-20 (\$'000)
Grants to the private sector - non-profit organisation	8.830	0.401	0.599	0.738	0.745
Rendering of goods and services - external entities	1,056.815	1,061.265	1,163.196	1,193.734	1,174.839
Other	0.716	1.169	1.275	1.600	2.058
Total administered expenses	1,066.361	1,062.835	1,165.070	1,196.072	1,177.642

Administered assets and liabilities

Administered assets comprise the following:

- funds held in the Official Public Account
- investments made in relation to the National Managed Fund (NMF)
- Goods and Services Tax (GST) 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 (OBFM)
- administered liabilities comprise payables to suppliers.

During 2019-20 net administered assets decreased by \$62.143 million.

ASSETS MANAGEMENT

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

PURCHASING

The NBA adheres to the *Commonwealth Procurement Rules* and best practice guidance when undertaking procurements. The guidelines are applied to the NBA's activities through the accountable authority's management instructions and key business processes.

The NBA has developed business processes to ensure that the knowledge and best practices developed within 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 meet government policy and better practice. The audit findings have been consistently favourable in relation to complying with mandatory processes. The NBA has implemented recommended opportunities.

The key business processes are constantly reviewed and refined as part of the NBA's own requirement for continual improvement in the management of its core business functions.

Exempt contracts

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

Competitive tendering and contracting

There were no contracts of \$100,000 or more (inclusive of GST) let in 2019-20 that did not provide for the Auditor-General's access to the contractor's premises.

Consultants

The selection and engagement of consultants was treated in the same way as the procurement of other property and services and was conducted in accordance with the *Public Governance, Performance and Accountability Act 2013*, Commonwealth Procurement Rules and internal policies and procedures. During 2019-20, three new consultancy contracts were entered into involving total actual expenditure of \$367,601 (GST inclusive). In addition, three ongoing consultancy contracts were active during the 2019-20 year, involving actual expenditure of \$420,078 (GST inclusive). Total expenditure on consultancies in 2019-20 was \$787,679 (GST inclusive).

Annual reports contain information about actual expenditure on contracts for consultancies. Information on the value of contracts and consultancies is available on the AusTender website, www.tenders.gov.au. No contracts were entered into that were exempt from reporting on the AusTender website - www.tenders.gov.au. Table 4.5 shows total expenditure on all consultancy services in 2019-20.

TABLE 4.5 Number and expenditure on consultants current report period (2019-20)

	Total
Number of new contracts entered into during the period	3
Total actual expenditure during the period on new contracts (including GST)	\$367,601
Number of ongoing contracts engaging consultants that were entered into during a previous period	3
Total actual expenditure during the period on ongoing contracts (including GST)	\$420,078

Procurement Initiatives to Support Small Business

The NBA 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: www.finance.gov.au/procurement/statistics-on-commonwealth-purchasing-contracts.

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

The NBA has in place procurement practices which support SMEs. This includes but is not limited to electronic systems or other processes used to facilitate on-time payment performance, including the use of payment cards.

Table 4.6 shows total expenditure on all consultancy services from 2015-16 to 2019-20 covering both new contracts let in the applicable year and ongoing contracts let in previous years.

TABLE 4.6 Expenditure on consultancy services, 2015-16 to 2019-20

Year	Number let	Total expenditure on new and existing consultancies (\$)
2015-16	11	\$424,193
2016-17	4	\$69,922
2017-18	7	\$392,766
2018-19	8	\$653,426
2019-20	6	\$787,679

FINANCIAL STATEMENTS



INDEPENDENT AUDITOR'S REPORT

To the Minister for Health

Opinion

In my opinion, the financial statements of the National Blood Authority (the Entity) for the year ended 30 June 2020:

- (a) comply with Australian Accounting Standards – Reduced Disclosure Requirements 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 2020 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 2020 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 and forming part of the financial statements, comprising an Overview Note, summary of significant accounting policies and other explanatory information.

Basis for opinion

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

Accountable Authority's responsibility for the financial statements

As the Accountable Authority of the Entity, the Chief Executive 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 – Reduced Disclosure Requirements and the rules made under the Act. The Chief Executive is also responsible for such internal control as the Chief Executive 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 is responsible for assessing the ability of the Entity to continue as a going concern, taking into account whether the Entity's operations will cease as a result of an

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administrative restructure or for any other reason. The Chief Executive 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



Mark Vial
Senior Director
Delegate of the Auditor-General

Canberra

3 September 2020

NATIONAL BLOOD AUTHORITY
FINANCIAL STATEMENTS
for the year ended 30 June 2020

STATEMENT BY THE ACCOUNTABLE AUTHORITY AND CHIEF FINANCIAL OFFICER

In our opinion, the attached financial statements for the year ended 30 June 2020 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

2 September 2020



Signed

Ashley Jackson
Chief Financial Officer

2 September 2020

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

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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 2020

	Notes	2020 \$'000	2019 \$'000
NET COST OF SERVICES			
Expenses			
Employee benefits	1.1A	7,689	7,438
Suppliers	1.1B	1,855	2,909
Depreciation and amortisation	3.2A	1,152	477
Finance costs	1.1C	20	3
Write-down and impairment of other assets	1.1D	47	-
Losses from asset sales		-	1
Total expenses		10,763	10,828
Own-Source Income			
Own-source revenue			
Revenue from contracts with customers	1.2A	4,269	3,817
Other revenue	1.2B	434	586
Total own-source revenue		4,703	4,403
Gains			
Resources received free of charge - remuneration of auditors	1.2C	66	66
Total gains		66	66
Total own-source income		4,769	4,469
Net (cost of)/contribution by services		(5,994)	(6,359)
Revenue from government	1.2D	5,681	5,682
Surplus/(Deficit) before income tax on continuing operations		(313)	(677)
Income tax expense		-	-
Surplus/(Deficit) after income tax on continuing operations		(313)	(677)
OTHER COMPREHENSIVE INCOME			
Items not subject to subsequent reclassification to net cost of services			
Changes in asset revaluation surplus		159	-
Total other comprehensive income		159	-
Total comprehensive income/(loss)		(154)	(677)

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

NATIONAL BLOOD AUTHORITY
STATEMENT OF FINANCIAL POSITION
as at 30 June 2020

		2020	2019
	Notes	\$'000	\$'000
ASSETS			
Financial assets			
Cash and cash equivalents	3.1A	8,821	8,678
Trade and other receivables	3.1B	1,502	1,353
Total financial assets		10,323	10,031
Non-financial assets¹			
Buildings	3.2A	1,629	-
Leasehold improvements	3.2A	490	570
Plant and equipment	3.2A	570	580
Computer software	3.2A	112	160
Other non-financial assets	3.2B	184	164
Total non-financial assets		2,985	1,474
Total assets		13,308	11,505
LIABILITIES			
Payables			
Suppliers	3.3A	129	794
Other payables	3.3B	128	488
Deferred revenue	3.3C	309	-
Total payables		566	1,282
Interest bearing liabilities			
Leases	3.4A	1,609	-
Total interest bearing liabilities		1,609	-
Provisions			
Employee provisions	6.1A	2,742	2,414
Other provisions	3.5A	173	172
Total provisions		2,915	2,586
Total liabilities		5,090	3,868
Net assets		8,218	7,637
EQUITY			
Contributed equity		5,799	5,182
Reserves		619	460
Retained surplus		1,800	1,995
Total equity		8,218	7,637

1. Right-of-use assets are included in the "Buildings" line item.

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 2020

	Retained Earnings		Asset revaluation reserve		Contributed equity/capital		Total equity	
	2020	2019	2020	2019	2020	2019	2020	2019
	\$'000	\$'000	\$'000	\$'000	\$'000	\$'000	\$'000	\$'000
Opening balance								
Balance carried forward from previous period	1 995	2 672	460	460	5 182	4 565	7 637	7 697
Adjustment on initial application of AASB 15	(301)	-	-	-	-	-	(301)	-
Adjustment on initial application of AASB 16	419	-	-	-	-	-	419	-
Adjusted opening balance	2 113	2 672	460	460	5 182	4 565	7 755	7 697
Comprehensive Income								
Revaluation adjustment	-	-	159	-	-	-	159	-
Surplus / (Deficit) for the period	(313)	(677)	-	-	-	-	(313)	(677)
Total comprehensive income attributable to Australian Government	(313)	(677)	159	-	-	-	(154)	(677)
Transactions with owners								
<i>Contributions by owners</i>								
Departmental capital budget	-	-	-	-	617	617	617	617
Total transactions with owners	-	-	-	-	617	617	617	617
Closing balance as at 30 June attributable to Australian Government	1 800	1 995	619	460	5 799	5 182	8 218	7 637

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 2020

	Notes	2020 \$'000	2019 \$'000
OPERATING ACTIVITIES			
Cash received			
Appropriations		5,681	5,682
Sale of goods and rendering of services		4,675	4,357
Net GST received		319	227
Total cash received		10,675	10,266
Cash used			
Employees		7,288	7,059
Suppliers		2,797	2,466
Interest payments on lease liabilities		21	-
Total cash used		10,105	9,525
Net cash from/(used by) operating activities		570	741
INVESTING ACTIVITIES			
Cash used			
Purchase of property, plant and equipment		222	198
Purchase of intangibles		7	160
Total cash used		229	358
Net cash from/(used by) investing activities		(229)	(358)
FINANCING ACTIVITIES			
Cash received			
Contributed equity - departmental capital budget		506	226
Total cash received		506	226
Cash used			
Principal repayment of lease liabilities		703	-
Total cash used		703	-
Net cash from/(used by) financing activities		(197)	226
Net increase/(decrease) in cash held		143	609
Cash and cash equivalents at the beginning of the reporting period		8,678	8,069
Cash and cash equivalents at the end of the reporting period	3.1A	8,821	8,678

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 2020

	Notes	2020 \$'000	2019 \$'000
NET COST OF SERVICES			
Expenses			
Employee benefits	2.1A	772	569
Suppliers	2.1B	1,174,839	1,193,734
Grants - non-profit organisations	2.1C	745	738
Depreciation and amortisation	4.2B	1,286	1,031
Total expenses		1,177,642	1,196,072
Income			
Revenue			
Non-taxation revenue			
Revenue from contracts with customers	2.2A	1,211,007	1,203,892
Interest equivalency payments		3,419	3,617
Other revenue		-	413
Total non-taxation revenue		1,214,426	1,207,921
Total revenue		1,214,426	1,207,921
Total income		1,214,426	1,207,921
Net contribution by services		36,784	11,849
Surplus		36,784	11,849
OTHER COMPREHENSIVE INCOME			
Items not subject to subsequent reclassification to net cost of services			
Changes in asset revaluation surplus		(2)	-
Total comprehensive income		36,782	11,849

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 2020

	Notes	2020 \$'000	2019 \$'000
ASSETS			
Financial assets			
Cash and cash equivalents	4.1A	193,100	168,335
Trade and other receivables	4.1B	45,092	28,988
Other investments	4.1C	133,800	129,800
Other financial assets	4.1D	-	76,032
Total financial assets		371,992	403,155
Non-financial assets			
Plant and equipment	4.2B	7	25
Intangibles	4.2B	5,939	5,882
Inventories	4.2A	113,529	100,985
Prepayments		58,407	-
Total non-financial assets		177,882	106,892
Total assets administered on behalf of Government		549,874	510,047
LIABILITIES			
Payables			
Suppliers	4.3A	55,178	57,683
Deferred revenue	4.3B	104,475	-
Total payables		159,653	57,683
Total liabilities administered on behalf of Government		159,653	57,683
Net assets		390,221	452,364

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

NATIONAL BLOOD AUTHORITY
ADMINISTERED RECONCILIATION SCHEDULE
as at 30 June 2020

	2020 \$'000	2019 \$'000
Opening administered assets less administered liabilities as at 1 July 2019	452,364	437,111
Net (cost of) / contribution by services		
Income	1,214,426	1,207,921
Expenses		
Payments to entities other than corporate Commonwealth entities	(1,177,642)	(1,196,072)
Adjustment on initial application of AASB 15	(102 555)	-
Other comprehensive income		
Revaluations transferred to reserves	(2)	-
Transfers (to) / from the Australian Government:		
Appropriation transfers from Official Public Account:		
Annual appropriations	3,630	3,404
Closing assets less liabilities as at 30 June 2020	390,221	452,364

Accounting Policy

Administered cash transfers to and from the Official Public Account

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

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

NATIONAL BLOOD AUTHORITY
ADMINISTERED CASH FLOW STATEMENT
for the year ended 30 June 2020

	2020 \$'000	2019 \$'000
OPERATING ACTIVITIES		
Cash received		
Revenue from contracts with customers	1,195,998	1,194,787
Interest	3,831	3,404
Net GST received	117,639	119,609
Other	-	713
Total cash received	1,317,468	1,318,513
Cash used		
Employees	772	569
Grants	745	738
Suppliers	1,289,489	1,330,351
Total cash used	1,291,006	1,331,658
Net cash (used by)/ from operating activities	26,462	(13,145)
INVESTING ACTIVITIES		
Cash received		
Maturity of investments	70,000	63,600
Total cash received	70,000	63,600
Cash used		
Purchase of property, plant & equipment and intangibles	1,327	2,421
Acquisition of investments	74,000	66,500
Total cash used	75,327	68,921
Net cash (used by) investing activities	(5,327)	(5,321)
Net increase / (decrease) in cash held	21,135	(18,466)
Cash and cash equivalents at the beginning of the reporting period	168,335	183,397
Cash from the Official Public Account		
Appropriations	3,630	3,404
Total cash from the Official Public Account	3,630	3,404
Cash to the Official Public Account		
Special accounts	(3,630)	(3,404)
Total cash to the Official Public Account	(3,630)	(3,404)
Cash and cash equivalents at the end of the reporting period¹	193,100	168,335
1. As shown in the administered schedule of assets and liabilities	4.1A	

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

NATIONAL BLOOD AUTHORITY OVERVIEW NOTE

for the year ended 30 June 2020

Objectives of the National Blood Authority

The National Blood Authority (NBA) is an Australian Government controlled entity. It is a not-for-profit entity. 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 2019-20 which have been tabled in Parliament.

