Australian Government
Organ and Tissue Authority

STRATEGIC PLAN
2015–2019

Organ and tissue donation for transplantation in Australia

15 January 2016
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A collaborative strategy between:
› DonateLife Australian Capital Territory
› New South Wales Organ and Tissue Donation Service
› DonateLife Northern Territory
› DonateLife Queensland
› DonateLife South Australia
› DonateLife Tasmania
› DonateLife Victoria
› DonateLife Western Australia

Australian Government
Organ and Tissue Authority
Transplantation is an effective and well-established treatment that can significantly benefit Australians facing illness, disability or premature death. Noting that the demand for organs for transplantation continues to exceed supply in Australia, as it does in the rest of the world, we are committed to optimising every donation opportunity. Clinicians in the donation and transplantation sectors, governments, and members of the community have a role to play in contributing to an organ and tissue donation service for Australia that meets our expectations.

On 2 July 2008 the Australian Government, recognising the importance of bridging the gap between the demand for transplantation and the availability of organs and tissues, announced a national reform programme to implement a world’s best practice approach to organ and tissue donation for transplantation, which was endorsed by the Council of Australian Governments on 3 July 2008.

In January 2009 the Organ and Tissue Authority (OTA) was established to manage the implementation of the national reform programme, and over that year the DonateLife Network, a national network of DonateLife Agencies and hospital-based medical and nursing specialists in organ and tissue donation, was established to provide a coordinated approach to organ and tissue donation for transplantation.

There has been strong growth in donation and transplant outcomes since the establishment of the OTA and the DonateLife Network. In 2014, our national organ donation outcome was 53% higher than 2009 and the number of transplant recipients was 39% higher.

Despite the improvements in donation and transplantation outcomes, Australia, consistent with international experience, has not met the increasing demand for transplantation. In 2014, there were approximately 1,600 Australians waiting for an organ transplant at any point in time.

This strategic plan has been developed in consultation with the Advisory Council and the Jurisdictional Advisory Group. The plan outlines our vision and priorities for the 2015–16 to 2018–19 financial years to ensure a shared understanding of our purpose and strategies to achieve our national goal of 25 organ donors per million population (dpmp) by 2018.

The strategies and actions outlined in the plan will continue to be reviewed and updated annually to ensure it remains current and aligns with available resources. The updated plan will inform the development of strategic priorities for each future financial year.

In the 2015 Federal Budget, the Australian Government announced a new measure: Accelerating growth in organ and tissue donation for transplantation. This two-year measure consists of four key elements that will increase organ and tissue donation rates:

- improving systems to allow better matching of available organs to potential transplant recipients
- implementing the DonateLife Collaborative to improve organ and tissue donation clinical practice
- enhancing online registration to increase the number of registrations on the Australian Organ Donor Register
- extending the Supporting Leave for Living Organ Donors Program.

The 2015 Mid-year Economic and Fiscal Outlook (MYEFO) included the policy decision to no longer proceed with the merger of the OTA and National Blood Authority (NBA) and efficiencies were identified from merging the corporate services of the two agencies.

We look forward to working with the DonateLife Network and other key stakeholders to achieve the objectives, strategies and actions outlined in this strategic plan.
The aim of the Australian Government’s national reform programme is to implement a nationally coordinated world’s best practice approach to organ and tissue donation for transplantation in collaboration with the states and territories, clinicians and the community sector.

The twin objectives of our national reform programme are:

1. To increase the capability and capacity within the health system to maximise donation rates, and
2. To build community awareness and stakeholder engagement across Australia to promote organ and tissue donation.

Our vision
Our vision is to implement world’s best practice in organ and tissue donation for transplantation in Australia, and to work in partnership with state and territory governments to improve access for Australians to life-transforming transplants.

Our mission
Our mission is to deliver a highly effective nationally consistent organ and tissue donation system for transplantation with the support of Australian governments, the clinical profession and the community and to increase the number of people from all parts of Australian society who consent to organ and tissue donation.

Our world’s best practice approach
Australia’s national reform programme was developed in the context of clear international commitments and statements by the World Health Organization relating to the obligation of governments to be more accountable and responsible for implementing safe, ethical and effective organ and tissue donation and transplantation systems at the national level.

Evidence from comparable countries demonstrates that a coordinated national approach and system, focused on clinical practice reform, improves organ donation and transplantation rates. The key reform elements adopted in Australia and by leading countries in organ and tissue donation are:

- An appropriate legal and ethical framework
- A national coordinating body
- Hospital-based clinical donation specialists
- Specialist training for clinical staff in management of the donation process and family donation conversations
- Implementation of a clinical governance framework that supports quality assurance and audit of hospital clinical practice and governance of the donation process
- Financial support to donor hospitals to ensure that costs related to donor management are not a barrier to donation
- Media engagement and national community awareness and education
- International cooperation to share best practice.

The Australian national reform programme has been informed by best practice in countries that are world leaders in organ and tissue donation.
Organ and tissue donation – a precious opportunity

Only around 1-2% of people who die in hospitals, die in the specific circumstances required to be a potential organ donor. For this reason, it is important to optimise the identification of potential donors and the conversion of potential donors to actual donors.

Unlike organ donation, many more people can become eye and tissue donors as tissues can be donated up to 24 hours after death.

Throughout this plan, unless otherwise specified, ‘tissue’ refers to all tissue types, including eye tissue.

The 2015-19 strategic plan includes outcome data for the 2014 calendar year.

AUSTRALIA’S POTENTIAL ORGAN DONOR POPULATION

In 2014 the Australian population was 23,490,700 with an estimated 149,100 deaths occurring.

Of these, approximately 74,400 deaths occurred in hospitals with around 700 potential organ donors identified.

Requests to families for donation were made in around 680 cases, with approximately 415 families consenting to donation.

In just under 40 cases where family consent was given, donation did not proceed for a variety of clinical reasons.

