

Yearly Transplants by Province

2009:	NS	NB	PE	NL	TOT	2010:	NS	NB	PE	NL	TOT
Kx AdultCad	21	19	1	9	50	Kx AdultCad	29	14	4	2	49
Kx Adult Live	15	10	2	5	32	Kx Adult Live	16	5	4	1	26
Kx/Pancreas	1	2	1	1	5	KxAdultPair	1	0	0	2	3
Liver	20	9	1	8	38	Kx/Pancreas	1	0	1	1	3
Heart	6	4	0	1	11	Liver	10	6	1	3	20
						Heart	0	1	2	2	5

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2011:	NS	NB	PE	NL	TOT	2012:	NS	NB	PE	NL	TOT
KxAdultCad	30	21	6	17	74	KxAdultCad	26	7	4	8	45
KxAdultLive	10	7	1	6	24	KxAdultLive	6	3	3	1	13
KxAdult Pair	1	1	0	2	3	KxAdultPair	1	2	0	0	5
KxPancreas	1	1	0	1	3	KxPancreas	1	2	0	0	3
Liver	15	4	2	9	30	Liver	10	1	0	4	15
Heart	3	5	0	0	8	Heart	4	2	0	2	8

*as of September 11th, 2012

Core Functions of a Transplant Social Worker

- Psychosocial assessment of transplant recipients (pre and post)
- Psychosocial interventions; planning, implementation and coordination
- Psychotherapy and/or supportive counseling on issues related to
 - * adjustment to disability/chronic illness, machine dependency, life-threatening or terminal illness
 - * adherence to one's medical plan and exploration of barriers
 - * anxiety/depression
 - * crisis intervention
 - * grief and loss issues
 - * survival's guilt
 - * post-traumatic stress symptoms

- *rehabilitation, including physical, emotional and social issues
 - * end of life/palliative counseling
 - * suicide assessment
 - * financial/work and medication coverage challenges
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- Advocacy, resource brokering, information and referral services
 - Continuity of care planning
 - Patient and family education to maximize patient wellness and graft survival
 - Interdisciplinary collaboration and consultation
 - Program and resource development

Recommendations

Team building

Advocate while protecting privacy/confidentiality

Make written communication available to provide continuity

More education for health care providers in home communities regarding liver disease, renal disease and the issues transplant recipients face

Goals

Strengthen working relationships

Enhance practice

Formalize communication amongst social workers both in hospitals and in community through regular meetings via teleconference to discuss challenges/issues in providing care

Linkages between dialysis and transplant clinic providing psychosocial context and considerations

Carole would like to see all post-tx recipients

Provide World-Leading Transplant Care