The Basis of Preparation

The financial statements are general purpose financial statements and 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 – Reduced Disclosure Requirements 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.

New Australian Accounting Standards

All new / revised / amending standards and/or interpretations that were issued prior to the signing of these statements by the Accountable Authority and Chief Financial Officer and applicable to the current reporting period were adopted by the NBA. This includes the following significant standards / interpretations:

NATIONAL BLOOD AUTHORITY
OVERVIEW NOTE
for the year ended 30 June 2020

Standard/ Interpretation	Nature of change in accounting policy, transitional provisions, and adjustment to financial statements
	AASB 15, AASB 2016-8 and AASB 1058 became effective 1 July 2019.
AASB 15 Revenue from Contracts with Customers / AASB 2016-8 Amendments to Australian Accounting Standards – Australian Implementation Guidance for Not-for-Profit Entities and AASB 1058 Income of Not-For-Profit Entities	<p>AASB 15 establishes a comprehensive framework for determining whether, how much and when revenue is recognised. It replaces existing revenue recognition guidance, including AASB 118 Revenue, AASB 111 Construction Contracts and Interpretation 13 Customer Loyalty Programmes. The core principle of AASB 15 is that an entity recognises revenue to depict the transfer of promised goods or services to customers in an amount that reflects the consideration to which the entity expects to be entitled in exchange for those goods or services.</p> <p>AASB 1058 is relevant in circumstances where AASB 15 does not apply. AASB 1058 replaces most of the not-for-profit (NFP) provisions of AASB 1004 Contributions and applies to transactions where the consideration to acquire an asset is significantly less than fair value principally to enable the entity to further its objectives, and where volunteer services are received.</p> <p>The details of the changes in accounting policies, transitional provisions and adjustments are disclosed below and in the relevant notes to the financial statements.</p> <p>AASB 16 became effective on 1 July 2019.</p> <p>This new standard has replaced AASB 117 Leases, Interpretation 4 Determining whether an Arrangement contains a Lease, Interpretation 115 Operating Leases—Incentives and Interpretation 127 Evaluating the Substance of Transactions Involving the Legal Form of a Lease.</p> <p>AASB 16 provides a single lessee accounting model, requiring the recognition of assets and liabilities for all leases, together with options to exclude leases where the lease term is 12 months or less, or where the underlying asset is of low value. AASB 16 substantially carries forward the lessor accounting in AASB 117, with the distinction between operating leases and finance leases being retained.</p> <p>The details of the changes in accounting policies, transitional provisions and adjustments are disclosed below and in the relevant notes to the financial statements.</p>
AASB 16 Leases AASB 2018-8 Amendments to Australian Accounting Standards – Right-of-Use Assets of Not-for-Profit Entities	

All other new / revised / amending standards and/or interpretations adopted by the NBA did not have a material effect on these financial statements and are not expected to have a material impact on the NBA's future financial statements.

Following the adoption of AASB 15 and 16 there are no new standards that impact these statements issued prior to the signing of these statements.

NATIONAL BLOOD AUTHORITY OVERVIEW NOTE

for the year ended 30 June 2020

Application of AASB 15 Revenue from Contracts with Customers / AASB 1058 Income of Not-For-Profit Entities

The NBA adopted AASB 15 and AASB 1058 using the modified retrospective approach, under which the cumulative effect of initial application is recognised in retained earnings at 1 July 2019. Accordingly, the comparative information presented for 2019 is not restated, that is, it is presented as previously reported under the various applicable AASBs and related interpretations. Following the adoption of the modified retrospective approach transitional adjustments have been made to retained earnings to reflect the transition.

Under the new income recognition model the NBA first determined whether an enforceable agreement exists and whether the promises to transfer goods or services to the customer are 'sufficiently specific'. If an enforceable agreement exists and the promises are 'sufficiently specific' (to a transaction or part of a transaction), the NBA applies the general AASB 15 principles to determine the appropriate revenue recognition. If these criteria are not met, the NBA have considered whether AASB 1058 applies.

In relation to AASB 15, the NBA elected to apply the new standard to all new and uncompleted contracts from the date of initial application. The NBA is required to aggregate the effect of all of the contract modifications that occur before the date of initial application.

In terms of AASB 1058, the NBA is required to recognise volunteer services at fair value if those services would have been purchased if not provided voluntarily, and the fair value of those services can be measured reliably.

Application of AASB 16 Leases

The NBA adopted AASB 16 using the modified retrospective approach, under which the cumulative effect of initial application is recognised in retained earnings at 1 July 2019. Accordingly, the comparative information presented for 2019 is not restated, that is, it is presented as previously reported under AASB 117 and related interpretations.

The NBA elected to apply the practical expedient to not reassess whether a contract is, or contains, a lease at the date of initial application. Contracts entered into before the transition date that were not identified as leases under AASB 117 were not reassessed. The definition of a lease under AASB 16 was applied only to contracts entered into or changed on or after 1 July 2019.

AASB 16 provides for certain optional practical expedients, including those related to the initial adoption of the standard. The NBA applied the following practical expedients when applying AASB 16 to leases previously classified as operating leases under AASB 117:

- Exclude initial direct costs from the measurement of right-of-use assets at the date of initial application for leases where the right-of-use asset was determined as if AASB 16 had been applied since the commencement date;
- Reliance on previous assessments on whether leases are onerous as opposed to preparing an impairment review under AASB 136 Impairment of assets as at the date of initial application; and
- Applied the exemption not to recognise right-of-use assets and liabilities for leases with less than 12 months of lease term remaining as of the date of initial application.

As a lessee, the NBA previously classified leases as operating or finance leases based on its assessment of whether the lease transferred substantially all of the risks and rewards of ownership. Under AASB 16, the NBA recognises right-of-use assets and lease liabilities for most leases. However, the NBA has elected not to recognise right-of-use assets and lease liabilities for some leases of low value assets based on the value of the underlying asset when new or for short-term leases with a lease term of 12 months or less.

On adoption of AASB 16, the NBA recognised right-of-use assets and lease liabilities in relation to leases of office space, which had previously been classified as operating leases. The lease liabilities were measured at the present value of the remaining lease payments, discounted using the NBA's incremental borrowing rates based on zero coupon yields as prescribed by the Department of Finance as at 1 July 2019. The weighted-average rate applied was 1.00%.

NATIONAL BLOOD AUTHORITY OVERVIEW NOTE

for the year ended 30 June 2020

The right-of-use assets were measured at an amount equal to the lease liability, adjusted by the amount of any prepaid or accrued lease payments. The total Departmental impact on transition is summarised below:

	1 July 2019
Right-of-use assets - buildings	2,303,093
Prepayments	(54,394)
Lease liabilities	2,248,699
Trade and other receivables	(13,570)
Other payables	(432,227)
Retained earnings	418,657

The following table reconciles the Departmental minimum lease commitments disclosed in the NBA's 30 June 2019 annual financial statements to the amount of lease liabilities recognised on 1 July 2019:

	1 July 2019
Minimum operating lease commitment at 30 June 2019	2,070,104
Plus: effect of differences in methodology of commitments calculations	144,314
Less: non-lease components excluded from AASB 16 lease liability calculations	(135,883)
Less: lease incentives included in AASB 16 lease liability calculations	(12,817)
Plus: effect of extension options reasonable certain to be exercised	220,154
Undiscounted lease payments	2,285,872
Less: effect of discounting using the incremental borrowing rate as at the date of initial application	(37,173)
Lease liabilities recognised at 1 July 2019	2,248,699

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

There were no events occurring after 30 June 2020 with the potential to significantly affect the ongoing structure and financial activities of the NBA.

Administered

There were no events occurring after 30 June 2020 with the potential to significantly affect the ongoing structure and financial activities of the NBA.

Departmental Financial Performance

This section analyses the departmental financial performance of the National Blood Authority for the year ended 2020.

1.1 Expenses

	2020	2019
	\$'000	\$'000
1.1A: Employee benefits		
Wages and salaries	4,825	4,657
Superannuation:		
Defined contribution plans	481	488
Defined benefit plans	530	475
Leave and other entitlements	1,454	1,676
Separation and redundancies	253	0
Other employee benefits	146	142
Total employee benefits	7,689	7,438

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	4	70
Contractors	493	546
Travel	195	236
Legal	52	4
IT services	551	769
Other	545	629
Total goods and services supplied or rendered	1,839	2,255

Goods supplied	148	207
Services rendered	1,691	2,048
Total goods and services supplied or rendered	1,839	2,255

Other suppliers

Workers compensation expenses	26	25
Operating lease rentals ¹	(10)	630
Total other suppliers	16	655
Total suppliers	1,855	2,909

1. NBA has applied AASB 16 using the modified retrospective approach and therefore the comparative information has not been restated and continues to be reported under AASB 117.

NBA has no short-term lease commitments as at 30 June 2020.

The above lease disclosures should be read in conjunction with the accompanying notes 1.1C, 3.2 and 3.4A.

1.1C: Finance costs

Interest on lease liabilities	19	-
Unwinding of discount	1	3
Total finance costs	20	3

1. NBA has applied AASB 16 using the modified retrospective approach and therefore the comparative information has not been restated and continues to be reported under AASB 117.

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

1.1D: Write-down and impairment of other assets

Revaluation decrement - furniture and fittings	47	-
Total write-down and impairment of other assets	47	-

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 2020

1.2 Own-Source Revenue and Gains

	2020 \$'000	2019 \$'000
Income		
1.2A: Revenue from contracts with customers		
Rendering of services	4,269	3,817
Total revenue from contracts with customers	4,269	3,817
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:		
Australian Government entities (related parties)	565	200
State and Territory Governments	3,704	3,617
	4,269	3,817

Accounting Policy

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

1. Australian Government entities (related parties) - Organ and Tissue Authority (OTA)

Nature - NBA signed a Shared Services Agreement with OTA on 4 February 2016. As per the agreement, NBA offers a variety of services like HR, IT and Finance Services to the OTA on a cost recovery basis. The agreement meets the criteria of a "contract" as per paragraph 9 of AASB15.

Timing - NBA issues an invoice to the OTA at the end of each quarter for the services it has provided to the OTA in that quarter.

Incoming receipts are classified as s.74 receipts.

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

2. State and Territory Governments

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

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

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

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

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

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

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

NATIONAL BLOOD AUTHORITY
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	2020 \$'000	2019 \$'000
1.2B: Other Revenue		
Other revenue	434	586
Total other revenue	434	586
1.2C: Other gains		
Remuneration of auditors - resources received free of charge	66	66
Total other gains	66	66

Accounting Policy

Resources received free of charge

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

1.2D: Revenue from Government

Appropriations

Departmental appropriations	5,681	5,682
Total revenue from Government	5,681	5,682

Accounting Policy

Revenue from Government

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

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

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

Income and Expenses Administered on Behalf of Government

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

	2020 \$'000	2019 \$'000
2.1A: Employee benefits		
Wages and salaries	511	436
Superannuation		
Defined contribution plans	46	29
Defined benefit plans	71	63
Leave and other entitlements	130	41
Other employee benefits	14	0
Total employee benefits¹	772	569

1. These salaries relate to a taskforce established to implement a program of work to improve the governance and management of immunoglobulin products funded and supplied under the National Blood Agreement.

2.1B: Suppliers

Goods and services supplied or rendered		
Purchases of blood and blood products	1,168,402	1,188,921
Consultants	2,090	1,552
Contractors	3,628	2,882
Travel	53	57
IT services	231	163
Other	435	159
Total goods and services supplied or rendered	1,174,839	1,193,734
Goods supplied	1,168,461	1,189,053
Services rendered	6,378	4,681
Total goods and services supplied or rendered	1,174,839	1,193,734

Accounting Policy:

Suppliers

Under the Deed of Agreement with the Australian Red Cross Lifeblood (ARCL or Lifeblood), surpluses greater than \$5 million in any particular year are offset against expenses in the following year. In 2019-20, \$69.8m (2018-19: \$39.7m) was returned by the Lifeblood which related to the 2018-19 financial year. This return reduced the supplier expenses in the current year.

	2020 \$'000	2019 \$'000
2.1C: Grants		
Private sector		
Not-for-profit organisations	745	738
Total grants	745	738

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 NBA is charged with facilitating and funding appropriate research, policy development or other action in relation to new developments by relevant government or non-government persons or entities. A nationally coordinated effort in research and development is required to address evidence gaps in the blood sector, and to enable responses to emerging evidence and new technologies. In September 2015, the NBA received approval from funding governments to implement a research and development pilot to support projects and activities likely to produce valuable outcomes in identified key priority areas in patient blood management and immunoglobulin governance. Expenditure to date for projects funded under the first four rounds of the research and development pilot is included in this year's financial statements.