The resulting 378 deceased organ donors enabled 1,165 organ transplant procedures where 1,328 organs were transplanted.

As a result, the lives of 1,108 organ transplant recipients and their families were transformed.

Sources
1. Estimated resident population, ABS 3101.0 Australian Demographic Statistics, June 2014, released 18/12/2014
2. Estimated from ABS 3302.0 Deaths, Australia, 2013, released 6/11/2014
4. Extrapolated from September 2014 DonateLife Audit Report, OTA
5. Australia and New Zealand Organ Donation Registry monthly report on Deceased Organ Donation in Australia, December 2015
PROGRESS

Australia has achieved strong growth in donation and transplant outcomes since the establishment of the OTA and the DonateLife Network (DLN) in 2009.

In 2014 organ donation and transplantation outcomes were largely comparable with 2013. However, the long-term trend is one of growth since the DLN was established:

• 53% increase in the number of deceased organ donors (378 donors in 2014 compared with 247 in 2009);

• 39% increase in the number of transplant recipients (1,108 recipients in 2014 compared with 799 in 2009);

• 38% increase in the number of organ transplant procedures (1,165 in 2014 compared with 843 in 2009);

• 41% increase in the donation rate (16.1 dpmp in 2014 compared with 11.4 dpmp in 2009);

• 28% increase in the transplant recipient rate (47.2 trpmp in 2014 compared with 36.8 trpmp in 2009); and

• 28% increase in the organ transplant procedures (organ transplants) rate (49.6 otpmp in 2014 compared with 38.9 otpmp in 2009).
As with organ donation and transplantation outcomes, there is a long-term trend of growth in eye and tissue outcomes:

- 26% increase in the number of eye donors (1,162 eye donors in 2014 compared with 922 in 2009)
- 29% increase in the number of corneal transplants (1,897 corneal transplants in 2014 compared with 1,467 in 2009)
- 59% increase in the number of deceased tissue donations (512 in 2014 compared with 323 in 2012, the first year in which national tissue outcomes were reported) and a 1.4% increase in the number of living tissue donations (3,704 living tissue donations in 2014 compared with 3,652 in 2012)
- 45% increase in the number of tissue grafts transplanted (9,071 notified tissue grafts transplanted in 2014 compared with 6,248 in 2013, the first year national tissue transplant outcomes were reported) and a 50% increase in the number of notified tissue transplant recipients (5,553 notified tissue transplant recipients in 2014 compared with 3,691 in 2013).
## PROGRESS CONT.

### Tissue Donations from Deceased Donors 2012–2014

<table>
<thead>
<tr>
<th>Year</th>
<th>Deceased Tissue Only Donations</th>
<th>Deceased Organ and Tissue Donations</th>
</tr>
</thead>
<tbody>
<tr>
<td>2014</td>
<td>323</td>
<td>189</td>
</tr>
<tr>
<td>2013</td>
<td>214</td>
<td>177</td>
</tr>
<tr>
<td>2012</td>
<td>192</td>
<td>131</td>
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</table>

### Tissue Donations from Living Donors 2012–2014

<table>
<thead>
<tr>
<th>Year</th>
<th>Musculoskeletal</th>
<th>Cardiovascular</th>
</tr>
</thead>
<tbody>
<tr>
<td>2014</td>
<td>3,687</td>
<td>17</td>
</tr>
<tr>
<td>2013</td>
<td>3,784</td>
<td>20</td>
</tr>
<tr>
<td>2012</td>
<td>3,652</td>
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### Notified Tissue Grafts Transplanted 2013–2014

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<thead>
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<th>Year</th>
<th>Musculoskeletal</th>
<th>Cardiovascular</th>
<th>Skin</th>
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<tr>
<td>2014</td>
<td>7,488</td>
<td></td>
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<tr>
<td>2013</td>
<td>5,289</td>
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<td>2014</td>
<td>1,379</td>
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<tr>
<td>2013</td>
<td>782</td>
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### Notified Tissue Transplant Recipients 2013–2014

<table>
<thead>
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<th>Year</th>
<th>Musculoskeletal</th>
<th>Cardiovascular</th>
<th>Skin</th>
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</thead>
<tbody>
<tr>
<td>2014</td>
<td>5,247</td>
<td></td>
<td></td>
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<tr>
<td>2013</td>
<td>3,438</td>
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<tr>
<td>2014</td>
<td>103</td>
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<tr>
<td>2013</td>
<td>89</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
In this time there have been major changes in Australia’s organ and tissue donation infrastructure, most notably with the embedding of dedicated medical and nursing donation specialist staff in organ and tissue donation in key hospitals across Australia, who work collaboratively with staff from eight DonateLife Agencies and their clinical colleagues. Initiatives such as the introduction of the Professional Education Package (PEP) and the DonateLife Audit of potential donor opportunities have further developed the skills of the hospital based donation specialist doctors and nurses, while the introduction of Organ Donation Hospital Support Funding has provided a contribution towards the costs associated with organ donation activity.

Further measures such as the introduction of a national Donor Family Support Service, the implementation of the Australian Paired Kidney Exchange programme, implementation of the Electronic Donor Record (EDR) and development of the Consensus Statement on Eligibility Criteria and Allocation Protocols for Organ Transplantation from Deceased Donors have all provided greater support, access and sector accountability to the Australian public.

Through the national DonateLife community awareness and education program considerable progress has been made in increasing public awareness of the importance of family discussion and knowledge of donation decisions. This is reflected in the increased levels of family discussion at the height of the DonateLife advertising campaign and in the gradual increase in families initiating discussions regarding the potential for organ donation in the hospital setting. At the same time, there is an ongoing need to engage the community to register donation decisions and most importantly to discuss and know family donation decisions. There is a prevailing gap between those who believe their family know their donation decisions and those who confidently know the donation decisions of their loved ones.

