

To:

Fox Den Road
Stoke Gifford
Bristol
BS34 8RRTel: 0117 975 7575
Fax: 0117 975 7577
www.nhsbt.nhs.uk

Dear Colleague,

Organ Retrieval – Training and Certification of NORS teams

As you will be aware, I am leading work within NHS Blood and Transplant to develop a comprehensive programme of training and accreditation for organ retrieval teams, as set out in Taking Organ Transplantation to 2020 and within Article 4 of the EU Directive, both of which places a requirement for a training programme to be in place for donation and transplantation. This will enable competent surgeons and trainees to participate in the National Organ Retrieval Service (NORS) as commissioned by NHSBT.

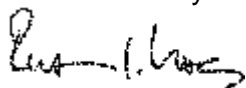
For those who were already fully trained and in-post, a 'grandfather clause' has been established as of 1 April 2014, meaning that practising members of the NORS teams are automatically deemed to be certified. For those who are undergoing training or have since started their training in organ retrieval, a new training and certification process to ensure competency is being established. Once competent and certified, surgeons are asked to be actively involved in a minimum of 5 procedures a year in order to keep their skills up to date remaining competent. Details of the process and competencies are provided in the attached Annex B.

In order for us to ensure that NHSBT has an up to date record of those certified and as well as of those undergoing training, we will be maintaining a list of all NORS team members. I would be grateful if you could take the following actions

1. Contact Clinical & Support Services (email: corporate.services@nhsbt.nhs.uk) at NHSBT to confirm whether the list of your team members provided at Annex A is correct. If not, please inform of the required amendments. As we will periodically check for you the number of procedures competent surgeons of your team are involved in, it is crucial to have an accurate list.
2. Provide a completed 'Q1' form naming those team members who are currently undergoing training and seek certification as they want to be able to join a NORS team.

In addition, we will also be contacting you every 3 months with a prepared list of competent surgeons and trainees of your NORS team for you to confirm and to ensure that our records are up to date.

Yours sincerely



Rutger J. Ploeg MD PhD FRCS
Professor of Transplant Biology
Honorary Consultant Transplant Surgeon
National Clinical Lead for Organ Retrieval
Organ Donation & Transplantation Directorate, NHSBT

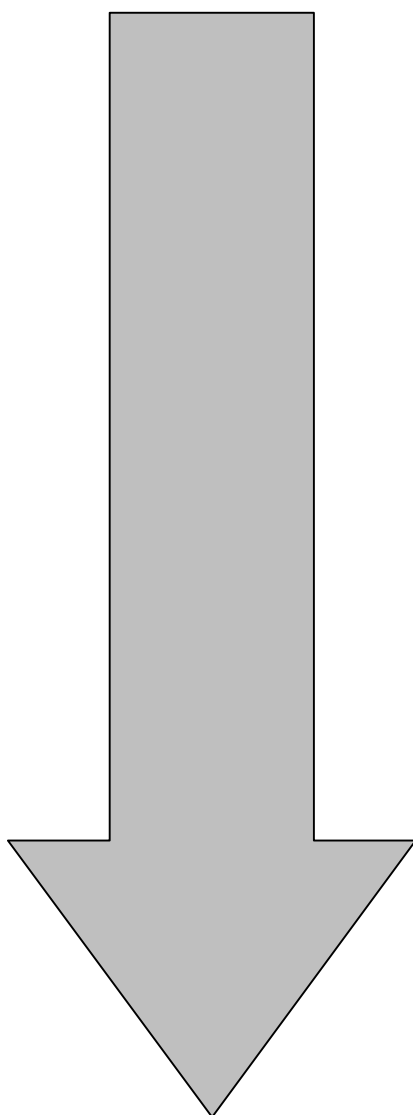
CTAG(15)S15

ANNEX A (See separate attachment)

