



MDE Workshop Participants, Capital Health, Spring 2010

In This Issue

| | |
|--|---|
| Offering a Legacy of Life — Meaningful Donation Experiences | 1 |
| Getting to Know You | 2 |
| Kudos Corner | 2 |
| News from the districts | 3 |
| National Perspective | 4 |
| Donor Family Recognition | 4 |
| Innovative Ideas..... | 5 |
| Stats..... | 5 |
| Did You Know..... | 5 |
| Partner Updates | 6 |
| Contact Us..... | 6 |

Offering a Legacy of Life — Meaningful Donation Experiences

The Professional Education Working Group has led the development and implementation of a four hour workshop entitled “Offering a Legacy of Life: Meaningful Donation Experiences”. The workshop responds to the needs of healthcare professionals to know more about the best ways to talk with a family about organ and tissue donation, using a dual advocacy approach. In dual advocacy the requestor speaks about the benefits of donation to both the donor family and the recipients of the gift of transplantation. Value positive words such as ability, compassion, kindness, inspiration, legacy, celebrate, courage, hope and selflessness are examples of words that

may be used in speaking with a family. The workshop was piloted in Cape Breton and will be offered in all district health authorities. To date over 22 workshops have been held with approximately 160 people participating. One of the participants in the three month follow up had the following comments: “It was a really great feeling when they (family) thanked you for the information and the fact that their loved one will live on through this kind act of giving.” “I just hope that if anything should happen to me or my family and, we can be donors, that there is a nurse who will be there to get us through this wonderful process?”



Cathy Timmons

District Resource Nurses

Cathy Timmons is the District Resource Nurse for the Pictou County Health Authority. Cathy's interest in organ and tissue donation developed while she worked in Intensive Care Units in hospitals in the United States. The interest continued after she returned to the Aberdeen Hospital in New Glasgow and became involved with the Clarica Project on Organ and Tissue Donation in 2002 as a member of the provincial steering committee. Cathy is President of the Operating Room Nurses Association of Nova Scotia. Cathy's OR nursing

experience coupled with her leadership role with the provincial association led her to develop a thorough and detailed step by step guide for operating room nurses on call during tissue procurement, a resource which has been shared with rural operating rooms throughout the province. Her goal at Pictou County Health Authority (PCHA) is to meet donor referral targets through providing professional education and working closely with staff. Cathy is proud of PCHA's involvement in the organ and tissue donation program. ■

DHA Champion



Murdeena Moore, Cape Breton

Murdeena Moore, mother of 2 girls ages 11 and 18 lives in Glace Bay, CB, and is a RN with Cape Breton Regional Emergency Department and Clinical Nurse Lead since 2007. ■

Murdeena is also a facilitator for the Meaningful Donation Experiences (MDE) workshops. She became involved in donation in 2008 and joined the Canadian Blood Services collaborative in 2009. After attending the first MDE pilot she has been a strong advocate in the Emergency Department for approaching families and offering the option of donation. She has participated in several approaches and found the experience very rewarding and is now a champion promoting organ and tissue donation. ■



Pat Lee

As the recently appointed chair of the provincial advisory committee, Pat Lee,

CEO of the Pictou County Health Authority, wants all Nova Scotians to become familiar with the Legacy of Life: Nova Scotia Organ and Tissue Donation program's strategic plan for 2009-2011. He believes that everyone has a role to play in improving organ and tissue donation and supporting awareness: policy makers, physicians, nurses, donation family members, and members of the public.

