
Objective

All users of this Standard Operating Procedure must act in accordance with current legislative frameworks for consent/authorisation in place across all territories of the United Kingdom. The purpose of this document is to guide the ODS **Lead Nurse (LN)** and **Specialist Nurse (SN)**, when receiving a potential organ and/or tissue donor referral.

Changes in this version

Terminology changes for TM to LN and RM to RHoN
Pager Holder changed to DPOC, pager changed to alert
Removal of SOP5495 as obsolete
Information from PDV993 included to continue to contact NRC via telephone to make tissue referral
Referenced SOP5024 Tissue Donation Manual
Page One contact details added in section 14

Roles

- **DPOC** – To answer the **alert** and document the potential donor's referral details on DonorPath. In the event of Donor Path Outage refer to **SOP3925** and use **FRM4228**.
- To assess suitability of the referral as a potential organ donor.
- To make a plan with the referring staff on how the referral will or will not proceed.
- To capture all referrals on DonorPath.

Restrictions

- This SOP is to be utilised by qualified and trained SN. In the event of a SN who is in training, this SOP is to be utilised under supervision.

Items Required

- Donor Path App

Instructions

DPOC

1. Receive incoming **alert**

- 1.1 Identify hospital that **alert** is being received from.

2. **DPOC** to answer the **alert** within 20 minutes. For ODST's not operating with a Specialist Requester, contact resident **SN** based at the referring hospital if available to action the referral ensuring that response times are not delayed

- 2.1 Respond to the **alert** via phone or in person. Confirm the following:
 - Your name & designation.
 - Name of referring hospital.
 - That the page is to refer a patient as a potential organ donor.
 - Name and designation of the person who made the referral.

 **Caution**

Ensure when answering the **alert**, you are able to talk ensuring:

- Health and Safety
 - Privacy
- Confidentiality

3. Complete DonorPath/FRM4228 whilst speaking to the HCP

- 3.1 Confirm that the medical practitioner (Consultant level) is aware of the referral. The information provided on DonorPath may be used at a later date and must be clear for others to review if required.
- 3.2 Complete the assessment module of DonorPath or **FRM4228** in the event of DonorPath outage.
- 3.3 Check the Organ Donor Register, **SOP3817**, **MPD888**.

4. Is this a potential organ donor?

- [If opted out on ODR go to Step 5](#)
- [If No go to Step 6](#)
- [If Yes go to Step 8](#)

 **Advice**

Refer to **POL188** – Absolute Contraindications to Donation for detailed guidance.
Consider **SOP5003** – ODT Donor Assessment Form Guidance for SNODs and **FRM5510** – Infant Donor Assessment and Organ Screening

5. Is there an Opt-Out record on the ODR?

- 5.1 If there is an expressed decision on the ODR that the person did not want to be a donor, this SHOULD be communicated to the family by the SN or medical team. Each opt out referral is assessed on a case by case basis by the pager holder. Points for the **DPOC** to consider:
 - If SN is onsite or nearby and donor activity allows, then a SN could attend the referral
 - If no SN is nearby or very busy period of activity, the clinician contacts the **DPOC** to discuss the case, **DPOC** coaches the clinician in the discussion to have with the family and agree actions.
 - If the family so wish, they can speak to the **DPOC** over the phone (whomever is most appropriate).
 - If it looks like there is further information of a more recent decision (family advise the potential donor had changed their mind on the opt out decision), a SN will attend to have a discussion with the family.
 - This approach will be kept under close review, with stop-checks at 6 months and 12 months.

6. Decline the referral and change the status on DonorPath to 'Non Proceeding'

- 6.1 If declined as a potential organ donor, consider Is this a potential tissue donor?
- [If yes go to Step 7](#)
 - If no give thanks for the referral and reasons to the HCP for not proceeding with organ and/or tissue donation.

