## **Nova Scotia Organ and Tissue Donation Program**

Required Referral outcomes in Cape Breton District Heath Authority



## **Outline**

- Policy development
- Policy implementation
- Policy evaluation
- Results
- Barriers and challenges
- Lessons learned
- Recommendations

## **Policy Development**

- \* 2008 chart audit results
- May 2008 to Feb 2009 policy research and several drafts developed
- From 2009 until April 2010 policy revised and presented to necessary committees for approval
- April 2010 policy officially accepted
- Policy fit well with accreditation standards and the new HOTDA law to be proclaimed

## **Policy Implementation April- June 21, 2010**

- Announcement posters
- Media announcement-radio and newspapers
- ❖ 8 hospital site visits and education sessions x 2
- District telehealth session
- Physician mail out
- Various conference presentations

## **Implementation Continued**

- Trained requestor's workshops 4 during roll out
- June 21 announcement policy active
- District newsletter article and picture
- Several tools were also used

## **NEW POLICY**

Organ and/or Tissue Donation Inpatient Referral



June 21, 2010

Found in the Nursing Policy and Procedure Manual and the CBDHA intranet under Nursing Policies.

Policy # 15 - 20

To make a referral for organ and/or tissue donation

Call 902.473.2220





# Record of Death form

	Authority	
	RECORD	OF DEATH
	D.O.A.	O OUTPATIENT
	ALL A	AREAS OF THIS FORM MUST BE COMPLETED
	Name in full:	
	Address:	
	Healthcare No.:	Age:Sex:
		mains: (DD/MM/YYYY) Hour:
	Doctor:	Doctor notified by:
	Next of Kin:	
		Phone:
	· ·	atients age ≤80 completed by
_ /	Accepted □ Deferred □	Actual Donor : □Yes □No
	Was an autopsy requested:	Yes No If Yes, by whom:
•	Consent signed	Yes DNo
	Was Medical Examiner no	
	If Yes, Name of Med	· ·
ĺ	Did Medical Examine	
		er release remains:
	In the event of D.O.A. :	r release remains. G 1es G 100
	Police present  Yes	: DNo
	If Yes, Name of Office	
		or to transfer Yes No, if yes by whom:
	Transported to morgue by	
	rimsported to morgae by	
	VALUABLES	AUTHORIZATION FOR RELEASE OF BODY
	DV- DV	in the state of th
	☐ No ☐ Yes, if yes list:	Kindly give remains of:
		To:
		Signature:
		T
		TO TO TO THE REAL PROPERTY.
		UNDERTAKER'S RECEIPT
		Signature:
	Received by	Signature:
	Received by:	Signature:
	Received by: Girea to: NSG4951R (01/06/2010)	Signature:

	Document Post Mortem Care				
	Mon, 31 Jan 2011 0933 by Cathy I MacLeod				
	Post Mortem Care				
	Time of Death				
	Death	□ Physician       □ Significant Other       □ Family Physician         □ Chaplain       □ Palliative Care       □ Organ Donation         □ Family       □ Pastoral Care       □ Security         □ Friend       □ Residence			
	Post Mortem Notification Comment				
	Tissue Bank Referral	O Yes O No Comment Applies to all patients 80 years of age and younger			
	Body Prepared / Shroud Applied	O Yes O No Comment			
PCS charting	ID Tags Applied	○ Yes ○ No Comment			
	Autopsy Consent	○ Yes ○ No Comment			
	Invasive Lines Removed	○ Yes ○ No Comment			
	Registration of Death	○ Completed ○ Not Completed			
	Body Released to:	O Morgue O Funeral Home			
	Personal Belongings Released To:	○ Family ○ Morgue ○ Funeral Home			
	Release of Home Medications	○ Yes ○ No Comment			
	Additional Health & Illness Information				

## Have you given your patient the opportunity to **G.I.V.E.**?

If your patient meets the following criteria, investigate their potential to be an organ donor.



As a result of:

- Intracranial hemorrhage
- Traumatic head injury
- Stroke
- · Anoxic brain injury

#### Irreversible brain injury

 Medical opinion is that the brain injury cannot be treated

#### **Ventilated**

 Patient is intubated and ventilator - dependent

#### End of life discussion

• End of life discussion has been held with family and decision has been made to withdraw life sustaining therapy

Consult with an Organ Donor Coordinator for more information at 473-2222.





is for
Irreversible
brain injury

is for Ventilated

is for
End of Life
discussion

Adapted with permission by the NB Organ and Tissue Procurement Program.