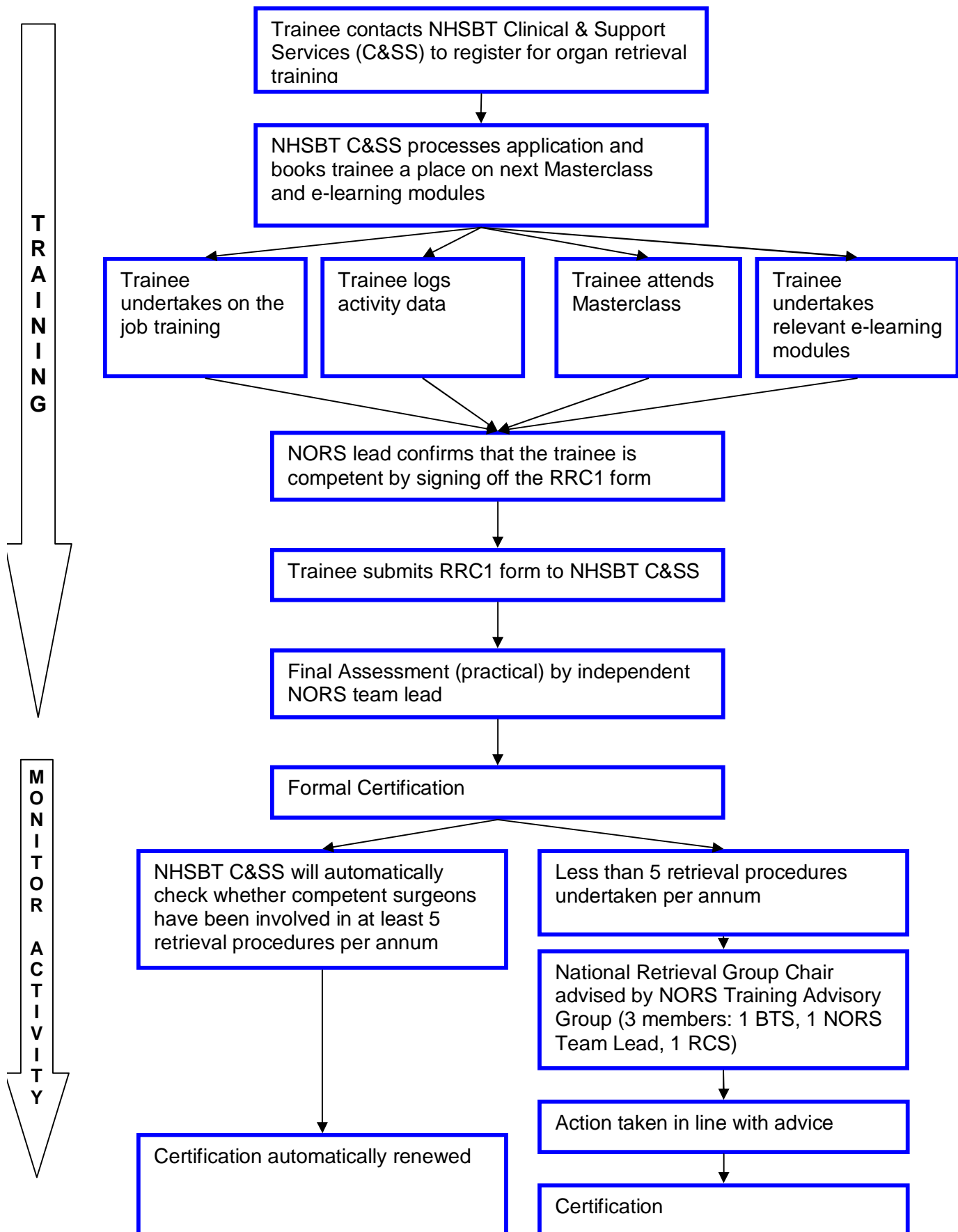
List of competent & trainee NORS team members –

Please check and amend the attached spreadsheet as necessary then return to
corporate.services@nhsbt.nhs.uk

Annex B below (see page 3)



ANNEX B – Process for Trainees in Organ Retrieval to obtain and maintain Competence for NORS teams



Training and Certification of Organ Donor Retrieval Surgery in the United Kingdom : The NORS Quality Cycle

As a result of a concerted initiative of NHS Blood and Transplant ODT and UK transplant centres in 2010 the National Organ Retrieval Service (NORS) was established to facilitate a 24/7 expert abdominal and thoracic organ retrieval system in the United Kingdom involving abdominal and cardiothoracic teams. To date, NORS teams have been operational due to the participation of experienced transplant surgeons.

The National Retrieval Group meeting of NHSBT in June 2012 identified the need for certified training and accreditation of organ retrieval surgery for transplantation.