These achievements are a tribute to those implementing the national reform programme; healthcare professionals involved in donation and transplantation; a wide range of community groups and religious and cultural leaders who have committed to work to raise awareness and promote organ and tissue donation for transplantation in the community; and particularly to organ and tissue donors and their families who have generously consented to donation.

While the need for organs will continue to exceed availability, we can do more to increase our donation and transplantation outcomes. This is a challenge for the whole of Australian society.

**Donation Consent Rate**

**Knowledge of donation decisions makes a difference**

- **90%** When donor has registered consent
- **77%** When families know donor’s decision
- **59%** National average
- **48%** When donor has not registered and family does not know donor decision

**SOURCES**

1. Organ donation and transplantation data: ANZOD Registry, May 2015
3. International organ donation data: International Registry of Organ Donation and Transplantation, June 2015
Strategic Plan 2015–2019

PARTNERSHIPS AND COLLABORATION

Increasing organ and tissue donation for transplantation in Australia is a collective responsibility and requires a whole-of-government, hospital and community response.

At the forefront of our work are the families of deceased organ and tissue donors, transplant recipients and their families, living donors, and those Australians and their families waiting for a transplant. These Australians play a significant role in helping us to educate the broader community to understand the need and benefits of donation for transplantation.

To optimise opportunities for Australians to receive a life-transforming transplant, we must work together to normalise clinical and community acceptance of organ and tissue donation to ensure that donors and their families are provided with every opportunity to donate.

To achieve this, Commonwealth, state and territory governments, clinicians, professional bodies, eye and tissue banks, consumers and the community sector work in partnership to improve organ and tissue donation and transplantation outcomes in Australia.

Our partners also include faith and cultural organisations, media, corporate partners and community partners that support organ and tissue donation and transplantation within their communities.

The following are the key stakeholders with whom we work to implement the national reform programme.

Government
- Australian Health Ethics Committee
- Australian Government Department of Health (including the Therapeutic Goods Administration)
- Australian Government Department of Human Services
- ACT Health
- Department of Health, Western Australia
- Department of Health, Northern Territory
- Department of Health and Human Services, Tasmania
- Department of Health and Human Services, Victoria
- National Health and Medical Research Council
- NSW Ministry of Health
- Queensland Health
- SA Department for Health and Ageing

Professional associations
- Australian and New Zealand Intensive Care Society
- Australian College of Critical Care Nurses
- Australasian College for Emergency Medicine
- Australian Medical Students Association
- Australasian Transplant Coordinators Association
- Biotherapeutics Association of Australasia
- College of Intensive Care Medicine of Australia and New Zealand
- Eye Bank Association of Australia and New Zealand
- Transplant Nurses Association
- Transplantation Society of Australia and New Zealand

Eye and tissue banks
- ACT Bone Bank
- Australian Biotechnologies
- Barwon Health Bone Bank
- Cells and Tissue Therapies Western Australia
- Donor Tissue Bank of Victoria
- Hunter New England Bone Bank
- Lions Eye Bank WA
- Lions Eye Donation Service VIC
- NSW Bone Bank
- NSW Lions Eye Bank
- PlusLife (Perth Bone and Tissue Bank)
- Queensland Tissue Banks
- Rachel Forster Bone Bank
- South Australian Eye Bank
- South Australian Tissue Bank
- Sydney Heart Valve Bank
PARTNERSHIPS AND COLLABORATION CONT.

Community

DonateLife partners
• Aussie Transplant Mates
• Coen Ashton Foundation
• David Hookes Foundation
• Eurobodalla Renal Support Group
• Gift of Life Incorporated
• Heart and Lung Transplant Trust Victoria
• Kidney Health Australia
• Liver Kids Australia Inc
• Organ Donation and Transplant Foundation of WA
• Sammy D Foundation
• Students and Volunteers for Organ Donation
• St John of God Healthcare Transplant Australia
• Transplant Cricket Australia
• Zaidee’s Rainbow Foundation

DonateLife community partners
• AM Solutions Group
• Bathurst Rugby Club
• Bayside United Football Club
• Brisbane Hinterland 4WD
• Bronte Family Day Care
• Charlotte Mackay
• Council of Governors of Lions Australia
• Creighton’s Funeral Service
• Dailey Family Funerals and Pink Lady Funerals
• David Tranter
• Don Williams
• Ethan ‘Jimmy’ Seccull Foundation
• Gentleman Player
• Gremmo Community Fund Inc
• Guy Holmes
• Hinterland Celtic Rugby Union Football Club
• Kazar Slaven
• Mustang Building Services
• Quadski Around Australia
• Russell Brothers Funeral Directors
• University of Queensland Rugby Football Club
• St Edmunds Basketball Club
• YMCA Victoria

Donation and transplant outcome registries
• Australia and New Zealand Dialysis and Transplant Registry
• Australia and New Zealand Liver Transplant Registry
• Australia and New Zealand Organ Donation Registry
• Australian and New Zealand Cardiothoracic Transplant Registry
• Australia and New Zealand Islets and Pancreas Transplant Registry
• Australian Corneal Graft Registry
• National Organ Matching Service

Other organisations
• Australian Red Cross Blood Service
• Donor Families Australia

International organisations
• Canadian Blood Services
• Donation and Transplantation Institute, Spain
• Gift of Life Donor Program, USA
• Institute for Transplantation and Biomedicine, The Republic of Croatia
• Authority for Blood and Transplant Services, Portugal
• International Registry on Organ Donation and Transplantation, Spain
• National Health Service, UK
• National Transplant Organization (ONT), Spain
• Organ Donation New Zealand
• The Transplantation Society
• World Health Organisation
Despite the progress achieved to date, the demand for transplantation in Australia continues to exceed the supply of organs. The wait for a transplant at times can be lengthy and comes at a significant cost to those needing a transplant, their family and community, and to the health system. It is for these reasons that continued sustained growth in organ and tissue donation is required.

