

Australian Organ and Tissue Donation and Transplantation Authority



# CORPORATE PLAN 2025–26





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#### **Acknowledgement of Country**

The Organ and Tissue Authority acknowledges Traditional Owners of Country throughout Australia and recognises the continuing connection to the land, waters and communities. We pay our respects to Aboriginal and Torres Strait Islander cultures, and to their Elders past and present.

Aboriginal and Torres Strait Islander people should be aware that this document may contain images or names of people who have since passed away. Artwork by Mali Isabel for the Organ and Tissue Authority's Reconciliation Action Plan.



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### Introduction

#### Message from the Chief Executive Officer



As the Accountable Authority of the Organ and Tissue Authority (OTA), it is my pleasure to present the OTA's Corporate Plan 2025–26, as required under paragraph 35(1)(b) of the Public Governance, Performance and

Accountability Act 2013 (the PGPA Act). This plan is informed by the OTA's Strategy 2022–2027 and covers the 4-year period of 2025–26 to 2028–29.

The OTA is a statutory authority established in 2009 by the *Australian Organ and Tissue Donation and Transplantation Authority Act 2008* and is a non-corporate Commonwealth entity under the PGPA Act. The OTA operates within the Health, Disability and Ageing portfolio and reports to the Assistant Minister for Health and Aged Care, Assistant Minister for Indigenous Health and Assistant Minister for Women.

Our purpose is to save and improve the lives of more Australians through organ and tissue donation and transplantation. Collaboration continues to be integral to achieving our purpose. Working in partnership with our key stakeholders, we are well placed to continue to increase donation and transplantation activity as seen in recent years. To achieve this, we will continue to prioritise building support across the community, optimising opportunities in the clinical sector, and enhancing systems to enable quality outcomes.

I encourage all Australians to talk about donation with their family and, for those who are 16 years and over, to register to be an organ and tissue donor. It only takes one minute at <a href="donatelife.gov.au">donatelife.gov.au</a> or on your Medicare account.

**Lucinda Barry AM**Chief Executive Officer
26 August 2025

We thank all the generous donors, and their families, who have transformed the lives of people needing a transplant through organ and tissue donation.

We also acknowledge the dedication and commitment of DonateLife donation specialist staff, intensive care units and transplant teams. Transplantation is only possible through the donation of organs and tissues, and its life-changing benefits would not be possible without this shared commitment.

### Purpose

To save and improve the lives of more Australians through organ and tissue donation and transplantation

#### Goals and objectives

The OTA, on behalf of the Australian Government, leads the national DonateLife program to increase organ and tissue donation and transplantation in partnership with the DonateLife Network, state and territory governments, organ donation and transplantation clinical sectors, eye and tissue sectors, and the community.

Build support  More people say yes to donation	Optimise opportunities  Donation and transplantation services deliver the best outcomes	Enhance systems Enable quality outcomes through information, technology and resources
Raise awareness	Identify donors & increase consent	Monitor, collect, analyse & report national performance
Increase family discussion	Drive excellence in donation services	Advance quality, safety & efficiency
Increase registration	Increase safe & equitable transplantation	Sustain specialist resources

#### Values and behaviours



#### Commitment

We are passionate about who we are, our work and our future



#### Collaboration

We work together to achieve shared goals



#### **Excellence**

We strive for the best quality national outcomes



#### Integrity

We operate with trust, respect, honesty and compassion



#### **Innovation**

We keep an open mind and have courage to make improvements

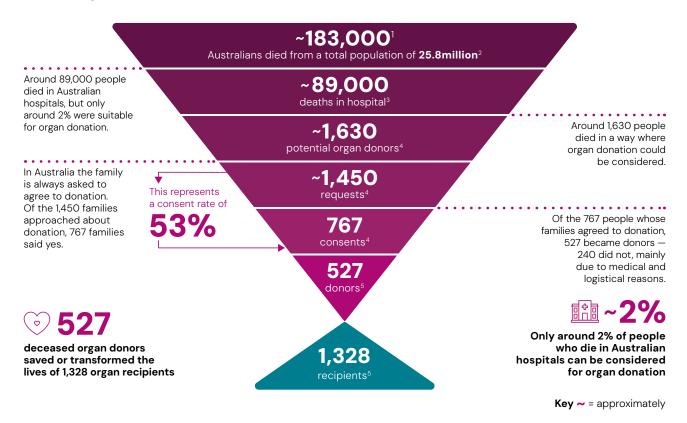
### **Environment**

#### How donation works in Australia

Very few people can become an organ donor when they die. A person must die in a hospital under specific circumstances, in an intensive care unit or emergency department, as organs need to be functioning well to be considered for transplantation. Only around 2% of people who die in Australian hospitals meet the criteria required to be an organ donor.

For someone who is seriously ill, an organ or tissue transplant can mean the difference between life and death, being healthy or sick, seeing or being blind, or being active or never walking again. Transplantation enables people to resume an active role in their family, workplace and community.

Figure 1: Australia's potential deceased organ donor population and transplantation outcomes 2024



#### Sources

- 1 Australian Bureau of Statistics. Causes of death, Australia, 2023 (Released 10/10/2024).
- 2 Australian Bureau of Statistics. National, state and territory population, June 2024 (Released 12/12/2024).
- 3 Australian Institute of Health and Welfare 2022. Admitted patient care 2022-23 (Released 31/05/2024).
- 4 Australian Organ and Tissue Donation and Transplantation Authority DonateLife Audit, January 2025.
- 5 Deceased organ donation in Australia, Australia and New Zealand Organ Donation Registry, December 2024.

#### The DonateLife program

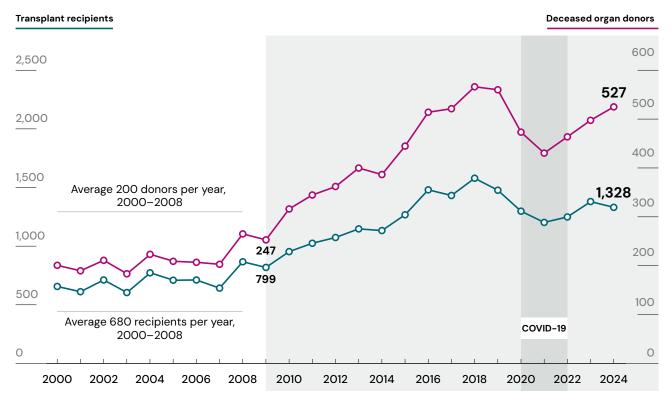
Currently there are around 1,800 Australians on the organ transplant waitlist and a further 14,000 people on dialysis, many of whom could benefit from a kidney transplant. With the rising prevalence of chronic disease and advancements in medical technology, transplantation is the optimal and sometimes only treatment option for people with organ failure.

