

SOP3925/6 – Manual Organ Donation Process for a Potential Organ and/or Tissue Donor in the event of DonorPath/IT network unavailability



Blood and Transplant

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Objective

To guide the SN in the process of taking a referral and registering a potential organ donor with NHSBT Hub Operations when DonorPath is unavailable.

Changes in this version

Donor Characterisation Electronic Result Transfer (DCERT) (section 5)

If ODR not accessible (section 4)

Update in terminology, removal of obsolete documents, addition of current documents

Roles

- **Specialist Nurse Organ Donation (SNOD/SN)** – to follow the guidance in this SOP to ensure that all referral details are captured, and the relevant data is transmitted to Hub Operations to allow the registration of a potential donor, whilst minimising the transfer of Person Identifiable Data (PID).
- **SN** – Specialist Nurse. For the purposes of this document the term 'SNOD or SN' will apply to a Specialist Nurse with the relevant knowledge, skills and training in organ donation, working within NHSBT Organ Donation Services Teams (ODST), including SNOD-Specialist Requester and SNOD-Family Care
- **TM/RM** – Team Manager/Regional Manager. To advise the SNOD if DonorPath/EOS is unavailable
- **ODST CC** – Organ Donation Service Cluster Co-ordinator. The person overseeing all donor referrals and activity in specific regions

Restrictions

- **SNOD/SN Trainee** – A SNOD in training working alongside and under supervision of a competent and trained SNOD

Items Required

- N/A



Advice

In the event that DonorPath is unavailable, other IT based systems may also be unavailable. In this instance SNs must ensure that they communicate referral/donor activity to their ODST Cluster Co-ordinator verbally (via telephone).

In instances when IT systems are unavailable, voice recording must be used as evidence of action where appropriate in addition to documenting action to the donor file (please refer to **SOP3649** for detailed guidance).

In instances when DonorPath is unavailable prior to Electronic Result Transfer (ERT) upload, then the SN will have to revert back to manual process as per SOP4618 as ERT will not upload when DonorPath becomes available.

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1. Confirm that DonorPath (iPad & Web versions), ODR and EOS is available/unavailable.

- 1.1 DonorPath may become unavailable at any time during the on-call period. Confirm with TM/RM that DonorPath &/or ODR checking is unavailable.
- 1.2 If TM/RM unavailable confirm with Hub Operations that DonorPath &/or ODR checking is unavailable.

2. Document potential donor referral.

- 2.1 On receipt of a referral to the ODST following **SOP3781** Receipt of Referral of a Potential Organ Donor, if DonorPath is unavailable, the referral should be documented on **FRM4228** Potential Donor Referral and Assessment.

3. Are you able to check ODR Registration online?

- [If No go to Step 4](#)
- [If Yes, then check ODR as per SOP3817 and go to Step 5](#)

4. Request ODR Registration check from Hub Operations.

- 4.1 Provide required information, which includes:
 - Patient Name
 - Date of Birth
 - NHS/CHI Number (if available)
 - Post Code of place of residence
- 4.2 If patient on ODR, request hard copy via email (where possible).
- 4.3 If the ODR is unavailable for SNs to check online then the responsibility falls to the Hub Operations staff, who will already have increased workloads. In this event and to prevent additional work, best practice would indicate that obtaining a hard copy of the ODR registration will help both the SN and the Hub Operations staff, by minimising multiple requests.
- 4.4 If Hub Operations are unable to email a copy due to IT failure, then once the IT systems are restored, it is the SN's responsibility to ensure the ODR is added to the donor record on DonorPath
- 4.5 If the ODR is not accessible to SN/ Hub Operations staff prior to retrieval surgery, please escalate to TM/RM. Inform family and outline risk of being unable to confirm any registered opt-out decision and explore options around proceeding, considering a delay to retrieval or stand-down.



Advice

If DonorPath is unavailable, EOS should then be utilised as the next IT system for inputting core donor data, but this cannot occur until written consent/authorisation is gained from the family.

If EOS is also unavailable, then FRM4193 Core Donor Data should be completed.

5. If EOS is available:

- 5.1 If patient information has been submitted onto DonorPath and then DonorPath becomes unavailable, this information will be saved and certain parts of it may be accessible on EOS if DonorPath was set to proceeding. *To note, microbiology results will automatically upload to EOS if they were uploaded prior to DonorPath becoming unavailable.*
- 5.2 In this case, ensure the information on sections visible to transplant centres on DonorPath has been transferred to EOS and continue on the CDDF on EOS.
- 5.3 If DonorPath is completely unavailable and there is no information on EOS, then following consent/authorisation, a call out should be added to EOS, where the core donor data can be added and a donor number will be generated.
- 5.4 It is important that EOS is not utilised until after consent/authorisation is gained as this information is visible to NTxD and recipient centres.
- 5.5 Complete **FRM4211** Medical and Social History Questionnaire **without PID**, scan via the Genius Scan App and email it to Hub Operations using encrypted email. Include 3 PID in the email only.
- 5.6 Once emailed to Hub operations, then add the PID onto paper **FRM4211**.
- 5.7 Contact Hub operations to confirm they have received the email.
- 5.8 Hub Operations OAS will then input **FRM4211** onto NTxD which will then be visible on EOS. They will inform the SN when this has been completed in order for the SN to check on EOS that the details are correct.
- 5.9 Once the core donor data has been completed on EOS, contact Hub Operations to register the patient following **MPD1382 Donation Pathway Communication Touchpoints – SN's, Hub Operations and RPOC's**.

