



# **Report on the RHDC Semi-annual Program of Work June - December 2014**

Zagreb, November 2014

	Milestone/Task from the Annual Program of Work	Monitoring & evaluation indicators	Input	Output	Outcome	Impact	Budget
<b>1.</b>	<b>WORKSHOPS/TRAININGS provided by RHDC Croatia</b>						
1.1	Preparing the Application for first TAIEX supported event to ExCom	Application has been accepted by ExCom; sent to TAIEX for final approval in August 2014; approved and confirmed by TAIEX in November (Ref. 22716)					480 €
1.2	Transplant Procurement Management Course (TPM Course) 08.-10.10.2014, Zagreb, Croatia	Evaluation test and questionnaire after the course	Training delivered for health care professionals in the field of transplant medicine	training delivered for representatives / health care professionals from Bosnia and Herzegovina (10), Croatia (17), Macedonia (2), Montenegro (5), Serbia (2)	acquired competences and skills in donor program	-capacity building -sharing knowledge, practice and information	9.600,00 €
1.3	Regional Workshop on Deceased donation program at the University Hospital Center Sisters of Mercy 23.-24.10.2014, Zagreb, Croatia	follow-up on accomplishments in donor program in the Region	Training delivered for representatives / health care professionals from the Region	Presentation of Croatian model of deceased donation program	acquired competences and skills in donor program	strengthening cooperation between SEEHN countries and Croatia in development of donor program	4.000,00 €
<b>2.</b>	<b>MEETINGS hosted by RHDC Croatia</b>						
2.1	Regular NFP Meeting Organized in conjunction with the ERBP-ERA-EDTA CME course on "European Best Practice Guidelines and Croatian Transplantation School", 20.06.2014, Dubrovnik, Croatia	New SEEHN RHDC Croatia Initiative discussed with professionals from SEE countries	Interest and feasibility of a Paired living kidney donation system in the SEE Region	Several recommended actions have been issued	Basic prerequisites for an International Paired Exchange Scheme defined	Positive feedback from several SEE countries in developing this program	9.356 €
2.2	Study visit of delegation from Federal MoH Federation of BiH (Federal Center for Transplant medicine) 14.10.2014, Zagreb, Croatia	Establishment and fully operational Competent Authority for organs, tissues and cells in Federation BiH	Exchange of knowledge and studying of Croatian organizational model in organ donation and transplantation	Summary of observations and deliberations  Planning of next Expert mission in support of newly established Center for transplantation	Strengthening of institutional capacities for organs, tissues and cells (Federal Center for Transplant medicine) in Federation of BiH		375 €
2.3	Study visit of delegation from Serbia (Directorate for Biomedicine i.e. Serbiatransplant) 15.10.2014, Zagreb, Croatia	Establishment and fully operational Competent Authority for organs, tissues and cells in Serbia (Serbiatransplant)	Exchange of knowledge and studying of Croatian organizational model in organ donation and transplantation	- Summary of observations and deliberations - Planning of next Expert mission in support of Directorate for Biomedicine and Serbiatransplant	Strengthening of institutional capacities for organs, tissues and cells (Directorate for Biomedicine) in Serbia		270 €
<b>3.</b>	<b>SEEHN RHDC Croatia EXPERT MISSIONS (EM)</b>						
3.1	EM to Montenegro (MoH) 23.06.2014	Implementation of Action plan on organ donation and transplantation in Montenegro	Follow-up on implementation of Montenegrin Action Plan	Conclusions and recommendations for further actions	recommended Action Plan	intensify efforts in further improvement of donor and transplant program	617 €
3.2	EM to Albania (MoH) 24.06.2014	Implementation of Action plan on organ donation and transplantation in Albania	Follow-up on implementation of Albanian Action Plan	Conclusions and recommendations for further actions	recommended Action Plan	intensify efforts in order to implement the deceased donor program	340 €
3.3	EM to selected hospitals (University Clinical Centers) in Federation of BiH: 1) Tuzla (09.-12.09.2014) 2) Mostar (01.-04.10.2014) 3) Sarajevo (10.-14.11.2014)	Accomplishments in donor program	Educational modules on optimal donor management, brain death diagnosis, family approach,	Training delivered for HTC and health professionals responsible for donor programs in major donor hospitals in	acquired competences and skills in donor program	intensify efforts in further improvement of donor and transplant program	1) 1.117 € 2) 1.462 € 3) 1.390 €

