

Policy

The process of facilitating organ donation can be complex and staff must ensure that they have documented processes to guide them in this.

Objective

To provide guidance for the SN and an opportunity for the SN to collate information and record actions during the organ donation process.

Changes in this version

- Change in terminology for SNOD to SN in alignment with other quality documents.
- Addition of TM role and restrictions.
- Addition of SN role in guidance of neurological death testing and the form required for this.

Roles

Specialist Nurses

- Where reference is made in this document to SN (Specialist Nurse), this term includes SNOD (Specialist Nurse Organ Donation), SR (Specialist Requestor) SNFC (Specialist Nurse Family Care)
- To use the Organ Donation Clinical Pathway as a tool to ensure that all required actions have been completed.
- To document the time where required, to provide evidence of action.
- To use the Organ Donation Clinical Pathway as a handover tool, when transferring accountability and responsibility of the organ donation process from one SN to another.

Team Manager

- To provide support to the SN where required.

Regional Manager

- To provide support to the SN and/or TM, where required.

Restrictions

- The SOP does not specifically mention all sections of the Organ Donation Clinical Pathway. Specific sections have been highlighted as these sections require guidance to complete.

1. INTRODUCTION

- 1.1. To facilitate the organ donation process, the SN must complete a series of actions to ensure the quality and safety of organs for transplantation. In addition, the SN may be required to provide clinical advice to a variety of healthcare professionals at the donating hospital.
- 1.2. The SN is responsible for providing information and support, where required, to the patient's family, whilst completing formal consent/authorisation for organ and/or tissue donation.
- 1.3. DonorPath is the primary source of the donor record. However, in the event of IT failure please use **SOP3925 - Manual Organ Donation Process for a Potential Organ and/or Tissue Donor** in the event of DonorPath/IT network unavailability by using The Organ Donation Clinical Pathway (**FRM4212**)
- 1.4. DonorPath/The Organ Donation Clinical Pathway (FRM4212) must be completed to ensure that all elements/clinical events of the donation process are documented and will form part of the donor record.

- 1.5. The SN must complete the relevant action point in DonorPath/**FRM4212** as it occurs, to provide an accurate timeline of clinical events and action.

2. SIGNATURE LOG

- 2.1. All SNs, including SNs/TMs/RMs who are in training or who are shadowing, who are involved in the organ donation process must sign into the individual donor record on DonorPath or complete the Signature Log found at the start of **FRM4212**, identifying their role in the process.
- 2.2. By completing both the full signature and initial boxes of the Signature Log, the SN/TM/RM will then be able to utilise their signature initial rather than full signature when completing actions. On DonorPath this is automatically generated.

3. COMPLETING SECTIONS

- 3.1. On DonorPath the SN must input the date and time as it occurred during the organ donation process. On **FRM4212** the SN must initial and put the time next to completed action points within each Section. Not all sections will require completion.
- 3.2. It is recognised that the organ donation process does not occur in a linear fashion, and therefore DonorPath/**FRM4212** should be completed as specific actions have been performed to aid the organ donation process.

ADVICE NOTE

For DBD donation death is diagnosed using neurological criteria. The SN must ensure the guidance has been followed and the form has been accurately and fully completed following neurological death testing, whilst the clinicians are available to discuss should any queries arise.

SNs should examine the documentation relating to this diagnosis as soon as possible and always before the patient is transferred to theatre. Any apparent errors or uncertainties should be resolved with the senior medical staff caring for the donor.

4. SEQUENCE OF EVENTS

- 4.1. There may be instances in which the actions of the SN have had to be adapted to facilitate organ and/or tissue donation to proceed.
- 4.2. In addition, there may be circumstances in which certain action points cannot be completed, due to the impact of other processes. Examples of these include:
 - 4.2.1. Lack of ancillary diagnostic tests being performed (decision made by healthcare professionals in donating hospitals)
 - 4.2.2. Non- proceeding donation due to change of clinical processes (decision made by healthcare professionals in donating hospitals)

4.2.3. Lack of medical history due to family members being unable to provide information or patient not registered with General Practitioner

4.3. In these circumstances, the SN must document in the Sequence of Events in DonorPath or on **FRM4212**, which will provide the SN the opportunity to give reason why the action has changed and detail surrounding any alternative action taken.