More and better donor organs with an advanced training system

Knowledge, skills and good communication are crucial for high quality procurement of donor organs. Therefore it is necessary to provide training for those surgeons entering the field of donation and transplantation. A training system that underpins continuing education will guarantee high technical quality, reduce the discard rate of organs, improve organ viability and establish regional expertise in donor surgery.

The need for standardization and increases efficiency

Within the context of national and international organ sharing, donor surgery is embedded in the regional structures making local surgical teams responsible for adequate procurement and preservation. The organ retrieval operation and the transplant procedures may not be performed by the same team. Furthermore, the donor surgeons may be transplant surgeons involved in some but not all types of transplantation. Thus, it has become important to establish criteria and standards that will guarantee high quality of retrieved donor organs for the accepting transplant centres.

Towards an accredited donor surgery training system

Established criteria, standards and procedures have to be communicated, taught and accepted by professional specialists.

Therefore, it is necessary to develop a training system for organ donor retrieval using both the expertise and tools that already exist in the transplant centres as well as the assets and the network structure provided by NORS. A UK alignment to the developments in the field of education in transplantation as undertaken by the European Society of Organ Transplantation (ESOT) and UEMS is desirable.

The proposed retrieval training system for new NORS team members includes several theoretical and practical modules that will facilitate the training of individual surgeons and provide accreditation for donor surgery on a national basis (NORS).

Surgeons who intend to practice donor surgery in the UK as members of a NORS team will be required to complete the training system and obtain accreditation confirming their knowledge and skills.

CTAG(15)S15

Requirements for training leading to certification by candidates

Candidates who wish to obtain retrieval training and certification of competence required for participation as lead surgeons in NORS teams have to fulfil the following criteria:

1. Registered in the UK Specialist Register as a Surgical Specialist;
or
2. Enrolled in higher surgical training programmes in the UK
or
3. Registered Specialist or in surgical training in another country at an equivalent training level as in the UK;
and
4. Permanent or temporary staff members in a UK transplant programme/centre.

To register for the training scheme candidates have to submit the following documentation:

1. Application letter and registration form;
2. Curriculum Vitae;
3. Support letter from Head of Department or Director of Transplant Service or respective NORS Team Lead;
4. Candidates must name a local mentor who is a member of the NORS team

Modular training system

The following modules will be established for candidates:

1. E-learning modules (on line)

To test and evaluate knowledge several modules covering the entire sequence of abdominal and cardiothoracic retrieval operation will be available on-line focusing on anatomy, criteria, management, operation and organ preservation. The technical donor operation modules for abdominal organs will contain a general introduction and detailed descriptions of liver, pancreas and kidney procurement. In the current first version of the e-modules photos, movie snapshots/videos and drawings of a DBD (MOD, kidneys) and DCD operative procedure interrupted by educational and technical questions have been used. Currently, the cardiothoracic modules for heart and lung retrieval are being developed. Before certification the e-learning modules have to be completed.

2. Organ Retrieval Masterclass

This course focuses on theoretical knowledge about donor management, retrieval and preservation, followed by workshops and hands-on training using specially prepared human cadavers. Candidates who seek certification in the UK and have entered the training system must complete at least one Masterclass course during their training (Masterclass is held annually and attended by 40-45 abdominal surgeons and 5-10 cardiothoracic surgeons from the UK).

3. E-learning module repetition

After the Masterclass and during the training on-the-job, candidates have full access to the e-learning modules to continue practicing donor surgery and train competence (operational).

4. Training on the job

Whilst completing part 1 and 2, candidates train on-the-job under supervision of senior and competent donor surgeons who participate in a NORS team. After completing at least 10 liver, 10 kidney pairs and 6 pancreas retrievals (for the abdominal surgeons) or 10 heart and 10 lung retrievals (for the cardiothoracic surgeons) and after agreement and sign-off with the local mentor candidates can arrange the practical examination.

CTAG(15)S15

5. Documentation

Candidates will now document every organ retrieval procedure they are engaged in using a log-book documenting the organs retrieved, date and ODT donor number to be checked by NHSBT C&SS when certification is sought. An on-line registration and assessment programme similar to the ICSP programme will be developed allowing candidates to ask their supervisor to document their progress and competence (not in place yet).

6. Practical examination

Upon completion of the practical training, the candidate will then perform one retrieval procedure under the supervision of a competent retrieval surgeon who is not a member of the same NORS team. Practically, this implies that the trainee will ask permission to participate in one retrieval procedure of another NORS team close by. The on-call lead surgeon of that NORS team will act as examiner and will confirm the competence and skills of the candidate. This will be documented and sent to NHSBT C&SS from the email account of the exam supervisor.