Evidence demonstrates that a coordinated and consistent national approach across the hospital system and clinical practice, with sustained public awareness, leads to improvements in donation and transplantation rates. The foundations of the DonateLife program to increase organ and tissue donation and transplantation have been developed with reference to international best practices and adapted for the Australian environment.

Since the DonateLife program began in 2009 there have been 6,944 deceased organ donors and 19,469 organ transplant recipients. Despite a decrease in donation activity throughout the COVID-19 pandemic, since 2021 we have observed a continued and slow recovery of organ donation rates. In 2024 there were 527 deceased organ donors, a 3% increase compared with 2023. However, there was a reduction in the number of organs suitable for transplant, resulting in a 5% decrease in transplant recipients.

Collaboration remains integral to increasing organ and tissue donation and transplantation in Australia. As we continue to navigate pressures across the health system, workforce and community, we work closely with all governments, the DonateLife Network, the transplantation sector, the eye and tissue sector, hospitals and the community to deliver the DonateLife program. While the program has driven significant progress, ongoing challenges and emerging opportunities remain across the donation and transplantation sectors and must be addressed to support future growth so that all Australians in need of a transplant have equitable access.

Figure 2: Deceased organ donation and transplant recipients 2000-2024



Note: the DonateLife program commenced in 2009

#### Increasing the number of people who say yes to organ donation

With only a small number of potential donors each year, increasing consent – the number of people who say yes to organ donation - is critical to increasing our donation rate and to achieving the OTA's intended purpose. Australia has an 'opt-in' donation legal consent system. In practice, this means that donation is voluntary and that family agreement is sought when donation is possible, so it is important that people also let those closest to them know if they want to be an organ donor.

In 2024 there were 1,630 people (of the approximately 89,000 people who died in Australian hospitals) who died in such a way that organ donation could be considered. In Australia, the family is always asked to agree to donation. In 2024, 1,450 families were asked about donation in the hospital and, of these, 767 families said yes to donation - representing a national consent rate of 53% - resulting in 527 people becoming organ donors. This consent rate contrasts with research which shows that 4 in 5 Australians say they support organ donation.

Several factors influence whether families consent to organ donation. These include whether the wishes of the potential donor are known, religious and cultural beliefs, family dynamics, and the way the donation conversation is handled by the clinical team. Lack of knowledge about organ donation and concerns about the medical process also play a role.

The OTA works with the DonateLife Network to enable best practice approaches to support families in their decision-making by:

- encouraging Australians to register on the Australian Organ Donor Register and promoting family discussions about donation. We know that:
  - more than 80% of families consent to donation when their family member is a registered donor
  - close to 60% of families consent to donation when they know if their family member wanted to be a donor
  - the consent rate drops to below 40% when their family member was not a registered donor and had not discussed donation with the family
- · increasing the involvement of highly trained donation nurse specialists in collaborative family donation conversations in the hospital setting. We know that more families consent to donation when they have the opportunity to discuss it with a donation specialist nurse, with consent rates more than 30% higher than when a donation specialist nurse was not involved.

In 2022 the OTA set a national target of increasing organ donation registration to 50% and increasing the national consent rate to 70% by 2027. This would result in an estimated extra 400 transplant recipients per year. However, without investment in large-scale public marketing campaigns and mass registration channels, such as the option to register via driver's licence in all states and territories, the OTA will not achieve these targets. Over the next 12 months, the OTA will undertake a detailed review of performance, national priorities and strategy to inform any required revision of performance targets.

#### Registration report card



**≌ 36%** 

In 2024, 36% of eligible Australians were registered on the Australian **Organ Donor Register** 

🗯 7 million

To reach our goal of 50%, an extra 7 million registrations are needed

# Sociocultural attitudes and equity of access for all Australians

Sociocultural attitudes towards organ and tissue donation in Australia play a critical role in influencing willingness and ability to engage with the donation system and, ultimately, individual decisions about registering for and consenting to donation. These attitudes are influenced by a complex mix of cultural beliefs, religious values, family traditions, community norms, and levels of trust in the healthcare system. In Australia, achieving equitable access to donation and transplantation requires not only the availability of medical services but also making sure that all Australians – regardless of cultural background or beliefs – can make informed decisions about donation.

Providing equitable access for all Australians who would benefit from organ transplantation is a key focus area of the National Strategy for Organ Donation, Retrieval and Transplantation (the National Strategy – see page 11) and for the OTA. Actions to improve organ donation registration and consent rates in culturally and linguistically diverse (CALD) communities and among Aboriginal and Torres Strait Islander people are identified as a critical part of the National Strategy.

#### **CALD** communities

We want all Australians to talk about organ and tissue donation, to tell their family that they want to be a donor and, importantly, to register. We know that CALD communities in Australia are under-represented in donor registrations but that the demand for transplants is often higher in these communities, driven by factors such as genetic predispositions and healthcare disparities. Communicating with CALD communities about organ and tissue donation in a culturally safe way is therefore important to increasing organ and tissue donation.

Building on our 2023–24 research to identify and understand the key drivers of and barriers to donation, our current research focuses on attitudes, values and beliefs about organ and tissue donation among CALD communities. This includes exploring myths about donation, the main barriers to families' agreement to donation, and insights into what would motivate them to say yes to donation.

This research will inform future communication and engagement strategies to build support for organ and tissue donation. Its aim is to increase the number of CALD people on the Australian Organ Donor Register, promote discussion about organ and tissue donation in CALD families, and increase organ donation consent rates among CALD communities.

### Aboriginal and Torres Strait Islander peoples

Aboriginal and Torres Strait Islander people experience significant challenges in accessing organ and tissue donation and transplantation. Identifying and addressing the causes of this inequity is critical, particularly as only 15% of Aboriginal and/or Torres Strait Islander people with kidney disease receive a kidney transplant, compared to 49% of non-Indigenous Australians.