			quality system evaluation	Federation of Bosnia and Herzegovina			
3.4	EM to Serbia (MoH) 12.11.2014	Implementation of Action plan on organ donation and Transplantation in Serbia	Follow-up on implementation of Serbian Action Plan	RHDC Croatia report on further steps agreed	acquired competences and skills for management of Serbiatransplant and Directorate for Biomedicine		1.098 €
3.5	EM to Albania (MoH) 13.11.2014	Implementation of Action plan on organ donation and Transplantation, Action Plan Follow-up	Follow-up on implementation of Albanian Action Plan	RHDC Croatia report on further steps			1.369 €
3.6	Bosnia and Herzegovina (Federation of Bosnia and Herzegovina) 14.11.2014	Implementation of Action plan on organ donation and Transplantation	Follow-up on implementation of Federation of BiH Action Plan	RHDC Croatia report on further steps agreed	acquired competences and skills for management of Federal Center for Transplantation		349 €
<b>4.</b>	<b>BILATERAL COOPERATION</b>						
5.1	Montenegro- Living Kidney Transplant Program	Implementation of Living kidney transplant program in Montenegro	Twinning cooperation between the University Clinical Centre Zagreb, Croatia, and Clinical Centre of Montenegro	Technical assistance of Croatian transplant team (UCH Zagreb)	3 living kidney transplants performed (28.09.-06.10.)	strengthening cooperation between SEE countries in further development of deceased donor and transplant program	8.480 €
<b>5.</b>	<b>NEW SEEHN RHDC Croatia INITIATIVE</b>						
6.1	Paired kidney donation program	New Initiative discussed with professionals from SEE countries	Interest and feasibility of a Paired living kidney donation system in the SEE Region	Basic prerequisites for an International Paired Exchange Scheme defined	Nominations of key persons involved in PKD program within SEEHN RHDC Croatia		150 €

## 2. CONTEXT

### 2.1 WORKSHOPS/TRAININGS PROVIDED BY RHDC Croatia

#### 2.1.1 Transplant Procurement Management Course (TPM course), 08.10.10.2014, Zagreb, Croatia

TPM course was organized by the RHDC Croatia, following successful Spanish model of trainings for transplant coordinators, offering health professionals a high quality educational program in the field.

Participants were provided by personalized feedback through lectures, practical simulations and discussions. All participants issued a TPM certificate. The main objective of this course was to provide knowledge and skills in organ donation in order to effectively detect and manage all potential donors.

This course was addressed to health professionals involved in organ donation process, particularly those working in referral units such as: intensive care, post-operative recovery and emergency rooms, to empower them with the required competences.

The course covered the fundamental aspects of organ donation and transplantation enabling participants to acquire a wide knowledge and skills on the topic. The program consisted in lectures on donor detection systems; brain death diagnosis, giving special emphasis to brain death donors; donor management; family approach for organ donation and organ recovery; preservation and allocation criteria.



#### 2.1.2 Regional Workshop on Deceased donation program at University Hospital Center “Sisters of Mercy”

23.- 24.10.2014, Zagreb

The course was organized with the aim of support in development of explantation and transplantation medicine in the SEE Region, especially considering that Croatia was appointed as Regional Health Development Center on Organ Donation and Transplant Medicine within the South-eastern Europe Health Network.

The workshop has shown organizational model of explantation program that led to the extraordinary increase in the number of realized explantation at University Clinical Hospital “Sisters of Mercy”, with a special emphasis on a multidisciplinary approach to organ donor, preparation and maintenance of a donor at the Intensive Care Unit, within current trends in therapeutic support, and practical cases at Intensive Care Unit of the Clinical Centre.

2.1.3 Two **TAIEX Multi-country Workshops** have been proposed to be held in Zagreb, Croatia, supported by the European Commission TAIEX (Technical Assistance and Information Exchange instrument):

1) *TAIEX Multi-country Workshop on Donor Detection and Optimal Donor Management*

First application has been approved and confirmed by TAIEX (Ref. 22716).

2) *TAIEX Multi-country Workshop on Waiting list management - Pre-transplant assessment and development of criteria for organ allocation process*

Application form and other relevant documents will be additionally delivered to ExCom for revision.

## 2.2 MEETINGS HOSTED BY RHDC Croatia

### 2.2.1 National Focal Points Meeting

20/06/2014, Dubrovnik, Croatia

In line with the conclusions from Sarajevo meeting (March 22<sup>nd</sup>) next SEEHN RHDC Croatia NFP Meeting was held on 20<sup>th</sup> June 2014 in Dubrovnik, in conjunction with the “European Best Practice Guidelines and Croatian Transplantation School”, organized by the Croatian Society for Nephrology, Dialysis and Transplantation (CSNDT) in collaboration with ERBP - ERA-EDTA. The major topic of this NFP meeting was presentation of a Paired living kidney donation system development throughout the SEE Region and further actions in more details.

During the meeting in Dubrovnik there was a fruitful discussion on Paired Kidney Donation system. Software program on PKD was presented by Dr Rees (an urologist at The University of Toledo, USA, who developed an altruistic kidney donation model) as well as list of data elements that should be entered in that computer system to enable testing match among these pairs selected by all SEEHN countries.

As agreed on the meeting all SEEHN countries were encouraged to:

- Define or confirm responsible nephrologist(s) and engage them to participate in PKDP
- Select all pairs - potential candidates for PKDP
- Provide their informed consent to participate in the PKDP (just for the purpose of testing match)
- Enter the requested data of the pairs into software system.

