

Travel for Transplantation - Theory into Practice

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First Principles

- Not all travel for transplantation is illicit or associated with criminal activity
 - People can and do travel legitimately for organ donation and transplantation
- UK has a low level of travel for transplantation but reported activity is increasing
 - Law changes - Modern Slavery Act (2015); HT Acts (July 2022)
 - NFP audit and improved clinical awareness
 - Transplant waiting lists going up post-pandemic
 - Lifting of travel restrictions



Legislation

- **Modern Slavery Act (2015)**
 - Human trafficking for the purposes of organ donation
- **Human Tissue Acts – (Amendments, July 2022)**
 - Jurisdiction within and outside the UK for transplantation associated with criminal activity* (but Modern Slavery Act may also apply)
- **Other considerations**
 - General Data Protection Regulations (GDPR)
 - Consent law

*Except Northern Ireland



Multiple Agencies - Roles and Responsibilities

- **Human Tissue Authority**- Regulator
- **NHS Blood and Transplant** - National Focal Point; clinical liaison and support
- **Department of Health** - ‘Conductor of the orchestra’; Ministerial liaison
- **Other agencies**
 - Visas and Immigration
 - National Crime Agency
 - Police



Matters Arising: Case 1

The relationship between a recipient under your care and their non-resident living donor is described to you as a friend of the family.

The donor is still in their country of residence but plans to travel as soon as possible.

They need a letter of support from you to apply for a UK Entry Visa.

What do you do?



Case 1: Potential non-resident living donor where the relationship is unclear and/or cannot be substantiated

1. Check Immigration Rules V 8.1 to V.8. 4. for requirements.
 - Crucially these require that the “the applicant must satisfy the decision maker that they genuinely intend to donate an organ to, or be assessed as a potential organ donor for, an identified recipient in the UK with **whom they have a genetic or close personal relationship**”
2. Do not write letter of support for the visa unless you are absolutely satisfied there is a genetic or close personal relationship
 - Question motivation and be less trusting- **use your professional scepticism**
 - Request to see all documents that will be submitted at the point of visa application so you can **assure yourself of the relationship** and be **content to support the application**

Case 1: Potential non-resident living donor where the relationship is unclear and/or cannot be substantiated

3. **Contact HTA for advice – transplants@hta.gov.uk or 0207 269 1900 and ask to speak to a member of the LOD team.**
 - If a case of this nature does come to the HTA, we will need sufficient time to review and make decisions – please do not assume you will have a decision within normal timeframes, there will be clarifications we will need to seek

4. **Read [HTA guidance](#)**

Matters Arising: Case 2

A recipient under your care expresses a wish to travel abroad to receive a transplant and asks you for a record of their HLA type.

They have no suitable living donors in the UK and they tell you that they do not want to wait any longer for a kidney here and they can get one much quicker in the country they plan to travel to.

What do you do?



Case 2: Patient who has expressed a wish to travel abroad for a transplant, has been counselled against doing so but still requests HLA typing

1. **Information on the HTA website** [for patients](#) and [professionals](#) on travelling overseas
2. **Provide** [Leaflet on Declaration of Istanbul](#) to patients
3. **Be clear with patients** not only about the **quality and safety risks** of seeking an organ transplant overseas, but also that they are **opening themselves up to prosecution**
4. **Red flags** include anxiety from patient about being listed in the UK

Case 2: Patient who has expressed a wish to travel abroad for a transplant, has been counselled against doing so but still requests HLA typing

5. **Under Article 15 of the GDPR**, patients have a right to access, and receive copies of, their health records and this includes H&I data.
 - It is unlikely that a transplant team would be committing a criminal offence by providing the patient with their medical H&I data

6. **The change made to the law in July 2022** means that the offences related to commercial dealings that already existed (had they taken place in the UK) **e.g. giving, offering, receiving, initiating or negotiating a reward, now apply if they are committed anywhere in the world**

7. **Reporting processes are being reviewed and will be clarified**, but please notify HTA of any cases of concern via transplants@hta.gov.uk

Matters Arising: Case 3

You see a non-resident living donor in your clinic who is planning to donate to a recipient under the care of one of your colleagues.

You are concerned that they have a superficial understanding of what is involved in the donation process and they are not very forthcoming about the nature of their relationship with the recipient.

What do you do?



Case 3: Potential non-resident living donor has arrived in the UK, is potentially vulnerable and a decision is made that they are not suitable to proceed to donation

- 1. Keep safeguarding concerns in mind** – could they have been trafficked?
 - Signs to look for include lack of understanding about why they are in the UK
 - Concerns about age / education / wealth disparity between donor and recipient
 - Concerns that relationship is not as claimed
- 2. Consult hospital safeguarding team** if you have any of these concerns and contact HTA if you need further advice.
 - If any immediate safeguarding concerns (if a person may be in danger of harm) contact the Police

If in Doubt...

- **Early consultation with the HTA, when**
 - There is little or no evidence of relationship
 - You have any other concerns

transplants@hta.gov.uk or 0207 269 1900



Next Steps

- **Multi-agency collaboration to improve safeguards and support legitimate travel for transplantation**
 - In progress
- **Guidance documents- review and update**
 - HTA guidance and reporting processes
 - BTS UK Living Donor Transplantation Guidelines
 - NHSBT resources

