**Transition Action Plan**

August 2022

## National Organ and Tissue Donation, Retrieval and Transplantation System

The last decade has seen significant growth in the donation and transplantation outcomes in Australia. Organ donation rates are increasing as are the number of Australians whose lives are transformed following transplantation.

In 2017, academic literature and media reports highlighted the disparities in access to transplantation.[[1]](#footnote-2) These articles raised the issue of inequitable access to transplant waiting lists for Aboriginal and Torres Strait Islander people and the added challenges experienced by patients in rural and remote areas of Australia. There was also evidence that the growth in donation activity was placing pressure on retrieval and transplant services. Consequently, all governments agreed to a review to examine pre and post-transplantation services and identify barriers to equity of access to transplant wait lists and transplantation services.

The Review of the Australian organ donation, retrieval and transplantation system Final Report[[2]](#footnote-3) (Review Report), released on 21 February 2020, found that the increased organ donation activity has placed downstream pressure on organ retrieval and transplantation services, putting strain on the capacity and capability of the system to maintain growth. Further, inconsistent practices and variable performance nationally have contributed to inequity of access for Aboriginal and Torres Strait Islander Australians and Australians living in rural and remote locations.

In addition, following the 2016 PricewaterhouseCoopers (PwC) Report: *Analysis of the Australian Tissue Sector*[[3]](#footnote-4), all governments agreed to a National Eye and Tissue Sector Framework (the Framework). The Framework provides the overarching principles for the Australian eye and tissue sector including national objectives to achieve the vision that Australians[[4]](#footnote-5) have safe, equitable and ethical access to life‑altering and/or life‑saving tissue transplantation, through a strong and effective Australian eye and tissue donation for transplantation sector.

A national strategy (the Strategy) for the Australian organ donation, retrieval and transplantation system, will provide national direction for a sustainable and equitable organ and tissue donation and organ transplantation system, and will be progressed in conjunction with the Organ and Tissue Authority’s (OTA) *Progressing Australian organ and tissue donation and transplantation to 2025 Strategic Plan*. Consultation with stakeholders will help to ensure implementation of the Strategy is feasible and reflects the needs of the sector.

This Transition Action Plan (TAP) aims to consolidate and progress, under four priority areas, 12 actions which can be progressed over the next 12 months with no additional resourcing, including actions that will inform the Strategy and implementation approach.

Agreement to the TAP demonstrates all Australian governments’ commitment to future action in the organ and tissue donation and the organ retrieval and transplantation system.

Based on the four priority areas of the draft Strategy, the identified actions in the TAP are:

# A national approach to optimise organ and tissue donation, retrieval and transplantation

* 1. Settle future governance arrangements
	2. Agree the role of the OTA
	3. Review funding arrangements for organ donation, retrieval and transplantation
	4. Review funding arrangements for tissue supply
	5. Consider options to improve donor registration to increase consent for donation.
1. Equitable access for Australians who would benefit from organ transplantation, with a focus on Aboriginal and Torres Strait Islander people and those living in rural, regional and remote areas
	1. Review current work informing equitable access to organ transplantation
	2. Review organ allocation processes to support equity and consistency in practice for Australians needing a transplant.

# Enhanced organ retrieval and transplantation capability and capacity to optimise transplant outcomes

* 1. Continue to consider workforce issues across retrieval and transplantation
	2. Review tissue typing arrangements

# Enhanced systems and data collection and reporting to drive clinical best practice

* 1. Expand organ donation to transplantation data and reporting
	2. Expand deceased eye and tissue donation data and reporting
	3. Support OrganMatch for national consistency, equitable and transparent processes
	4. Facilitate eye and tissue sector collaboration

A steering committee comprising representatives from all jurisdictions and the OTA will oversee the delivery of the TAP.

The ‘*Progressing Australian organ and tissue donation and transplantation to 2025 Strategic Plan 2020–21 to 2024-25*, is delivered collaboratively by the OTA, the national DonateLife Network, and Commonwealth, state and territory health departments complements, and will work alongside the TAP, Framework and Strategy.