→ [go to Step 11](#)

6. If EOS is unavailable:

- 6.1 Following consent/authorisation, telephone Hub Operations to generate a donor number by providing mandatory donor details which include:
 - Patient Name
 - Date of Birth
 - Donor Hospital
 - Blood Group (if available)
- 6.2 If NTxD is available, the donor number will be a permanent number.
- 6.3 If NTxD is unavailable, the donor number will be a temporary number.

7. Complete FRM4193 Core Donor Data Form and FRM4211 Medical and Social History Questionnaire including the donor number but both WITHOUT PID.

- 7.1 Scan via the Genius Scan App completed forms **FRM4193** and **FRM4211** without PID and email to Hub Operations using encrypted email.

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- 7.2 Include 3 PID in the email only.
 - 7.3 This information is sent without PID as completed **FRM4193** and **FRM4211** can be sent to RcPOC's and there needs to be no PID other than the donor number.
 - 7.4 Once emailed to Hub Operations, ensure all PID is completed on **FRM4193** and **FRM4211** prior to contacting Hub Operations.

8. Contact Hub Operations to confirm receipt of the email with Hub Operations.

- 8.1 Confirm donor number.
- 8.2 Confirm that an email has been received with the same donor number.
- 8.3 Confirm the number of pages received.

9. Depending on the level of outage, Hub Operations Team Manager will decide the best course of action according the SOP4859 and the OAS may submit the data from FRM4193 and FRM4211 onto NTxD.

- 9.1 Once confirmed as complete, if possible, the SN should access EOS or EOS Mobile to review the core donor data and medical and social history PDFs.
- 9.2 If unable to access EOS or EOS Mobile request that Hub Operations email a PDF of core donor data and medical and social history to SN.
- 9.3 Following review, the SN should confirm with Hub Operations by telephone that the data is accurate and complete.
- 9.4 Should EOS later become available, the SNOD should review as soon as possible.

10. Once the SN has confirmed the Core Donor Data and MaSH information is correct on EOS or via a PDF copy sent from Hub Operations, then the SN is to contact Hub operations to register the patient, confirming mandatory patient details following [MPD1382](#).

11. Have organs been accepted for transplantation?

- [If No go to Step 12](#)
- [If Yes go to Step 13](#)

12. Confirm with Hub Operations and stand organ donation process down.

- 12.1 Confirm if patient to donate tissues.
- 12.2 Please refer to **MPD910** and **SOP5024** for detailed guidance on relevant documentation to complete.
- 12.3 Document actions for the donor record.
- 12.4 Sign, date and time the entries.
- 12.5 Complete donation process.

- 12.6 In Scotland, please complete **LET241** –Non-Proceeding Medical Record Entry Letter and place in patient's medical notes. Obtain copy of Letter for donor file.

→ [go to Step 17](#)

13. Proceed with organ donation process

- 13.1 Receive confirmation from Hub Operations of the Recipient Centres that have accepted organs for transplantation.
- 13.2 Confirm if patient is to donate tissues.
- 13.3 Proceed with organ donation process.



Advice

When photocopying **FRM4193** to accompany an organ to a Recipient Centre
all PID must be removed

14. Can the RCPoC(s) access EOS?

→ [If No go to Step 15](#)

→ [If Yes go to Step 16](#)

15. Prepare donor characterisation documentation to accompany organ

- 15.1 Photocopy **FRM4193** CDD and **FRM4211** MaSH **WITHOUT PID** to ensure that a copy of the form accompanies each organ.
- 15.2 Ensure that all PID has been removed from the photocopies, which includes:
- Patient Name
 - Date of birth
 - Hospital number
 - Post Code
 - NHS/CHI number
- 15.3 **FRM4193** and **FRM4211** (plus any continuation sheet for free text) are the only paperwork that is to accompany an organ that describes donor characterisation. Any other paperwork that is used for data collection purposes should not accompany the organ and must be kept for local donor records only.
- 15.4 Follow **SOP5499** Theatre Manual for Deceased Organ Donors for detailed guidance on other mandatory paperwork required to accompany an organ for transplantation.

16. Continue with donor process

- 16.1 Continue with mandatory actions to complete the organ donation process. Please refer to **SOP5499** Theatre Manual for Deceased Organ Donors for detailed guidance on actions to take to support the donor process in theatre.