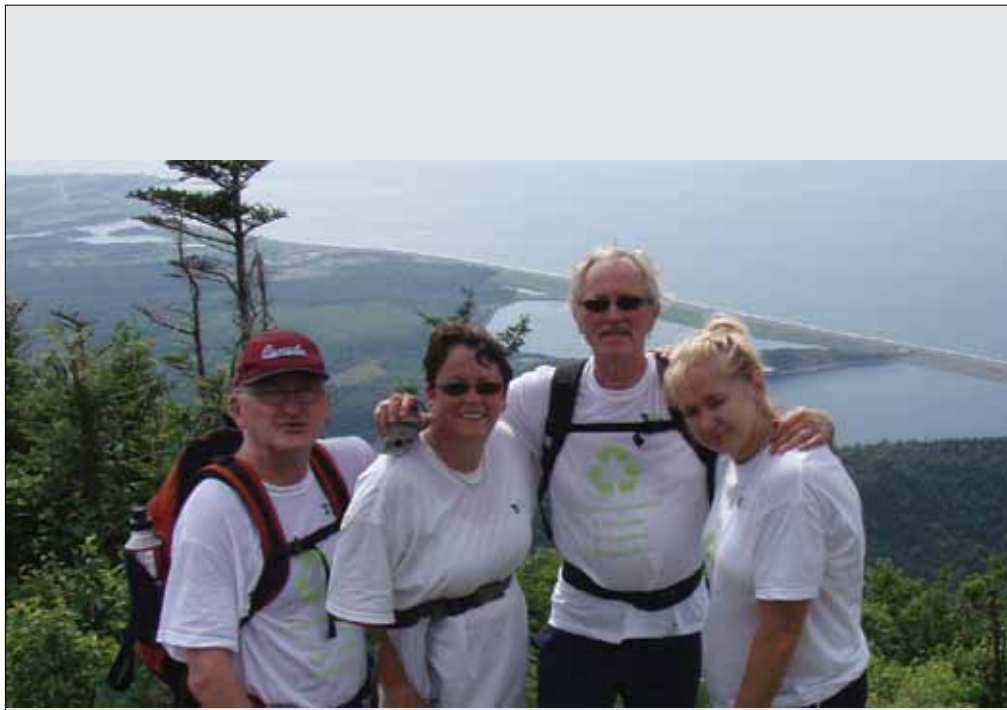
Given that many Nova Scotians are currently waiting for an organ or tissue donation, there is lots of work to do. Each and every one of us can make a difference. We need to encourage the public to talk to their family about organ and tissue donation, to be informed and make their wishes known. As the providers, it is our job to become educated on organ and tissue donation to meet the donor's wishes, support family members during and after the donation and ensure that no possible donations are missed.

According to Lee, a team effort is required to meet the targets set out by the Department of Health. ■

Cumberland Health Authority Awareness Event

During Organ and Tissue Donation Awareness Week in April a creative event was held in Amherst. The First Annual Green Balloon Promenade was well attended and enjoyed by all. Participants of all age groups found something to capture their interest while attending the walk, visiting a mall booth or participating in a flag raising ceremony to highlight

the week. Support was shown by Town Councilor George Baker along with committee members through raising the Legacy of Life flag at town square, Amherst. The enthusiasm and response of the community is encouraging and the volunteers participating in the event are appreciated by Legacy of Life staff.



Rick Bedard, Ruth Bedard, Gerry Charrett, Moria Charrett

Cape Breton Highlands Three Peak Challenge

Dr. Rick Bedard a cardiologist at the Cape Breton Regional Hospital was a proud supporter of the Legacy of Life Program during his Hike Three Peak Challenge on July 17th. Dr. Bedard, his wife Ruth, Gerry and Moria Charrett were one of several teams that participated in the 12-hour three-mountain hike. During the hike up the Acadian Trail, the team donned their Legacy of Life t-shirts to raise awareness and to support the provincial program.

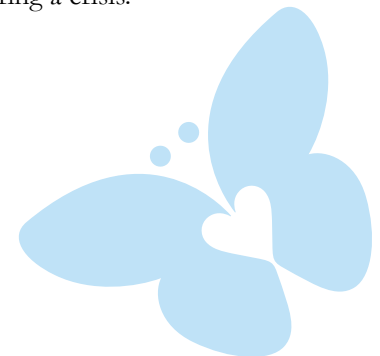
“Wearing the t-shirts generated several conversations from the other teams involved. Questions were asked about the program, and a lot of people wanted to know about donation. We are proud supporters, and I have been involved in organ and tissue donation for my whole career. I intend to take every opportunity to spread the word on how important it is to talk with your families about your wishes,” said Dr. Bedard

Transplant Atlantic 2010

Transplant Atlantic is taking place from October 13-15, 2010, at a new venue this year, The Westin Hotel in Halifax. A Public Forum will be held on October 13th from 7-9 pm at the Westin. This will be followed by two days of meetings with many topics of interest to the donation and transplantation communities.

Second Annual Organ and Tissue Donation Conference in Sydney

On October 27, 2010, the second annual Organ and Tissue Donation Conference will be held at the Days Inn, Sydney NS. Dr. Stephen Beed will be the keynote speaker providing information about donation after cardiac death. In addition there will be guest speakers presenting about the CBS living donor paired exchange program, the tissue bank specialist experience, Emergency Health Services and tissue donation, the renal patient and transplantation, and the *Nova Scotia Organ and Tissue Donation Act*. There will also be a very personal message from a donor family, a recipient and from those that make the difficult family approach during a crisis. ■



NATIONAL PERSPECTIVE

Edition 2 of the Draft Standards on the Safety of Cells, Tissues and Organs for Transplantation and Assisted Reproduction are now available for review. (Z900.1. 2.2,2.3,2.4 are related to CTO.)