The ability of Commonwealth, state and territory governments, working with the community and clinicians to maximise organ and tissue donation for transplantation, will require ongoing focus on key areas such as increasing the number of identified potential donors, improving the number of successful donation outcomes and ensuring that appropriate systems are in place to support organ and tissue donation and transplantation. In order to meet the demand it is essential that we work with Australian governments, the community and the donation and transplant sectors to develop strategies that will increase availability of deceased donor organs and tissue and maximise transplantation.

The Australian community also has an ongoing role to play in increasing organ and tissue donation for transplantation. Australians need to consider organ and tissue donation as the normal thing to do, both for themselves and their loved ones. Work will continue with the community to maintain active engagement and build on the high level of support for organ and tissue donation; to encourage all Australians to register their donation decision on the Australian Organ Donor Register and most importantly to discuss their donation decision with family members.

In order to meet the demand it is essential that we work with Australian governments, the community and the donation and transplant sectors to develop strategies that will increase availability of deceased donor organs and tissue and maximise transplantation.

In order to expand the number of organs available for transplantation, extended criteria for organ suitability have been developed for some but not all organs. Success with this approach is being achieved internationally. Extended criteria relate to the characteristics of the donor (e.g. comorbidities, infectious diseases, age) or the donor organ (e.g. longer ischaemic time) that can be associated with poorer outcomes after transplantation in some recipients. However, the prospect of the potential recipient surviving considerably longer than may occur without a transplant, and the resulting community benefit, is weighed against the medical factors and potentially higher risk involved. In these cases, the application of an alternate allocation system to match an extended criteria organ to suitable recipients should be explored. Following the 2015 Budget Measure, work has commenced to develop the Australian Organ Matching System (AOMS) to allow for optimal matching of organs to transplant recipients.

Further growth in organ and tissue donation for transplantation will require us to work even more closely with our clinical and transplant colleagues and the broader community. We must ensure that the very best use is made of this scarce resource in order to provide as many Australians as possible with access to transplantation. This will necessitate further strengthening of the professional relationships that exist between the donation and transplant communities to ensure that more organs are useable and surgeons are better supported to transplant organs safely into
the most appropriate recipient. It will require ongoing development of relevant systems, policies and protocols to keep pace with the changing clinical environment to maintain a safe, ethical and effective organ and tissue donation for transplantation system in Australia.

Ongoing awareness of developments in medical technologies is integral to understanding and utilising the best options available to the Australian community. There are scientific developments and research on the horizon that will challenge current accepted clinical and ethical practice in donation and transplantation. We need to be prepared to address clinical and ethical issues that may arise in relation to any evolving technology and techniques in organ transplantation and, the ongoing transition from innovation of research to established practice.

Developments in the field of organ transplantation such as machine reperfusion of organs have the potential to transform and increase the opportunities for patients needing a transplant. Repair and regeneration of organs will have a substantial impact on the number of suitable organ donors. Both mechanical and biological (stem cell) organ replacement therapies may change the profile of people needing an organ transplant. Work with the eye and tissue banking sector will continue to foster a strong national network, and consistency and sustainability of the sector. Eye and tissue banks are strong candidates to become launching hubs for novel biotechnology, enhanced tissue grafts and biotherapeutics.

We will work even more closely with our donation and transplantation sectors and the broader community with the aim to provide Australians with the opportunity to make informed decisions about their donation and transplantation options, in order to provide more Australians with the appropriate transplant outcome for them.

69% of Australians are willing to become an organ and tissue donor

56% have made a decision on becoming a donor
This strategic plan has been developed to ensure that organ and tissue donation is delivered on a collaborative basis throughout Australia with a view to increasing organ donation outcomes to 25 donors per million population (dpmp) by 2018.

The plan identifies the objectives, strategies and actions resulting from consultation with our stakeholders, as well as identifying performance measures.

The following key objectives are identified:

1. Increase the number of potential organ and tissue donors
2. Improve organ and tissue donor conversion rates
3. Enhance systems to support organ and tissue donation and transplantation.

Strategies are identified to support achievement of each objective and a set of actions for each of the four financial years of the plan is identified to support achievement of each strategy.

These strategies and actions represent a challenge to all those with a role in organ and tissue donation and transplantation. All stakeholders will need to continue to work together to achieve these outcomes.

Our delivery against these objectives, strategies and actions is reported regularly to stakeholders and the Australian Government. Implementation is managed by a framework of internal governance and control mechanisms.

Annual Review

The plan is reviewed and updated annually to ensure it remains current and aligns with available resources. The annual review will provide the opportunity to assess the effectiveness of the planned strategies and actions in terms of progress towards achievement of the objectives; to identify any changed circumstances, needs or priorities; and to update the plan to ensure it remains relevant and practicable.

Strategic Priorities

In addition, the annual update of the plan will inform development of strategic priorities for the coming year which will focus our efforts, guide the allocation of our resources, and streamline reporting of progress. The 2015–16 strategic priorities have been endorsed by the DonateLife Network leadership team, comprising the Advisory Council, the Jurisdictional Advisory Group and Operations/Agency/Clinical Managers.
Objective 1
Increase the number of potential organ and tissue donors

Strategy 1.1
Implement end of life prompts for donor identification and referral

Strategy 1.2
Provide professional education and training for clinicians

Strategy 1.3
Optimise the uptake of Donation after Circulatory Death (DCD) donation pathway in hospitals

Strategy 1.4
Establish processes to optimise the transplantation of organs from extended criteria donors (ECD)

