

# CTAG Workplan Update

## CARDIOTHORACIC ADVISORY GROUP Heart - WORKPLAN 2021/24

Priorities identified	Priority rating	Justification for priority rating	Plan to achieve completion	Anticipated start date	Anticipated completion date	Measure of success	Key deliverables
<b>Priority 1: Implementation of fair and equitable urgent heart donor organ allocation</b>	****	To allocate hearts to urgent patients on the waiting list according to need but also achieving good outcomes	Heart Allocation Sub-Group convened September 2021 to discuss future allocation policy. Modelling work undertaken by Statistics Team for Risk Communication Tool to model waiting list mortality and post-transplant outcomes. Review of data collected at time of listing and time of transplant. Involvement for all key stakeholders including operational teams and patients representatives.	Autumn 2021	Autumn 2023	Equitable waiting times across centres, reduce waiting list mortality without negatively impacting post-transplant outcomes	New urgent heart allocation scheme
<b>Priority 2: Increase utilisation of donor hearts</b>	****	Increase the number of hearts for transplantation and the chances of listed patients receiving a transplant	Agree on minimum dataset for offering a donor heart. Work with CLUs and others to explore methods of donor optimisation and hurdles to organ acceptance. Achieve sustainable funding for DCD heart retrieval.	Autumn 2021	Autumn 2022	Increase the utilisation rate of DBD donor hearts offered, from 29% in 2020/21. Sustainable funding for DCD heart retrieval.	Agreed donor optimisation process and fully funded DCD heart retrieval service

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<b>Priority 1: Implementation of fair and equitable urgent heart donor organ allocation</b>	****	To allocate hearts to urgent patients on the waiting list according to need but also achieving good outcomes	FTWG for super-urgent and paediatric heart Allocation Sub-Group convened April 2025 to discuss future allocation policy. Terms of reference to be developed for adjudication panel.  1. Modelling work undertaken by Statistics Team for Risk Communication Tool to model waiting list mortality and post-transplant outcomes. 2. Involvement for all key stakeholders including clinicians, operational teams and patient representatives.	Autumn 2025	Autumn 2027	Equitable waiting times across centres, reduce waiting list mortality without negatively impacting post-transplant outcomes	ToR for adjudication Development of new allocation schemes
<b>Priority 2: Increase resilience of DCD retrieval</b>	****	Sustainable funding for DCD retrieval is now available. There are issues with the burden of work for current DCD retrieval teams	Training of all NORS retrieval teams to participate in DCD retrieval (once appropriate funding is available) to allow a staged implementation of 1. 4 team rota 2. 6 team rota	Autumn 2025	Autumn 2027	Reduce the burden of DCD retrieval on current teams. Greater coverage of DCD heart retrieval to ensure that donors are not lost.	Fully funded DCD heart retrieval service
<b>Priority 3: Collaborative working</b>	****	OUG report theme 2 recommendation 4 - <i>Transplant units must build on the lessons learned during the coronavirus (COVID-19) pandemic and increase further the collaborative effort across units.</i>	Cardiothoracic Transplant Units must regularly meet with at least one other "buddy" unit	Autumn 2025	Autumn 2026	Institution of collaborative meetings between centres	Regular meetings with "buddy" centre(s) to discuss donor utilisation, outcomes and patient management strategies.