# A national approach to optimise organ and tissue donation, retrieval and transplantation

## 1.1 Settle future governance arrangements

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| **Action** | Settle future governance arrangements to support implementation of the Framework and the Strategy.  |
| **Rationale for early action**  | Agreed governance arrangements will provide all jurisdictions with the ability to contribute to national organ and tissue donation, retrieval and transplantation policy. Governance arrangements are likely to include a jurisdictional committee comprising senior officials that will provide advice on the national approach to organ and tissue donation, organ retrieval and transplantation. The Commonwealth and jurisdictions are working together on a coordinated approach to support progression of the Framework at the same time as the development of the Strategy. Aligning jurisdictional governance, where appropriate, in both eye and tissue and organ donation, retrieval and transplantation will allow these arrangements to be built upon existing arrangements, enabling Strategy development.National governance arrangements will need to include structures to draw on clinical subject matter experts.  |
| **Implementation** | All governments will work together to agree governance and committee arrangements to facilitate agreed implementation of the Framework and the Strategy.    |

## 1.2 Agree the role of the OTA

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| **Action** | Agree the scope of the OTA’s role in implementing a nationally consistent approach to elements of the retrieval and transplantation system and the eye and tissue sector. |
| **Rationale for early action**  | Clarifying the role of the OTA will inform the development of the Strategy and associated implementation plans, including activities to support the Framework. It may also identify that some elements are out of scope for the OTA.Consultation with all jurisdictions will settle the elements of the reviews of organ donation, retrieval and transplantation and the eye and tissue sector that would benefit from national coordination. This may include:* enhanced stakeholder engagement and collaboration
* national data collection, analysis and enhanced reporting
* professional education and resources
* enhanced national community awareness and messaging
* collaboration with stakeholders to develop and monitor nationally consistent clinical practice guidelines protocols
* improve the efficiency of donation, retrieval and transplantation processes with consideration of current and emerging best practice
* a national approach for transport and other services that support donation, retrieval and transplantation.
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| **Implementation** | The Commonwealth, in collaboration with the OTA, will work with states and territories to clarify any expanded role of the OTA.  |

## 1.3 Review funding arrangements for organ donation, retrieval and transplantation

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| **Action** | Continue to engage with the Independent Hospital Pricing Authority (IHPA) regarding the review of the costing arrangements for all aspects of organ donation, retrieval and transplantation. Request IHPA to complete their work on a costing study and classification review for the classification of all aspects of organ donation, retrieval and transplantation, including both donation pathways, deceased and living donation, and intrastate/interstate retrieval and transplantation (include non-admitted pre and post organ transplantation care). |
| **Rationale for early action**  | The Review Report identified that the current funding arrangements for donation, retrieval and transplantation present challenges for the sector, with concerns that the current arrangements do not allocate funding appropriately or consider all the associated costs. Reviewing funding arrangements will underpin other actions to be included in the Strategy.  |
| **Implementation** | IHPA’s 2021-22 Workplan includes a review of costing arrangements for all aspects of organ donation, retrieval and transplantation, as part of the development of the *Pricing Framework for Australian Public Hospital Services.*[[5]](#footnote-6) It is anticipated that this work will be finalised in 2022.All governments will continue to engage with IHPA regarding a proposed costing study and classification review as recommended by the Review Report. |

## 1.4 Review funding arrangements for tissue supply

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| **Actions** | The Commonwealth, as part of its existing plans, will consider how to enhance prostheses listing and benefit setting to potentially include:* tissues and tissue-based products being included on the Australian Register of Therapeutic Goods;
* assessment of products for comparative clinical effectiveness and outcomes;
* cost-effectiveness and benchmarking of benefits to ensure similar benefits are payable for like tissues and tissue-based products.
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| **Rationale for early action**  | Planned reforms to the Prostheses List arrangements, including a review of Part B items to investigate how item listings are assessed for comparative clinical and cost effectiveness and improved benefit setting, will further support the sustainability of the sector.The reform of Part B of the Prostheses List is being considered as part of a broader program of prostheses reform being delivered under the Australian Government’s Agreement with the Medical Technology Association of Australia. This may include:* Aligning arrangements for human tissue items (Part B) with those of Part A of the Prostheses List
* Developing and implementing, in consultation with the sector, clear guidance to assist providers of tissues and tissue products with new arrangements.
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| **Implementation** | The Prostheses List review is being conducted by the Commonwealth Department of Health with the involvement of key stakeholders. |