Strategy 1.5
Support living organ donation

Actions 2015–19
## OBJECTIVE 1

**Increase the number of potential organ and tissue donors**

<table>
<thead>
<tr>
<th>STRATEGIES</th>
<th>ACTIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consider feedback from clinicians on clinical triggers to develop enhanced signage for use in Emergency Departments (ED), Intensive Care Units (ICU), and general wards</td>
<td>Evaluate the implementation of the comprehensive referral system to the DonateLife Agency for all potential organ donors</td>
</tr>
<tr>
<td>Agree and implement a comprehensive referral to the DonateLife Agency for all potential organ donors</td>
<td>Implement and promote use of revised clinical triggers in ED, ICU and general wards</td>
</tr>
<tr>
<td></td>
<td>Evaluate the implementation of the comprehensive referral system to the DonateLife Agency for all potential organ donors</td>
</tr>
<tr>
<td></td>
<td>Implement and promote use of revised clinical triggers in ED, ICU and general wards</td>
</tr>
<tr>
<td><strong>1.2</strong> Provide professional education and training for clinicians</td>
<td>2015–16</td>
</tr>
<tr>
<td>Explore commencement of an organ and tissue Graduate Diploma course</td>
<td>Pending its commencement, promote enrolment and uptake of the organ and tissue Graduate Diploma course</td>
</tr>
<tr>
<td>Explore a national education strategy on the comprehensive system for referral of potential organ donors</td>
<td>Develop the education strategy on the comprehensive system for referral of potential organ donors</td>
</tr>
<tr>
<td>Consider development of additional modules to extend the Professional Education Package (PEP)</td>
<td>Develop and implement agreed additional PEP modules</td>
</tr>
<tr>
<td><strong>1.3</strong> Optimise the uptake of Donation after Circulatory Death (DCD) donation pathway in hospitals</td>
<td>2015–16</td>
</tr>
<tr>
<td>Update the DonateLife Audit application to capture and report DCD data</td>
<td>Update training and guidance documentation to reflect ongoing changes</td>
</tr>
<tr>
<td>Issue DBD and DCD DonateLife Audit reports to key stakeholders for use in local potential donor case review and to identify best practice</td>
<td>Release the revised National Protocol for DCD</td>
</tr>
<tr>
<td>Refine DCD DonateLife Audit report according to feedback from key stakeholders</td>
<td>Continue to refine DCD DonateLife Audit report according to feedback from key stakeholders</td>
</tr>
<tr>
<td>Update the DonateLife Audit data dictionary and the DonateLife Audit Standard Operating Procedure to incorporate DCD</td>
<td></td>
</tr>
<tr>
<td>Complete the review of the National Protocol for DCD and identify opportunities for increasing the uptake and consistency of DCD practice in the donation and transplantation sectors</td>
<td></td>
</tr>
</tbody>
</table>
## OBJECTIVE 1 CONT.
Increase the number of potential organ and tissue donors

<table>
<thead>
<tr>
<th>STRATEGIES</th>
<th>ACTIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1.4</strong> Establish processes to optimise the transplantation of organs from extended criteria donors (ECD)</td>
<td><strong>2015–16</strong></td>
</tr>
<tr>
<td>› Consider and develop national protocols, guidelines, tools and resources that will support the successful transplantation of organs from ECD</td>
<td>› Develop and deliver education strategies that support the implementation of agreed national protocols and guidelines for transplantation of organs from ECD</td>
</tr>
<tr>
<td>› Work with the donation and transplantation sectors to optimise transplantation of organs from ECD:</td>
<td></td>
</tr>
<tr>
<td>• Better organ and recipient matching</td>
<td>› Explore best practice guidelines for organ preservation strategies</td>
</tr>
<tr>
<td>• Improved access to testing and screening</td>
<td></td>
</tr>
<tr>
<td>• Work with jurisdictions to establish and maintain effective and efficient retrieval services</td>
<td></td>
</tr>
<tr>
<td>• Allocation systems and processes</td>
<td></td>
</tr>
<tr>
<td>• Scope national best practice guidelines for organ preservation strategies</td>
<td></td>
</tr>
<tr>
<td>• Standardise extended criteria for donor suitability</td>
<td></td>
</tr>
</tbody>
</table>

| **1.5** Support living organ donation | **2015–16** | **2016–17** | **2017–18** | **2018–19** |
| | › Continue to deliver and evaluate the Australian Paired Kidney Exchange (AKX) programme | › Continue to evaluate the AKX programme | › Continue to monitor and evaluate the AKX programme | › Review the AKX programme, policies and procedures |
| | › Work with the AKX programme to ensure adequate governance structures are in place | › Explore opportunities to expand the AKX programme | | |
| | › Work with the AKX programme to introduce a Deputy Clinical Director position | | | |
| | › Continue to work with the Department of Health to understand the relationship and impact of living kidney donation on deceased organ donation | | | |
| | › Continue to work with the Department of Health on strategies to provide for living donor leave | | | |
| | › Monitor and report the transplant outcomes of living donation | | | |
Objective 2
Improve organ and tissue donor conversion rates

Strategy 2.1
Develop an Australian best practice request and consent model for organ and tissue donation for transplantation

Strategy 2.2
Increase education of professionals involved in conversations about organ and tissue donation

Strategy 2.3
Continue to build public support and confidence in Australia’s donation and transplantation system

Strategy 2.4
Support informed family discussion and AGDR registration of donation decisions within culturally and linguistically diverse (CALD) and Aboriginal and Torres Strait Islander (Indigenous Australian) communities

Strategy 2.5
Optimise physiological management of potential organ donors

Actions 2015–19
Actions 2015–19
Actions 2015–19
Actions 2015–19
Actions 2015–19
## Objective 2

**Improve organ and tissue donor conversion rates**

### Strategies

#### 2.1 Develop an Australian best practice request and consent model for organ and tissue donation for transplantation

- **2015–16**
  - Develop and agree a national best practice model for request and consent for donation by analysing the findings from the national evaluation of the pilot of request and consent models

- **2016–17**
  - Develop an education strategy to support the implementation of a nationally agreed best practice model for request and consent

- **2017–18**
  - Evaluate the implementation of the national best practice model for request and consent

- **2018–19**
  - Implement the revised national best practice model for request and consent and monitor its implementation