# Clinical Triggers For Organ Donation



## Have you made the C.A.L.L.?

If your patient meets the following criteria, investigate their potential to be a tissue donor.

- patient's death confirmed by a health professional
- patient is 80 years old or younger
- the approximate time of death is known
- tissue bank specialist screens the patient prior to discussing with family

Contact the Tissue Specialist at 473-2222.

- Cardiac Death
- \_\_\_\_ Age ≤ 80
- Length of time since death
- Let the Tissue
  Bank screen



Adapted with permission of Cape Breton District Health Authority

## Criteria for Tissue Referrals



## **Staff Educated**

- Staff educated -264 during education sessions
- Teleconference- 14 + attended
- \* Pastoral care, Pt Ed .conference- 150 people
- Orientation- 158
- ❖ CBU 2010-46
- ❖ LPN 2010-86
  - ❖Total 700 plus to Dec 2010

## **MDE Workshops**

- Over 150 staff trained
- Formal evaluation of the workshop

## **Evaluation and Results**

- Involved a formal review of the of the development and implementation process
- O and T donation statistics
- Review of referrals specifically
- Review of 2010 audits
- Review of the number of district deaths
- Assessing front-line provider feedback

## Results

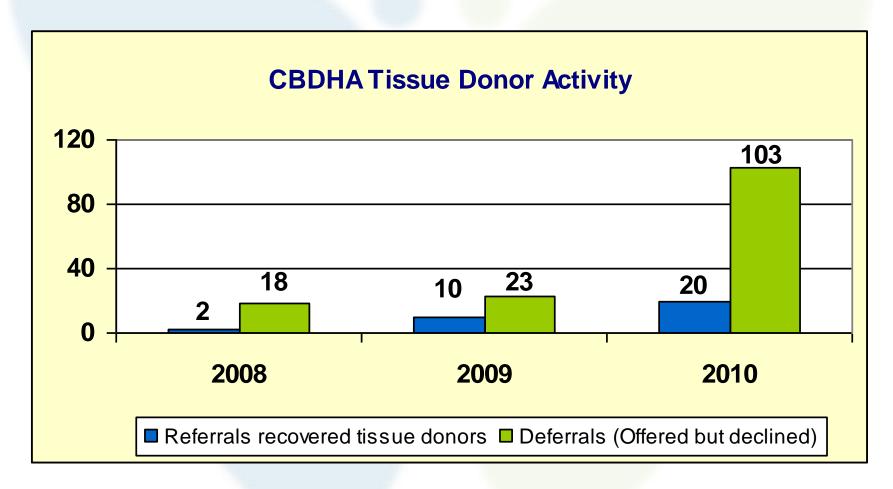
- 2010 7/8 hospitals making referrals now
- 2009 had 3/8 making referrals
- 2010 5/8 hospitals had actual donors
- 2009 3/8 had actual donors

### **Potential Organ Donors Comparison**

#### **Data To Dec 31, 2010**

	2008	2009	2010
Referred organ donors	5	11	12
Family Declined	3	2	1
Missed Referrals	6	1	0
Deferred organ donors	2	5	10
Actual donors	0	3	1

## **Results - Tissue Donation**



## **Reason for Tissue Deferrals**

	Infection	Age	No NOK consent	Disease	Staff Limitations	Other
CBRH	35	6	14	9	2	6
Glace Bay	4	1	5	1	2	1
North Sydney	1	1	3	3	0	0
Cheticamp	0	1	0	0	0	0
Baddeck	1	0	0	1	0	1
Inverness	0	1	1	1	0	1
New Waterford	0	2	0	0	0	1
TOTAL	41	12	23	15	4	10

## **Total District Deaths Age ≤ 80**

SITE	TOTAL EXPIRED PATIENTS
CAPE BRETON REGIONAL HOSPITAL	274
GLACE BAY HEALTHCARE	70
NORTHSIDE GENERAL	47
NEW WATERFORD CONSOLIDATED	14
BUCHANAN MEMORIAL	7
INVERNESS CONSOLIDATED	19
SACRED HEART HOSPITAL	16
VICTORIA COUNTY MEMORIAL HOSPITAL	18
Total	465

