

Promoting Organ Donation in Northern Ireland

NHSBT Board Update, November 2017

Part 4 of the Health (Miscellaneous Provisions) Act (NI) 2016 provides a duty for DOH(NI) to promote organ transplantation by providing information and increasing awareness about donation. It includes a duty to promote a campaign informing the public at least once a year, and a duty to lay an annual report at the Assembly, which every 5 years should include the opinion of the Department about whether the Act has been effective and any further amendments to the law it considers appropriate at that time.

The Organ Donation Clinical Advisory Group (ODCAG) was tasked with the development of a policy statement to guide the Department and HSC in the implementation of the new statutory duty. This work has concluded, and the draft policy cleared for public consultation in December 2017 by the Department's senior management.

NB. This may coincide with the English consultation on soft opt-out – date tbc. Communications will need to make a clear distinction for the NI audience.

The draft policy contains objectives are **to encourage positive actions and behaviours in relation to organ donation**, such as discussing our organ donation wishes with family and close friends, or joining the Organ Donor Register (ODR); and **to develop and provide appropriate awareness training for healthcare professionals** involved along the consent journey.

Within these objectives the policy contains 6 commitments aimed at making more organs available for transplantation through a sustained increase in the rate of consent for donation to proceed to the UK strategy target of 80% by 2020. The commitments are summarised below:

- 1) **Developing a rolling 3-year integrated HSC Communications Programme**, combining regional and local promotional activities with NHSBT's UK-wide media campaign activity, tailored to meet priorities identified for Northern Ireland. The ODCAG recommends this approach having considered international best practice in communications aimed at long term behavioural and cultural change in organ donation. Whilst NI has signed up to UK strategic commitments, there has not previously been a coordinated approach to communications activity.
- 2) **Providing ring-fenced annual funding to deliver the Communications Programme** activity through a new Regional Coordinator, with priorities determined and overseen by a new HSC Steering Group chaired by the Department, and maintaining links with NHSBT to facilitate the delivery of evidence-informed UK-wide media campaigns within the available budget.

- 3) **Utilising the potential of civic society to develop effective partnerships with other sectors** including: the business community (e.g. through bespoke Corporate Social Responsibility programmes); the statutory sector (e.g. schools, colleges, libraries); and the community and voluntary sector (e.g. sport clubs).
- 4) **Working with Local Government** to build on Councils' commitment to improving health and wellbeing, and their existing strong links with communities. Following a Council and HSC Trust workshop earlier this year, the ODCAG has developed a Local Government Code of Practice setting out broad principles and activities which we envisage that Councils will adopt following consultation.
- 5) **Engaging with key target audiences including older citizens and children and young people, to ensure greater levels of awareness and responsibility by the current and future adult population.** The Communications Programme will include a co-ordinated approach to working with schools and youth organisations in order to increase knowledge and understanding about organ donation, and encourage young people to discuss the subject amongst friends and family. It will also recognise the key target group of over 50s from which the majority of deceased donors come, but amongst whom there is a need for greater awareness and understanding to counter misconception.
- 6) **Providing high quality organ donation awareness training for medical professionals,** focusing on those involved at various stages along the consent journey. Opportunities have been identified for this training to be included in training for medical students, medical trainees, GP trainees, nurses, and in the revalidation process for consultants and specialists. Subject to available resources the Department aims to work HSC, training bodies, universities, and NHSBT to implement this.

Regional Organ Donation Coordinator Role

The ODCAG has recommended the creation of this role in order to ensure the comprehensive delivery of the policy commitments across the region. It is envisaged that NHSBT would be the employer, with priorities/objectives set in agreement with DOH(NI) and a local Organ Donation Oversight Group. This would provide the appropriate linkages with campaign developments and comparable roles in GB, and the ability to coordinate the delivery of media campaigns to Northern Ireland audiences as required, and subject to available resource.

NHSBT has indicated support in principle for a regional coordinator for Northern Ireland, and provided advice (through Leonie Austin) in the development of a job outline. Ryan Wilson discussed this further with Fiona Wellington and Andi Ttofa at the NI Organ Donation Collaborative on Tuesday 21st November 2017, and agreed to share the draft outline and policy statement with a view to further discussion with NHSBT about how to take this forward.

The job outline reflects the Department's draft policy commitments and therefore will focus on the development and implementation of the Communications Programme, including coordinating the delivery of media campaigns (with PHA), and local partnership development, working in conjunction with Trust committees and local government. It is envisaged that some degree of administrative support would also be required.

Steering Group

It is proposed that a Northern Ireland Organ Donation Steering Group would be responsible for overseeing the development and delivery of the Communications Programme. It is envisaged that the Department would chair this group, with representation from NHSBT provided by the regional coordinator and SNODs.