7. Certification

The aim is that certification is accredited at a national level by a professional organisation, preferably the Royal College of Surgeons (England). This approval is currently being sought.

8. Competency and Re-Certification

When certified as competent for retrieval, surgeons or surgical trainees can participate as lead retrieval surgeons and supervise other surgeons and/or surgical trainees actively participating in NORS team procedures. To maintain competency, NORS team retrieval surgeons have to be actively involved in at least 5 retrieval procedures per year. The numbers required will be checked automatically by NHSBT.

Establishment of Feed-back and the NORS Quality Cycle

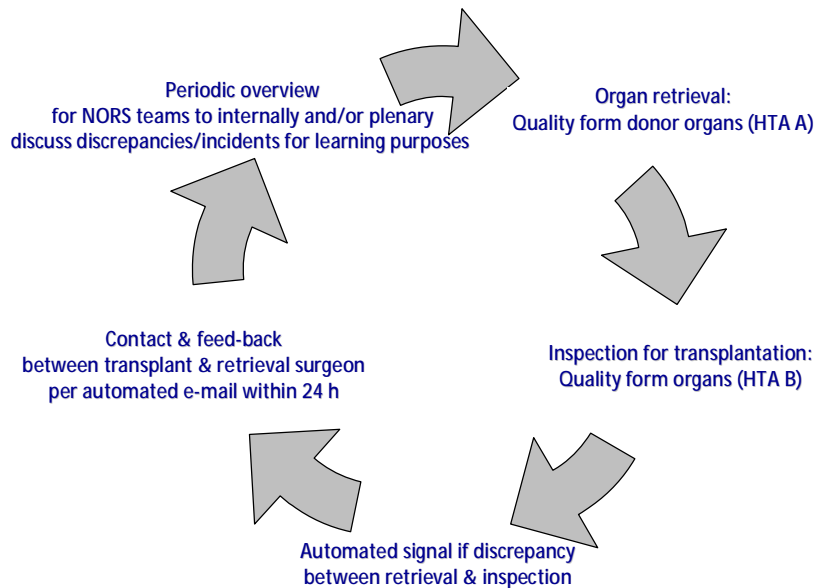
During the organ retrieval operation, currently, the anatomical situation and quality aspects of the donor organs are inspected and documented by the NORS team on paper forms (HTA A forms). The relevant information is verbally communicated over the telephone by the SN-OD and/or a NORS team member to the implanting surgeon or coordinators who is/has accepting/accepted the donor organ. This information as witnessed by the NORS team is crucial for the transplant surgeon to decide whether to accept the organ in general or for a particular recipient. Anatomical abnormalities, injuries or preservation related issues should be communicated to the transplant teams. Discrepancies between the inspection data during retrieval and condition found upon unpacking the organ prior to transplantation should not occur. If they exist, communication is mandatory. To minimise miscommunication and document appropriate anatomy and condition of donor organs including damage and/or perfusion problems, an electronic version of the forms at time of retrieval (HTA A) and inspection in the recipient centre (HTA B) will be established.

Donor forms with relevant specifications per organ will be attached or included in EOS allowing adequate decision making prior to transplantation. Upon inspection in the recipient centre, a mirror of the Donor form will allow the transplant surgeon to agree or disagree with the information documented by the NORS team. The use of imaging technology will be facilitated to document organ quality.

Discrepancies between Donor form and Inspection form will be automatically fed back within 24 hours to the responsible NORS team with a copy to the NHSBT-ODT database.

This will allow the transplant surgeon and retrieving surgeon to discuss per e-mail in a direct and respectful way, their perception of the condition of the organ and what has happened during retrieval or at time of inspection and transplantation. Both teams will learn from this feedback loop as it will be immediate and without long delay. This procedure will also facilitate and reduce the workload of the 'incident reporting process' carried out by NHSBT that can be cumbersome for all parties involved.

NORS Quality Cycle



In addition, a regular review of any discrepancies should be undertaken by all NORS teams. It is anticipated that this NORS Quality Cycle will improve communication and give a better insight in the condition and quality of the donor organ. Also, technical issues related to retrieval and preservation can be recorded and adjusted allowing better mentoring of NORS team members by their respective surgical leads.

05/02/2015