



Summary of Implementation Steering group for Organ Utilisation (ISOU) Meeting, 11th July 2023

Members were welcomed to the second meeting of the Implementation Steering Group for Organ Utilisation (ISOU).

The key aims of this meeting were to:

- Agree key roles and responsibilities for implementation of each of the recommendations and supporting actions
- Update on progress/delivery and activity already underway
- Agree the Stakeholder Forum Terms of Reference and membership
- Agree ISOU Subgroup proposals

It was confirmed that the Secretary of State had appointed John Forsythe to join the Department of Health and Social Care as the Clinical Co-Chair of ISOU.

2. Conflicts of Interest

The ISOU Conflicts of Interest Register was noted. There were no conflicts of interest declared for the planned discussion. The Conflicts of Interest Register will be maintained and updated after each ISOU meeting.

3. Minutes of the last meeting and actions arising

Minutes of the last meeting were agreed with no amendments.

4. Feedback on Events

Welsh Transplant Advisory Group (WTAG)

- A stakeholder event was held to review themes and recommendations and explore potential implementation and where collaboration is needed, the focus was on adult services.
- WTAG will set up a co-produced day in September with patients and 3rd Sector to discuss plans in more detail.
- The Welsh Kidney Network plans to write to the Unit in Wales for assurance that: Clinical Leads for Organ Utilisation (CLU) are in place; patients are being approached for co-production of services and a plan is in place or being developed for organ utilisation.
- It was noted that Wales has kidney and kidney/pancreas transplant units only. Other transplant services are commissioned in English Units.
- WTAG were looking to link with work in other countries and charities where appropriate.

NHSBT Associate Medical Director Workshop

- NHSBT Associate Medical Directors for Organ and Tissue Donation and Transplantation (OTDT) met to explore the OUG recommendations, led by the OTDT Medical Director.
- A review of patient-facing information was underway, and a range of projects ongoing looking at patient empowerment.
- All agreed there was a need to do more work to support Trusts in focusing on organ utilisation and perhaps adding organ utilisation issues to already established Organ Donation Committees. NHSBT planned to work with colleagues in other organisations to look at supporting Trusts with a template for a Trust report and data provision.
- Organ utilisation collaboratives were being established and some are already in place, for example a London Kidney Transplant Collaborative.

- CLU funding was in place for a fixed period, including administrative and programme management support.
- There was also work looking at innovation, including modern methods of organ perfusion and preservation; genomics, the proposed use of drones for specimen transport and monitoring the science in xenotransplantation.

NHS England

- Identified leads for the different recommendations/areas within NHSE and working to finalise responsibilities.
- Will be holding a planning event in September with NHSBT.
- Working to identify a remit for the Cardiothoracic Transplant Services Review and submit a case for change for approval.
- The Renal Transformation Service Programme (RTSP) was underway, with themes that are relevant to the work of the OUG and ISOU (e.g. equity of access). It was noted that the RTSP covers adult services.
- Web-based Toolkit recently launched which includes service specifications, dashboards etc. Aligns with several OUG recommendations and may inform ISOU activity.
- Looking at developing MOUs as per OUG recommendations, working with NHSBT.
- NHSBT was in the process of finalising the annual heart and lung transplant reports.
- Important that NHSE and NHSBT work closely and collaboratively, with clear governance for any joint programmes of activity.
- Data will be the key to driving improvements.

5. Tracking Template

Roles and responsibilities

It was important that there is a named individual and organisation for overall responsibility for the delivery of every recommendation.

It was anticipated that the lead person will bring together a project team with the key stakeholders in delivery involved. They will also bring in others as appropriate to ensure that people are engaged and supportive of the direction of travel.

A tracking document would be maintained, to summarise roles and responsibilities for the overarching recommendations and associated actions.

Priorities for action

The tracking document also noted suggested priorities for action, based on importance in undertaking work and pragmatic issues. This built on feedback from Ministers, NHSBT National Organ Utilisation Conference and NHSE discussions.

Collated templates of current/ planned activity

DHSC was making progress with supporting implementation and have confirmed funding to NHS Blood and Transplant for CLUs to remain in place in all Units in 23/24, alongside the supporting infrastructure – national organ-lead CLUs, admin and stats support. This will help ensure local delivery and Trust engagement. ISOU looked forward to receiving updates in future meetings.

6. ISOU Stakeholder Forum – Terms of Reference; Membership; Potential Timescales for meetings

There was significant interest in the OUG implementation and stakeholders were keen to support the delivery – both clinicians and patients.

There was a need to continue to engage stakeholders throughout the implementation process. It was also crucial to hear from and give opportunity to hear from the 'less heard voices'.

At the last meeting it was agreed to build on the successful OUG approach of establishing a Stakeholder Forum. The Forum would be very interactive and empower people to speak up.

Membership – important to build further on both patient and clinical communities who were not part of the OUG/ ISOU. ISOU members advised including:

- Commissioners
- representatives from the different existing patient groups

Aiming to hold first meeting in September/October to discuss the ToR and remit.

7. ISOU subgroup proposals

At the first ISOU meeting it was agreed that a series of subgroups should be established, reporting in to ISOU, to provide initial impetus and steer on implementation of the OUG recommendations. The subgroups would focus on the following areas:

- Patient engagement
- Innovation
 - Histocompatibility and Immunogenetics (H+I)
 - Xenotransplantation
 - Assessment and Recovery Centres (ARCs) and approach for adoption of proven innovation
- Trust Engagement
- Commissioning

The subgroups were not intended to replace any project working groups that already exist or those that will be established to deliver recommendations. Instead, they will provide an initial impetus – particularly for those areas that are complex with multiple co-dependencies – and stock-take of existing activity made/ planned and then provide assurance back to ISOU regarding approach and progress.

ISOU Co-Chairs would identify suitable Co-Chairs for each subgroup and agree more detailed Terms of Reference, membership, and timescales for delivering outputs.

Date of next meeting: 5 September