Hospital Senior Nurse of Organ and Tissue Donation in a regional setting; a presentation using-

**Donor Case Studies and Peer Feedback.**
Overview

• Why is donation important?
• The national framework/ EFT funding
• The HSN role
• Case examples
• Peer feedback
Why is donation important?

- Organ, eye and tissue donation and transplantation can be life saving or life changing
- Australia is a world leader in successful transplantation
- Australians support organ donation but there is a long standing shortage of organs for transplantation
- As of the 2nd of May 2011 - 1602 Australians were on the official transplant waiting list
Why is organ donation important?

Liam King.
Liver Recipient.
Swimming Champion.
Before and After Organ Transplant
Organ Donors Per Year

Number of Donors

Year

2004 2005 2006 2007 2008 2009

AUST

218 204 202 198 259 247

VIC/TAS

47 52 53 56 75 69

Yeast
International Donor Statistics 2009

Donors per million of population (PMP)

Commonwealth Government’s response

- Comprehensive national reform package
- Unprecedented opportunity to transform and save more Australian lives
- Record Commonwealth funding
  - $151 million over four years
  - New funding $136 million
- All state & territory governments committed
The Authority

• The Australian Organ and Tissue Authority established on 1 January 2009
  (Australian Organ and Tissue Donation and Transplantation Authority Act 2008)

• An independent statutory authority

• Established to provide national leadership and to drive the National Reform Package
The Authority

Vision
Make Australia a world leader in organ and tissue donation for transplantation, and to work in concert with state and territory governments to improve access by Australians to life-saving and life-transforming transplants

Mission
Deliver a highly effective national organ and tissue donation system with the support of Australian governments, the clinical profession and the community
The DonateLife Network

• All state and territory governments agreed to establish a national network

• The Network comprises:
  • Organ and Tissue Donation Agencies (OTDAs) including State Medical Directors (SMDs)
  • Specialist staff – Hospital Medical Directors (MDs) and Hospital Senior Nurses (HSNs)
  • Organ and Tissue Authority

• The Network supports staff to increase family consent, donation and transplantation rates
Key objectives

1. Increase capacity in hospitals
   - Raise awareness of pathways and donation processes
   - Provide staff with skills to support donor families

2. Increase donation rates
   - Raise awareness in the Australian community
   - Encourage family discussion of donation decisions
   - Ensure staff identify potential donors, raise donation and support families to make an informed decision
Victorian DonateLife™ Network

- Level 1 and Level 2 Hospitals
- Hospital Clinical Teams
  - Hospital Medical Directors 8.4 FTE
    - 24 Positions
  - Hospital Senior Nurses 15.1 FTE
    - 33 Positions
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<td>8.4</td>
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HSN Reporting structure:

- Monthly meetings
- Executive Director Medical Services
- Director of Nursing- acute/medical services
- Anyone who doesn’t lock the door, Lucky- open door policy- ICU director and deputy, NUM, ED director….
- Twice yearly Quality Governance report
- DonateLife Victoria State Medical Director, cluster and staff.
Community engagement

• Media relations
• Starts with the community
• Education/awareness
• Opportunity to get the message out
• Part of the community
• Left up to the HSN
Push to boost organ donation

In the past couple of years in some parts of the world, organ donation rates have increased. This has been a positive trend, but the issue of organ donation remains a challenge for many countries. In Australia, the rate of organ donation is lower than in many other countries. This is partly due to public awareness and understanding of the importance of organ donation. The Australian Red Cross Blood Service is working to increase the number of organ donors in Australia. They are doing this through public awareness campaigns and education programs. They also provide support to families who are considering organ donation. It is important that people talk to their families about their wishes regarding organ donation. This will help to ensure that their wishes are respected in the event that they become unable to make decisions for themselves.
Has the HSN role led to increased donor numbers?

- Up to date clinical knowledge
- Family support & communication skills
- Availability & time
- Knowledge of donor pathways in place
Up to date clinical knowledge

• A regional HSN recognised a patient was demonstrating a BD autonomic storm not multi organ failure and initiated medical staff to complete brain death testing and a family discussion on organ donation.
Family support and communication skills

A regional HSN was told by a treating Dr they where hesitant in discussing donation with the family as they were Jehovah's witnesses. Assistance was given so the approach was open and balanced rather than apologetic and expecting a negative response- this patient became an organ donor.
Availability & Time

A regional HSN was contacted by the ED as a potential donor had been flagged. Intensivist did not want to speak with the family overnight and was hesitant the patient was a suitable donor, they where 78 “who would want them” HSN was able to come in and meet the family, spend the time finding out medical suitability and discuss donation- they became a kidney donor.
Knowledge of donor pathways in place

• A regional HSN recognised a young patient who treatment was being withdrawn and highlighted the opportunity to transfer the patient to Melbourne as a potential donor after cardiac death - the family jumped at the chance and the patient became a lung donor.
Peer feedback on the HSN role

• The numbers speak for them selves, but what do the key stakeholders think of the role??

5 questions asked to the CEO, executive directors of medical and nursing services, and the ICU, OT and ED departments medical and nursing heads.
Do you think the role of HSN has made the organ donation process easier? How?
• Yes, by coordinating the process
• Yes, someone with the knowledge and expertise to support and encourage staff
• Without HSN it is easy to think donation as being “too hard”
• Absolutely, it’s vital in coordination and promotion
• It has brought a face to the process and someone to contact when you need help
• It improves understanding and smoother organisation
Do you think the position of HSN has raised the profile of organ and tissue donation within the hospital and the community? How?
• Yes, by making more stakeholders aware of the process
• Having a presence in the hospital has raised awareness and kept it off the back burner
• Yes, the level of donations have increased as has the media coverage
• Having a HSN means I will go from zero interest due to not having enough time to “can be motivated and prodded to occasionally do something useful” re donation.
• There is a better awareness with public & not only medical staff.
• Absolutely, the communication strategy of getting out there and letting people know to donate and what it means to others has put a more real component to this difficult process.
Do you have any suggestions of how the role could be better utilized to further improve organ and tissue donation numbers?
• Regular “brief and often” slots in education programs and governance meetings
• Continued education of staff to equip them in dealing with bereaved relatives and promoting donations
• Having more EFT would assist, 1x 0.5 HSN cannot be available 24/7
• More PR work especially in the public sector.
Do you feel the HSN position should continue after the reform package ends in 2012?
• YES
• Definitely
• Yes, unless they want to go backwards
• If it doesn’t continue the donor rate will drop dramatically, if I am not reminded on a weekly basis there is so many other programs and issues that will fill the gap I will forget.
Do you think the hospital would benefit from having some EFT funding for a medical role to assist with the organ and tissue donation process? How?
• Probably not worthwhile in BHS, HSN can manage the process quite well
• Education by nurse seems to be working, however with more info on how the medical role is working elsewhere may change my mind
• In the event of funding a medical role could definitely be of assistance in promoting the scheme among medical practitioners and liaison with donor families
• Uncertain, maybe in ICU
• Medical and Nursing should always work together…the position could be part of the staff health physicians role a person that cares for the well being of the hospital staff and wider community.
Is it working???
Success should not be measured in terms of donation rates or refusal rates, but rather as the proportion of families who at the end of the process believed they had made the right decision for their family.
Acknowledgements

• Regional HSN’s, especially Damien Hurrell, & Kristie Campbell

• Survey participants- Ballarat Health Services
Questions?

This man could save a life one day.
He's decided to be an organ and tissue donor.

OK