To download copies and submit your comments, visit “Public Review” section on CSA’s website.

https://review.csa.ca/opr/opr_list.asp

For information about this review contact:

Jeffrey Kraegel
Project Manager
Health Care and
Community Safety
Program

Email: Z900review@csa.ca

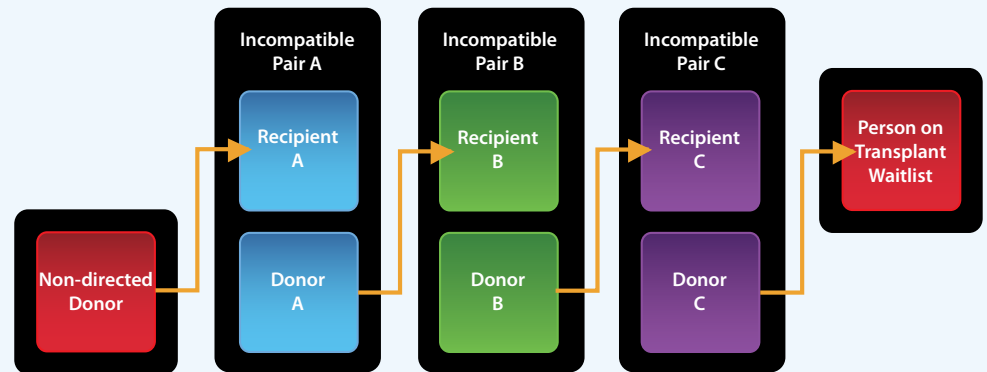


Living Donor Paired Exchange

Danielle Byrne RN, MN, Todd Campbell, CBS

In years past, in order for a transplant recipient to receive a kidney, it had to be from someone who donated their organ after death. However, living kidney donation offers more options for kidney patients today. As long as the donor and recipient are healthy and blood tests indicate that they are a suitable match, then they are considered a compatible pair and the transplant can proceed. This sounds like a simple way to obtain a kidney, however, quite often blood tests indicate that the donor and recipient are

incompatible. Now, thanks to the Living Donor Paired Exchange (LDPE) Registry developed by Canadian Blood Services, incompatible pairs have a new option. With Paired Exchange, the incompatible pair can be entered into the LDPE Registry, a secure computer database, and virtually cross-matched with other incompatible pairs. If a match is found, then the pairs might be able to exchange donors. As well, non-directed donors, a person who is not paired with a recipient, but wishes to donate a kidney to anyone in need, participate in the Registry (see diagram below). *Continued on page 6.*



DONOR FAMILY RECOGNITION



Norma's Story

Donation had never been a question in our family. We had discussed it many times and all agreed that if the worst happened and it was possible we would like to donate. So it wasn't a question when we sat in the family room of the hospital

that day and were told that there was nothing that could be done to save our loved one. Our wife and mother, Norma O'Shea had suffered a brain hemorrhage and would never recover. Norma was an incredible person, everyone's best friend and the most caring and kind individual you would ever be lucky enough to meet. She gave everything she had with all her heart to anyone who needed it, and so when we were faced with her loss the first thing we thought of was one last way for her to leave yet another mark of her kindness and giving spirit. When told there was nothing that could be done for her our thoughts were of whether or not she could be a donor, a way to bring a small light to this dark day. Norma was a full donor, both organ and tissue. Her death has saved or improved countless

lives in not only the recipients but also their families. As a donor family we are honoured to be able to bring some good out of the saddest day we've ever experienced. Our choice of donation saved other families from having to experience that sadness and left a touch of Norma's philosophy on the world. There really is no bad in donation, it's a win-win situation for everyone involved and we were lucky enough to have that option when there was nothing that could be done for Norma. On a day when you feel the most helpless and paralyzed there is something you can do. By signing your Nova Scotia health card and discussing with your families you can turn the darkest of days into the most radiant for another family. – Pat O'Shea, husband of organ donor Norma O'Shea. ■

A Call to Action – the Human Organ and Tissue Donation Act

Calendar for Awareness

Danielle Byrne Surette, District Resource Nurse from South West Health is in the process of developing a Legacy of Life calendar to promote organ and tissue donation awareness. Each month will highlight a different aspect of donation and transplantation. The calendars will be distributed by the District Nurses once completed.

Respiratory Checklist

In May 2010, the Cape Breton collaborative team integrated a new Respiratory Checklist screening form that has been used at the Cape Breton Regional Hospital. The plan is to utilize a new organ donor screening checklist on a ventilated patient that meets the GIVE criteria (GCS<5T, irreversible brain injury, ventilated, end of life discussion). The aim is that the checklist will result in more referrals and decrease the chance of missing potential organ donors. The Respiratory Therapist will screen the patient prior to intubation and then follow up with the primary nurse regarding making a referral to the organ donor coordinator. The checklists were efficient in identifying those patients that met the criteria prior to withdrawal of life sustaining therapy. The checklist also prevented a missed referral from happening. The form has now been spread to the ICU in Glace Bay Hospital. ■

*Submitted by Danielle Byrne-Surette,
South West Health*

Healthcare professionals advocate for their clients everyday by promoting their health and well-being. These same skills of communication and collaboration can be used when advocating for change within health legislation. Since practice changes faster than legislation, it is logical that current practice influences legislation. Stakeholders, such as the members and partners with Legacy of Life Program, are tasked with bringing these issues to light and advocating for change. However, becoming involved in political action can be intimidating. Challenges such as unfamiliarity with the legislative process and legal language can intimidate an expert in the field, making them feel like a novice.

