

## **Clinical Governance and Feedback to the National Retrieval Group**

**Governance and the Incident reporting scheme has a variety of aims and requirements. But amongst the most important is to provide useful information to the users in the transplant community. This comes through a range of routes; one of considerable use and interest is the Cautionary Tales, appearing bi-monthly on the ODT website -**

**[http://odt.nhs.uk/pdf/odt\\_cautionary\\_tales\\_report.pdf](http://odt.nhs.uk/pdf/odt_cautionary_tales_report.pdf)**

**Governance Reports, with a breakdown of numbers and identification of particular trends, are sent to the Advisory Groups. (4 Reports from spring 2015 are appended)**

**For Retrieval, there is a second Governance route, through analysis of the data supplied in the HTA A and B forms. This goes to the production of Funnel Plots for organ damage rates and in turn feeds back into Commissioning meetings with the retrieval teams. It has long been accepted that there is a lot more to retrieval performance than organ damage alone, and the work being done to enhance the A and B forms should improve this. However, even progression of this work is not yet confirmed, and there is no timescale.**

**It was apparent in the spring round of Advisory groups that retrieval damage was a major component of reported Incidents. Indeed, this has always been the case, but was perhaps more obvious this year. AG's may not be the best place to discuss organ damage –not all the retrieval team leads are present, and may not read the documents**

**NRG members are asked whether retrieval governance data should be presented to that body, in addition to the AG's, and if so, what further information should be collated**

**John Dark June 2015**