#### 2.2 Increase education of professionals involved in conversations about organ and tissue donation

- **2015–16**
  - Develop and deliver advanced Family Donation Conversation (FDC) modules on family communication associated with paediatrics and culturally and linguistically diverse (CALD) communities and Indigenous Australians

- **2016–17**
  - Deliver and evaluate communications training on calling families for consent to eye and tissue donation

- **2017–18**
  - Commence the FDC e-learning program to complement the FDC workshops and support professionals with additional training on family communication

- **2018–19**
  - Monitor uptake of the FDC e-learning program and hospital-level attendance at FDC workshops

#### 2.3 Continue to build public support and confidence in Australia’s donation and transplantation system

- **2015–16**
  - Work with the Department of Health and the Department of Human Services to introduce the functionality for online consent registration on the Australian Organ Donor Register (AODR)

- **2016–17**
  - Implement a national donor online registration campaign, in consultation with key stakeholders, to encourage Australians to register and revise the Professional Education Program to incorporate the AODR changes

- **2017–18**
  - Revise the national communications plan

- **2018–19**
  - Implement the revised national communications plan, informed by market research on current attitudes and awareness levels

  - Revise and implement the national communications plan to increase family discussion and knowledge of the AODR and registered donation decisions
## STRATEGIES

### OBJECTIVE 2 CONT.
**Improve organ and tissue donor conversion rates**

<table>
<thead>
<tr>
<th>STRATEGIES</th>
<th>ACTIONS</th>
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</table>
| **2.4** Support informed family discussion and AODR registration of donation decisions within culturally and linguistically diverse (CALD) and Aboriginal and Torres Strait Islander (Indigenous Australian) communities | 2015–16: Revise the national CALD community education and engagement plan, and identify potential partnerships for an Indigenous Australian community education and engagement plan  
2016–17: Implement the national CALD community education and engagement plan and develop an Indigenous Australian community education and engagement plan  
2017–18: Revise the national CALD community education and engagement plan informed by market research on current attitudes and awareness levels  
2018–19: Implement the revised national CALD community education and engagement plans |
| **2.5** Optimise physiological management of potential organ donors | 2015–16: Embed endorsed national clinical protocols into clinical practice  
2016–17: Scope options for the development of additional national clinical protocols for management of donation after brain death (DBD)  
2017–18: Evaluate the effectiveness of national clinical protocols, and develop new national clinical protocols as required  
2018–19: Monitor the effectiveness of national clinical protocols and continue to promote the use of national protocols in the donation and transplantation sectors  
2019–20: Revise national clinical protocols as necessary |
Objective 3
Enhance systems to support organ and tissue donation and transplantation

Strategy 3.1
Continue to develop the Electronic Donor Record (EDR)

Strategy 3.2
Deliver a national vigilance and surveillance system for deceased organ donation and transplantation

Strategy 3.3
Support the delivery of ethical and clinical guidelines for organ transplantation from deceased donors

Strategy 3.4
Provide organ donation hospital support funding (ODHSF)

Strategy 3.5
Continue to develop systems and processes to capture, analyse and report on donation and transplantation data and research

Strategy 3.6
Continue to support the ongoing development of the eye and tissue sector in collaboration with professional bodies

Strategy 3.7
Support the development of an Australian Organ Matching System (AOMS) to improve organ allocation and matching processes

Strategy 3.8
Continue to support the evolution of the DonateLife Network in response to changes in the requirements of the organ and tissue donation and transplantation service model

Strategy 3.9
Provide national Donor Family Support Services to ensure that donor families have access to quality bereavement care and support

Actions
2015–19

Actions
2015–19

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2015–19

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2015–19

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2015–19

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2015–19
### OBJECTIVE 3
Enhance systems to support organ and tissue donation and transplantation

<table>
<thead>
<tr>
<th>STRATEGIES</th>
<th>ACTIONS</th>
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</thead>
<tbody>
<tr>
<td>3.1 Continue to develop the Electronic Donor Record (EDR)</td>
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</tr>
<tr>
<td>- Implement the findings of the post-implementation review of the EDR organ module</td>
<td>- Complete the development and implementation of the EDR eye module and associated processes</td>
</tr>
<tr>
<td>- Renegotiate the Privacy and Access Agreements for access and use of EDR Data</td>
<td>- Undertake a post-implementation evaluation of the EDR eye module</td>
</tr>
<tr>
<td>- Finalise the scoping of business requirements for the EDR tissue module</td>
<td>- Complete the development and implementation of the EDR tissue module and associated processes</td>
</tr>
<tr>
<td>- Commence the development of the EDR eye module and associated processes</td>
<td>- Undertake a post-implementation evaluation of the EDR tissue module</td>
</tr>
<tr>
<td>- Commence the development of the EDR tissue module and associated processes</td>
<td>- Implement the recommendations of the EDR eye module post-implementation reviews</td>
</tr>
<tr>
<td>- Expand the EDR User Group to include eye and tissue bankers</td>
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<tr>
<td>3.2 Deliver a national vigilance and surveillance system for deceased organ donation and transplantation</td>
<td></td>
</tr>
<tr>
<td>- Develop an implementation strategy for the national vigilance and surveillance system</td>
<td>- Monitor implementation of the national vigilance and surveillance system</td>
</tr>
<tr>
<td>- Establish an expert advisory committee to monitor adverse events related to deceased organ donation and transplantation</td>
<td>- Undertake a post-implementation review of the vigilance and surveillance system</td>
</tr>
<tr>
<td>3.3 Support the delivery of ethical and clinical guidelines for organ transplantation from deceased donors</td>
<td>- Continue to monitor implementation and compliance with the vigilance and surveillance system</td>
</tr>
<tr>
<td>- Support alignment of the ethical guidelines for organ transplantation from deceased donors and clinical guidelines for organ transplantation from deceased donors</td>
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<tr>
<td>- Support the community and the donation and transplantation sectors in the use of the ethical and clinical guidelines</td>
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<tr>
<td>- Maintain the currency of the ethical and clinical guidelines</td>
<td></td>
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<tr>
<td>- Monitor the utility of the ethical and clinical guidelines</td>
<td></td>
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<tr>
<td>- Support the transplantation sector to evaluate compliance with the ethical and clinical guidelines</td>
<td></td>
</tr>
<tr>
<td>- Maintain currency of the ethical and clinical guidelines</td>
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## OBJECTIVE 3 CONT.