Culturally appropriate education programs and resources for Aboriginal and Torres Strait Islander people are required so that all potential transplant recipients, including Aboriginal and Torres Strait Islander people, receive information that is appropriate. Community-led engagement and culturally safe discussions will be necessary to achieve this goal.

To promote and drive changes leading to equitable access to transplantation services, we will continue to collaborate with the National Indigenous Kidney Transplantation Taskforce. The taskforce was established to improve access to kidney transplantation for Aboriginal and Torres Strait Islander people, ensuring culturally safe, equitable and effective pathways to care. Through advocacy, policy development and collaboration, it works to bridge the gap in kidney health outcomes and drive equitable access to transplantation services.

The OTA, and the wider DonateLife Network, continue to progress culturally safe action plans that support engagement with Aboriginal and Torres Strait Islander people on the topic of organ donation in clinical and community programs.

### Policy opportunities and structural reform

The following national initiatives are likely to have a significant impact on the DonateLife program over the next 2 years.

#### National Strategy for Organ Donation, Retrieval and Transplantation

The National Strategy for Organ Donation, Retrieval and Transplantation, developed in response to the review of the Australian organ donation, retrieval and transplantation system undertaken in 2018, was endorsed by all Australian governments in 2024. The National Strategy works in conjunction with, and builds on, the OTA's Strategy 2022–2027. It outlines 4 priorities:

- greater national coordination of the organ donation, retrieval and transplantation system
- equitable access for all Australians needing a transplant, including for people living in rural and regional Australia and for Aboriginal and Torres Strait Islander people
- enhanced organ retrieval and transplantation capability and capacity
- · better systems for data collection and reporting.

The National Strategy, led by the Department of Health, Disability and Ageing and supported by all governments, represents an opportunity to build on the DonateLife program's successes to date and expand nationally consistent and equitable practices across the end-to-end donation, retrieval and transplantation systems. Achieving the vision in the National Strategy will require substantial commitment and investment from all governments, as well as strong collaboration with clinical and community stakeholders. An implementation approach is still to be determined.

### Australian Law Reform Commission review of human tissue laws

The OTA continues to play a key role in the Australian Law Reform Commission inquiry into human tissue laws. It has been almost 50 years since human tissue Acts commenced in Australian states and territories, and over this time donation and transplantation practices, technologies and expectations have changed significantly. There are now inconsistencies between human tissue laws which make their application complex and sometimes impractical.

The Australian Law Reform Commission inquiry provides an opportunity for all Australian governments to review the human tissue Acts and develop recommendations to harmonise legislation impacting human organ and tissue donation, retrieval and transplantation so that the state and territory laws are integrated, are effective and align with contemporary issues and expectations. The inquiry's final report is expected in August 2026.

### Independent Health and Aged Care Pricing Authority organ and tissue project

The OTA has been identified as a key stakeholder to support the Independent Health and Aged Care Pricing Authority organ and tissue project, which is focused on reviewing the costs and pricing associated with organ donation, retrieval and transplantation services in the hospital environment. The OTA will continue to support this crucial project for the organ and tissue sector as it seeks to align funding with the actual costs of delivering these services, to support the ongoing viability of organ donation and transplantation in Australia. The project is due to conclude in early 2026.

### **Emerging technologies** and innovation

The OTA and the DonateLife Network continue to monitor the international landscape for new technologies and emerging approaches to clinical practice, consent systems, and community engagement and registration to help close the gap between the number of organs suitable for transplant and the number of people requiring a transplant. Emerging approaches include:

- efforts to expand the pool of potential donors through clinical approaches, such as extended medical criteria for donors
- the use of machine perfusion, which is transforming the way donated organs are preserved and assessed before transplantation, resulting in more organs being suitable to be transplanted
- offering more choice to patients who choose voluntary assisted dying, and enabling them to participate in organ donation as part of their end-of-life care journey
- enhancing education and training for DonateLife staff using a range of technologies, including the use of e-learning platforms and online modules, virtual workshops and webinars, and simulation-based tools that provide practical, valuable and interactive delivery of the training
- advancements in OrganMatch the national organ waitlisting, matching and allocation system.

### Cooperation

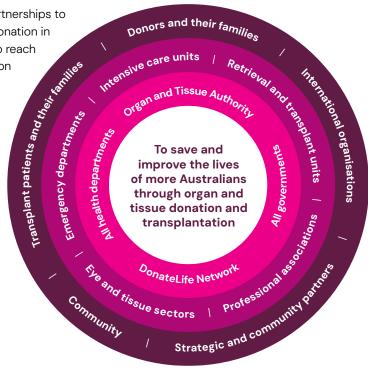
Collaboration is integral to increasing donation and transplantation rates in Australia.

The OTA provides leadership to drive, implement and monitor a national approach in partnership with the DonateLife Network. We collaborate with the Australian Government Department of Health, Disability and Ageing, state and territory governments, the broader organ donation and transplantation clinical sectors, the eye and tissue sectors, hospitals and community organisations, who also provide advice through our advisory committees to inform and support the delivery of the DonateLife program.

The OTA has a range of strategic and community partnerships to increase public awareness about organ and tissue donation in Australia. This includes partnerships supporting us to reach target audience groups that are under-represented on the Australian Organ Donor Register:

- people aged 16 to 30
- · First Nations people
- · culturally and linguistically diverse people.

Figure 3: Collaboration environment



#### The DonateLife Network

The Australian Government, through the OTA, provides funding to state and territory governments to deliver donation services consistent with the DonateLife program.

Each state and territory has a DonateLife agency, a leadership team, and hospital-based medical and nursing donation specialist staff. Agency staff also include educators, communication officers, donor family support officers, and data and audit personnel. These teams are referred to as the DonateLife Network.

#### The DonateLife Network includes



DonateLife agencies across Australia



donation specialist staff across Australia



hospitals

### Capability

The OTA relies on key capabilities to achieve our purpose and support the government's priorities, ensuring that we can respond flexibly to the challenges, risks and opportunities in our environment.

Analytics and technology

People and culture

Communication and stakeholder engagement

Clinical expertise











#### **Analytics and technology**

We harness our expertise, data and technology assets to provide national insights and improve donation and transplantation outcomes across Australia.

