

Board Meeting in Public Tuesday, 28 March 2023

Title of Report	Organ Utilisation Group Update			Agenda No.	4.2
Nature of Report (tick one)	⊠ Official		□ Official Se	nsitive	
Author(s)	Claire Williment, Chief of Staff; Lead Secretariat – DHSC Organ Utilisation Group				
Lead Executive	Anthony Clarkson, OTDT Director				
Non-Executive Director Sponsor (if applicable)	Deirdre Kelly				
Presented for (tick all that applies)		Approval □ Information Assurance □ Update			
Purpose of the report and key issues					
Purpose: This paper summarises the report from the Department of Health and Social Care's Organ Utilisation Group (OUG) and NHSBT's next steps to contribute to implementation. Key Issues: The OUG report complements the UK Strategy Meeting the Need, meaning that work is already underway within NHSBT to support delivery of several recommendations. However, significant additional activity is required across NHSBT and other relevant organisations, to deliver the recommendations in full. To date, DHSC has confirmed funding for Clinical Leads for Utilisation for FY 2023/24, but no further funding is confirmed. DHSC is establishing an Implementation Steering group for Organ Utilisation (ISOU) and NHSBT is preparing for the first meeting, which is planned for the 18th April.					
Previously Considered by					
The proposals in this paper have been approved by the Exec Team. The Board previously received an update on OUG recommendations in March 2022.					
Recommendation	The Board is asked to approve the proposed approach for preparing for the first meeting of the DHSC Implementation Steering Group.			or the	
Risk(s) identified (Link to Board Assurance Framework Risks)					
N/A					
Strategic Objective(s) this paper relates to: [Click on all that applies]					
☑ Collaborate with partners		Invest in people and cultu			on
☐ Modernise our operations ☐ Grow and diversify our donor base			nor base		
Appendices:	N/A				



1. Background

The Organ Donation Taskforce delivered significant improvements in donation rates, but the UK transplant rate has not kept pace. Even before the impact of Covid, there was evidence that the transplant waiting list was starting to increase. This is partly explained by changing donor demographics (e.g. increasing donor age/ obesity/ co-morbidities), but national and international comparisons of transplant rates demonstrated that more could be done to improve the transplant rate.

In response to the Organ Donation and Transplantation 2030: Meeting the Need Strategy the DHSC established an Organ Utilisation Group (OUG), which was Chaired by Professor Sir Stephen Powis (National Medical Director, NHS England) and brought together experts along the whole transplant care pathway. The OUG's remit was to make recommendations on how to maximise the potential for organ transplantation and provide a premier healthcare system, that delivers equity, excellence, and innovation to meet the needs of those on the transplant waiting list.

The report of the Organ Utilisation Group (OUG) was informed by extensive consultation with national and international stakeholders and experts from the solid organ transplant care pathway and patients, carers and donors. The feedback informed their recommendations, which focused on making the best and most efficient use of available resources across the care pathway, rather than seeking significant additional funding.

NHS Blood and Transplant provided the secretariat support for the OUG and took an active role in informing the work of the group, with NHSBT representatives Chairing or acting as members on Sub-Groups; providing data and evidence regarding transplant services and Deirdre Kelly Co-Chairing the OUG Stakeholder Forum.

2. The Organ Utilisation Group Report

The Organ Utilisation Group report, *Honouring the Gift of Donation: utilising organs for transplant*, was launched on 21 February 2023 by Neil O'Brien (Parliamentary Under Secretary and Minister for Primary Care and Public Health). There are four documents available on the DHSC website here:

- 1. The full report
- 2. A summary report
- 3. Supporting evidence
- 4. A Written Ministerial Statement by Minister O'Brien lodged in both Houses of Parliament

The report places the patient voice at the heart of delivering improvements and sets out 12 recommendations, against the following 6 themes:

- 1. Placing the patient at the heart of the service
- 2. An operational infrastructure that maximises transplant potential (i) standardised pathways; (ii) Sustainability of the service
- 3. Creating a sustainable workforce that is fit for the future
- 4. Data provision that informs decisions and drives improvements
- 5. Driving and supporting innovation
- 6. Delivering improvements through new strategic and commissioning frameworks (i) Strategic direction and oversight; (ii) Commissioning



Whilst the report was a DHSC publication, it was shared with Ministers in all UK Health Departments, who have been supportive. Policy Leads and Commissioners from the Devolved Administrations were included as Observers on the Group.

The report was warmly welcomed by patient and clinical stakeholders and there is enthusiasm across all communities for working together to implement the recommendations.

3. Implementation Approach

i. Delivery

Implementation of the recommendations will require action by multiple organisations, including NHSBT, NHS England (including NHS Digital and Health Education England), Royal Colleges and professional organisations. Action will also be required by Trusts, to identify and deliver improvements.

The DHSC is in the process of establishing an Implementation Steering group for Organ Utilisation (ISOU), with a remit to:

- Bring together those with a role in leading implementation of the recommendations
- Prioritise and align implementation activity
- Provide updates on progress
- Monitor implementation activity
- Identify and address issues with implementation

The ISOU will have Policy and Clinical Co-Chairs. Membership will include senior representatives of the relevant organisations, with patient and lay representatives and a similar Stakeholder Forum to that that operated successfully in the OUG. The first meeting will be held on 18 April 2023.

The Organ and Tissue Donation and Transplantation (OTDT) Directorate already has a range of work underway to start delivery of the recommendations, including establishment of CLUs, improving dissemination of data and developing the specification for Assessment and Recovery Centres.

ii. Timescales

It is anticipated that delivery of all 12 recommendations will take several years. One of the first steps for ISOU will be to prioritise actions and timescales for delivery.

iii. Resourcing delivery

The OUG remit was to deliver recommendations that would make the best use of existing resources. The majority of the recommendations do not require any additional funding. Some recommendations can use existing funding to support delivery, for example through the Electronic Patient Records work in NHS Digital, or through the DHSC Workforce Strategy.

The recommendations to establish Clinical Leads for Utilisation within all transplant units and establish Assessment and Recovery Centres to support organ perfusion and assessment will require additional funding. DHSC has confirmed funding for the CLUs for 2023/24, but any future funding route is unclear.

Delivery of the recommendations will require resources within NHSBT and there will need to be consideration of priority of delivery against other existing projects.



4. Recommendation

The Board is asked to approve the following approach:

- i. OTDT leads work within NHSBT to identify:
 - a. supporting actions NHSBT will lead or support in line with ISOU steer.
 - b. co-dependencies and priorities for action to support successful, timely delivery.
 - c. resourcing requirements
 - d. how to maximise the potential benefits the publication of the OUG report offers to raise awareness of the need to support the resilience of the transplant service
- ii. As with all implementation work, placing the patient and carer voice at the centre of delivery will be essential in delivering those actions where NHSBT has a role in delivery.
- iii. Initial work should be completed quickly, so that NHSBT can attend the first meeting of ISOU with first thoughts on the delivery approach.
- iv. OTDT and DHSC will provide the Board with regular updates on delivery approach.