

NHS BLOOD AND TRANSPLANT

**MINUTES OF THE TWENTY-SECOND MEETING OF THE
TRANSPLANT POLICY REVIEW COMMITTEE (TPRC)
HELD AT 3:45 PM ON TUESDAY 9 JULY 2019
TELECON**

PRESENT:

Mr Jeremy Monroe (JM), Chair	Non-Executive Director, NHSBT
Ms Millie Banerjee (MB)	Chair, NHSBT
Mr John Casey (JC)	Chair, Pancreas Advisory Group
Mr Anthony Clarkson	Director - ODT, NHSBT
Professor John Forsythe (JF)	Medical Director – ODT, NHSBT
Dr Dale Gardiner (DG)	National Clinical Lead for Organ Donation, NHSBT
Mr John Isaac (JI)	Deputy Chair, Liver Advisory Group
Ms Lisa Mumford (LMu)	Head of ODT Studies
Mr Gabriel Oniscu (GO)	Chair, Research, Innovation and Novel Technologies Advisory Group
Professor Chris Watson (CW)	Chair, Kidney Advisory Group

IN ATTENDANCE:

Ms Caroline Robinson (CR)	Clinical and Support Services Manager, NHSBT (Minutes)
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		ACTION
1	APOLOGIES	
1.1	<p>Apologies were received from:</p> <p>Mr Richard Baker, Joint Lead, Clinical Governance, NHSBT Mr Marius Berman Associate Clinical Lead for Organ Retrieval Mr Ian Currie, National Clinical Lead for Organ Retrieval Professor Peter Friend, Chair, Multi-visceral and Composite Tissue Advisory Group Ms Victoria Gauden, National Quality Manager, ODT, NHSBT Professor Derek Manas, National Clinical Lead, Governance, NHSBT Dr Gail Mifflin, Medical and Research Director, NHSBT Dr Jayan Parameshwar, Chair, Cardiothoracic Advisory Heart and Lung Groups Dr Doug Thorburn, Chair, Liver Advisory Group Dr Andre Vercueil, Regional CLOD, London</p>	
2	DECLARATIONS OF INTEREST – TPRC(18)1	
	There were no declarations of interest.	
3	PURPOSE OF THE MEETING	
	This meeting was called to discuss and approve changes to the policies and procedures for the National Kidney and Pancreas Offering Schemes.	
3.1	POL199/10 - Pancreas Transplantation: Organ Allocation – TPRC (19)13	
	JC explained that a working group had held several telecons to develop the new scheme followed by wider discussion at both the Pancreas and Kidney Advisory Groups. The new scheme will now be called the National Pancreas Offering Scheme (NPOS). It has been dovetailed with the new kidney offering scheme and seeks to balance the needs of those listed nationally for either pancreas alone, islet alone,	

	<p>combined pancreas and kidney and combined islet and kidney transplants. It is believed that the policy now demonstrates a robust process. The issue of those in closer proximity to a donor centre being treated more favourably for transplant than those further away was discussed at TPRC. It was agreed that cold ischaemic time (CIT) of less than 8 hours was important (due to decline in organ quality), but there was reassurance that statistical analysis had shown there was now a balance between allocation points for highly sensitised patients and travel time that ensured equity of access wherever patients are in the country. User acceptance testing is ongoing currently and it is hoped the scheme will go live on 3 September 2019.</p> <p>TPRC approved the new policy.</p>	
3.2	<p>POL186/10 – Kidney Transplantation: Deceased Donor Organ Allocation - TPRC(19)14</p> <p>It was explained that the new policy builds on the presentation that was given by LMU at the last TPRC meeting in February 2019. CW stated that the previous scheme was developed in 2006 and while it had served well, it did not incorporate DCD donors who now make up 40% of donors. The new scheme aims to more effectively match anticipated graft life with patient life expectancy as well as donor HLA type. Three working groups reviewed the existing scheme. There will be two tiers in the new scheme for difficult to match patients and then a series of weighted items to ensure equity. The 'sine curve with an uptick' that was used to give points for age was discussed and it was pointed out that the 'uptick' for older patients was inserted following feedback from patients and clinicians representing patients.</p> <p>It was also questioned why centre patients did not get points in the way that regional patients do in the scheme. In fact, centre patients do get the same points as regional patients. This should be clarified.</p> <p>Action: LMU to clarify wording</p> <p>TPRC, acknowledging that the new scheme should aid 'difficult to match' patients and hence those from BAME backgrounds, discussed the outcomes of BAME donors to BAME recipients, particularly in light of centre specific results from Leeds. It was agreed that more work is needed on this aspect with larger national numbers and ability to divide into different ethnic groups. <i>(Post meeting note – it is confirmed that this work is underway).</i></p> <p>The issue of waiting time being determined from the start of permanent dialysis or date of first active listing for a graft was discussed and there was reassurance that the points system does not penalise any group of patients.</p> <p>The Chair noted that both the new Pancreas and Kidney Offering schemes introduced complex information and the imperative for TPRC should be to determine that they work as intended and do not disadvantage certain patient groups. TPRC needs to investigate this in more detail to ensure that the outcomes expected when the committee signs off schemes do result. It is hoped that there will be more time in future TPRC meetings to do this.</p> <p>The enormous amount of work involved in developing both new policies was acknowledged.</p> <p>TPRC approved the new policy.</p>	L Mumford
4	ANY OTHER BUSINESS	
4.1	<p>TPRC Annual Report 2018-2019 TPRC(19)15</p> <p>The Annual Report for 2018-2019 was circulated for information and this was</p>	

	approved to go forward to the NHSBT Board meeting.	
5	DATE OF NEXT MEETING: The date for the next full meeting of TPRC is Wednesday 2 October 2019 . This will be held in the Board Room at NHSBT West End Donor Centre, 26 Margaret Street, London, W1W 8NB . The meeting will start at 1:30 pm and lunch will be provided beforehand at 12:30 pm. Full details will be circulated in due course.	

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