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- 16.2 Confirm if patient to donate tissues.
 - 16.3 Please refer to **MPD910** and **SOP5024** for detailed guidance on relevant documentation to complete.
 - 16.4 Complete donation process.
 - 16.5 Document actions for the donor record.
 - 16.6 Sign, date and time the entries.
 - 16.7 In Scotland, please complete **LET242** – Proceeding Medical Record Entry – Scotland and place in patient's medical notes. Obtain copy of Letter for donor file.

17. In addition to FRM4193 Core Donor Data and FRM4211 Medical and Social History the following forms are routinely completed in DonorPath and will need to be completed on paper if DonorPath is unavailable:

- **FRM4228** – Potential Donor Referral and Assessment
 - **FRM4212** – Organ Donation Clinical Pathway
 - **FRM4039** – NHSBT Referral for Coroner/Procurator Fiscal
 - **FRM4156** – Organ Retrieval Information
 - **FRM4135** – NHSBT Surgical Safety Checklist
 - **FRM4153** - Proceeding and Non-Proceeding Donors after Cardiac Death-Information (DCD only)
 - **FRM4131** - DCD Observation Chart (DCD only)
- 17.1 Paper forms completed at the time of donation should be scanned &/or stored in the donor file. - SNODs should utilise the emergency backup donor packs supplied by [Donor Family Care Service](#) in this instance.
 - 17.2 Information already submitted to DonorPath prior to it becoming unavailable will already be stored and does not need to be duplicated on paper.
 - 17.3 Data not submitted to DonorPath should be completed on the appropriate forms.

18. Post donation/IT systems are restored

- 18.1 It is the responsibility of the SN completing the paper forms to input them onto DonorPath once the IT systems are available post-donation.
- 18.2 If a temporary donor number was assigned by Hub Operations as NTxD was unavailable, once the IT systems are restored then the SN will create an electronic donor record in DonorPath by inputting all of the relevant documentation from the paper forms above. This will create a donor number by changing the status to proceeding. The SN must then inform Hub operations of this number.

⊖ End of Procedure

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Definitions

- **DonorPath** - The secure electronic system that SNODs utilise to upload clinical information about the patient. Data is shared with EOS (Electronic Offering System) which can be accessed by the RCPoCs, so decisions can be made on whether to accept organs for transplant.
- **ODR (Organ Donor Register)** - The NHS Organ Donor Register is a confidential, computerised database recording people's legal wishes in respect to organ donation.
- **Person Identifiable Data (PID)** - Any data that can identify an individual that can be sensitive in nature
- **Organ Donation Services Team (ODST)**
- **Electronic Offering Service/mobile (EOS)** - the IT application the recipient points of contact access donor information for review
- **Hub Operations (HO)** - the central co-ordinating office of NHSBT for organ donation and transplantation
- **Electronic Result Transfer (ERT)**- automatic transfer of Microbiology results into DonorPath
- **Hub Operations Team Manager (HOTM)** - the person in charge of Hub Operations on a given shift
- **Organ Allocation Specialist (OAS)** - a member of the Hub Operations team
- **National Transplant Database (NTxD)** - Includes details of all donors and patients who are waiting for, or who have received, a transplant
- **Recipient Points of Contact (RcPOC)** - the person that liaises between HO and the SNOD regarding organ offering and acceptance
- **Donor Family Care Service (DFCS)** NHSBT centralised administration services for donor records
- **Genius Scan App** - recommended scanning app on NHSBT iPads for scanning documents ready to email

Related Documents/References

Forms

- **FRM4228** - Potential Donor Referral and Assessment
- **FRM4212** - Organ Donation Clinical Pathway
- **FRM4193** - Core Donor Data (Used as EOS back-up)
- **FRM4211** - Medical and Social History Questionnaire
- **FRM4039** - NHSBT Referral for Coroner/Procurator Fiscal
- **FRM4156** - Organ Retrieval Information
- **FRM4135** - NHSBT Surgical Safety Checklist
- **FRM4131** - DCD Observation Chart
- **FRM4153** - Proceeding and Non-Proceeding Donors after Cardiac Death-Information

SOPs

- **SOP3781** - Receipt of a Referral of a Potential Organ Donor
- **SOP3649** - Voice Recording of Organ Donation Clinical Conversations
- **SOP3817** - Access for SNOD's and other External Approved Users to the NHS Organ Donor Register (ODR)
- **SOP4859** - Emergency, Security & Infrastructure Procedures – Hub Operations
- **SOP5024** - Tissue Referral process
- **SOP5499** - Theatre Manual for Deceased Organ Donors
- **SOP4618** – Receipt and Management of Microbiological Blood results at the time of Donation

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MPDs

- **MPD910** - Medical Records Entries for Proceeding and Non-Proceeding Organ and/or Tissue Donors
- **MPD1382** - Donation Pathway Communication Touchpoints – SN's, Hub Operations and RPoC's

LETs

- **LET241** - Non-Proceeding Medical Record Entry Scotland
- **LET242** - Proceeding Medical Record Entry Scotland