7. For all potential tissue donors in England Wales and Northern Ireland, and potential ocular only donors in Scotland, refer the patient to the National referral Centre

- 7.1 Select yes to "is the patient a potential tissue donor" when changing the status to non-proceeding in DonorPath. The record will then be pushed to Tissue Path and a notification sent to the NRC.
- 7.2 Thank the referring HCP for the referral and [advise the hospital HCP to refer potential tissue donors to the NRC via telephone call](#).
- 7.3 [For potential tissue donors who have registered an opt in decision on the ODR advise the HCP to call the NRC on 0800 432 0559 when the patient dies and in line with SOP5024](#).
- 7.4 Document this conversation on sequence of events along with any additional information TES may be required to know regarding specific hospital/trust policy as a key note.
- 7.5 For potential tissue donors who would normally be referred to SNBTS select no to "is the patient a potential tissue donor" and add in additional information referral to SNBTS.

8. Accept the referral

- 8.1 Accept and explain that donation is a possibility. The decision to mobilise a SN will be at the discretion of the [LN](#) and considering geographical location, training needs and exposure.
- 8.2 Determine who will attend the referral.
- 8.3 Mobilise attending SN.

[DPOC/Attending SN](#)

9. Confirm plan of action, including arrival time of SN with HCP making the referral

- 9.1 Give an estimated journey time and that HCP will be informed if there are any delays.
- 9.2 If appropriate, request a full set of blood tests to be taken, including blood group. Refer to **SOP3630** for detailed guidance.
- 9.3 Request if any significant clinical changes occur that the HCP contacts the pager service as soon as possible.

10. Transport self or arrange transport with national transport provider

10.1 Confirm:

- Pick up location and destination.
- Departure time.
- Estimated travel time and time of arrival – If the estimated time of arrival exceeds your estimation, or any delays are experienced, ensure that the HCP making the referral is aware of any delays.

11. Activate Lone Worker App

- 11.1 Activate Lone Worker App if applicable as per **MPD364**.

12. Arrive in referring area and change status on DonorPath to ‘Assessing on site’

- 12.1 Introduce yourself to relevant HCP.
- 12.2 Speak with medical practitioner responsible for the patient’s care.
- 12.3 Ascertain patient’s organ donation decision if not already done so by accessing the ODR, **SOP3817**.
- 12.4 Proceed with planning approach conversation.

13. Complete the referral on DonorPath in collaboration with the embedded SN

- 13.1 Complete DonorPath referral.

14. Actions in the Event of outage of pager System

- 14.1 SN/LN to Inform IT service desk of any known outage immediately, *need to provide date/time of issue and PageOne will only review for 30 days post event as information not available afterwards.*
- 14.2 SN/LN to Inform ODT HUB Operations/DFCS/NRC.
- 14.3 SN/LN Inform RHoN On Call.
- 14.4 RHoN to inform SMT and all SN teams of outage.
- 14.5 If out of hours RHoN to contact PageOne to ascertain the problem and advise SN teams and SMT of likely timescales to resolve.
- *Page one contact number is 0333 200 5033 (in hours) or 0844 573 6498 (out of hours).*
 - *Email address is Customer Support Team <customersupport@pageone.co.uk>*

⊖ End of Procedure

Definitions

- **SN** – Specialist Nurse
- **DPOC** – Donation Point of Contact
- **NRC** – National Referral Centre
- **HCP** – Health Care Professional
- **RHoN** – Regional Head of Nursing
- **LN** – Lead Nurse
- **SMT** – Senior Management Team
- **TES** – Tissue and Eye Services
- **DFCS** – Donor Family Care Service

Related Documents/Reference

- **FRM4228** – Potential Donor Referral & Assessment
- **FRM5510** – Infant Donor Assessment and Organ Screening
- **MPD364** – Lone Working
- **MPD888** – Access to the Organ Donor Register
- **POL188** – Contraindications to Organ Donation.
- **SOP3630** – Diagnostic Blood Tests
- **SOP3817** – Access for SN-ODs to the Organ Donor Register (ODR)
- **SOP3925** – Manual Organ Donation Process for a potential Organ and/or Tissue Donor in the event of Donor Path/IT network unavailability
- **SOP5003** – ODT Donor Assessment Form Guidance for SNODs
- **SOP5024** – Tissue Donation Manual