

Northern Ireland Assembly Health Select Committee

Monday 30th November 2015

Ref: SJ/lf/2015/1108

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Dear Sirs

Re. Human Transplantation Bill

NHSBT has reviewed the proposals to change the legislation regarding consent for deceased organ donation in N Ireland. As the Organ Donor Organisation for the UK, we wish to make it clear that we will work within the legislative systems set out by each of the four UK governments. We have worked closely with policy officials in Wales to make sure that the Human Transplantation (Wales) Act is implemented smoothly and we would expect to provide the same level of support for any legislative change in Northern Ireland.

The comments that follow therefore are limited to three areas:

- Will it be possible to implement the proposals operationally?
- Will implementation increase costs?
- Will the proposals achieve their objective of providing more deceased donor organs for transplantation?

Will it be possible to implement the proposals operationally?

Having compared the proposed legislation with the Human Transplantation (Wales) Act, most of the provisions are identical or very similar and therefore it should be relatively straightforward to implement the legislation.

A new NHS Organ Donor Register has already been built and N Ireland citizens can already register to donate some or all organs; record a refusal to donate and appoint up to two representatives.

The key differences therefore from the position as it stands today are:

- The duty to promote transplantation
- The provision for deemed consent where adults usually resident in N Ireland have not recorded express consent or a refusal.

The inclusion of deemed consent will require all clinicians likely to come into contact with potential donors and their families, to be trained in the legislation.

The role of the family with regard to deemed consent appears to be subtly different from the position in Wales and therefore this element of the training package will need revision. It also presents a challenge to those supporting front-line staff when on call, if the provisions are slightly different in different countries. The NHSBT on call rota covers the entire UK and there is a risk of error and confusion if the deemed consent requirements are different.

Will implementation increase costs?

NHSBT's statistics department has estimated that donor numbers might increase by approximately 14 under the new legislation if it is successful in encouraging families to affirm that the deceased would not have objected to donation. This would probably result in an extra 36 transplants per annum. NHSBT should be able to absorb the operational costs of increased donor numbers within the existing baseline.

We expect that there will be ongoing costs associated with publicising the new law: for example Wales intend to communicate with every citizen as they approach their 18th birthday so they are aware of their responsibilities under the law as well as publicising the law generally.

Will the proposals achieve their objective of providing more deceased donor organs for transplantation?

It is difficult to predict the impact of the proposed legislation. Although the legislation is very similar to that in Wales, it appears to give a more central role to families (or those in a qualifying relationship) and the test of the potential donor's wish is more ambiguous than it is in Wales. It would be helpful to be clearer about what is meant by 'would not have objected' and how this is tested.

For this legislation to have the desired outcome, the public awareness campaign will need to motivate every family to discuss organ donation and understand what their responsibilities would be, should a member of their family be in a position to be save a life through organ donation.

Yours sincerely,

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