## 1.5 Consider options to improve donor registration to increase consent for donation

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| **Action** | Consider options to support increased consent for donation including by leveraging existing processes, such as driver licence applications and renewals. |
| **Rationale for early action**  | Very few people are able to become organ donors at the end of their life. Only around two per cent of people who die in hospitals die in a way that allows organ donation to be considered. In 2020, there were approximately 1,250 potential donors. Australia’s consent rate from this pool of potential donors was 58 per cent resulting in 1,270 people receiving a transplant. If the national consent rate from this pool increased to 75 percent an estimated 300 additional people in Australia would receive a transplant. Registration on the Australian Organ Donor Register (AODR) and family knowing their family member wanted to be a donor make a major difference when families are asked to consent to donation in the hospital. In 2020, 88 percent of families agreed to donation when their family member was registered on the AODR. Increasing the number of people on the AODR will support increased donor consent rates. |
| **Implementation** | The Commonwealth, in collaboration with the OTA and other relevant stakeholders, will work with states and territories to consider options to increase consent for donation. |

# Equitable access for Australians who would benefit from organ transplantation, with a focus on Aboriginal and Torres Strait Islander people and those living in rural, regional and remote areas

## 2.1 Review current work informing equitable access to organ transplantation

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| **Actions** | Leverage the work of the National Indigenous Kidney Transplantation Taskforce (NIKTT), including findings from relevant initiatives, to inform Strategy actions. |
| **Rationale for early action**  | One of the drivers for the Review of the Australian organ donation, retrieval and transplantation system was the reported inequity of access to transplantation for Aboriginal and Torres Strait Islander people. The Transplantation Society of Australia and New Zealand (TSANZ) Performance Report (the TSANZ Report), endorsed by the Commonwealth and published in March 2019, provided 35 recommendations to address inequities in access. Of these, eight recommendations were prioritised, which sought improvements in pre‑transplant care. In June 2019, the Commonwealth funded the NIKTT to implement initiatives based on the Report’s priority recommendations.In response to the TSANZ Report and the Review Report’s findings of inequitable access to transplantation for Aboriginal and Torres Strait Islander people, the final Strategy will include actions that aim to break down geographical, cultural, educational and language barriers to transplantation. Drawing on the work of the NIKTT will be a foundational requirement to develop these actions.  |
| **Implementation** | All governments, through relevant committee arrangements, will consider the work of the NIKTT with a view to aligning and incorporating any endorsed recommendations and initiatives into the Strategy.  |

## 2.2 Review organ allocation processes to support equity and consistency in practice for Australians needing a transplant

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| **Actions** | 1. Continue to support implementation of the work being undertaken by the Transplantation Society of Australia and New Zealand (TSANZ) Renal Allocation Working Group of the renal allocation algorithm:
* Improved access to transplant for highly sensitised patients and other groups who are otherwise very hard to match
* Improved utility of donated kidneysImproved immunological matches for younger patients to reduce sensitisation
1. Continue to work with TSANZ Advisory Committees, transplant units and DonateLife agencies to improve efficiencies across non-renal organ allocation and acceptance processes using OrganMatch.
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| **Rationale for early action**  | The Review Report found that current allocation systems and practices do not take into account major changes and advances in transplantation and other treatment options that have occurred over the past decade. It also identified processes that could be strengthened to improve the timeliness and effectiveness of organ allocation. These actions will support existing work in the sector, and any further work to be progressed through the Strategy, aiming to provide a more equitable and nationally consistent organ allocation system for optimal patient outcomes.  |
| **Implementation** | The OTA and jurisdictions will work with TSANZ and the broader clinical sector in consideration and implementation of the recommendations from the review of renal and the non‑renal allocation working groups  |