## **Barriers and Challenges**

- Front line staff-attendance, comfort, resistance
- Communication within departments
- Physicians
- Geography
- Meditech

## **Lessons Learned**

- Charting PCS and paper
- Frequently asked questions
- Morgue
- Site specific referral info during education

## **Recommendations - CBDHA**

- Add absolute contraindications to policy
- Ongoing education district wide
- Coffee cart education
- Reporting annual statistics and noncompliance
- Cardiac arrest form
- Reporting stats and compliance to CEO and VP
- Increasing Trained requestors- key areas

## One year later...

2011

## **Recommendations - CBDHA**

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## **Results - Organ Donation to June 2011**

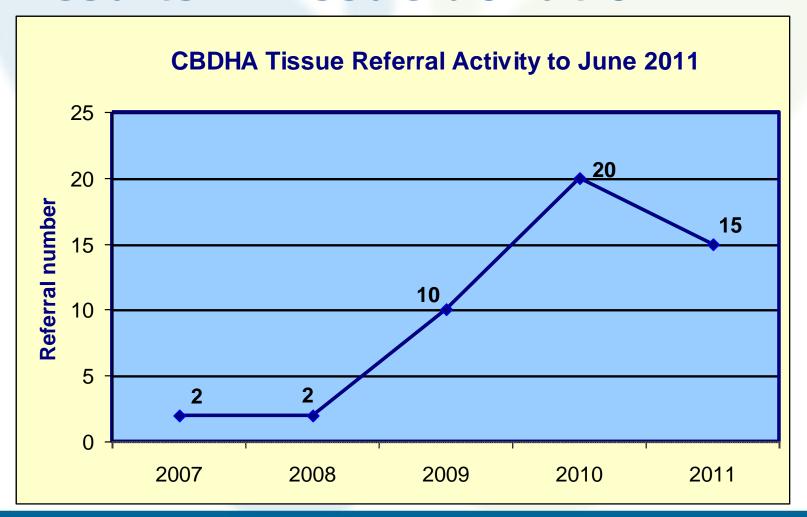
	2008	2009	2010	2011
Referred organ donors	5	11	12	5
Family Declined	3	2	1	0
Missed Referrals	6	1	0	0
Deferred organ donors	2	5	10	3
Actual donors	0	3	1	1

### **Organ and Tissue Donation Data to June 2011**

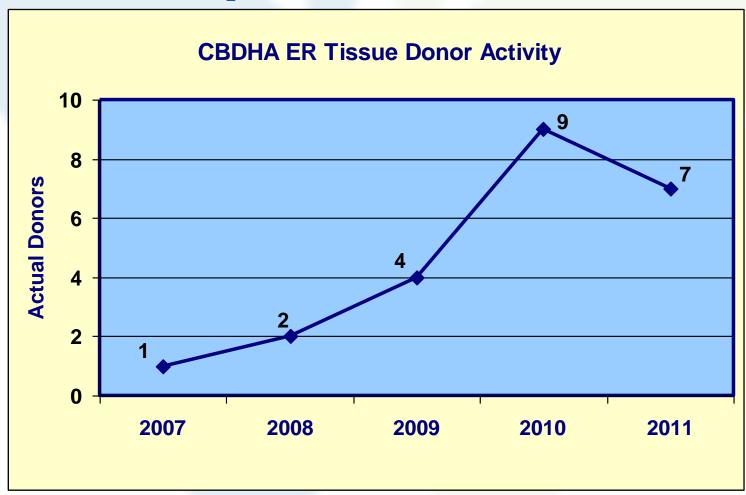
Organ Donation:	2007	2008	2009	2010	2011
Referrals	1	5	10	12	5
Donors	1	0	3	1	1

Tissue Donation:	2007	2008	2009	2010	2011
Referrals	6	18	34	103	60
Donors	2	2	10	20	15

## **Results - Tissue donation**



## **ER Activity to June 2011**



## What questions do you have?



## The gift of a lifetime

## Choose to donate Tell your family Sign your MSI card

www.legacyoflife.ns.ca