Enhance systems to support organ and tissue donation and transplantation

<table>
<thead>
<tr>
<th>STRATEGIES</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Negotiate ODHSF funding variations with states and territories, hospitals and health services and private hospitals for the two year period from 1 July 2016 to 30 June 2018</td>
<td>Administer ODHSF Funding Agreement variations with states and territories, hospitals and health services and private hospitals</td>
</tr>
<tr>
<td>Undertake an internal audit review of the ODHSF funding model within each state and territory</td>
<td>Implement the OTA Data Governance Framework and amend as necessary</td>
</tr>
<tr>
<td>3.5 Continue to develop systems and processes to capture, analyse and report on donation and transplantation data and research</td>
<td>Implement the enhancements to the DonateLife Audit tool and processes to enable the reporting of DCD donation activity</td>
</tr>
<tr>
<td>Pending ethics approval, conduct and report on Wave 2 of the national Donor Family Study (2012 and 2013)</td>
<td>Conduct market research into community attitude and awareness levels</td>
</tr>
<tr>
<td>Develop strategies to support research in the donation and transplantation sectors</td>
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</tr>
<tr>
<td>Conduct market research into general community attitude and awareness levels</td>
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<tr>
<td>Work with the transplant sector and registries to improve the quality of data available on transplantation outcomes and access to transplantation</td>
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### OBJECTIVE 3 CONT.

Enhance systems to support organ and tissue donation and transplantation

<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td><strong>3.6</strong> Continue to support the ongoing development of the eye and tissue sector in collaboration with professional bodies</td>
<td><strong>2015–16</strong></td>
</tr>
<tr>
<td>- Complete an economic analysis of the Australian eye and tissue sector and present findings to the COAG Health Council (CHC) for a decision on the future structure and sustainability of the sector</td>
<td>- Support the eye and tissue sector during the implementation of the agreed CHC recommendations</td>
</tr>
<tr>
<td>- In consultation with stakeholders, develop an implementation plan for the agreed CHC recommendations</td>
<td>- Commence the implementation of the ISBT 128 coding standard across the eye and tissue sectors</td>
</tr>
<tr>
<td>- Develop an implementation plan for the integration of the Information Standard for Blood and Transplant (ISBT) 128 coding standard into the eye and tissue sectors</td>
<td>- Support the eye and tissue sector during the implementation of the agreed CHC recommendations</td>
</tr>
<tr>
<td>- Implement the Biotherapeutics Association of Australasia (BAA) National Competency Matrix and Training Modules for Australian Tissue Banks</td>
<td>- Commence the implementation of the ISBT 128 coding standard across the eye and tissue sectors</td>
</tr>
<tr>
<td>- Develop and implement the BAA and Eye Bank Association of Australia and New Zealand (EBAANZ) Donor Surveillance Pilot</td>
<td>- Support the eye and tissue sector during the implementation of the agreed CHC recommendations</td>
</tr>
<tr>
<td>- Continue to support eye and tissue sector organisations in complying with the Therapeutic Goods Administration Biologicals Framework</td>
<td>- Commence the implementation of the ISBT 128 coding standard across the eye and tissue sectors</td>
</tr>
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</table>

| **3.7** Support the development of the Australian Organ Matching System (AOMS) to improve organ allocation and matching processes | **2015–16** | **2016–17** | **2017–18** | **2018–19** |
| - Work with the Australian Red Cross Blood Service (Blood Service) to establish a robust AOMS project management, governance and implementation framework | - Work with the Blood Service to decommission the NOMS | - Work with the Blood Service to transition key NOMS data to the AOMS | - Launch the AOMS |
| - Work with the Blood Service to develop business requirements for a phased procurement process for the AOMS including an open and competitive Expression of Interest and a subsequent short listed Request for Tender | - Work with the Blood Service to decommission the NOMS | - Work with the Blood Service to transition key NOMS data to the AOMS | - Launch the AOMS |
| - Negotiate and enter into a contract with a suitable vendor to ensure the successfully delivery and implementation of the AOMS | - Work with the Blood Service to decommission the NOMS | - Work with the Blood Service to transition key NOMS data to the AOMS | - Launch the AOMS |
| - Launch the AOMS | - Work with the Blood Service to decommission the NOMS | - Work with the Blood Service to transition key NOMS data to the AOMS | - Launch the AOMS |
## Objective 3 Cont.

Enhance systems to support organ and tissue donation and transplantation

### Strategies

#### 3.8 Continue to support the evolution of the DonateLife Network in response to changes in the requirements of the organ and tissue donation and transplantation service model

- Monitor jurisdictional progress in implementing the national reform programme in accordance with the current funding agreements
- Negotiate state and territory funding agreements/variations for delivery of organ and tissue donation services for the two year period from 1 July 2016 to 30 June 2018
- Implement and monitor Phase 2 of the Clinical Governance Framework (CGF)/Clinical Practice Improvement Program (CPIP) including the DonateLife Collaborative learning framework (including best practice model for requesting consent)
- Support a review by the Independent Hospital Pricing Authority (IHPA) of funding for organ retrieval and associated donation/transplantation services
- Support AHMAC and CHC review of organ perfusion technologies for potential future utilisation
- Deliver the 2016 DonateLife Network/Transplantation workshop

#### 3.9 Provide national Donor Family Support Services to ensure that donor families have access to quality bereavement care and support