5. “YES/NO” QUESTIONS

5.1. To aid the SN in undertaking specific actions DonorPath/**FRM4212** provides the SN some questions that can be answered either “yes” or “no”.

5.2. In these instances, the SN is able to click on DonorPath or initial either yes or no as evidence of completion.

6. HANDOVER BETWEEN SNs

6.1. SNs must handover the organ donation process in a professional and consistent manner, consistent with the principles outlined in **MPD921** Handover between Specialist Nurses Organ Donation.

6.2. The SN who is handing over the organ donation process must systematically use DonorPath/**FRM4212** as a guide to:

6.2.1. Ensure that all actions that have been performed as part of the organ donation process have been evidenced.

6.2.2. Identify all actions that are yet to be completed to the incoming SN assuming responsibility for the completion of the organ donation process. (The SN may utilise the page “Actions to be Completed – A prompt for handover”).

6.2.3. Confirm that the responsibility of the organ donation process has been formally handed over from one SN to another.

6.3. The SN who is handing over the organ donation process over must make an entry in the Sequence of Events section confirming that handover has taken place. On DonorPath the date and time must be accurate. On **FRM4212** the entry must be signed, dated, and timed.

6.4. The incoming SN who is assuming the responsibility for the organ donation process must complete the Signature Log on **FRM4212** upon completion of the handover process, time, and date their entry onto the Log.

7. POST DONATION

7.1. DonorPath/**FRM4212** forms an integral part of both proceeding and non-proceeding organ donation records, in conjunction with other mandatory documentation.

7.2. The SN who assumes lead responsibility for the proceeding or non-proceeding donation process must review DonorPath/**FRM4212** to confirm that all relevant sections and action points have been completed.

- 7.3. If omissions are apparent, then the SN assuming lead responsibility must complete the relevant sections or contact any other SN involved in the process to complete their action points at the earliest opportunity.
- 7.4. If required, the SN assuming lead responsibility must highlight any issues to their TM.
- 7.5. **FRM4212** must be kept for the donor record and stored securely, whether organ and/or tissue donation has proceeded or not. Refer to **SOP5049** - Donor Records Department (DRD) Process Manual

Definitions

- **Patient's Family** - For the purpose of this document "patient's family" refers to the family, friends, and significant others of the patient.
- **Lead SN** - the SN who has facilitated the majority of the donation process, who will be the named contact for ongoing communications
- **HCP** - Medical/Nursing Healthcare Professional in critical care, responsible for the patient.
- **DonorPath** - The secure electronic donor record that SN's utilise to upload clinical information about a patient. Also contains the electronic Organ Donation Clinical Pathway for SN's to utilise as the primary source of documentation.
- **Organ Donation Clinical Pathway** – the paper record that SN's utilise to provide evidence of their actions in the event of IT network unavailability or DonorPath outage.
- **'Must'** refers to an overriding duty or principle.
- **'Should'** is used to provide an explanation of how you meet the overriding duty. Also used where the duty or principle will not apply in all situations or circumstances, or where there are factors outside the SNs control that affect whether or how you can comply with the document

Related Documents / References

- **MPD921** - Handover between Specialist Nurses – Organ Donation
- **SOP3925** - Manual Organ Donation Process for a Potential Organ and/or Tissue Donor in the event of DonorPath/IT network unavailability
- Record keeping Guidance for Nurses and Midwives (2010). Nursing and Midwifery Council: London
- **FRM4212** - Organ Donation Clinical Pathway
- **SOP5049** - DRD Process Manual (Donor Records Department)