# Enhanced organ retrieval and transplantation capability and capacity to optimise transplant outcomes

## 3.1 Continue to consider workforce issues across retrieval and transplantation

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| **Action** | Continue to support workforce planning and capacity at the state and territory level.  |
| **Rationale for early action**  | As outlined in the Review Report, the increased organ donation activity has placed downstream pressure on organ retrieval and transplantation services. A key objective of the *2008* *World’s Best Practice Reform Package on Organ and Tissue Donation for Transplantation* and the ongoing National Program for organ and tissue donation has been increasing the donation capability and capacity within the health system to optimise donation and transplant rates. This continues to be delivered through the four year Strategic Plan for the national donation program. While this has specifically focused on the donation workforce, there is further work required to enhance retrieval and transplantation capability and capacity.  |
| **Implementation** | All jurisdictions will continue to manage workforce capacity and capability which will inform future national planning to be considered as part of the Strategy. |

## 3.2 Review tissue typing arrangements

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| **Action** | Continue to support the phased transition to nationally consistent tissue typing practices commencing with the introduction of Virtual Cross Matching (VXM) assessment of histocompatibility, and consider future options to support national coordination and workforce planning. |
| **Rationale for early action**  | The Review Report found jurisdictional variation in tissue typing practices across Australia. It highlighted the lack of a nationally coordinated approach to drive clinical best practice and adopt new technologies. VXM is being implemented in all Australian tissue typing laboratories following successful introduction in many transplant programs overseas and due to the equipment and reagents for the current complement-dependent cytotoxicity (CDC) crossmatch test becoming unavailable in the near future. This will drive national consistency of processes and will expedite the timeframe for the organ offer process. With financial support from the OTA, TSANZ has established the Virtual Cross Match Working Group to guide the national implementation of VXM, with representation from across the sector and all organ groups.  |
| **Implementation** | The OTA, jurisdictions and TSANZ will work with the clinical sector to support a phased transition to VXM for full implementation by the end of 2022. This will inform future national coordination and workforce planning to be considered as part of the Strategy. |

# Enhanced systems and data collection and reporting to drive clinical best practice

## 4.1 Expand organ donation and transplantation data and reporting

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| **Action** | Continue to support the OTA and data custodians to implement the Data Governance Framework and facilitate access to, and sharing of, national de-identified data.  |
| **Action** | Consider expansion of the availability of hospital donation performance data. |
| **Action** | Consider expansion of data relating to the profile and numbers of patients on kidney transplantation waiting lists with future consideration of wait list data for other organs. |
| **Rationale for early action**  | Access to high-quality data will underpin decision making and drive best clinical practice and outcomes for patients. A comprehensive de-identified data set will also inform the final Strategy, help governments to implement other actions in the Strategy and inform future policy priorities.  |
| **Implementation** | All governments will collaborate with the OTA to implement the Data Governance Framework. The Commonwealth and jurisdictions will collaborate to consider additional data collection that complies with jurisdictional practices and policy.  |

4.2 Expand deceased eye and tissue donation data and reporting

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| **Action** | Identify and develop a robust data set that enables the capture and analysis of deceased eye and tissue donation associated with organ donation |
| **Rationale for early action**  | All Australian governments recognise that an essential part of supporting the sustainability of the Australian eye and tissue sector is the consistent collection and analysis of data.Establishing a national data and reporting framework in consultation with the sector will build upon and link existing data sets and systems wherever possible. All stakeholders in the Australian eye and tissue sector have a role in collecting and providing data to contribute to the national data and reporting framework. This may include donation agencies, tissue manufacturers and distributors, regulators, funders and cost setting agencies, and users of tissues and tissue-based products. |
| **Implementation** | The OTA to work with all jurisdictions and eye and tissue sector stakeholders to identify and develop a robust data set that: * Captures deceased organ donor identification and referral for eye and tissue donation
* Captures requests, consents and retrieval of eyes and tissue from deceased organ donors
* Enables analysis of factors influencing consent for deceased eye and tissue donation
* Expands reporting of graft outcomes for corneal transplants.
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## 4.3 Support OrganMatch for national consistency, equitable and transparent processes