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

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2.2 Administered - Income		
	2020 \$'000	2019 \$'000
Revenue		
Non-Taxation Revenue		
2.2A: Revenue from contracts with customers		
Rendering of services	1,211,007	1,203,892
Total revenue from contracts with customers	1,211,007	1,203,892
Disaggregation of revenue from contracts with customers		
Revenue under AASB15 is derived all 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	759,479	754,787
State and Territory Governments	451,303	448,804
External entities	225	300
	1,211,007	1,203,892
Accounting Policy		
All administered revenues are revenues relating to ordinary activities performed by the entity on behalf of the Australian Government. As such, administered appropriations are not revenues of the individual entity that oversees distribution or expenditure of the funds as directed.		
The following is a description of principal activities from which NBA generates its revenue:		
1. State & Territory Contributions		
<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 paragraph 9 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.		
2. McMaster University		
<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

	2020	2019
	\$'000	\$'000

3.1A: Cash and cash equivalents

Cash in special accounts - held in the OPA	8,651	8,069
Cash in special accounts - on hand or on deposit	170	610
Total cash and cash equivalents	8,821	8,679

Accounting Policy

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

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

3.1B: Trade and other receivables

Goods and services receivables		
Goods and services	247	212
Total goods and services receivables	247	212

Appropriations receivables

Appropriation receivable	1,234	1,123
Total appropriations receivables	1,234	1,123

Other receivables

Statutory receivables - GST receivable	21	18
Total other receivables	21	18
Total trade and other receivables (gross)	1,502	1,353
Total trade and other receivables (net)	1,502	1,353

Credit terms for goods and services were within 30 days (2018-19: 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

3.2. Non-Financial Assets

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

	Buildings -Right of Use Asset \$'000	Leasehold Improvements \$'000	Other plant and equipment \$'000	Intangibles - Computer Software \$'000	Total \$'000
As at 1 July 2019					
Gross book value		968	1,016	3,761	5,745
Accumulated depreciation, amortisation and impairment		(398)	(436)	(3,601)	(4,435)
Total as at 1 July 2019		570	580	160	1,310
Recognition of right of use asset on initial application of AASB 16	2,303	-	-	-	2,303
Adjusted total as at 1 July 2019	2,303	570	580	160	3,613
Additions					
Purchase	-	-	222	7	229
Internally developed	-	-	-	-	-
Right-of-use assets	-	-	-	-	-
Revaluations and impairments recognised in other comprehensive income	-	115	43	-	158
Revaluations and impairments recognised in other comprehensive income for right-of-use assets	-	-	-	-	-
Revaluations recognised in net cost of services	-	-	(47)	-	(47)
Impairments recognised in net cost of services	-	-	-	-	-
Impairments on right-of-use assets recognised in net cost of services	-	-	-	-	-
Depreciation and amortisation	-	(195)	(228)	(55)	(478)
Depreciation on right-of-use assets	(674)	-	-	-	(674)
Other movements	-	-	-	-	-
Total as at 30 June 2020	1,629	490	570	112	2,801
Net book value as of 30 June 2020 represented by:					
Gross book value	2,303	968	1,238	3,768	8,277
Accumulated depreciation, amortisation & impairment	(674)	(478)	(668)	(3,656)	(5,476)
	1,629	490	570	112	2,801

1. The carrying amount of computer software included \$111,577 purchased software and \$ nil internally generated software.

No indicators of impairment were found for leasehold improvements, property, plant and equipment or intangibles.

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

Revaluations of non-financial assets

All revaluations are conducted in accordance with the revaluation policy stated on the next page. On 31 March 2020, an independent valuer conducted revaluations of property, plant and equipment.

A revaluation increment for leasehold improvements of \$114,769.79 (2018-19: Nil) and an increment for property, plant and equipment of \$43,752.81 (2018-19: Nil) were credited to the asset revaluation surplus by asset class and included in the equity section of the statement of financial position. Revaluation decrements for property, plant and equipment of \$46,888.12 (2018-19: Nil) were recognised as an expense in the Statement of Comprehensive Income.

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

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Accounting Policy:

Acquisition of Assets

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

Property, Plant and Equipment

Asset Recognition Threshold

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

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

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

Revaluations

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

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

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

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

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

Depreciation

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

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

Asset class	2020	2019
Property, plant and equipment	3 to 7 years	3 to 7 years
Leasehold improvements	Lease term	Lease term

Impairment

All assets were assessed for impairment at 30 June 2020. Where indications of impairment exist, the asset's recoverable amount is estimated and an impairment adjustment made if the asset's recoverable amount is less than its carrying amount.

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

Derecognition

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

Intangibles

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

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

Type	2020	2019
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 2020.

Lease Right of Use (ROU) Assets

Leased ROU assets are capitalised at the commencement date of the lease and comprise the initial lease liability amount, initial direct costs incurred when entering into the lease less any lease incentives received. These assets are accounted for 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.

On initial adoption of AASB 16 the NBA has adjusted the ROU assets at the date of initial application by the amount of any provision for onerous leases recognised immediately before the date of initial application. Following initial application, an impairment review is undertaken for any ROU 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, General Government Sector (GGS) and whole of government financial statements.

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

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	2020	2019
	\$'000	\$'000
3.2B: Other non-financial assets		
Prepayments	184	164
Total other non-financial assets	184	164

3.3 Payables

3.3A: Suppliers

Trade creditors and accruals	129	794
Total suppliers	129	794

3.3B: Other payables

Salaries and wages	110	47
Superannuation	18	9
Operating lease rentals and incentive	-	432
Total other payables	128	488

3.3C: Deferred revenue

Deferred revenue ¹	309	-
Total deferred revenue	309	-

1. NBA has applied AASB 15 using the modified retrospective approach and therefore the comparative information has not been restated and continues to be reported under AASB 101.82(A).

3.4 Interest Bearing Liabilities

3.4A: Leases

Lease liabilities:		
Buildings	1,609	-
Total leases	1,609	-

Total cash outflow for leases for the year ended 30 June 2020 was \$592,636.

3.5 Other Provisions

3.5A: Other provisions

	Provision for restoration \$'000	Total \$'000
As at 1 July 2019	172	172
Amounts used - unwinding of discount	1	1
Total as at 30 June 2020	173	173

The entity currently has two (2018-19: 2) agreements for the leasing of premises which have provisions requiring the entity to restore the premises to their original condition at the conclusion of the lease. The entity has made a provision to reflect the present value of this obligation.

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

	2020 \$'000	2019 \$'000
4.1A: Cash and cash equivalents		
Cash in special accounts - held in the OPA	192,849	168,084
Cash in special accounts - on hand or on deposit	251	251
Total cash and cash equivalents	193,100	168,335
4.1B: Trade and other receivables		
Goods and services receivables	43,228	19,130
Total goods and services receivables	43,228	19,130
Other receivables		
Interest	1,437	1,849
Statutory receivables - GST receivable	427	8,010
Total other receivables	1,864	9,859
Total trade and other receivables (gross)	45,092	28,989
Less impairment loss allowance	-	-
Total trade and other receivables (net)	45,092	28,989

Credit terms for goods and services were within 30 days (2018-19: 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 2019-20.

4.1C: Other investments

Deposits ¹	133,800	129,800
Total other investments	133,800	129,800
Other investments expected to be recovered		
No more than 12 months	53,000	70,000
More than 12 months	80,800	59,800
Total other investments	133,800	129,800

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 2020 is \$135,322,183 (30 June 2019: \$131,491,103), and is a combination of cash (\$251,118), investments (\$133,800,000) and the balance of the special account (\$1,271,065).

4.1D: Other financial assets

Advances ²	-	76,032
Total other financial assets	-	76,032
Other financial assets expected to be recovered		
No more than 12 months	-	76,032
More than 12 months	-	-
Total other financial assets	-	76,032

2. Comprises a cash advance to the Australian Red Cross Lifeblood in accordance with the Deed of Agreement (and the Output Based Funding Model (OBFM)).

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

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4.2 Administered - Non-Financial Assets

	2020 \$'000	2019 \$'000
4.2A: Inventories		
National reserve inventory held for distribution	55,667	54,766
Other inventory held for distribution	57,862	46,219
Total other investments	113,529	100,985

During 2019-20, \$600,478 of inventory held for distribution related to a net write-off of damaged and expired stock and was recognised as an expense (2018-19: \$390,044). No items of inventory were recognised at fair value less cost to sell. All inventory is expected to be distributed in the next 12 months.

Accounting Policy:

Inventories

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

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

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

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

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

	Plant and equipment \$'000	Computer Software ¹ \$'000	Total \$'000
As at 1 July 2019			
Gross book value	117	9,519	9,636
Accumulated depreciation, amortisation and impairment	(92)	(3,637)	(3,729)
Total as at 1 July 2019	25	5,882	5,907
Additions			
Purchase	3	-	3
Internally developed	-	1,324	1,324
Revaluations and impairments recognised in other comprehensive income	(2)	-	(2)
Depreciation and amortisation	(19)	(1,267)	(1,286)
Disposals			
Other	-	-	-
Total as at 30 June 2020	7	5,939	5,946
Net book value as at 30 June 2020 represented by:			
Gross book value	120	10,843	10,963
Accumulated depreciation, amortisation & impairment	(113)	(4,904)	(5,017)
	7	5,939	5,946

1. The carrying amount of computer software included \$ Nil purchased software and \$5,939,165 internally generated software.

No indicators of impairment were found for property, plant and equipment and intangibles.

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

Revaluations of non-financial assets

All revaluations are concluded in accordance with the revaluation policy stated at Note 3.2. On 31 March 2020, an independent valuer conducted revaluations of plant and equipment.

A revaluation increment for property, plant and equipment of \$1,770.49 (2018-19: Nil) was credited to the asset revaluation surplus by asset class and included in the equity section of the statement of financial position.

4.3 Administered - Payables

	2020 \$'000	2019 \$'000
4.3A: Suppliers		
Trade creditors and accruals	55,178	57,683
Total suppliers	55,178	57,683
Suppliers expected to be settled		
No more than 12 months	55,178	57,683
More than 12 months	-	-
Total suppliers	55,178	57,683

Settlement was usually made within 30 days.

4.3B: Deferred revenue

Deferred revenue ¹	104,475	-
Total deferred revenue	104,475	-

1. NBA has applied AASB 15 using the modified retrospective approach and therefore the comparative information has not been restated and continues to be reported under AASB 101.82(A).

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 2020

	Annual Appropriation \$'000	Adjustments to appropriation ¹ \$'000	Total Appropriation \$'000	Appropriation applied in 2020 (current and prior years) \$'000	Variance \$'000
DEPARTMENTAL					
Ordinary annual services	5,681	434	6,115	5,681	434
Capital Budget ²	617		617	506	111
Total departmental	6,298	434	6,732	6,187	545
ADMINISTERED					
Ordinary annual services					
Administered items	3,630	-	3,630	3,630	-
Total administered	3,630	-	3,630	3,630	-

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.

Annual Appropriations for 2019

	Annual Appropriation \$'000	Adjustments to appropriation ¹ \$'000	Total appropriation \$'000	Appropriation applied in 2019 (current and prior years) \$'000	Variance \$'000
DEPARTMENTAL					
Ordinary annual services	5,682	586	6,268	5,682	586
Capital Budget ²	617		617	226	391
Total departmental	6,299	586	6,885	5,908	977
ADMINISTERED					
Ordinary annual services					
Administered items	3,404	-	3,404	3,404	-
Total administered	3,404	-	3,404	3,404	-

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)

	2020 \$'000	2019 \$'000
DEPARTMENTAL		
Cash	170	610
Appropriation Act (No.1) 2017-18	-	506
Appropriation Act (No.1) 2018-19	617	617
Appropriation Act (No.1) 2019-20	617	-
Total	1,404	1,733

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

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5.2 Special Accounts

	The National Blood Account ¹		NMF Blood and Blood Products Special Account 2017 ²	
	2020 \$'000	2019 \$'000	2020 \$'000	2019 \$'000
Balance brought forward from previous period	175,343	197,725	1,440	958
Increases				
Appropriation credited to special account	9,817	9,312	-	-
Departmental				
Other receipts - State and territory contributions	4,673	3,979	-	-
Other receipts - external parties	-	605	-	-
Total departmental increases	4,673	4,584	-	-
Administered				
Realised investments	-	-	70,000	63,600
Other receipts - Commonwealth contributions	759,479	754,787	-	-
Other receipts - State and territory contributions	436,294	440,000	-	-
Other receipts - external parties	225	713	3,831	3,402
Total administered increases	1,195,998	1,195,500	73,831	67,002
Total increases	1,210,488	1,209,396	73,831	67,002
Available for payments	1,385,831	1,407,121	75,271	67,960
Decreases:				
Departmental				
Payments made to employees	7,288	7,059	-	-
Payments made to suppliers	3,450	2,824	-	-
Total departmental decreases	10,738	9,883	-	-
Administered				
Payments made to employees	772	569	-	-
Payments made to suppliers	1,173,922	1,221,326	-	20
Investments made from the special account (PGPA Act section 58)	-	-	74,000	66,500
Total administered decreases	1,174,694	1,221,895	74,000	66,520
Total decreases	1,185,432	1,231,778	74,000	66,520
Total balance carried forward to the next period	200,399	175,343	1,271	1,440
Balance represented by:				
Cash held in entity bank accounts	170	610	-	-
Cash held in the Official Public Account	200,229	174,733	1,271	1,440
Total balance carried forward to the next period	200,399	175,343	1,271	1,440

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

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

	2020	2019
	\$'000	\$'000
6.1A: Employee provisions		
Leave	2,596	2,414
Separations and redundancies	146	-
Total employee provisions	2,742	2,414

Accounting Policy:

Liabilities for 'short-term employee benefits and termination benefits expected within twelve months of the end of reporting period are measured at their nominal amounts.