#### We aim to:

- have technologies in place to access, create and communicate information and ideas, solve problems and work collaboratively
- safeguard the confidentiality, integrity and availability of information and data through robust governance processes
- provide high-quality data to inform decision-making and drive improvement in organ and tissue donation outcomes and clinical practice
- enhance the efficiency, accountability and transparency of the donation organ allocation and offer process
- monitor and uplift our cybersecurity maturity in line with the Protective Security Policy Framework.

#### We will enhance our capability by:

- further investing in key applications that inform and enable the donation, retrieval and transplantation process, including the Electronic Donor Record, DonateLife Audit and OrganMatch
- growing our technical expertise, including our data extraction, integration and analysis skills, through improvements in skill sharing and expanded collaboration in analysis and problem solving
- building understanding of the donation and transplantation sectors and organ donation process by working closely with the DonateLife Network, the clinical sector and our partners
- engaging with partners to improve our technology infrastructure and enhance our cybersecurity posture
- improving governance processes in line with legislation, such as the *Data Availability and Transparency Act 2022*, and changes in clinical and data best practices.



We are committed to building a positive culture and harnessing our diverse skills, experience and qualities to achieve our purpose.

#### We aim to:

- continue to foster a culture which is inclusive, psychologically safe and positive and which minimises psychosocial risks
- · uphold and champion integrity every day
- build our cultural literacy, diversity and inclusion practices so that our employees belong and thrive
- maintain a healthy working environment that supports employees to choose a sustainable pace
- support employee agency by enabling autonomy and building employee capabilities
- encourage innovation and a workplace culture that promotes open discussion of risk and exploration of new ideas, empowering employees to act and to learn from their mistakes.

#### We will enhance our capability by:

- engaging in proactive workforce planning which will enable us to attract and retain the right people, support a positive workplace culture and tackle immediate and emerging challenges
- improving the workplace experience by listening to our employees through the Australian Public Service (APS) Employee Census survey and providing an action plan to address the results
- building cultural competency to acknowledge, celebrate and learn more about the significance of First Nations peoples, communities, histories and cultures, including through implementing a Reconciliation Action Plan and providing mandatory cultural competency training across our workforce
- implementing actions from the APS reform agenda, including bolstering integrity, outwardly engaging and strengthening the capability of our staff.

In line with the APS Strategic Commissioning Framework, we will continue to review how we deliver the core work of the OTA, including how our existing functions and roles are resourced.

The OTA uses contractors, labour hire and consultants in very limited circumstances. The OTA is not expecting a reduction in outsourcing expenditure in 2025–26.



#### Communication and stakeholder engagement

We apply evidence-based communication and engagement methods, in collaboration with the DonateLife Network and stakeholders, to build support for organ and tissue donation – encouraging Australians to register and talk to their family about donation.

#### We aim to:

- lead a nationally consistent team of professional communication experts across Australia in collaboration with the DonateLife Network
- partner with a range of local and national stakeholders, media, community groups, professional organisations and governments to extend the reach of public awareness messages and activities into target audience segments
- use data, insights and research to deliver targeted communication and engagement activities that increase DonateLife brand awareness, and identify key opportunities for behavioural change to increase the number of new registrations on the Australian Organ Donor Register and prompt family discussion about donation
- · make our communication accessible to all
- be culturally safe, appropriate and inclusive in our engagement and communication.

#### We will enhance our capability by:

- implementing communication and engagement strategies to deliver nationally focused and consistent activities to increase awareness, drive new registrations on the Australian Organ Donor Register and increase family discussion
- using audience segmentation and research findings about attitudes and behaviour to build support for organ and tissue donation
- strengthening the DonateLife digital presence, using data and insights about audience behaviour to optimise digital content and channels for target audiences such as First Nations peoples, young people, and culturally and linguistically diverse groups
- actively collaborating with a range of stakeholders, advocates and partners to increase public awareness about organ and tissue donation in Australia.



We bring together clinical expertise from across the DonateLife Network and the clinical sector to drive nationally consistent best clinical practices that deliver the best outcomes, so that more people have access to life-changing transplantation.

#### We aim to:

- drive nationally consistent best clinical practices and efficiencies in donation and transplantation
- lead the development of clinical guidelines and standards to drive a safe, efficient and effective system
- lead the DonateLife program based on international clinical best practice
- maintain vigilance and surveillance to enhance safety across the organ donation and transplantation sectors
- support and listen to families who make the decision to donate
- deliver a high-quality clinical organ donation education and training program.

#### We will enhance our capability by:

- guiding and participating in expert committees and working groups to draw on specialist skills and capabilities within the DonateLife Network and among sector partners
- implementing the OTA's National Education Program, which further develops the skill set of DonateLife donation specialists and clinicians, who play a critical role in caring for the donor, managing the process, engaging with families, and providing care in the hospital
- continuing to review the Australian Donor Risk
   Assessment Interview so information on donors is
   relevant and useful to the transplantation sector
- collecting data on donor family experience to understand how families experience donation and how we can improve the donation process
- engaging with hospitals to cultivate relationships, grow best practice and further improve organ donation performance outcomes
- working with the Australian Government Department of Health, Disability and Ageing and state and territory governments to implement the National Strategy for Organ Donation, Retrieval and Transplantation and, with the sector, implement the National Eye and Tissue Sector Framework
- undertaking further enhancements to our national vigilance and surveillance system to further develop the efficacy and safety of the Australian donation and transplantation system
- driving further enhancements to the OrganMatch system to increase safe and equitable transplantation.

# Risk oversight and management

The OTA's CEO, as the Accountable Authority, is responsible for risk oversight and management.

The OTA has an appropriate system of risk oversight, management and internal control consistent with section 16 of the PGPA Act, the Commonwealth Risk Management Policy and AS ISO 31000:2018 Risk management – principles and guidelines.

Our risk management practices are also informed by internal assurance activities that assess the effectiveness of our current controls and whether further measures are necessary. The OTA's Audit and Risk Committee, established in compliance with section 45 of the PGPA Act, also reviews and advises on the appropriateness of our audit and risk frameworks.

We recognise that effective risk management is a critical component of sound corporate governance, particularly in relation to the delivery of outcomes, transparency and accountability to the portfolio ministers and the parliament.

#### Desired risk culture

Our risk culture is a shared set of values, attitudes and behaviours that shape how staff engage with risk in the activities they complete at work. Our risk culture needs to be championed by all staff and managers, every day.

