

# Introducing Donation after Circulatory Death to Regional Victoria- Highlighting the final requirement



**Joanna Forteath, NDS**

Ballarat Health Services, Ballarat, Victoria, Australia

## Introduction

Ballarat Health Services (BHS) has been involved with the Australian Organ and Tissue Donation and Transplantation Authority's (AOTDA) national reform program since November 2009 and is funded to have a 0.5 FTE Nurse Donation Specialist (NDS). Being a regional centre organ donation is a relatively rare event, however BHS is always keen to build on existing capability. Strong positive relations between DonateLife Victoria, BHS's NDS, key clinical staff and hospital executive has paved the way for BHS to be the first regional hospital in Victoria to have a live donation after circulatory death (DCD) program. At the end of July 2014, BHS's Chief Executive Officer advised DonateLife Victoria that all requirements had been met and the hospital was ready to proceed with the DCD program. These requirements have been: An approved clinical practice protocol for DCD, full support at a senior hospital executive level, education and engagement of medical and nursing staff from relevant clinical areas, including the hospital Designated Officers, recruiting clinical champions from relevant areas to ensure that the program is an ongoing success and the final requirement: running a mock DCD.

## Summary of Mock

DonateLife Victoria provided outstanding support for BHS to implement DCD. Education was provided to the hospital's NDS and available resources were shared from throughout the DonateLife Victoria network.

BHS chose to run the mock DCD within an organised ICU nurses education day, this enabled a large number of nurses to be involved. The date picked also coincided with a morning that had a spare theatre. 3 theatre nurses were given study leave to attend the day. Theatre also supported the day by sending theatre technicians to participate and anaesthetic staff became heavily involved by taking on key roles. Interns with a strong desire to work in surgery or ICU took on the roles as the visiting surgeons to make the mock as real as possible. The treating Intensivist and Registrar on the floor for the shift took on the medical roles in order to show how it would impact normal ICU workload. Participants taking on the roles for the mock were given role briefings and the scenario being used was circulated in advance. All other attendees for the education day became observers. These roles were clearly labelled. The mock patient had all relevant hospital and donor paperwork completed.

The education day covered all aspects of DCD. It started with educating the participants on the pathway, the hospital's DCD protocols, potential DCD donors and DCD transplant outcomes. The session then moved onto the mock scenario. It utilised the DonateLife Victoria Donation after Cardiac Death education and training simulation DVD to show aspects of DCD outside of what the mock would cover.

DonateLife Victoria staff facilitated the mock and observed all participants. The mock started with the pre withdrawal meeting, then followed all steps for a DCD case finishing at the Theatre draping stage. Debriefing was then completed with participating staff.

## Mock DCD in Pictures



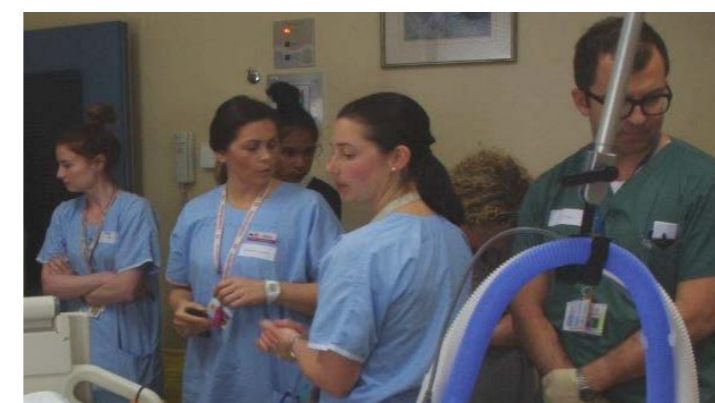
The donor was set up as real to life as possible with monitoring, intubation, ventilation and infusions. Staff took on roles as the patients family



The Intensivist informs the pre-withdrawal meeting participants the donors story. Attendee's for the education day not taking a role observed.



Theatre staff complete a final check of the donation paperwork during the pre-withdrawal meeting before going back to theatre for final preparations



Intensive care staff preparing for withdrawal of cardio-respiratory support



## Mock Outcome

The mock scenario was an outstanding success in testing systems and demonstrating the cross organisational enthusiasm for the DCD program. Involved staff attended follow up discussions and provided feedback on their learning's. DonateLife Victoria provided the hospital detailed feedback with formal comments and learning's following the mock. BHS now awaits its first DCD case and is pleased to be able to offer the local community this pathway for donation.



## Acknowledgments

DonateLife Victoria staff- Jessica Amsden and Paula Lyons. BHS staff who took on key participation roles for the mock from internal medicine, ICU, anaesthetics and theatre. SimVan simulation dummy and staff. NDS and MDS teams from the DonateLife Victoria network who shared their learning's on making a mock a success.

## Further Information

Joanna Forteath BHS NDS  
[joannaf@bhs.org.au](mailto:joannaf@bhs.org.au)  
 For information on DCD  
<http://donatelife.gov.au>