Other long-term employee benefits are measured as net total of the present value of the defined benefit obligation at the end of the reporting period minus the fair value at the end of the reporting period of plan assets (if any) out of which the obligations are to be settled directly.

Leave

The liability for employee benefits includes provision for annual leave and long service leave.

The leave liabilities are calculated on the basis of employees' remuneration at the estimated salary rates that will be applied at the time the leave is taken, including NBA's employer superannuation contribution rates to the extent that the leave is likely to be taken during service rather than paid out on termination.

The liability for long service leave has been determined by using the shorthand method. The estimate of the present value of the liability takes into account attrition rates and pay increases through promotion and inflation.

Separation and redundancy

Provision is made for separation and redundancy benefit payments. The entity recognises a provision for termination when it has developed a detailed formal plan for the terminations and has informed those employees they will be terminated.

Superannuation

The entity's staff are members of the Commonwealth Superannuation Scheme (CSS), the Public Sector Superannuation Scheme (PSS), or the PSS accumulation plan (PSSap), or other superannuation funds held outside the Australian Government.

The CSS and PSS are defined benefit schemes. The PSSap is a defined contribution scheme.

The liability for defined benefits is recognised in the financial statements of the Australian Government and is settled by the Australian Government in due course. This liability is reported in the Department of Finance's administered schedules and notes.

The entity makes employer contributions to the employees' defined benefit superannuation scheme at rates determined by an actuary to be sufficient to meet the current cost to Government. The entity accounts for the contributions as if they were contributions to defined contribution plans.

The liability for superannuation recognised as at 30 June 2020 represents outstanding contributions.

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

NATIONAL BLOOD AUTHORITY
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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:

	2020	2019
	\$	\$
Short-term employee benefits	783,042	701,994
Post-employment benefits	113,497	98,233
Other long-term benefits	15,908	19,682
Total key management personnel compensation expenses	912,447	819,909

The total number of key management personnel that are included in the above table are 3 (2018-19: 3).

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 (2018-19: 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 liabilities and contingent assets are not recognised in the Statement of Financial Position but are reported in the notes. 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 settlement is greater than remote.

7.1B: Administered - Contingent Assets and Liabilities

	2020 \$'000	2019 \$'000
Contingent liabilities		
Indemnities	132,207	149,961
Total contingent liabilities	132,207	149,961
Net administered contingent liabilities	132,207	149,961

Quantifiable administered contingencies

The above table contains \$132,207,000 of contingent liabilities disclosed in respect to the Deed of Indemnity between the Australian Red Cross Society (ARCS) and the NBA (2018-19: \$149,961,000). The Deed indemnifies the ARCS in relation to funding arrangements for the Sydney Processing Centre (SPC) and the Melbourne Processing Centre (MPC). The NBA indemnifies the ARCS in respect of the ARCS's liability to meet a funded obligation relating to the SPC or MPC if contracted payments become due and payable after the date when the ARCS does not have sufficient SPC or MPC funding.

Unquantifiable administered contingencies

At 30 June 2020, the NBA had three unquantifiable contingencies (2018-19: 3) disclosed below:

Unquantifiable Contingent Assets

- 1 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) may apply to retain up to the first \$5,000,000 of surplus in any given year. Any surplus, less than \$5,000,000 retained if applicable, will be refunded to the NBA.

Unquantifiable contingent liabilities

- 2 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.
- 3 Under certain conditions Australian Governments jointly provide indemnity for Lifeblood through a cost sharing arrangement for claims, both current and potential, regarding personal injury and damage suffered by a recipient of certain blood products. The Australian Government's share of any liability is limited to sixty three per cent of any agreed net cost.

The Deed of Agreement between the ARCS and the NBA in relation to the operation of Lifeblood includes certain indemnities and a limit of liability in favour of the ARCS. These cover a defined set of potential business, product and employee risks and liabilities arising from the operations of Lifeblood. Certain indemnities for specific risk events operate within the term of the Deed of Agreement, are capped and must meet specified pre-conditions. Other indemnities and the limitation of liability only operate in the event of the expiry and non renewal, or the earlier termination of the Deed of Agreement relating to the operation of the ARCS or the cessation of funding for the principal sites, and only within a certain scope. All indemnities are also subject to appropriate limitations and conditions including mitigation, contributory fault, and the process of handling relevant claims.

In the event of the contingent liability disclosed in the quantifiable administered contingencies occurring, the Commonwealth, or its nominee, would be assigned ownership of Lifeblood MPC building.

It was not possible to estimate the amounts of any eventual payments that may be required in relation to these claims. These were not included in the above table.

Accounting Policy:

Indemnities

The maximum amounts payable under the indemnities given is disclosed above. At the time of completion of the financial statements, there was no reason to believe that the indemnities would be called upon, and no recognition of any liability was therefore required.

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

NATIONAL BLOOD AUTHORITY
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for the year ended 30 June 2020

7.2 Departmental - Financial Instruments

7.2A: Categories of Financial Instruments

	2020	2019
	\$'000	\$'000
Financial Assets		
Financial assets at amortised cost		
Cash and cash equivalents	8,821	8,678
Trade and other receivables	1,502	212
Total financial assets at amortised cost	10,323	8,890
Financial Liabilities		
Financial liabilities measured at amortised cost		
Trade and other creditors	129	794
Total financial liabilities measured at amortised cost	129	794

Accounting Policy:

Financial assets

With the implementation of AASB 9 *Financial Instruments* for the first time in 2018-19, the entity classifies its financial assets in the following categories:

- financial assets at fair value through profit or loss;
- financial assets at fair value through other comprehensive income; and
- financial assets measured at amortised cost.

The classification depends on both the entity's business model for managing the financial assets and contractual cash flow characteristics at the time of initial recognition. Financial assets are recognised when the entity becomes a party to the contract and, as a consequence, has a legal right to receive or a legal obligation to pay cash and derecognised when the contractual rights to the cash flows from the financial asset expire or are transferred upon trade date.

Comparatives have not been restated on initial application.

Financial assets at amortised cost

Financial assets included in this category need to meet two criteria:

- the financial asset is held in order to collect the contractual cash flows; and
- the cash flows are solely payments of principal and interest (SPPI) on the principal outstanding amount.

Amortised cost is determined using the effective interest method.

7.3 Administered - Financial Instruments

7.3A: Categories of Financial Instruments

	2020	2019
	\$'000	\$'000
Financial Assets		
Financial assets at amortised cost		
Deposits	133,800	129,800
Advances	-	76,032
Cash and cash equivalents	193,100	168,335
Trade and other receivables	45,092	28,988
Total financial assets	371,992	403,155
Financial Liabilities		
Financial liabilities at amortised cost		
Trade and other creditors	55,178	57,683
Total financial liabilities at amortised cost	55,178	57,683

7.3B: Net Gains or Losses on Financial Assets

Financial assets at amortised cost		
Interest revenue	3,419	3,617
Net gain on financial assets at amortised cost	3,419	3,617

Accounting Policy:

Financial assets

With the implementation of AASB 9 *Financial Instruments* for the first time in 2018-19, the entity classifies its financial assets in the following categories:

- financial assets at fair value through profit or loss;
- financial assets at fair value through other comprehensive income; and
- financial assets measured at amortised cost.

The classification depends on both the entity's business model for managing the financial assets and contractual cash flow characteristics at the time of initial recognition. Financial assets are recognised when the entity becomes a party to the contract and, as a consequence, has a legal right to receive or a legal obligation to pay cash and derecognised when the contractual rights to the cash flows from the financial asset expire or are transferred upon trade date.

Comparatives have not been restated on initial application.

Financial assets at amortised cost

Financial assets included in this category need to meet two criteria:

- the financial asset is held in order to collect the contractual cash flows; and
- the cash flows are solely payments of principal and interest (SPPI) on the principal outstanding amount.

Amortised cost is determined using the effective interest method.

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

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7.4 Departmental - Fair Value Measurement

Fair value measurements at the end of the reporting period

	2020	2019
	\$'000	\$'000
Non-financial assets		
Leasehold improvements	490	570
Plant and equipment	570	580

7.5 Administered - Fair Value Measurement

Fair value measurements at the end of the reporting period

	2020	2019
	\$'000	\$'000
Non-financial assets		
Plant and equipment	7	25

Accounting Policy:

Fair value measurement

An annual assessment is undertaken to determine whether the carrying amount of the assets is materially different from the fair value. Comprehensive valuations are carried out at least once every three years in compliance with AASB 13 Fair Value Measurement requirements. On 31 March 2020 an independent valuer conducted revaluations of leasehold improvements and property, plant and equipment.

The methods utilised to determine and substantiate the unobservable inputs are derived and evaluated as follows:

Physical Depreciation and Obsolescence - Assets that do not transact with enough frequency or transparency to develop objective opinions of value from observable market evidence have been measured utilising the depreciated replacement cost approach.

Under the depreciated replacement cost approach the estimated cost to replace the asset is calculated and then adjusted to take into account physical depreciation and obsolescence. Physical depreciation and obsolescence has been determined based on professional judgement regarding physical, economic and external obsolescence factors relevant to the asset under consideration. For all leasehold improvement assets, the consumed economic benefit / asset obsolescence deduction is determined based on the term of the associated lease.

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

Other Information

8.1 Aggregate Assets and Liabilities

8.1A: Departmental - aggregate assets and liabilities

	2020	2019
	\$'000	\$'000
Assets expected to be recovered in:		
No more than 12 months	10,323	10,031
More than 12 months	2,985	1,474
Total assets	13,308	11,505
Liabilities expected to be settled in:		
No more than 12 months	712	1,282
More than 12 months	4,378	2,586
Total liabilities	5,090	3,868

8.1B: Administered - aggregate assets and liabilities

	2020	2019
	\$'000	\$'000
Assets expected to be recovered in:		
No more than 12 months	349,599	343,355
More than 12 months	200,274	166,692
Total assets	549,873	510,047
Liabilities expected to be settled in:		
No more than 12 months	55,178	57,683
More than 12 months	104,475	-
Total liabilities	159,653	57,683

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

NATIONAL BLOOD AUTHORITY
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8.2: BUDGETARY REPORTS AND EXPLANATIONS OF MAJOR VARIANCES

The following tables provide a comparison of the original budget as presented in the 2019-20 Portfolio Budget Statements (PBS) to the 2019-20 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 2020	2020 Actual \$'000	2020 Budget \$'000	2020 Variance \$'000
NET COST OF SERVICES			
Expenses			
Employee benefits	7,689	6,591	1,098
Suppliers	1,855	3,098	(1,243)
Depreciation and amortisation	1,152	621	531
Finance costs	20	7	13
Write-down and impairment of other assets	47	-	47
Total expenses	10,763	10,317	446
Own-source income			
Own-source revenue			
Revenue from contracts with customers	4,269	3,699	570
Other revenue	434	250	184
Total own-source revenue	4,703	3,949	754
Gains			
Resources received free of charge - remuneration of auditors	66	66	-
Total gains	66	66	-
Total own-source income	4,769	4,015	754
Net (cost of)/contribution by services	(5,994)	(6,302)	308
Revenue from government	5,681	5,681	-
Surplus/(Deficit) before income tax on continuing operations	(313)	(621)	308
Income tax expense			
Surplus/(Deficit) after income tax on continuing operations	(313)	(621)	308
OTHER COMPREHENSIVE INCOME			
Items not subject to subsequent reclassification to net cost of services			
Changes in asset revaluation surplus	159	-	159
Total other comprehensive income	159	-	159
Total comprehensive income/(loss)	(154)	(621)	467

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 2020

STATEMENT OF FINANCIAL POSITION as at 30 June 2020	2020 Actual \$'000	2020 Budget \$'000	2020 Variance \$'000
ASSETS			
Financial assets			
Cash and cash equivalents	8,821	8,088	733
Trade and other receivables	1,502	919	583
Total financial assets	10,323	9,007	583
Non-financial assets			
Buildings	1,629	352	1,277
Leasehold improvements	490	490	-
Plant and equipment	570	354	216
Computer software	112	371	(259)
Other non-financial assets	184	210	(26)
Total non-financial assets	2,985	1,777	1,208
Total assets	13,308	10,784	1,791
LIABILITIES			
Payables			
Suppliers	129	163	(34)
Other payables	128	624	(496)
Deferred revenue	309	-	309
Total payables	566	787	(221)
Interest bearing liabilities			
Leases	1,609	-	1,609
Total interest bearing liabilities	1,609	-	1,609
Provisions			
Employee provisions	2,742	1,980	762
Other provisions	173	182	(9)
Total provisions	2,915	2,162	753
Total liabilities	5,090	2,949	2,141
Net assets	8,218	7,835	(350)
EQUITY			
Contributed equity	5,799	5,799	-
Reserves	619	460	159
Retained surplus/(Accumulated deficit)	1,800	1,576	224
Total equity	8,218	7,835	383