The OTA strives to have a positive and effective risk culture – an environment that supports open discussion about uncertainties and opportunities, enables evidence–based decision–making every day, encourages staff to speak up, and provides a channel for the escalation of concerns where necessary.

The OTA regularly reviews its risk management practices and behaviours to enable a supportive and collaborative workplace culture that promotes open and regular discussion of risk, encourages staff to explore new ideas, and empowers everyone to act and to learn from every decision.

Our risk culture in practice includes:

- · proactively identifying and managing risks
- · using available risk training resources and tools
- adopting a reflective and lessons-learned attitude to risk
- · engaging in open and honest conversations about risk
- clearly identifying risk responsibilities, decision-making roles and escalation procedures
- working closely with our partners and stakeholders to understand our shared risks
- having leaders at all levels model our desired risk culture.

### Risk appetite and tolerance

We face a range of risks reflecting the diversity of activities we undertake to fulfill our purpose – to save and improve the lives of more Australians through organ and tissue donation and transplantation.

Our risk appetite statement: The OTA engages with higher levels of risk, particularly for innovation to achieve community and clinical outcomes. However, the OTA does not want to engage with risks that could harm our people, the DonateLife Network or the community.

We only tolerate risks that enable us to:

- · achieve our stated objectives efficiently and effectively
- · comply with all applicable laws and regulations
- · conduct our business in a safe and sound manner.

Our tolerance for risk is highly dependent on the activity undertaken and the views of our partners and stakeholders.

We have identified 4 core areas of enterprise-level risk that may impact our ability to achieve our purpose.

#### **Enterprise risks**

#### Table 1: Enterprise risks, management strategies and tolerance

#### **Risk statement** Management strategies Tolerance level and statement People Failure to attract, engage Offer a flexible workplace culture that invests We have a low tolerance and retain high-quality, in staff wellbeing and life-long learning for any activities that may committed people cause harm to the safety Actively and regularly engage with staff through leads to insufficient and wellbeing of our people. staff surveys and employee consultation - taking capability to deliver We have a high tolerance action as required for taking a flexible approach Leverage our workforce strategy, to enable the to recruiting and retaining right capability to be attracted and retained into an engaged, diverse and the future skilled workforce. **Engagement** Ineffective collaboration Design communications and engagement initiatives We have a high tolerance for using data, insights and research to maximise with a range of engaging with our stakeholders and partners to build support for stakeholders, advocates awareness opportunities, specific to audience needs and partners means that donation, optimise opportunities Maintain formal governance structures to we do not build public in the clinical sector and enhance collaborate and seek expertise from a range support for donation systems to enable quality of stakeholders and partners and we fail to increase outcomes. Build and maintain key relationships through donation rates so that consultation, sharing knowledge and developing more people can receive solutions with a focus on shared outcomes a transplant Delivery Failure to optimise Maintain formal governance structures to We have a low tolerance for any opportunities with the collaborate and seek expertise activities that may cause harm clinical sector or improve to the safety of the community. Work with key stakeholders to ensure the most quality outcomes leads We have a high tolerance for appropriate and effective processes, systems and to decreased or less optimising opportunities with resources to deliver services effective donation and the clinical sector to improve Build and maintain key relationships through the quality of donation and transplantation outcomes consultation, sharing knowledge and developing transplantation outcomes. solutions with a focus on shared outcomes Use evidence, standards, evolving technology and techniques to drive clinical innovation Increase capability and capacity in organ donation and transplantation Information and technology Inadequate information Partner with trusted suppliers to enable information We have a low tolerance for and technology systems and technology to be available, secure and well inappropriate, illegal or fraudulent and infrastructure leads maintained and enhance our cybersecurity posture access to systems, which might to interruption of critical result in the exposure of personal · Ensure adequate business continuity processes services and/or loss of data and critical information. are in place to respond to disaster events We have a high tolerance key data Improve governance processes in line with for innovative information new legislation and changes in clinical and technology and consistent data best practices practices for lawful sharing

**Corporate Plan** 2025–26 **18** 

of data and information.

### **Performance**

The OTA's purpose is to save and improve the lives of more Australians through organ and tissue donation and transplantation.

Our Strategy 2022–2027 articulates our goals of Build support, Optimise opportunities and Enhance systems. Each goal represents a key activity, supported by 3 objectives.

The OTA's annual planning and performance reporting cycle enables us to be transparent and accountable to the parliament and the Australian public. Our planning processes are undertaken in consultation with our key stakeholders and informed by insights from our advisory committees with clinical expertise and from lived experience of donor families and recipients.

Our performance measures provide information on how well the OTA is delivering its purpose and help the OTA's leadership and staff to understand the impact of their activities in delivering our purpose.

The OTA's Annual Report contains our Annual Performance Statements, which assess our performance against our performance measures and provide narrative and analysis. Overall results of the DonateLife program are reported annually in the Australian Donation and Transplantation Activity Report. Performance measures are reported by calendar year to align with Australian and international donation and performance reporting practice.

Figure 4: Planning and performance reporting framework

Planning	Performance reporting
Strategy	Australian Donation and Transplantation Activity Report
Portfolio Budget Statements	Annual Report
Corporate Plan	(Annual Performance Statements)
Operational plans	Operational reporting
Individual development plans	Individual performance reviews

#### Our performance measures

The OTA's performance measures are designed to assess what we have delivered, how effectively it was delivered, and the resulting benefits, providing a clear picture of what we aim to achieve over the next 4 years. We will report annually on our performance against the measures and review the measures each year to ensure they remain relevant and appropriate.

The OTA's measures and targets were set as part of our Strategy 2022–2027, based on the external environment context at the time. They include the performance targets set by all governments in 2009 when the agency was established.

Since that time much has changed in our operating environment – see the Environment section for more information. Some of our targets can now only be achieved with commitment and investment from all governments.

This Corporate Plan maintains the targets set by our Strategy 2022–2027; however, over the next 12 months, the OTA will undertake a detailed review of performance, national priorities and strategy to inform any required revisions.

Our performance measures are demonstrated in the framework in figure 5 below. Our purpose measures for the DonateLife program are to increase the donation rate and to increase the transplantation rate. Our purpose is supported by 3 key activities, which are our goals. Each activity has performance measures to guide us in delivering our purpose.

Figure 5: Performance measures overview

#### **Purpose**

To save and improve the lives of more Australians through organ and tissue donation and transplantation

#### Outcome and program

#### Outcome 1:

Improved access to organ and tissue transplants, including through a nationally coordinated and consistent approach and system.

