NATIONAL RETRIEVAL GROUP November 2017

Requests from NORS Team to Retrieve Organs for Own Recipients

Background

Some NORS Centres are asking to retrieve organs that they have accepted, rather than the team identified as part of the mobilisation process by the ODT Hub Operations. Frequently, the reason given for the request is so that the organ can be placed on machine perfusion.

The NORS Standards clearly state that if the accepting centre wishes the organ to be placed on machine perfusion, they can send a surgeon, provided this does not delay donation. Centres are allowed to retrieve their own organs in the following cases:

- complex congenital recipients the accepting NORS centre will attend and be paid for transport/consumables
- donors outside the UK if the local organ retrieval team is unable to attend, the accepting UK NORS centre will attend and be paid for transport/consumables
- multi-visceral donors these will be attended by the intestinal transplant centre

Despite this, NORS Centres are insisting they will only accept the organ if they can attend with the machine. Even when another NORS Team is retrieving, the Centres no longer send a single surgeon with the machine, but between two and four individuals.

The National Transplant Liaison Coordinators (NTLCs) in ODT Hub Operations have guidance on when a team can attend to retrieve organs for their own recipients, but they are being challenged by some Centres and do not always feel able to refuse the requests.

NORS Centres have also contacted the NORS Team that was allocated by ODT Hub Operations and made arrangements to stand the allocated Team down so that they can retrieve organs for their own recipients.

The impact is as follows:

- Control of mobilisation is moved away from ODT Hub Operations and is made by NORS/Operational teams leading to confusion and inefficiencies.
- Impact on the original team there has been an incident where the changes were not clearly communicated, no-one stood down the allocated NORS Team and they still attended, requiring a flight.

- Sending what equates to another full NORS team has an impact when the donor hospital theatre has limited space. With many additional members of staff in attendance, this can also have an impact on clear communication.
- The accepting NORS Centre may be unavailable for a more local donor if retrieving for their recipients.
- Finally, this goes against the entire principle of NORS which was to separate the retrieval team from transplantation.

Proposal

NRG is asked to provide clarity on the following points:

- Are there any additional circumstances where the NORS Centre can retrieve their own organs?
- Are there any circumstances where a team should <u>not</u> be given the option to retrieve their own organs?
- If a Centre insists on sending another team with the machine, but the SNOD/Hub Operations feel unable to delay, is it reasonable to refuse this request?
- What steps should be taken when a Centre refuses to accept the organs if they cannot attend and/or place organs on a machine?
- How many members of staff should be in attendance?

NRG is also asked to write formally to all centres to reiterate the guidance (and provide updated information if relevant).

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