

Elements of a high performing deceased donation system

Through experience gained provincially, nationally and internationally it is generally accepted that fundamental key elements of a high performing deceased donation system exist, and when implemented, lead to improved performance. These elements include: adequate resources and infrastructure, availability of highly trained front-line specialists, leading practice guidelines and professional education, availability of performance data to inform improvement, adequate legislation, and the presence of appropriate accountability tools and structures. A general description of each is provided in the chart below.

Definitions of key elements

Accountability tools and structure

There are many ways to ensure and demonstrate accountability within the OTDT system in Canada. Examples of tools and structures that have been implemented to varying degrees include: implementation of death audits to identify if a donation opportunity was lost, use of potential donor referral criteria checklists, integrating best practices into accreditation guidelines, and the development and reporting of hospital performance using benchmarks and scorecards.

Legislation

A fundamental aspect of an interprovincial donation and transplantation system is ensuring appropriate legislation is in place that optimizes donation and transplantation, including provisions for mandatory referral to the ODO, sharing of donor and recipient personal information for purposes of facilitating organ donation and transplantation and mandatory outcome data reporting for system performance measurement. Presumed consent or opt-out legislation is also often debated in terms of relative impact on system performance, however it is generally accepted that these other legislative elements are fundamental, as is the case in other national systems.

Data and system performance improvement

To ensure quality care, performance must be monitored, measured and reviewed systematically. Foundational to improvement is defining metrics at the hospital, provincial and national level and working towards achieving performance targets. Opportunities exist to continue to build on performance data that is currently collected and available to continue to improve outcomes for patients.

Leading practices and professional education

Donation and transplantation are low frequency, high impact events. Development and implementation of leading practices and clinical practice guidelines is essential to guide current practice and aid in the management of complexities of the donation and transplantation process. Special attention must be applied to ensure staff leading these processes at the bedside are highly trained. Public education and awareness is another important driver of change but must be supported by knowledgeable health professionals.

Specialization

An essential aspect of a high-performing donation system is the availability of highly trained specialized staff such as donation coordinators and donation physicians. These specialists are required to coordinate progression along the donation pathway, implement best practices, support donor care, improve quality, and provide education. Donation specialist models have been implemented in many provinces to differing degrees.

Adequate front-line resources and infrastructure

Adequate resources and infrastructure are necessary to ensure that the clinical donation process is supported at every step in the pathway from donor identification and referral through to transplant and post-transplant care. For example, without adequate hospital capacity, support for donor assessment and management, and availability of surgical retrieval and transplant teams, organ donation and transplantation may not proceed.