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 2020

Statement of Changes in Equity for the NBA
for the year ended 30 June 2020

	Retained Earnings			Asset revaluation reserve			Contributed equity/capital			Total equity		
	2020 Actual \$'000	2020 Budget \$'000	2020 Variance \$'000	2020 Actual \$'000	2020 Budget \$'000	2020 Variance \$'000	2020 Actual \$'000	2020 Budget \$'000	2020 Variance \$'000	2020 Actual \$'000	2020 Budget \$'000	2020 Variance \$'000
Opening balance												
Balance carried forward from previous period	1 995	2 197	(202)	460	460	-	5 182	5 182	-	7 637	7 839	(202)
Adjustment on initial application of AASB 15	(301)	-	(301)	-	-	-	-	-	-	(301)	-	(301)
Adjustment on initial application of AASB 16	419	-	419	-	-	-	-	-	-	419	-	419
Adjusted opening balance	2 113	2 197	(84)	460	460	-	5 182	5 182	-	7 755	7 839	(84)
Comprehensive income												
Revaluation adjustment	-	-	-	159	-	159	-	-	-	159	-	159
Surplus / (Deficit) for the period	(313)	(621)	308	-	-	-	-	-	-	(313)	(621)	308
Total comprehensive income attributable to Australian Government	(313)	(621)	308	159	-	159	-	-	-	(154)	(621)	467
Transactions with owners												
Contributions by owners	-	-	-	-	-	-	617	617	-	617	617	-
Departmental capital budget	-	-	-	-	-	-	-	-	-	-	-	-
Total transactions with owners	-	-	-	-	-	-	617	617	-	617	617	-
Closing balance as at 30 June 2020 attributable to Australian Government	1 800	1 576	224	619	460	159	5 799	5 799	-	8 218	7 835	383

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 2020

Cash Flow Statement for the NBA for the year ended 30 June 2020	2020 Actual \$'000	2020 Budget \$'000	2020 Variance \$'000
OPERATING ACTIVITIES			
Cash received			
Appropriations	5,681	5,681	-
Sale of goods and rendering of services	4,675	3,949	726
Net GST received	319	273	46
Total cash received	10,675	9,903	772
Cash used			
Employees	7,288	6,591	697
Suppliers	2,797	3,299	(502)
Interest payments on lease liabilities	21	-	21
Total cash used	10,105	9,890	215
Net cash from/(used by) operating activities	570	13	557
INVESTING ACTIVITIES			
Cash used			
Purchase of property, plant and equipment	222	617	(395)
Purchase of intangibles	7	-	7
Total cash used	229	617	(388)
Net cash from/(used by) investing activities	(229)	(617)	388
FINANCING ACTIVITIES			
Cash received			
Contributed Equity - departmental capital budget	506	617	(111)
Total cash received	506	617	(111)
Cash used			
Principal repayment of lease liabilities	703	-	703
Total cash used	703	-	703
Net cash from/(used by) financing activities	(197)	617	(814)
Net increase/(decrease) in cash held	143	13	130
Cash and cash equivalents at the beginning of the reporting period	8,678	8,075	603
Cash and cash equivalents at the end of the reporting period	8,821	8,088	733

3.1A

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

8.2B: Departmental Major Budget Variances for 2020

Explanations of major variances	Affected line items (and statement)
Statement of Comprehensive Income	
Employee benefits This variance arises from three factors: - Higher than normal long service leave taken by staff requiring the need to backfill positions; - Valuation of employee benefits at the end of the financial year; - Higher average staffing levels through out the financial year.	<i>Employee Benefits (Statement of Comprehensive Income) (Statement of Financial Position) (Cash Flow Statement)</i>
Suppliers Reduced supplier expenses to offset higher employee expenses to maintain an operating surplus and the impact of the adoption of AASB 16 Leases.	<i>Suppliers (Statement of Comprehensive Income) (Cash Flow Statement)</i>
Sale of goods and rendering of services This variance resulted in the transfer of leave entitlements for staff joining the NBA from other Commonwealth agencies.	<i>Sale of goods and rendering of services (Statement of Comprehensive Income) (Cash Flow Statement)</i>
Statement of Financial Position	
Cash and cash equivalents This variance relates to unspent capital appropriations as part of the departmental capital budget as a result of the delay in developing or purchasing software for managing contracts.	<i>Cash and cash equivalents (Statement of Financial Position) (Cash Flow Statement)</i>
Trade and other receivables This variance is as a result of timing of receipt on outstanding debtors at year end and higher than anticipated Appropriation receivable relating to Departmental Capital Budget.	<i>Trade and other receivables (Statement of Financial Position) (Cash Flow Statement)</i>
Buildings PBS does not include the impact of the adoption of AASB 16 for property leases.	<i>Non-financial assets (Statement of Financial Position)</i>
Computer software This variance is as a result of a delay in developing or purchasing software for managing contracts.	<i>Non-financial assets (Statement of Financial Position)</i>
Other payables PBS does not include the impact of the adoption of AASB 16 for property leases.	<i>Payables (Statement of Financial Position)</i>
Deferred revenue PBS does not include the impact of the adoption of AASB 15 for revenue.	<i>Deferred revenue (Statement of Financial Position)</i>
Interest bearing liabilities PBS does not include the impact of the adoption of AASB 16 for property leases.	<i>Interest bearing liabilities (Statement of Financial Position)</i>
Employee Provisions This variance is as a result of the transfer in of leave entitlements for staff joining the NBA from other Commonwealth agencies and valuation of employee benefits at the end of the financial year.	<i>Provisions (Statement of Financial Position), Sale of goods and rendering of services (Statement of Comprehensive Income)</i>
Cash Flow Statement	
Purchase of property, plant and equipment This variance is as a result of a delay in undertaking budgeted capital expenditure.	<i>Purchase of property, plant and equipment (Cash Flow Statement)</i>
Principal repayment of lease liabilities PBS does not include the impact of the adoption of AASB 16 for property leases.	<i>Principal repayment of lease liabilities (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 2020

8.2C: Administered Budgetary Reports

Administered Schedule of Comprehensive Income for the NBA for the period ended 30 June 2020	2020 Actual \$'000	2020 Budget \$'000	2020 Variance \$'000
NET COST OF SERVICES			
Expenses			
Employee benefits	772	650	122
Suppliers	1,174,839	1,273,793	(98,954)
Grants - non-profit organisations	745	500	245
Depreciation and amortisation	1,286	600	686
Total expenses	1,177,642	1,275,543	(97,901)
Income			
Revenue			
Non-taxation revenue			
Other sources of non-taxation revenues	1,214,426	1,277,939	(63,513)
Total non-taxation revenue	1,214,426	1,277,939	(63,513)
Total revenue	1,214,426	1,277,939	(63,513)
Net (cost of)/contribution by services	36,784	2,396	34,388
Surplus/(Deficit)	36,784	2,396	34,388
OTHER COMPREHENSIVE INCOME			
Items not subject to subsequent reclassification to net cost of services			
Changes in asset revaluation surplus	(2)	-	(2)
Total comprehensive income/(loss)	36,782	2,396	34,386

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 2020

Administered Schedule of Assets and Liabilities for the NBA as at 30 June 2020	2020 Actual \$'000	2020 Budget \$'000	2020 Variance \$'000
ASSETS			
Financial assets			
Cash and cash equivalents	193,100	219,085	(25,985)
Trade and other receivables	45,092	25,671	19,421
Other investments	133,800	135,192	(1,392)
Total financial assets	371,992	379,948	(7,956)
Non-financial assets			
Plant and equipment	7	-	7
Other intangibles	5,939	5,305	634
Inventories	113,529	98,221	15,308
Prepayments	58,407	76,037	(17,630)
Total non-financial assets	177,882	179,563	(1,681)
Total assets administered on behalf of Government	549,874	559,511	(9,637)
LIABILITIES			
Payables			
Suppliers	55,178	70,661	(15,483)
Deferred revenue	104,475	-	104,475
Total payables	159,653	70,661	88,992
Total liabilities administered on behalf of Government	159,653	70,661	88,992
Net assets/(liabilities)	390,221	488,850	(98,629)

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

8.2D: Administered Major Budget Variances for 2020

Explanations of major variances	Affected line items (and statement)
Administered Schedule of Comprehensive Income	
<u>Suppliers</u> This variance is mainly as a result of efficiencies generated by the Australian Red Cross Lifeblood to the value of \$69.8m associated with the 2018-19 Output Based Funding Model.	<i>Suppliers (Administered Schedule of Comprehensive Income), Deficit/Surplus (Administered Schedule of Comprehensive Income)</i>
<u>Funding from governments</u> The variance predominantly relates to the return of \$73.1m to the Commonwealth, and State and Territory Governments for the 2018-19 end of year reconciliation as part of the National Blood Agreement.	<i>Funding from governments (Administered Schedule of Comprehensive Income), Deficit/Surplus (Administered Schedule of Comprehensive Income)</i>
Administered Schedule of Assets and Liabilities	
<u>Cash and cash equivalents</u> This variance is offset by the increase in Trade and other receivables.	<i>Cash and cash equivalents, (Administered Schedule of Assets and Liabilities)</i>
<u>Trade and other receivables</u> This variance is as a result of timing of payments at year end which is offset by the reduction in Cash and cash equivalents.	<i>Trade and other receivables (Administered Schedule of Assets and Liabilities)</i>
<u>Other financial assets</u> The prepayment to the Australian Red Cross Lifeblood which is part of the 2019-20 Output Based Funding Model has been reduced.	<i>Prepayments (Administered Schedule of Assets and Liabilities)</i>
<u>Inventories</u> This variance is primarily as a result of an increase in the plasma unit costs during the year.	<i>Inventories (Administered Schedule of Assets and Liabilities), Suppliers (Administered Schedule of Comprehensive Income)</i>
<u>Suppliers</u> This variance is as a result of timing of payments at year end.	<i>Suppliers (Administered Schedule of Assets and Liabilities)</i>
<u>Deferred revenue</u> Adoption of AASB 15 for revenue.	<i>Deferred revenue (Administered Schedule of Assets and Liabilities)</i>

END OF FINANCIAL STATEMENTS

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

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PART



5

APPENDICES

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APPENDIX 1. COMMITTEE AND BOARD MEMBER PROFILES



NBA Board Members (L to R) Mr Geoff Bartle, Ms Penny Shakespeare, Dr Amanda Rischbieth (Chair), Mr Paul Bedbrook, Professor Chris Brook PSM, Professor Lyn Beazley AO, and Associate Professor Alison Street AO.

NBA Board Members

Dr Amanda Rischbieth - Chair

Dr Amanda Rischbieth has over 30 years' experience in health and academia including CEO and non-executive directorship roles across health care delivery, clinical (critical care), public health, research, ethics, and corporate governance. She is a Fellow of the Australian Institute of Company Directors, an Adjunct Associate Professor at the University of Adelaide, a Governor's Leadership Foundation Fellow, and a former Telstra Business Women Awards Finalist.

Following her twelve month Harvard Advanced Leadership Fellowship in 2017, Dr Rischbieth was invited back as a Visiting Scientist to join Harvard's Culture of Health project – a partnership between Harvard Chan School of Public Health and Harvard Business School. Her previous directorships include the Australian Organ and Tissue Authority, the National Heart Foundation of Australia SA, Australian College of Critical Care Nurses (National President), South Australian Public Health Council, Urban Renewal Authority, and the South Australian Motor Sport Board (V8 Supercars Adelaide 500).

Formerly a Director of Research for Calvary Health Care where she led the establishment of an international cancer clinical trials unit, Dr Rischbieth established and co-led a private cardiac and general Intensive Care Unit. Dr Rischbieth has received various awards and recognition for her business and community contributions. In 2018, she joined a humanitarian project team in Sri Lanka fitting prosthetic hands to over 240 land-mine and other victims.

Dr Rischbieth was appointed Chair of the NBA Board in March 2019.

Mr Geoffrey Bartle – Community Representative

Mr Bartle has over thirty years of experience at an executive and strategic level in technology enabled business transformation and the design and implementation of business solutions. Prior to retirement, he was a management consultant and had a proven track record of delivering genuine business benefits for his clients in Western Australia and the Northern Territory.

His consulting roles included strategy, governance, business architecture, benefits management, organisational transformation, procurement, change management, business and system analysis, strategic business cases, program design, business process improvement, business continuity and disaster recovery, and the design of technology enabled solutions to optimise business outcomes.

Mr Bartle's industry experience included human services, disability services, health, police, education, superannuation, government services, insurance, small business, sustainability and Green IT, mining, taxation, racing and wagering, social welfare, public housing and smartcards; delivered in government, university and private sector environments.

Mr Bartle has also had extensive experience in a diverse range of Senior Executive Service roles in the public sector in Australia and New Zealand including national administration of large legislative, compliance, business and client service programs. The roles undertaken by Mr Bartle during his career have equipped him with sound business acumen, and an unusual breadth of knowledge and experience, that he drew upon to deliver high calibre consulting services. His pragmatic approach to problem solving, together with his skill in engaging with clients and stakeholders at all levels of an organisation, and his broad exposure to a variety of proprietary and industry methodologies and processes, enabled him to take on a range of challenging engagements.

He understands that a holistic and consumer-centric approach across the entire healthcare continuum is essential, and holds a number of other community representative roles including:

- National Blood Authority – Haemovigilance Advisory Committee
- NPS MedicineWise – Opioids Working Group
- WA Primary Health Alliance – Chronic Heart Failure Steering Committee
- WA Primary Health Alliance – Health Care Home Governance Group
- WA Primary Health Alliance – Chair, Metropolitan Community Advisory Council
- WA Department of Health Cardiovascular Health Network Executive Advisory Group.