#### Program 1.1:

A nationally coordinated system for organ and tissue donation for transplantation.

#### DonateLife program

#### Increase the donation rate

#### Performance measures:

- Deceased organ donors per million population Estimated donors per year
- Living organ donors per million population Estimated living donors per year

#### Increase the transplantation rate

#### Performance measure:

Transplants per year, from deceased and living donors

#### Goals (Key activities)

#### **Build support**

More people say yes to donation

#### **Optimise opportunities**

Donation and transplantation services deliver the best outcomes

#### **Enhance systems**

Enable quality outcomes through information, technology and resources

#### Performance measures:

- Eligible Australians (16 years and over) are registered on the Australian Organ Donor Register
- Registered donors have discussed donation with their family
- Eligible Australians (16 years and over) are aware of the DonateLife brand

#### Performance measures:

- National organ donation consent rate
- Routine notification to
   DonateLife of all planned end of-life in an intensive care unit
   or emergency department
- Donation conversations with families involve a donation specialist nurse

#### Performance measures:

- Hospital and jurisdictional performance data and analysis disseminated
- Waitlist, donation and transplantation data is publicly available
- Increased utilisation of donation and transplantation information systems

### DonateLife program

#### DonateLife program - performance measures

Increase the donation rate					
Targets	Current	2025	2026	2027	2028
Deceased organ donors per million population (dpmp)	19.4 dpmp	21.5 dpmp	23.3 dpmp	25 dpmp	25 dpmp
Estimated donors per year	527	575	625	680	680
Living organ donors per million population (dpmp)	9.3 dpmp	11.1 dpmp	12.5 dpmp	14 dpmp	14 dpmp
Estimated living donors per year	253	300	340	380	380

#### Rationale

This is a core outcome measure of the national DonateLife program – the number of people who actually become a deceased or living organ donor in Australia, and the number of lives saved or transformed as a result. Access to organ donation and transplantation is essential to the provision of quality healthcare in Australia, especially where providing an organ transplant can be the difference between life and death.

#### Methodology

The number of deceased organ donors is expressed as a total number and as a rate of the Australian population – referred to as donors per million population (dpmp). Organ donation is measured internationally in dpmp, and this provides a standardised, comparable way to assess Australia's organ donation performance with that of other countries.

The number of deceased organ donors is the total number of patients in a calendar year on whom, with family consent for organ donation, an operation commenced for the purpose of organ retrieval for transplantation. This number is also expressed in dpmp.

The number of living organ donors is the total number of people in a calendar year who donate a kidney, or on rare occasions part of their liver, to another person. This number is also expressed in dpmp.

#### Data sources

Australia and New Zealand Organ Donation Registry, which receives deceased organ donation data from DonateLife hospitals through the Electronic Donor Record and living organ donation data through OrganMatch

Australian Bureau of Statistics, National, State and Territory Population

#### **Notes**

The targets for this measure are currently under review. A national target for deceased donation of 25 dpmp was agreed to by all states and territories in 2015. While there has been significant growth in the rates of organ donation and transplantation since the national DonateLife program started in 2009, the highest national donation rate achieved to date is 22.2 dpmp in 2018. In 2020 COVID-19 had a direct impact on donation rates and the annual dpmp target was adjusted to reflect this environmental impact. The revised targets reflect a gradual increase towards the agreed target of 25 dpmp. Future revisions to dpmp targets will be aligned with changes to the consent rate targets.

Increase the t	ransplantation r	ate				
Targets	Current	2025	2026	2027	2028	
Transplants per year, from deceased and living donors	1,581	1,730	1,865	2,000	2,000	
Rationale	This is a core outcome measure of the national DonateLife program – the number of people who receive an organ transplant that saves or transforms their lives as a result. Access to organ donatic and transplantation is essential to the provision of quality healthcare in Australia, as an organ transplant is the optimal treatment for organ failure and can be the difference between life and dea					
	There are around 1,800 Australians on the waitlist for a transplant and an additional 14,000 peop on dialysis. For someone who is seriously ill, an organ or tissue transplant can mean the differen between life and death, being healthy or sick, seeing or being blind, or being active or never walking again. Transplantation enables people to resume an active role in their family, workplace and community.				n the difference or never	
Methodology	This measure calculates the total number of organ transplants from deceased and living donors.  These include kidney, liver, lung, heart, pancreas, and intestine transplants.					
Data source	Australia and New Zealand Organ Donation Registry, which receives deceased organ donation data from the DonateLife hospitals through the Electronic Donor Record and living organ donation data through OrganMatch					
Notes	The targets for this measure are currently under review. The number of transplant recipients plass a direct relationship to the number of deceased and living donors per year. In most years and transplantation rates increase or decrease together. However, in 2024, for example, there an increase in the number of deceased organ donors but a decrease in the number of transprecipients. Factors that contribute to this include donor age and the donation pathway, both can influence the number of organs suitable for transplantation.					
	Further growth in the number of transplant recipients is reliant on implementation of the National					

Further growth in the number of transplant recipients is reliant on implementation of the National Strategy for Organ Donation, Retrieval and Transplantation. This strategy, led by the Department of Health, Disability and Ageing in collaboration with all governments, focuses on increasing capability and capacity across the transplantation sector and developing a national strategy for increasing living donation rates.

### **Build support**

More people say yes to donation

Sustained community support for donation is crucial to improving donation outcomes in Australia. Donation is only possible through the generosity of individuals and their families who say yes to donation, to save and transform the lives of others.



### Raise awareness



### Increase family discussion



### Increase registration

#### Objective

More Australians understand the need for organ and tissue donation and the benefits it gives to another person needing a transplant.

#### Objective

More Australians talk to their family about organ and tissue donation.

#### **Objective**

All Australians who want to be an organ and tissue donor register on the Australian Organ Donor Register.

#### Why it's important

Access to life-changing and often life-saving transplantation depends on the willingness of people to donate and public awareness of and confidence in the donation process.

#### Why it's important

In Australia, families are always asked to agree to donation. It is important registered donors have discussed their donation wishes with their family.

#### Why it's important

Around 4 in 5 Australians aged 16 and over support organ and tissue donation but only 1 in 3 have registered to be a donor. Being a registered donor has a direct impact on families agreeing to donation.