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| **Action** | Agree OrganMatch be used as the national system for real time wait listing of patients for transplantation for all organs and pathways. |
| **Action** | Support delivery of OrganMatch enhancements, informed by clinical feedback, to improve the efficiency of organ allocation and offer process. |
| **Action** | Support OrganMatch to contribute to the best possible clinical outcomes for patients awaiting transplant.  |
| **Rationale for early action**  | The Australian Government funded national OrganMatch system went live in April 2019, replacing the outdated National Organ Matching System (NOMS) that had been in operation since the 1990s. OrganMatch is a world-class system that supports patient waitlisting, optimal immunological matching and organ allocation, with functionality that goes far beyond what NOMS could offer. Ongoing support for OrganMatch is required to continue its use and provide for ongoing enhancements that will improve the efficiency and effectiveness of clinical service delivery. To support equitable and optimal patient outcomes, OrganMatch should be the single national system for real time waitlisting of patients waiting for transplantation.Enhanced OrganMatch functionality will support other actions in the Strategy that enable optimal matching of donors and recipients; benefit patients and clinicians living and working in rural and remote areas; and support equitable access to transplantation for Aboriginal and Torres Strait Islanders. |
| **Implementation** | The Commonwealth funds OrganMatch. Future funding arrangements will be negotiated and agreed with governments.  |

## 4.4 Facilitate eye and tissue sector collaboration

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| **Action** | Support further effective engagement between Australian eye and tissue sector stakeholders to collaborate on clinical practice guidelines, professional education and community awareness initiatives. |
| **Rationale for early action**  | All Australian governments recognise that engagement between Australian eye and tissue sector stakeholders is vital to the ongoing viability and sustainability of the sector, so that Australians have access to clinically-appropriate tissue and tissue-based products. The OTA’s Eye and Tissue Advisory Committee (ETAC) comprises all Australian eye and tissue banks, professionals associations and representatives of the Commonwealth Department of Health, including the Therapeutic Goods Administration (TGA) who have responsibility for the safety, quality and efficacy of the Australian eye and tissue banking sector under the Regulatory Framework for Biologicals.The ETAC is well established and facilitates collaboration and advice on new and emerging issues in the eye and tissue sector. Continued support for the ETAC will enable ongoing sector collaboration and advice in the development, review and delivery of clinical practice guidelines, professional education and community awareness. Key future areas to be progressed with the ETAC include: * Supporting the TGA to review the Therapeutic Good Orders with a view to increasing the number of eye and tissue donations
* Providing advice on national arrangements to the National Incident Room on skin supply in Australia for extraordinary and emergency supply (significant events and disasters).
* Review the ‘Emerging, Re-emerging and Emerged Infectious Diseases (EREEID) Program’ for the eye and tissue sector
* Increasing awareness of eye and tissue donation in the community
* Providing advice on education and training for the DonateLife network to support clinical best practice eye and tissue donation services for deceased donors in hospitals.
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| **Implementation** | The OTA will continue to support the ETAC to progress relevant elements of the Framework and provide the national forum for collaboration and consultation on key issues for the sector.  |

1. For example, Lawton P et al, 2017, ‘Organ Transplantation in Australia: Inequities in Access and Outcome for Indigenous Australians’ *The Official Journal of the Transplantation Society and the International Liver Transplantation Society*, Vol: 101 Issue: 11, pp. 345-346; *Organ transplant system tipped towards non-Indigenous patients,* 2017, radio program, ABC Radio, Sydney 14 December 2017. [↑](#footnote-ref-2)
2. Review of the Australian organ donation, retrieval and transplantation system Final Report<https://www.health.gov.au/resources/publications/review-of-the-organ-donation-retrieval-and-transplantation-system-final-report> [↑](#footnote-ref-3)
3. PricewaterhouseCoopers Report: *Analysis of the Australian Tissue Sector (2016)* <https://www.donatelife.gov.au/about-us/corporate-transparency/government-reports> [↑](#footnote-ref-4)
4. Within the Framework, ‘Australians’ or ‘Australian patients’ refers to Australian residents who are eligible to access health services in Australia. [↑](#footnote-ref-5)
5. This document outlines the principles, scope and methodology to be adopted by IHPA in the setting of the national efficient price and national efficient cost for public hospital services in 2022-23. [↑](#footnote-ref-6)