Mr Bartle was appointed to the NBA Board as the community representative in October 2017.

Professor Lyn Beazley AO – State and Territory Representative (Small Jurisdiction)

After graduating from Oxford and Edinburgh Universities, Professor Lyn Beazley built an internationally renowned research team in neuroscience that focused on recovery from brain damage, with much of her investigations undertaken as Winthrop Professor at the University of Western Australia. Currently Professor Beazley is Adjunct Professor of Science at Murdoch University.

Professor Beazley was the Chief Scientist of Western Australia from 2006 to 2013, advising the WA government on science, innovation and technology. Professor Beazley currently chairs several boards including the NCRIS facility, the Terrestrial Ecosystems Research Network, the Northwest Shelf Flatback Turtle Conservation Program and the Royal Perth Hospital Research Foundation and serves on others including the Royal Institution Australia and the council of the Australian Academy of Science. Professor Beazley was a Trustee of the Western Australian Museum from 1999 to 2006 and currently is Patron of the Friends of the Museum, along with many other educational, environmental, social and health-related organisations; in addition she is Vice Patron of both the Royal Society of Western Australia and the Peron Foundation for Neurological and Translation Research.

In 2009 Professor Beazley was awarded Officer of the Order of Australia. In that year she was elected a Fellow of the Australian Academy of Technological Sciences and Engineering and in 2019 became a Fellow of the Academy of Science. In 2011 Professor Beazley was inducted into the inaugural Western Australian Women's Hall of Fame and was elected a Fellow of the Australian College of Educators and a Companion of Engineers Australia. In 2015 she was inducted into the Western Australian Science Hall of Fame and was announced as the 2015 WA Australian of the Year.

Professor Beazley works to promote science, technology, engineering and mathematics to the community, especially to young people, as well as striving to advance gender equity by bringing financial knowledge to women especially those experiencing violence and/or financial abuse.

Mr Paul Bedbrook – Financial Expert

Mr Paul Bedbrook has had a connection with blood issues via his personal involvement with haemophilia for three decades. He is the father of two adult sons with haemophilia. For much of this time Mr Bedbrook has been involved with the Haemophilia Foundation NSW (HFNSW) and the Haemophilia Foundation Australia (HFA). Mr Bedbrook is a past President of HFNSW and past Treasurer of HFA. He brings his personal experiences with blood issues to the Board as well as feedback from a community of individuals who rely on the blood and plasma products distributed to Australia's health services under the auspices of the NBA.

Professionally, Mr Bedbrook has had over thirty years of experience in financial services. His current roles include: Chairman of Zurich Financial Services Australia Ltd, Independent non-executive Director of Credit Union Australia (CUA) Ltd and Independent Chairman of ASX listed Elanor Investors Group.

Mr Bedbrook was a senior executive for over twenty years with the Dutch global banking, insurance and investment group, ING. Mr Bedbrook's early career was as an Investment Analyst and Investment Portfolio Manager at ING, and between 1987 and 1995, he was the General Manager Investments and Chief Investment Officer for the Mercantile Mutual (ING) Group in Sydney. In the decade to 2010, Mr Bedbrook was in turn, President and CEO of INGDIRECT Canada, CEO and Director of ING Australia and Regional CEO of ING Asia Pacific based in Hong Kong.

Mr Bedbrook has been a member of the NBA Board since May 2011 and was appointed to his current Board role as financial expert in August 2013. Mr Bedbrook is also a member of the NBA Audit and Risk Committee (ARC), he attended all six ARC meetings during 2019-20 and was reimbursed \$7,637.

Professor Chris Brook PSM – State and Territory Representative (Large Jurisdiction)

Professor Chris Brook was a senior executive in Victorian Health for thirty years, fulfilling both professional (Chief Medical Officer and Director, Public Health) and management roles (Regional Director; Director Acute Health; Director Rural Health and Aged Care; and Executive Director Wellbeing, Integrated Care and Ageing).

Professor Brook has been part of blood and blood policy since 1988 and a national champion since the 1990s, including the several transformations in that time. He is especially proud of how treatment for people with haemophilia has utterly transformed in his time.

Professor Brook was re-appointed to the Board in January 2017.

Ms Penny Shakespeare – Australian Government Representative

Penny Shakespeare is Deputy Secretary of the Health Resourcing Group in the Commonwealths Department of Health. This includes the Technology Assessment and Access Division, Medical Benefits Division, Provider Benefits Integrity Division and Health Workforce Division in the Commonwealth Department of Health.

Since joining Health in 2006, Penny has held a number of senior leadership positions, as First Assistant Secretary of the Technology Assessment and Access Division and Health Workforce Division.

Prior to joining Health, Ms Shakespeare was an industrial relations lawyer in the Department of Employment and Workplace Relations and was in regulatory policy roles, including as head of the ACT Office of Industrial Relations.

Penny has a Bachelor of Laws, a Master's degree in International Law and is admitted as a Barrister and Solicitor.

Associate Professor Alison Street AO – Public Health Expert

Professor Alison Street graduated in 1971 from Monash University with first class honours in medicine. After completing postgraduate training in clinical and laboratory haematology in Melbourne and Sydney, Professor Street spent three years in clinical research in Boston. Professor Street returned to Melbourne to work with Monash University and Alfred Health in 1984, where she retired from the positions of Head of Laboratory Haematology and Haemostasis-Thrombosis (including Haemophilia) in 2012.

Professor Street's main professional interests were in haemostasis-thrombosis, transfusion medicine and teaching. During her tenure at Alfred Health, Professor Street was Chief Examiner in haematology for the Royal College of Pathologists of Australasia between 2001 and 2006, and President of the Haematology Society of Australia and New Zealand between 1996 and 1998.

Professor Street was a Board member with the World Federation of Hemophilia (WFH) between 2002 and 2012 (Vice-President Medical between 2008 and 2012) and a Board member of Lifeblood between 1998 and 2004.

Professor Street's other appointments are:

- Clinical Adjunct Associate Professor in the Department of Immunology and Pathology, Monash University
- Chair of the NBA Haemovigilance Advisory Committee, and
- Member of the Steering Committee for the Asia-Pacific Haemophilia Working Group.

Professor Street received the Award of Officer in the Order of Australia in 2006 for services to haematology and the community of people with congenital bleeding disorders, and is an honorary life member of the Haematology Society of Australia and New Zealand, Australian Society of Thrombosis and Haemostasis and the Australian and New Zealand Society of Blood Transfusion.

Professor Street was appointed to the NBA Board in January 2017.

Audit and Risk Committee

Ms Roslyn Jackson - Chair

Ms Jackson was appointed as the chair of the Audit and Risk Committee in September 2019 following the resignation of Mr Ken Barker from the committee. Ms Jackson has been a member of the committee since September 2017.

Ms Jackson brings more than 30 years' experience as a Chartered Accountant working in both public practice and in 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 a number of not-for-profit companies, primarily in the health sector and is currently Deputy Chair of Capital Health Network (CHN), the Primary Health Network for the ACT and Director of the Australian Nursing and Midwifery Accreditation Council (ANMAC).

Ms Jackson attended all six ARC meetings during 2019-20 and was reimbursed \$12,251.

Mr Ken Barker – Outgoing Chair

Until 2009 Mr Barker had some forty two years of experience in the New South Wales Government. He worked for New South Wales Health for twenty four years where his last appointment was as Chief Financial Officer. He is now director of his own company, which specialises in financial management and provision of strategic advice, mainly to government agencies. He is also a member of a number of state government governance boards and of several New South Wales agency audit and risk committees.

Mr Barker has worked with the former New South Wales Blood Transfusion Service, and has made important contributions to many of the key decisions and events that have shaped the current Australian blood sector: the establishment of the Blood Service and the NBA; provision of national indemnity arrangements for blood and blood products; the Stephen Review of the Australian Blood Banking and Plasma Product Sector; and the 2008 KPMG business study of the Blood Service.

Mr Barker was appointed to the NBA Interim Board and has served as a full Board member since the inception of the NBA. He was reappointed in May 2011 and his term extended until August 2013. He served as Chair of the NBA Audit Committee between 2003 and 2007 and continued to serve as an Audit Committee member, until his appointment as Chair in October 2013. Mr Barker attended two ARC meetings during 2019-20 and was reimbursed \$3,696. Mr Barker resigned from the ARC in September 2019.

Mr Greg Fraser

Greg is a Fellow of the Australian Institute of Company Directors and the Governance Institute of Australia.

Greg is a former Chief Executive of the ACT Department of Health and Community Care and has 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.

Greg has served on a number of corporate, public sector and not for profit boards and audit and risk committees. He is currently a member of the Board of Dementia and Alzheimer's Australia Limited and sits on its Audit and Risk Committee. He is a member of the Board of Marymead and a member of the National Blood Authority's Audit and Risk Committee.

Mr Fraser attended all six ARC meetings during 2019-20 and was reimbursed \$6,633.

APPENDIX 2. FRESH BLOOD COMPONENTS SUPPLIED UNDER CONTRACT BY LIFEBLOOD IN 2019-20

TABLE 5.1 Fresh blood components supplied under contract by Lifeblood, 2019-20

Product Type	Name	Presentation	JBC Price
Red blood cells	Whole blood (WB) red cells leucodepleted	>200ml ¹	\$399.25
	WB paediatric red cells leucodepleted (set of 4)	25-100ml ¹	\$426.94
	WB washed red cells leucodepleted	>130ml ¹	\$416.15
Platelets	WB platelet pool leucodepleted	>160ml ¹	\$278.26
	Apheresis platelet leucodepleted	100-400ml ¹	\$634.21
	Paediatric apheresis platelet leucodepleted (set of 3)	40-60ml ¹	\$905.64
Clinical fresh frozen plasma (FFP)	WB clinical FFP	295ml+/-10% ¹	\$181.79
	WB paediatric clinical FFP (set of 4)	60-80ml ¹	\$213.14
	Apheresis clinical FFP	295ml +/-10% ¹	\$263.52
Cryoprecipitate	WB cryoprecipitate	30-40ml ¹	\$164.00
	Apheresis cryoprecipitate	54-66ml ¹	\$320.41
Cryo-depleted plasma	WB cryo-depleted plasma	215-265ml ¹	\$148.59
	Apheresis cryo-depleted plasma	495-605ml ¹	\$385.16
Other products	Autologous donation	NA	\$399.25
	Therapeutic Vensections for WB for Discard	NA	\$585.47
	Serum eye drops	Single Collection	\$859.30
Plasma for Fractionation	Plasma for Fractionation ²	Presentation size NA, but costed per kg	\$376.67

¹The presentation volume for a typical unit content is specified in the Australian Red Cross Lifeblood Blood Component Information, 2020. URL: <https://transfusion.com.au/BCI>.

²Plasma for Fractionation is supplied to CSL Behring (Australia) Pty Ltd for manufacturing plasma derived products.

APPENDIX 3. PLASMA AND RECOMBINANT PRODUCTS SUPPLIED UNDER CONTRACT IN 2019-20

TABLE 5.2 Plasma and recombinant products supplied under contract 2019-20

Product Type	Name	Presentation	Supplier	Price
Albumin (plasma derived - domestic)	Albumex	20% 10ml	CSL Behring (Australia) Pty Ltd	\$15.70 ¹
		20% 100ml		\$68.50 ¹
		4% 50ml		\$15.70 ¹
		4% 500ml		\$68.50 ¹
Factor VIIa (recombinant - imported)	NovoSeven	1mg	Novo Nordisk Pharmaceuticals Pty Ltd	\$1,351.11
		2mg		\$2,702.22
		5mg		\$6,755.55
		8mg		\$10,808.80
Factor VIII Anti-Inhibitor (plasma derived - imported)	FEIBA	500 IU	Shire Australia Pty Limited	\$1,200.00
		1000 IU		\$2,400.00
		2500 IU		\$6,000.00
Factor VIII (plasma derived - domestic)	Biostate	250 IU	CSL Behring (Australia) Pty Ltd	\$220.98 ¹
		500 IU		\$441.96 ¹
		1000 IU		\$883.91 ¹
Factor VIII (recombinant - imported)	Advate	250 IU	Shire Australia Pty Limited	\$75.00
		500 IU		\$150.00
		1000 IU		\$300.00
		1500 IU		\$450.00
		2000 IU		\$600.00
		3000 IU		\$900.00
Factor VIII (recombinant - imported)	Eloctate	250 IU	Sanofi-aventis Australia Pty Ltd	*
		500 IU		*
		1000 IU		*
		2000 IU		*
		3000 IU		*
Factor IX (recombinant - imported)	Alprolix	250 IU	Sanofi-aventis Australia Pty Ltd	*
		500 IU		*
		1000 IU		*

