

**NHS BLOOD AND TRANSPLANT  
ORGAN DONATION AND TRANSPLANTATION DIRECTORATE**

**LIVER ADVISORY GROUP**

**IT IMPLEMENTATION PROGRESS REPORT**

**September 2013**

**Summary**

This report summarises further progress made since the last report in March 2013 on information technology project implementation within the Organ Donation and Transplantation (ODT) directorate.

**IFALD**

The changes to NTxD and associated systems to implement the 'Intestinal Failure Associated Liver Disease' allocation scheme were implemented on 22<sup>nd</sup> July 2013. Some additional changes to closely-associated parts of the application, and a few implicit replacements of older functionality were included in the software release:

- The IFALD matching run itself, closely linked to the liver matching run supports the ODT Duty Office in operating complex, interdependent and sensitive organ allocation schemes. Integrating IFALD into the NTxD application has permitted a more equitable, nationally-agreed scheme for the allocation of small bowels (and other abdominal organs) to a small but very vulnerable patient group.
- Super-urgent liver registration form and waiting list enhancements to the NTxD, with the aim of replacing the operationally fragile whiteboard-based system with a more robust and transparent system.
- Super-urgent matching run, implementing the blood group matching more strictly and donor size preferences that units may specify when registering a patient. It is hoped that this may speed up the offering process by ensuring that fewer unwanted offers are made.
- New data capture forms and an ability to manage the IFALD patient list fully integrated with the rest of the NTxD. This has resulted in the withdrawal of both the two Apex-based forms for IFALD registration and recording of transplants and of the old Microsoft Access-based 'Small Intestine Database', in use since prototyping in 1998.
- Enhancements to the HTA Tracker application, facilitating a more complete record of the use (or disposal) of small bowels than was previously possible. Extension of the HTA tracking remit to other abdominal organs has been deferred.

A system error with the functioning of the scheme that was identified in late August. This resulted in the use of the IFALD allocation being suspended temporarily. It is expected that the system will resume by early October.

## **EOS Mobile**

The EOS Mobile project has now completed and 99% of offers are now viewed using EOS, dramatically reducing the need for transcription of data and the possibility of error. The EOS Mobile application has been short listed in the 'Excellence in Mobile Healthcare' category of the eHealth Awards, and in both the 'Improving Care with Technology' and 'Enhancing Care by Sharing Data and Information' of the HSJ Awards.

## **Donor Registration Transformation**

The Donor Registration Transformation project is now well underway. The project will largely eliminate the use of paper forms by Specialist Nurses when registering a donor by providing them with a tablet-based solution. Again, this is designed to eliminate the need to transcribe data and remove the risk of patient harm due to transcription errors. [Taking account of the fact that internet connectivity is not consistently available in hospitals, the solution will work offline.](#)

## **New Organ Donor Register**

In response to the Welsh opt-out legislation, the four UK health administrations have agreed the need for a new Organ Donor Register, specifically designed for operational use. The requirements of the new Register have now been confirmed and procurement is underway to identify a supplier of the new system which is expected to be operational in early 2015.

## **DCD Kidney Allocation**

A new project to implement a national DCD kidney sharing scheme has now been approved by the ODT Change Programme Board. The project will implement the recommendations of the Donation after Circulatory Death (DCD) Kidney Allocation Working Party (KAWP), a sub-group of the NHS Blood and Transplant (NHSBT) Kidney Advisory Group (KAG), endorsed by the NHSBT Kidney Advisory Group in December 2012 and subsequently the Transplant Policy Review Committee. Currently, DCD kidneys are allocated according to local arrangements only and acceptance criteria vary between centres resulting in under-utilisation of these kidneys.

The project will also implement a number of significant NTxD fixes to address high risk urgent heart registration and matching processes.

In a further phase, enhancements to improve Duty Office and Data Services operational efficiency and data quality issues will be included within the changes made to NTxD.

It is expected that this project will be delivered in three phases during 2014 with the first phase, including DCD Kidney Allocation, delivered in May/June.

## **ODT Infrastructure Refresh Project**

In July the NHSBT Transformation Programme Board approved the initiation of a project to refresh the current ODT hardware infrastructure during 2014

**Aaron Powell**

**Assistant Director – Transplantation Support Services**