- Agree data collection and reporting processes to monitor the delivery of donor family support services
- Agree Key Performance Indicators (KPIs) to ensure that donor family services are delivered to the required standard
- Consider opportunities for national recognition of donors and their families
- Consider findings from Wave 2 of the national Donor Family Study to inform enhancements to family support services
- Review and update the resources provided to families after donation
- Monitor and report achievement against the agreed KPIs

### Actions

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<tr>
<td>Monitor jurisdictional progress in implementing the national reform programme in accordance with the current funding agreements</td>
<td>Monitor jurisdictional progress in implementing the national reform programme in accordance with the current funding agreements</td>
<td>Negotiate state and territory operational models for delivery of organ and tissue donation services and enter into new funding agreements from 1 July 2018</td>
<td>Monitor jurisdictional progress in implementing the national reform programme in accordance with the current funding agreements</td>
</tr>
<tr>
<td>Negotiate state and territory funding agreements/variations for delivery of organ and tissue donation services for the two year period from 1 July 2016 to 30 June 2018</td>
<td>Continue implementation of the Phase 2 of the CGF/CPIP including the DonateLife peer hospital audits</td>
<td>Complete implementation of Phase 2 of the CGF/CPIP including the DonateLife Collaborative</td>
<td>Develop an evaluation process to inform the next steps of the CGF/CPIP</td>
</tr>
<tr>
<td>Implement and monitor Phase 2 of the Clinical Governance Framework (CGF)/Clinical Practice Improvement Program (CPIP) including the DonateLife Collaborative learning framework (including best practice model for requesting consent)</td>
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A key element of the Public Governance, Performance and Accountability Act (PGPA) is the implementation of an enhanced whole-of-government performance framework. The performance framework is based on Section 38 of the PGPA Act, which requires all Commonwealth entities to measure and assess their performance and is underpinned by the principle that confidence in the efficient, effective and proper use of public resources is supported by a strong performance framework.

Indicative national and jurisdictional organ donation key performance indicators for projected donation and transplant trajectories have been in place since 2012. Our aim is for Australia to achieve an organ donation rate of 25 dpmp by 2018.

Note: Performance measures are reported by calendar year to align with Australian and international donation and performance reporting practice. Progress against these performance measures will be reported in the OTA Annual Report and progress reports on donation and transplantation activity.

* Performance Measures 1 and 2 are time limited targets and progress is measured using national organ and tissue donation and transplantation data reported by the Australia and New Zealand Organ Donation Registry. These targets will be reviewed annually and the Strategic Plan will be updated if required.

While Performance Measure 2 is specific to deceased donors, public reporting will include transplant recipients from deceased donors per million population as well as transplant recipients from combined deceased and living donors per million population.
2015–16 STRATEGIC PRIORITIES

During 2015–16, the Organ and Tissue Authority (OTA), in partnership with state and territory governments and the DonateLife Network, will continue to remain focused on the delivery of the national reform programme objectives and outcomes to achieve continued and sustained increases in organ and tissue donation.

The OTA remains focussed on supporting the Australian Eye and Tissue Sector and will support the delivery of the independent Economic Analysis of the Australian Eye and Tissue Sector, as well as the implementation of any recommendations according to Commonwealth and State and Territory government directions.

Our efforts will focus on five key priority areas:

1. Implementing Phase 2 of the Clinical Governance Framework

The OTA, in partnership with State and Territory Governments and the DonateLife Network, will implement Phase 2 of the Clinical Governance Framework and Clinical Practice Improvement Program (CPIP).

CPIP Phase 2 will involve a refreshed approach to the implementation of the Hospital Activity Plans. It will also involve additional support for DLN staff from their interstate colleagues at paired hospitals through the DonateLife Collaborative. The DonateLife Collaborative will also include a focus on those hospitals with the greatest potential to increase deceased donation rates. The DonateLife Collaborative will culminate with peer hospital audits undertaken by DLN, OTA and state and territory health department staff to further strengthen the delivery of organ and tissue donation specialist services in key DLN hospitals across Australia.

2. Continuing to deliver specialist education to health professionals involved in conversations with families about the opportunity for donation

Education opportunities for health professionals involved in family donation conversations will continue to be developed and delivered. This work will contribute to increasing the donation consent rate. Advanced Family Donation Conversation (FDC) workshops will be developed to provide treating clinicians and donation specialists with increased knowledge and skills to support families in making donation decisions. In addition, an Eye and Tissue FDC workshop tailored to telephone-based family consent for eye and tissue donation outside of the hospital setting will be developed and delivered.

3. Developing a national vigilance and surveillance framework for organ donation and transplantation

Endorsement of the National Vigilance and Surveillance Framework to further support safety and quality in organ donation for transplantation will be sought from states and territories and key stakeholders. The Framework will support the investigation, resolution and learning from adverse outcomes related to organ donation for transplantation. In addition, a Vigilance and Surveillance Expert Advisory Committee will be established to provide advice on appropriate evaluation, reporting and remedial action required for notified adverse events related to deceased organ donation for transplantation.

4. Commencing development of the Australian Organ Matching System

Development of the Australian Organ Matching System (AOMS) will commence to replace the current organ matching system. The AOMS will be developed with the functionality to adapt in an agile and timely manner to implement future clinical innovations in the matching and allocation of donor organs. The system will allow for optimal matching of transplant recipients through the application of best-practice algorithms to further maximise the equity of access and clinical outcomes of transplants in Australia.

5. Conducting community awareness and education activities on organ and tissue donation

The number of registrations on the Australian Organ Donor Register (AODR) will be increased by improved awareness of the importance and process of registration, including introducing the functionality for electronic signatures. Increased AODR registration, together with improved family knowledge of donation decisions, will provide greater certainty of an individual’s donation decision for clinicians and families at the family donation conversation. The electronic registration process will be supported by the OTA through the implementation of a national online donor registration campaign and revising the Professional Education Program to incorporate AODR changes.