Product Type	Name	Presentation	Supplier	Price
Factor VIII (recombinant - imported)	Xyntha	2000 IU	Pfizer Australia Pty Ltd	*
		3000 IU		*
		250 IU		\$90.00
		500 IU		\$180.00
		1000 IU		\$360.00
		2000 IU		\$720.00
Factor IX (plasma derived - domestic)	MonoFIX	3000 IU	CSL Behring (Australia) Pty Ltd	\$1,080.00
		1000 IU		\$883.91 ¹
		250 IU		\$197.50
		500 IU		\$395.00
		1000 IU		\$790.00
		2000 IU		\$1,580.00
Factor IX (recombinant - imported)	BeneFIX	3000 IU	Pfizer Australia Pty Ltd	\$2,370.00
		250 IU		\$197.50
		500 IU		\$395.00
		1000 IU		\$790.00
		2000 IU		\$1,580.00
		3000 IU		\$2,370.00
Factor VIII (recombinant - imported)	Adynovate	250 IU	Shire Australia Pty Limited	*
		500 IU		*
		1000 IU		*
		2000 IU		*
Factor IX (recombinant - imported)	Rixubis	250 IU	Shire Australia Pty Limited	\$196.50
		500 IU		\$393.00
		1000 IU		\$786.00
		2000 IU		\$1,572.00
		3000 IU		\$2,358.00
Factor XI (plasma derived - imported)	Factor XI	1 IU	CSL Behring (Australia) Pty Ltd	\$12.85
Factor XIII (plasma derived - imported)	Fibrogammin	250 IU	CSL Behring (Australia) Pty Ltd	\$198.98
		1250 IU		\$994.89
Factor XIII (recombinant - imported)	NovoThirteen	2500 IU	Novo Nordisk Pharmaceuticals Pty Ltd	\$30,000
Human prothrombin complex (plasma derived - domestic)	Prothrombinex	500 IU	CSL Behring (Australia) Pty Ltd	\$281.76 ¹
Fibrinogen Concentrate (plasma derived - imported)	RiaSTAP	1g	CSL Behring (Australia) Pty Ltd	\$801.55
Human C1 esterase inhibitor concentrate (plasma derived - imported)	Berinert	500 IU - IV	CSL Behring (Australia) Pty Ltd	\$942.68
		2000 IU - SC		\$2,040.00
		3000 IU - IV		\$3,060.00

Product Type	Name	Presentation	Supplier	Price
Protein C concentrate (plasma derived - imported)	Ceprotin	500 IU	Shire Australia Pty Limited	\$1,075.00
		1000 IU		\$2,150.00
Antithrombin III concentrate (plasma derived - domestic)	Thrombotrol VF	1000 IU	CSL Behring (Australia) Pty Ltd	\$1,425.31 ¹
Intravenous IVIg (plasma derived – domestic)	Intragam 10	2.5g/25ml	CSL Behring (Australia) Pty Ltd	\$145.57 ¹
		10g/100ml		\$582.30 ¹
		20g/200ml		\$1,164.59 ¹
SCIg (plasma derived – domestic)	Evogam	16% 0.8g/5ml	CSL Behring (Australia) Pty Ltd	\$46.58 ¹
		15% 3.2g/20ml		\$186.33 ¹
IVIg (plasma derived - imported)	Flebogamma DIF	5% 0.5g/10ml	Grifols Australia Pty Ltd	\$22.50
		5% 2.5g/50ml		\$112.50
		5% 5g/100ml		\$225.00
		5% 10g/200ml		\$450.00
		5% 20g/400ml		\$900.00
		10% 5g/50ml		\$225.00
		10% 10g/100ml		\$450.00
		10% 20g/200ml		\$900.00
IVIg (plasma derived - imported)	Gamunex	10% 5g/50ml	Grifols Australia Pty Ltd	*
		10% 10g/100ml		*
		10% 20g/200ml		*
IVIg (plasma derived - imported)	Privigen	5g/50ml	CSL Behring (Australia) Pty Ltd	\$225.00
		10g/100ml		\$450.00
		20g/200ml		\$900.00
		40g/400ml		\$1,800.00
SCIg (plasma derived - imported)	Hizentra	1g/5ml	CSL Behring (Australia) Pty Ltd	\$59.15
		2g/10ml		\$118.31
		4g/20ml		\$236.61
		10g/50ml		\$591.53
Normal Ig NIg (plasma derived - domestic)	Normal Ig VF	2ml (0.32gm)	CSL Behring (Australia) Pty Ltd	\$32.06 ¹
		5ml (0.80gm)		\$52.56 ¹
CMV Ig (plasma derived - domestic)	CMV Ig	1.5 million units	CSL Behring (Australia) Pty Ltd	\$1,218.77 ¹
Hepatitis B Ig (plasma derived - domestic)	Hepatitis B Ig	100 IU (2ml)	CSL Behring (Australia) Pty Ltd	\$44.55 ¹
		400 IU (5ml)		\$102.00 ¹
Rh (D) Ig (plasma derived - imported)	Rhophylac	1500 IU	CSL Behring (Australia) Pty Ltd	\$419.44

Product Type	Name	Presentation	Supplier	Price
Rh (D) Ig - VF (plasma derived - domestic)	Rh (D) Ig	250 IU	CSL Behring (Australia) Pty Ltd	\$30.18 ¹
		625 IU		\$75.41 ¹
Tetanus Ig (plasma derived - domestic)	Tetanus Ig VF	250 IU	CSL Behring (Australia) Pty Ltd	\$44.04 ¹
		4000 IU		\$704.52 ¹
Zoster Ig (plasma derived - domestic)	Zoster Ig VF	200 IU	CSL Behring (Australia) Pty Ltd	\$279.33 ¹

*Extended half-life products supplied under limited and interim arrangements with no additional cost to the NBA budget.

¹ The price does not include the starting plasma provided to CSL Behring (Australia) Pty Ltd by Australian Red Cross Lifeblood.

APPENDIX 4. MANDATORY REPORTING

Work health and safety

- Refer Part 3

Statistics on employees who identify as Indigenous

- Refer Part 3

Procurement Initiatives to Support Small Business

The National Blood Authority 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 website:

www.finance.gov.au/procurement/statistics-on-commonwealth-purchasing-contracts

The following initiatives employed by the National Blood Authority support small business:

- the Commonwealth Contracting Suite for low-risk procurements valued under \$200,000
- Australian Industry Participation plans in whole-of-government procurement where applicable
- the Small Business Engagement Principles (outlined in the government's Industry Innovation and Competitiveness Agenda), such as communicating in clear, simple language and presenting information in an accessible format
- electronic systems or other processes used to facilitate on-time payment performance, including the use of payment cards.

The National Blood Authority 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: www.treasury.gov.au.

Advertising and market research

Section 311A of the *Commonwealth Electoral Act 1918* requires 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 2019-20. The NBA did not conduct any advertising campaigns in 2019-20.

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 2019-20 this included the following examples:

- continued use of audio and video conferencing and online collaboration in preference to face-to-face meetings requiring interstate or international travel
- recycling into three streams of waste – co-mingled material, paper and printer cartridges
- encouraging staff to recycle and re-use existing stationery before ordering new supplies

- maintaining paper use reduction initiatives such as defaulting printer settings to print double sided and in black and white and using 100 per cent recycled paper
- running the air conditioning systems on timers and occupancy sensors to ensure operation only during business hours when the immediate area is occupied
- participating in Earth Hour – the office was fully compliant and all staff were encouraged to participate
- ensuring that through purchasing activities further improvements were made within blood product supply contracts
- electronic document and records management system in place.

In summary, Table 5.3 provides information on the impact the NBA's activities have on the natural environment. The NBA continues to look at ways to further reduce the impact on the environment.

TABLE 5.3 NBA environmental performance indicators

Theme	Performance measure	Indicator(s)	2018-19	2019-20
Energy efficiency	Total consumption of energy	Amount of electricity consumed (kWh)	171,682 kWh	170,498 kWh
		Amount of gas consumed (MJ)	0 MJ	0 MJ
		Amount of other fuels consumed (\$/kWh/MJ/L)	0	0
		Air travel distances (km)	543,656 kms	378,325 kms
	Total consumption of green energy	Amount of green energy purchased/consumed (\$/kWh)	0 kWh	0 kWh
	Greenhouse gas emissions	Amount of greenhouse gases produced (tonnes)	0 tonnes	0 tonnes
	Relative energy uses	Amount of green energy purchased divided by the amount of electricity consumed	0%	0%
		Amount of total energy consumed (kWh) per employee	2,183 kWh	2,005 kWh

Theme	Performance measure	Indicator(s)	2018-19	2019-20
Waste	Total waste production	Amount of waste produced (tonnes)	11.82 tonnes	8.87 tonnes
	Un-recyclable waste production	Amount of waste going to landfills (tonnes)	1.90 tonnes	1.68 tonnes
	Recyclable waste production (excluding office paper)	Amount of waste going to recycling facilities (tonnes)	1.15 tonnes	1.13 tonnes
	Paper waste production	Amount of waste paper going to recycling facilities (tonnes)	8.771 tonnes	6.058 tonnes
		Amount of paper sourced from recyclable sources (tonnes)	1.394 tonnes	1.305 tonnes
		Percentage of paper sourced from recyclable sources (per cent)	99.7%	99.5%
	Use of renewable/recyclable products	Amount of products sourced from renewable/recyclable sources (tonnes)	1.390 tonnes	1.290 tonnes
	Relative waste production	Amount of total waste (tonnes) per employee	0.15 tonnes	0.10 tonnes
Theme	Performance measure	Indicator(s)	2018-19	2019-20
Water	Total consumption of water	Amount of water consumed (L)	413,133 L	482,505 L
	Grey water/rainwater capture and use	Grey Water not applicable to NBA tenancies	na	na
	Relative consumption/use of water	Amount of total water use (L) per employee	5,255 L	5,673 L

Grant programs

Information on grants awarded by the NBA during the period 1 July 2019 to 30 June 2020 is available at: www.blood.gov.au/governmental-compliance.

Disability reporting

Since 1994, non-corporate Commonwealth entities have reported on their performance as policy adviser, purchaser, employer, regulator and provider under the Commonwealth Disability Strategy. In 2007-08, reporting on the employer role was transferred to the Australian Public Service Commission's State of the Service Report and the APS Statistical Bulletin. These reports are available at www.apsc.gov.au. From 2010-11, entities are no longer required to report on these functions.

The Commonwealth Disability Strategy has been overtaken by the National Disability Strategy 2010-2020, which sets out a 10-year national policy framework to improve the lives of people with a disability, promote participation and create a more inclusive society. A high level two-yearly report will track progress against each of the six outcome areas of the strategy and present a picture of how people with disability are faring. The first of these reports was published in late 2014, and can be found at www.dss.gov.au.

Information Publication Scheme statement

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.

A copy of the NBA IPS Plan and associated published documents can be located at: <http://www.blood.gov.au/ips>.

Errata

Nil.

Agency resource statements

The agency resource statement provides details of the funding sources that the NBA drew upon in 2019-20. In addition, it provides information about special accounts balances to be carried over to 2020-21.

TABLE 5.4 Agency resource statement

	Actual Available Appropriation for 2019-20 \$'000	Payments made 2019-20 \$'000	Balance 2019-20 \$'000
	(a)	(b)	(a) - (b)
Ordinary Annual Services¹			
Departmental appropriation ²	6,298	6,187	111
Total	6,298	6,187	111
Administered expenses			
Outcome 1 ³	3,630	3,630	
Total	3,630	3,630	
Total ordinary annual services	9,928	9,817	
Special Accounts⁴			
Opening Balance	176,783		
Appropriation receipts ⁵	9,817		
Non-appropriation receipts to Special Accounts	1,274,502		
Payments made		1,259,432	
Total Special Accounts	1,461,102	1,259,432	201,670
Total resourcing and payments	1,471,030	1,269,249	

¹ Appropriation Act (No. 1) 2019-20 and Appropriation Act (No. 3) 2019-20. This may also include Prior Year departmental appropriation and section 31 relevant agency receipts.

² Includes an amount of \$0.617 million in 2019-20 for the Departmental Capital Budget. For accounting purposes this amount has been designated as 'contributions by owners'.

³ Includes an amount of \$nil in 2019-20 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 2019-20 included above.

Resources for outcomes

This table provides details of the total funding for each outcome. In 2019-20 the NBA operated under a single outcome.

TABLE 5.5 Agency expenses by outcome

Outcome 1: Australia's blood supply is secure and well managed	Budget*	Actual	Variation
	2019-20	Expenses	2019-20
	2019-20	2019-20	
	\$'000	\$'000	\$'000
	(a)	(b)	(a) - (b)
Programme 1.1:			
National Blood Agreement management			
Administered expenses			
Ordinary Annual Services (Appropriation Bill No. 1)	3,630	3,630	-
Special Accounts	1,275,543	1,174,694	100,849
Departmental expenses			
Departmental appropriation ¹	6,298	6,187	111
Special Accounts	9,630	10,738	-1,108
Expenses not requiring appropriation in the Budget year	687	2,524	-1,837
Total for Programme 1.1	1,295,788	1,197,773	98,015
Total expenses for Outcome 1	1,295,788	1,197,773	98,015
		2018-19	2019-20
Average Staffing Level (number) ²		56	55

* Full year budget, including any subsequent adjustment made to the 2019-20 Budget.

1 Departmental Appropriation combines "Ordinary annual services (Appropriation Act No. 1)" and "Revenue from independent sources (s31)".

