

CARDIOTHORACIC ADVISORY GROUP - WORKPLAN 2016/17

Priorities identified	Priority rating	Justification for priority rating	Plan to achieve completion	Anticipated start date	Anticipated completion date	Measure of success	Key deliverables
Priority 1: Implementation of urgent/super-urgent allocation schemes for hearts and lungs		Current allocation schemes are out-dated and do not cater for the patients who would benefit most from transplantation.	NHSBT HUB project has commenced. First meeting was held on 17 February 2016.	17-Feb-16	Summer 2016	Reduced waiting times for super-urgently listed patients compared with urgently listed patients.	
Priority 2: Increase utilisation of donor organs		Increase the number of organs for transplantation and the chances of listed patients receiving a transplant	Presented Phase 2 Scout Project interim analysis to SMT on 19 January 16. Confirmed at Scout Steering Group meeting on 22 February 16 to cost up various options for scout implementation.	Spring 2016	Ongoing	Increase the percentage of donor hearts retrieved and transplanted.	
Priority 3: Implementation of fair and equitable cardiothoracic donor allocation		To ensure fair and equitable access to transplantation irrespective of which centre a patient is listed.	Splitting of heart/lung zones to be achieved when NHSBT is able to support and implement schemes that have been agreed at CTAG.	Dependent on NHSBT IT resource	Dependent on NHSBT IT resource	Matching demand (as measured by percentage of patients listed per centre) and supply (as measured by percentage of donor organs within zone).	
Priority 4: Agree and implement cardiothoracic organ perfusion protocol		To ensure consistent approach by all NORS teams	Joint CTAG/NRG cardiothoracic organ perfusion meeting held on 10 Dec 2015. Proposal from meeting ratified by NRG on 9 March 2016. Agreed approach to be incorporated in to NORS standards.	Spring 2016	After ratification by TPRC in July 2016	NA (No monitoring required)	