40%

of families say yes to donation if they are not aware of what their family member wanted. 60%

of families say yes to donation when they know what their family member wanted. 80%

of families say yes to donation if their family member is registered.

### **Build support – performance measures**

	alians (16 years a gan Donor Regist		, otorea on the		
Targets	Current	2025	2026	2027	2028
	36%	43%	46%	50%	50%
Rationale	Several factors influence whether families consent to organ donation, including whether their family member is registered as an organ donor on the Australian Organ Donor Register. More than 80% of families say yes to donation if their family member is registered. Around 4 in 5 Australians support organ and tissue donation ( <i>Australia Talks</i> , ABC, 2021) but only 1 in 3 have registered to be a donor.				
Methodology	This measure identifies the number of people aged 16 years and over who have registered a decision on the Australian Organ Donor Register as at a given date, expressed as a proportion of the Australian population.				
Data sources	Services Australia, Au	ustralian Organ Dono	or Register		
	Australian Bureau of	Statistics, National, S	State and Territory Po	pulation	
Notes	The targets for this measure are currently under review. Current targets are not achievable without commitment and investment from all governments to implement large-scale registration initiatives, such as the national adoption of driver's licences as a registration channel, and national marketing campaigns.				
Registered do	onors have discus	sed donation v	vith their family	,	
Targets	Current	2025	2026	2027	2028
	82%	85%	87%	90%	90%
Rationale	Several factors influence whether families consent to organ donation, including whether the donation wishes of their family member are known. More than 80% of families say yes to donation when they know their family member was registered as a donor on the Australian Organ Donor Register. Family consent is lower, however, when the family was unaware that their family member wanted to be a dono				
Methodology	This measure identifies the proportion of organ donors who were registered on the Australian Organ Donor Register and who had discussed donation with their family.				
Data source	Organ and Tissue Au	thority, DonateLife A	audit (sourced from E	DonateLife hospitals)	
Eligible Austr	alians (16 years a	nd over) are aw	are of the Dona	teLife brand	
Targets	Current	2025	2026	2027	2028
	32%	34%	37%	40%	40%
Rationale	Access to life-changing and often life-saving transplantation depends on the willingness of people to donate, and public awareness and confidence in the donation process. Awareness of the DonateLife brand can create awareness about the need for organ and tissue donation and the benefits it gives to another person needing a transplant. When people recognise and trust the DonateLife brand, this cay influence their decision to become an organ and tissue donor.				
Methodology	A nationally representative sample of Australians aged 18-plus years is surveyed each month. The dat is weighted by age, gender and religion to reflect the latest Australian Bureau of Statistics population estimates. Results are reported as at June each year.				
Data source	Community survey v	ia YouGov			

### **Optimise opportunities**

Donation and transplantation services deliver the best outcomes

Only around 2% of deaths in hospital occur in such a way that organ donation is medically possible, so every donation opportunity is precious. A national approach enables as many Australians as possible to have the opportunity to donate, so that more people have access to life-changing transplantation.



### Identify donors & increase consent



### Drive excellence in donation services



## Increase safe & equitable transplantation

#### Objective

DonateLife receives notification of all patients approaching end-of-life in intensive care and emergency departments for assessment for potential organ donation.

#### Objective

Lead, implement and monitor nationally consistent best donation practice in Australia through clinical practice improvement initiatives to provide exceptional care throughout the donation process.

#### **Objective**

Support the donation and transplant sectors to adopt best clinical practices policy and technology that enables optimal organ allocation and utilisation so more people have access to life-changing transplantation.

#### Why it's important

Notification to DonateLife means the opportunity to donate is explored whenever it is possible and that the wishes of individuals are respected. Suitability for donation is ascertained and the person's registration status is checked so their wishes can be made known to their family. Donation specialists assist families through providing accurate information and support, including throughout the entire process if donation proceeds.

#### Why it's important

Donation leading to transplantation is a complex process with many steps. Optimising practices in donor identification, family approach, donor care and assessment, organ allocation and retrieval is important in enabling the best outcomes for donors, for their families and for those on the transplant waitlist.

#### Why it's important

Transplantation is the best and sometimes only treatment option for organ failure, saving or enhancing the life of the recipient, and providing benefits to their family and the broader community. Supporting the sectors to adopt robust practices, policies and frameworks will improve access to and outcomes from organ transplantation.

Data source

### Optimise opportunities – performance measures

Targets	Current	2025	2026	2027	2028
	53%	63%	66%	70%	70%
Rationale	•	tion of families who	onsent to deceased on say yes to donation in the say yes to donation in the say we have a say we have a say we have the say we have a say we h	O	
	organ donor. With on	ly a small number of	stralian hospitals mee f potential donors, inc d improving opportur	creasing family conse	ent in the hospital
Methodology			n (expressed as a per come of the conversa	0 ,	
Data source	Organ and Tissue Au	thority, DonateLife A	audit (sourced from D	onateLife hospitals)	
Notes	without commitment	and investment fro	O	implement the Natio	
	initiatives such as ma ication to Donatel y department	arketing campaigns a	and mass registration		iver's licences.
or emergenc	initiatives such as ma	arketing campaigns a	and mass registration	channels such as dr	iver's licences.
or emergenc	initiatives such as ma ication to Donatel y department	arketing campaigns a	and mass registration  ed end-of-life i	channels such as dr	iver's licences.
	initiatives such as material ication to Donately department  Current  89%  To maximise organ depractice is the notifice emergency department the individual wanted	2025  95%  conation opportunities cation to DonateLife ents. This process end by checking their reinvolvement of a document of a	2026 100% es and ensure families of all patients approanables exploration of egistration status on ponation specialist nurs	2027 100% s receive appropriate aching end-of-life in donation possibilitie the Australian Organ	2028 100% support, best intensive care and s, respects what Donor Register,
or emergenc Targets	initiatives such as material ication to Donately department  Current  89%  To maximise organ depractice is the notifice emergency department the individual wanted and facilitates timely communication where This measure is a key	2025 2025 205 206 206 207 208 208 208 208 208 208 208 208 208 208	2026 100% es and ensure families of all patients approanables exploration of egistration specialist nursile. ator for DonateLife Nament Program, which is and ensure families exploration of ensure families exploration of ensure families exploration specialist nursile.	2027 100% s receive appropriate aching end-of-life in donation possibilitie the Australian Organ se to assist with planetwork hospitals in active channels.	2028 100% support, best intensive care and s, respects what Donor Register, ning and family