Selecting a cause such as the *Human Organ and Tissue Donation Act*, can motivate health professionals to embrace the legislative process. Within the process, there are opportunities where individuals or groups

can influence government decisions. This can be accomplished through individual grassroots activities or as part of organized activities with an association, advisory committee or working group. Practice can also influence legislation through data collection, changes in practice guidelines and evolving societal values and expectations. In turn, legislation will influence practice by describing specific healthcare roles, monitoring requirements or affecting the healthcare system.

Since the process of developing a new *Organ and Tissue Donation Act* to replace the Human Tissue Gift Act began in 2006, Legacy of Life stakeholders have discussed the legislation during education sessions, annual meetings and provincial newsletters. Now, in 2010, the draft *Human Organ and Tissue Donation Act* has reached the point in the legislative process where initial public consultation is complete and the draft Bill is expected to be presented for first reading to the House of Assembly in the fall session. ■

STATS

There is a well documented gap between the number of organ and tissue donors and the need for organs and tissues for transplantation. Nationally and provincially efforts have been underway to improve the identification and referral of organ and tissue donors. The following table provides stats for Nova Scotia for the past four years.

| | 2007 | 2008 | 2009 | 2010 to date |
|-------------------------------------|------|------|------|--------------|
| Number of organ donor referrals | 40 | 44 | 57 | 49 |
| Number of actual organ donors | 15 | 16 | 15 | 16 |
| Number of tissue donation referrals | 158 | 196 | 198 | 123 |
| Number of actual tissue donors | 100 | 100 | 95 | 67 |



Medic - Leith Fermin, Kathleen McNally and Wade Smith

By Tom Dobson, Emergency Health Services

Since 2004 Nova Scotia Paramedics have been involved in identifying potential tissue donors from out of hospital cardiac arrest deaths. After the pronouncement of death at the scene, paramedics work with the patient's families and the Medical

Examiner's Office to refer donors. This is not always an easy task. Many of these deaths occur suddenly leaving family members traumatized. Paramedics are trained to recognize the appropriate situations in which to approach families.

This program has been a great success. A detailed retrospective analysis showed that from May 1, 2004 – Dec 31, 2006 (32 months) Paramedics approached next of kin 15 – 18.5% of the time. This resulted in 53 donors, 932 allografts and 521 recipients of tissues. Since this analysis the program has consistently met the desired approach rates and refers on average 2 to 3 donors each quarter.

The success of this program has caught the attention of other EMS services and we are currently working with Island EMS on Prince Edward Island to begin their EMS initiated tissue donation program this fall. ■

Living Donor Paired Exchange *continued from page 4.*

Since launching in January 2009, 140 donor-recipient pairs have been entered into the Registry, as well as 19 non-directed donors. As a result, 41 transplants have been completed successfully, and more are currently under medical review. The LDPE Registry began as a pilot program involving Ontario, Alberta and British Columbia, then expanded to include Nova Scotia and other provinces this summer. For more information on the Registry, visit Canadian Blood Services' website:

www.blood.ca/organsandtissues. ■

CONTACT US



Organ & Tissue District Resource Nurses

Corinne Corning
Legacy of Life Program Manager
Department of Health, Halifax
(t:) 902.424.7916

Denise Peach-Stokes
South Shore Health
(t:) 902.543.4604 ext. 2803

Danielle Byrne
South West Health
(t:) 742-3542 ext 1759 or (c:) 902-740-3679

Shelley Orr
Annapolis Valley DHA
(t:) 902.698.6219

Jill Peterson
Colchester Regional Hospital
(t:) 902.558.0059

Sue Boiduk
Cumberland Health Authority
(t:) 902.667.5400 ext. 6377

Cathy Timmons
Pictou County Health Authority
(t:) 902.752.7600 ext. 2895 (Voicemail)
(t:) 902.752.7600 ext. 2610 (Daily)

Kyla Neary
Guysborough Antigonish Strait Health Authority
(t:) 902.870.5443

Janet Evans
Cape Breton Regional Hospital
(t:) 902.567.7031

Capital Health
Ask for Organ Donor Coordinator or Regional Tissue Bank Specialist on call.
(t:) 902.473.2220