2 Average Staffing Level during 2019-20

TABLE 5.6 Report on financial performance summary

Entity Resource Statement subset Summary Current Report Period (2019-20)	Actual Available Appropriation for 2019-20 \$'000	Payments made 2019-20 \$'000	Balance 2019-20 \$'000
	(a)	(b)	(a) - (b)
Departmental			
Annual appropriations - ordinary annual services	6,187	6,187	-
Total departmental annual appropriations	6,187	6,187	-
Special accounts	8,699	-	8,699
Total special accounts receipts	10,860	10,738	122
less departmental appropriations drawn from annual/special appropriations and credited to special accounts	6,187	6,187	-
Total departmental resourcing (A)	19,559	10,738	8,821
Administered			
Annual appropriations - ordinary annual services	3,630	3,630	-
Total administered annual appropriations	3,630	3,630	-
Special accounts	168,084	-	168,084
Total special accounts receipts	1,273,459	1,248,694	24,765
less administered appropriations drawn from annual/special appropriations and credited to special accounts	3,630	3,630	-
less payments to corporate entities from annual/special appropriations	-	-	-
Total administered resourcing (B)	1,437,913	1,245,064	192,849
Total resourcing and payments for NBA (A + B)	1,457,472	1,255,802	201,670

APPENDIX 5. LIST OF REQUIREMENTS

Outlined in this section is the information provided in accordance with the Department of Finance's *Resource Management Guide No. 135 Annual reports for non-corporate Commonwealth entities* as at May 2020.

na denotes that the requirement was not applicable to the NBA during 2019-20.

nil denotes that this aspect was not reported on for the NBA in 2019-20.

TABLE 5.7 List of requirements

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	181-185
17AJ(c)	Appendix 6	Glossary of abbreviations and acronyms.	Mandatory	178-180
17AJ(d)	Appendix 5	List of requirements.	Mandatory	171-177
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)	Part 1	A review by the accountable authority of the entity.	Mandatory	10-13
17AD(b)	Overview of the entity			
17AE(1)(a)(i)	Part 1	A description of the role and functions of the entity.	Mandatory	2-3
17AE(1)(a)(ii)	Part 1	A description of the organisational structure of the entity.	Mandatory	4,89
17AE(1)(a)(iii)	Part 1	A description of the outcomes and programmes administered by the entity.	Mandatory	25-32,85
17AE(1)(a)(iv)	Part 1	A description of the purposes of the entity as included in corporate plan.	Mandatory	2
17AE(1)(aa)(i)	Part 1	Name of the accountable authority or each member of the accountable authority	Mandatory	3

PGPA Rule Reference	Part of Report	Description	Requirement	Page
17AE(1)(aa)(ii)	Part 1	Position title of the accountable authority or each member of the accountable authority	Mandatory	3
17AE(1)(aa)(iii)	Part 1	Period as the accountable authority or member of the accountable authority within the reporting period	Mandatory	3
17AE(1)(b)		An outline of the structure of the portfolio of the entity.	Portfolio departments - mandatory	na
17AE(2)		Where the outcomes and programs administered by the entity differ from any Portfolio Budget Statement, Portfolio Additional Estimates Statement or other portfolio estimates statement that was prepared for the entity for the period, include details of variation and reasons for change.	If applicable, Mandatory	na
17AD(c)	Report on the Performance of the entity <i>Annual performance Statements</i>			
17AD(c)(i); 16F	Part 2	Annual performance statement in accordance with paragraph 39(1)(b) of the Act and section 16F of the Rule.	Mandatory	22
17AD(c)(ii)	Report on Financial Performance			
17AF(1)(a)	Part 4	A discussion and analysis of the entity's financial performance.	Mandatory	103-105
17AF(1)(b)	Part 4	A table summarising the total resources and total payments of the entity.	Mandatory	104-105
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.	150
17AD(d)	Management and Accountability <i>Corporate Governance</i>			
17AG(2)(a)	Part 3	Information on compliance with section 10 (fraud systems)	Mandatory	88
17AG(2)(b)(i)	Part 3	A certification by accountable authority that fraud risk assessments and fraud control plans have been prepared.	Mandatory	iii,88
17AG(2)(b)(ii)	Part 3	A certification by accountable authority that appropriate mechanisms for preventing, detecting incidents of,	Mandatory	iii,88

PGPA Rule Reference	Part of Report	Description	Requirement	Page
		investigating or otherwise dealing with, and recording or reporting fraud that meet the specific needs of the entity are in place.		
17AG(2)(b)(iii)	Part 3	A certification by accountable authority that all reasonable measures have been taken to deal appropriately with fraud relating to the entity.	Mandatory	iii,88
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	81-83
17AG(2)(d) - (e)		A statement of significant issues reported to Minister under paragraph 19(1)(e) of the Act that relates to non-compliance with Finance law and action taken to remedy non-compliance.	If applicable, Mandatory	na
Audit Committee				
17AG(2A)(a)	Part 3	A direct electronic address of the charter determining the functions of the entity's audit committee.	Mandatory	82
17AG(2A)(b)	Part 3	The name of each member of the entity's audit committee.	Mandatory	82
17AG(2A)(c)	Appendix 1	The qualifications, knowledge, skills or experience of each member of the entity's audit committee.	Mandatory	156, 158
17AG(2A)(d)	Appendix 1	Information about the attendance of each member of the entity's audit committee at committee meetings.	Mandatory	156, 158
17AG(2A)(e)	Appendix 1	The remuneration of each member of the entity's audit committee.	Mandatory	156, 158
External Scrutiny				
17AG(3)	Part 3	Information on the most significant developments in external scrutiny and the entity's response to the scrutiny.	Mandatory	88
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	88
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	88

PGPA Rule Reference	Part of Report	Description	Requirement	Page
17AG(3)(c)	Part 3	Information on any capability reviews on the entity that were released during the period.	If applicable, Mandatory	88
Management of Human Resources				
17AG(4)(a)	Part 3	An assessment of the entity's effectiveness in managing and developing employees to achieve entity objectives.	Mandatory	89-99
17AG(4)(aa)	Part 3	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	93
17AG(4)(b)	Part 3	Statistics on the entity's APS employees on an ongoing and non-ongoing basis; including the following: ▪ statistics on staffing/classification level; ▪ statistics on full-time employees; ▪ statistics on part-time employees; ▪ statistics on gender; ▪ statistics on staff location; ▪ statistics on employees who identify as Indigenous.	Mandatory	93,95
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	95
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	95
17AG(4)(c)(ii)	Part 3	The salary ranges available for APS employees by classification level.	Mandatory	96
17AG(4)(c)(iii)	Part 3	A description of non-salary benefits provided to employees.	Mandatory	97
17AG(4)(d)(i)		Information on the number of employees at each classification level who received performance pay.	If applicable, Mandatory	na
17AG(4)(d)(ii)		Information on aggregate amounts of performance pay at each classification level.	If applicable, Mandatory	na
17AG(4)(d)(iii)		Information on the average amount of performance payment, and range of such payments, at each classification level.	If applicable, Mandatory	na

PGPA Rule Reference	Part of Report	Description	Requirement	Page
17AG(4)(d)(iv)		Information on aggregate amount of performance payments.	If applicable, Mandatory	na
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	105
Purchasing				
17AG(6)	Part 4	An assessment of entity performance against the <i>Commonwealth Procurement Rules</i> .	Mandatory	105
Consultants				
17AG(7)(a)	Part 4	A summary statement detailing the number of new contracts engaging consultants entered into during the period; the total actual expenditure on all new consultancy contracts entered into during the period (inclusive of GST); the number of ongoing consultancy contracts that were entered into during a previous reporting period; and the total actual expenditure in the reporting year on the ongoing consultancy contracts (inclusive of GST).	Mandatory	106
17AG(7)(b)	Part 4	A statement that <i>"During [reporting period], [specified number] new consultancy contracts were entered into involving total actual expenditure of \$[specified million]. In addition, [specified number] ongoing consultancy contracts were active during the period, involving total actual expenditure of \$[specified million]"</i> .	Mandatory	106
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	106
17AG(7)(d)	Part 4	A statement that <i>"Annual reports contain information about actual expenditure on contracts for consultancies. Information on the value of contracts and consultancies is available on the AusTender website."</i>	Mandatory	106
Australian National Audit Office Access Clauses				
17AG(8)		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,	If applicable, Mandatory	na

PGPA Rule Reference	Part of Report	Description	Requirement	Page
		purpose and value of the contract, and the reason why a clause allowing access was not included in the contract.		
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	106
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	106
17AG(10)(b)	Part 4	An outline of the ways in which the procurement practices of the entity support small and medium enterprises.	Mandatory	106
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	106
Financial Statements				
17AD(e)	Part 4	Inclusion of the annual financial statements in accordance with subsection 43(4) of the Act.	Mandatory	108-150
Executive Remuneration				
17AD(da)	Part 3	Information about executive remuneration in accordance with Subdivision C of Division 3A of Part 2-3 of the Rule.	Mandatory	97-98
17AD(f)	Other Mandatory Information			

PGPA Rule Reference	Part of Report	Description	Requirement	Page
17AH(1)(a)(i)	Part 4	If the entity conducted advertising campaigns, a statement that <i>"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."</i>	If applicable, Mandatory	na
17AH(1)(a)(ii)	Part 5	If the entity did not conduct advertising campaigns, a statement to that effect.	If applicable, Mandatory	164
17AH(1)(b)	Part 5	A statement that <i>"Information on grants awarded by [name of entity] during [reporting period] is available at [address of entity's website]."</i>	If applicable, Mandatory	167
17AH(1)(c)	Part 5	Outline of mechanisms of disability reporting, including reference to website for further information.	Mandatory	167
17AH(1)(d)	Part 5	Website reference to where the entity's Information Publication Scheme statement pursuant to Part II of FOI Act can be found.	Mandatory	167
17AH(1)(e)	Part 5	Correction of material errors in previous annual report.	If applicable, mandatory	167
17AH(2)	Information required by other legislation			
		Work health and safety (Schedule 2, Part 4 of the Work Health and Safety Act 2011).	Mandatory	99
		Ecologically sustainable development and environmental performance (Section 516A of the Environment Protection and Biodiversity Conservation Act 1999).	Mandatory	164-166
		Agency Resource Statements and Resources for Outcomes.	Mandatory	168-169
		Report on Financial Performance Summary.	Mandatory	170

APPENDIX 6. ACRONYMS AND ABBREVIATIONS

ABDR	Australian Bleeding Disorders Registry
ACSQHC	Australian Commission on Safety and Quality in Health Care
ACT	Australian Capital Territory
AHCDC	Association of Hemophilia Clinic Directors of Canada
AHCDO	Australian Haemophilia Centre Directors' Organisation
ANAO	Australian National Audit Office
ANMAC	Australian Nursing and Midwifery Accreditation Council
ANZSBT	Australian and New Zealand Society of Blood Transfusion
Anti-D	Rh D Immunoglobulin
APS	Australian Public Service
ARC	Audit and Risk Committee
ASCIA	Australasian Society of Clinical Immunology and Allergy
ASX	Australian Stock Exchange
BloodNET	BloodNET - Australia's online blood ordering and inventory management system
BloodSafe eLearning	transfusion practice and patient blood management education online system
BloodSTAR	BloodSTAR - blood system for tracking authorisations and reviews
BCP	Business Continuity Plan
BEA	BloodSafe eLearning Australia
CHN	Capital Health Network
CIDP	Chronic inflammatory demyelinating polyneuropathy
COAG	Council of Australian Governments
CSL Behring	CSL Behring (Australia) Pty Ltd
CUA	Credit Union Australia
DAPI	discards as a percentage of net issues
EA	Enterprise Agreement
EAP	Employee Assistance Program
EHL	extended half-life
ERG	expert reference group
FEIBA	factor VIII anti-inhibitor
FFP/FP	fresh frozen plasma/frozen plasma
FIX	factor nine
FOI Act	Freedom of Information Act
FVIII	factor eight
GIN	Guidelines International Network
GST	goods and services tax

HAA	Annual scientific meeting of the HAA-Haematology Society of Australia and New Zealand-HSANZ, the Australian & New Zealand Society of Blood Transfusion-ANZSBT, and the Australasian Society of Thrombosis and Haemostasis-ASTH (now Blood)
HAC	Haemophilia Advisory Committee
HFA	Haemophilia Foundation Australia
HFNSW	Haemophilia Foundation New South Wales
HTA	Health Technology Assessment
ICT	Information Communications Technology
Ig	immunoglobulin
IPAA	Institute of Public Administration Australia
IPS	Information Publication Scheme
ISTH	International Society on Thrombosis and Haemostasis
IU	International Units
IVIg	Intravenous Immunoglobulin
JBC	Jurisdictional Blood Committee
KM	Knowledge Management
KPI	key performance indicator
kWh	kilowatt hour
Lifeblood	Australian Red Cross Lifeblood
LIS	Laboratory Information System
MSAC	Medical Services Advisory Committee
MyABDR	MyABDR is a secure app for smartphones and web site for people with bleeding disorders or parents/caregivers to record home treatments and bleeds
NaFAA	National Fractionation Agreement for Australia
NBA	National Blood Authority
NBSCP	National Blood Supply Contingency Plan
NFRC	National Federation Reform Council
NICE	National Immunohaematology Continuing Education
NIGAC	National Immunoglobulin Governance Advisory Committee
NMF	National Managed Fund
NPL	National Product 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
PGPA Act	Public Governance, Performance and Accountability Act
PGPA Rule	Public Governance, Performance and Accountability Rule
PwC	Pricewaterhouse Coopers Consulting (Australia) Pty Ltd
Red Cross	Australian Red Cross Society
R&D	research and development

rFIX	recombinant factor nine
rFVIII	recombinant factor eight
RMA	Rural Medicine Australia
RMG	resource management guide
SCIg	subcutaneous immunoglobulin
SES	Senior Executive Service
SME	small and medium enterprises
SOP	standard operating procedure
SPF	staff participation forum
SWG	specialist working group
ViP	Value in Prescribing
WFH	World Federation of Hemophilia
WHS	work health and safety

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