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Organ and Tissue Authority, DonateLife Audit (sourced from DonateLife hospitals)

Donation conversations with families involve a donation specialist nurse						
Targets	Current 2025 2026 2027 20					
	87% 89% 92% 95% 95%					
Rationale	Families of potential donors require care, sensitive communication and accurate information about donation. Optimising practices in family approach, donor care and assessment is important in enabling the best outcomes for donors, for their families and for those on the transplant waitlist. Families supported by a donation specialist nurse are more likely to receive the information required throughout the donation process. This has also been shown to significantly improve consent rates.					
Methodology	For cases where the subject of donation was raised with the patient's family by hospital staff, this measure identifies the proportion of family donation conversations that involved a donation specialist nurse.					
Data source	Organ and Tissue Aut	thority, DonateLife A	udit (sourced from	DonateLife hospitals)		

### **Enhance systems**

Enable quality outcomes through information, technology and resources

Underpinning a coordinated and consistent national approach is the effective use of enabling capability – information, technology and resources – an essential part of achieving continuous improvements in clinical practice and community awareness.



# Monitor, collect, analyse & report national performance



### Advance quality, safety & efficiency



### Sustain specialist resources

#### Objective

Monitor, collect, analyse and report information and data to provide evidence, support decision-making and drive continuous improvement in organ and tissue donation and transplantation.

#### **Objective**

The organ donation and transplantation system is safe, efficient and effective through clinical guidelines, timely surveillance practices and the adoption of state-of-the-art technology.

#### Objective

Dedicated resources are available through collective funding from the Commonwealth and state and territory governments to enable the system to have the infrastructure and expertise necessary to support donation and transplantation.

#### Why it's important

Clinical data informs program design and delivery, which drives best clinical practices and efficiencies in donation and transplantation practices. Data about community attitudes, beliefs and expectations is critical in addressing barriers to donation and informing the approach taken to increase donation consent rates.

National performance data is distributed to support strategic decision-making and continuous improvement across the donation and transplantation sectors.

#### Why it's important

Transplant recipients, donors and families, as well as the Australian community, trust that the organ donation and transplantation system is as safe and effective as possible. Optimal systems and state-of-the-art technology enable improvements in efficiency, equity of access, donation and transplant outcomes, and mitigation of emerging risks.

#### Why it's important

Resourcing should not be a barrier to donation and transplantation. An effective system requires funding to employ specialist staff and cover associated donation and transplantation costs.

**260** 

donation specialist staff support ~95 hospitals across Australia

### Enhance systems – performance measures

Hospital and jurisdictional performance data and analysis disseminated						
Targets	Current	2025 and beyond				
	Dashboard and tailored analysis were distributed broadly across the DonateLife Network in a variety of formats, including through self-service options, to inform, shape and monitor hospital clinical practice	Dashboards and tailored analysis are distributed broadly across the DonateLife Network in a variety of formats, including through self-service, to inform, shape and monitor hospital clinical practice				
Rationale	The OTA is committed to promoting data-driven decision-making and enhancing the technology systems that support donation and transplantation to drive clinical best practice. By collecting, analysing and reporting donation data – such as through the DonateLife Audit and the DonateLife Network dashboards – DonateLife agencies, hospitals, clinical specialists and health departments are equipped with timely, high-quality insights to monitor hospital performance, evaluate activities and guide future work. This targeted approach enables hospitals to make more responsive decisions and drive meaningful clinical change to optimise donation and transplantation outcomes.					
Methodology	Analysis of the data products distributed throughout the year, including daily national and jurisdictional dashboards.					
Data sources	Organ and Tissue Authority, DonateLife Audit (sour	ced from DonateLife hospitals)				
	Australia and New Zealand Organ Donation Registry, which receives deceased organ donation data from the DonateLife hospitals through the Electronic Donor Record					
Waitlist, don	ation and transplantation data is publicl	y available				
Targets	Current	2025 and beyond				
	National waitlist, donation and transplant activity metrics are publicly available	National and state patient waitlist, organ donation and transplant activity metrics are publicly available on an annual basis				
Rationale	Public access to waitlist, donation and transplantation data promotes transparency and public trust in organ donation and transplantation systems. It also supports community engagement and awareness of organ donation and transplantation.					
	Analysis of the public data products distributed throughout the year by the OTA or in partnership with the OTA, including the Australian Donation and Transplantation Activity Report, datasets provided by the Australia and New Zealand Organ Donation Registry and transplant outcome registries.					
Methodology	the OTA, including the Australian Donation and Trans					
Methodology  Data sources	the OTA, including the Australian Donation and Trans	stry and transplant outcome registries.  y, which receives deceased organ donation				
	the OTA, including the Australian Donation and Trans the Australia and New Zealand Organ Donation Regis Australia and New Zealand Organ Donation Registry	stry and transplant outcome registries.  y, which receives deceased organ donation ctronic Donor Record				

Increased utilisation of donation and transplantation information systems				
Targets	Current	2025 and beyond		
	Increase use of OrganMatch for waitlist management	Establishment of OrganMatch as the central patient waitlisting, recipient matching and offer management system		
	National capture of adverse events in the Serious Adverse Event Reporting database	National capture of an expanded range of adverse events across the sector in the Serious Adverse Event Reporting database		
Rationale	The use of agreed platforms and systems across the DonateLife Network is integral to the collection, analysis and clinical usage of accurate donation and transplantation data.			
	The OTA supports the use of OrganMatch across the DonateLife Network as Australia's organ waitlisting, matching and allocation system – designed to drive national clinical best practice and the agreed platform to implement nationally consistent best practice in organ offering, allocation, waitlisting and management of patients across the end-to-end donation and transplantation system.			
	The OTA has also established the Australian Vigilance and Surveillance System for Organ Donation and Transplantation, which provides a national framework for the reporting of adverse events and reactions in the Australian donation and transplantation system to identify national trends to inform clinical practice improvements. This is consistent with similar vigilance and surveillance systems globally.			
Methodology	Analysis of user and usage data from OrganMatch and the Serious Adverse Event Reporting database.			
Data sources	LifeBlood, OrganMatch			
	Organ and Tissue Authority, Serious Adverse Event	Reporting database		