Courtesy of Dr. Rees each SEEHN country will be provided with a technical instruction on website and password(s) for the Paired Kidney Donation Program.

#### **Update on Paired kidney donation program Initiative**

Until now we have received nominations of key persons to be involved in Paired Kidney Donation (PKD) program within SEEHN RHDC Croatia from Competent Authorities of Moldova, Macedonia, Montenegro and Bulgaria. According to previous discussion and presentation at Dubrovnik meeting it became evident that for participation in PKD program some SEEHN countries should amend their legislation to enable such kind of program. Participation of all interested SEEHN countries in PKD program would be of great value and benefit for patients within the Region.

Also, Greece and Cyprus are very keen to be engaged in this initiative.

### 2.2.2 Study visit of delegation from Federal Ministry of Health (Federation of Bosnia and Herzegovina)

14/10/2014, Zagreb, Croatia

#### **Summary of Deliberations and Observations**

Competent Authority, **Center for Transplant Medicine** within the Federal Ministry of Health has been inaugurated on September 23, 2014; Dr Lada Sarajlić has been appointed as the Director of the Center.

A key donation person/ transplant coordinator has been appointed in 13 hospitals of the Federation.

#### **Obstacles:**

- Next step is to implement a fully operational (24/7) duty desk for coordination of organ donation and transplantation activities within the Federation of Bosnia and Herzegovina (IT system is not yet fully implemented);
- A waiting list of patients for organ transplants within the Federation is not yet centralized and managed by the Federal Center for transplant medicine;
- Reporting system for referral of potential BDD not yet developed.

#### **Further steps to achieve:**

- Piloting kidney allocation IT program in collaboration with SEEHN RHDC Croatia;
- Reporting system development (based on Croatian model);
- Management of kidney waiting list (kidney allocation) within the all transplant centers in Federation of Bosnia and Herzegovina.

### 2.2.3 Study visit of delegation from the Republic of Serbia

15/10/2014, Zagreb, Croatia

#### Summary of Deliberations:

Serbian Competent Authority for organs, tissues and blood is structured as Directorate for Biomedicine with three sectors (Serbiatransplant, Tissues and cells, Blood) within the Ministry of Health (hierarchically directly responsible to the Minister).

That kind of organization has been implemented to meet requirements of EU directives, however lack of capacities, tools and clear authority has been identified as current critical obstacles to enable Serbiatransplant to undertake their responsibilities.

The IT system for central Waiting list management an organ allocation has not been developed yet.

There is no unique central waiting list (one national list for a patient from all of Serbia and one list for Vojvodina) and no consensus on allocation criteria.

The organ donation effort within the intensive care units is not structured to accommodate efficient flow of information from ICU to Serbiatransplant.

Different trainings and education on donor and transplant program (donor program; liver program; transplantation program; multiple organ explantation program; TAIEX multi-country workshop on organ donation and transplantation; Transplant Procurement Management Course) have been provided by RHDC Croatia for more than 100 health care professionals (nurses and medical doctors).

#### Planned activities in collaboration with RHDC Croatia

- To define Serbiatransplant Action Plan on organ donation and transplantation
- Present defined Action plans to the Minister for approval on November 12, 2014
- To define procedures and funding for Serbiatransplant to become effective and fully operational
- To strengthen Serbiatransplant in implementing organ donation reform throughout the healthcare system (with authority, clear responsibilities, tools and equipment)
- Reporting system development (4DD WHO critical pathway implementation-Croatian model).

## 2.3 EXPERT MISSIONS ORGANIZED BY RHDC Croatia

2.3.1 Expert mission to Montenegro Competent Authority – Follow-up visit, 23/06/2014

2.3.2 Expert mission to Albania Competent Authority – Follow-up visit, 24/06/2014

The main objective of these visits was follow-up assessment since October 2013 meeting in Podgorica and continuing strategy for initiation of program of deceased organ donation with expansion of organ transplantation, and to support Albania in a best way that can serve this country to achieve Action Plan objectives in accordance with the recommendations from the follow-up visit in March 2013.

2.3.3 Expert mission to Serbia Competent Authority (Serbiatransplant) – Follow-up visit, 12/11/2014



Picture: Radoljupka Radosavljević, Zlatibor Lončar, Mirela Bušić, Francis L. Delmonico, Nenad Milojević

Several planned activities have been agreed in collaboration with RHDC Croatia:

**1. Strengthening Institutional Capacities of Directorate for Biomedicine**

Expert's assistance from the Croatian Competent Authority for organs, tissues and cells (Institute for transplantation and biomedicine) is welcomed to address organizational issues and strengthen the capacity of Directorate for Biomedicine, designated Competent Authority for organs tissues and cells, Republic of Serbia. With that objective next Expert mission approved by TAIEX is to be organized in December/January 2015. Furthermore planning and preparation of IPA/Twinning Project is planned to start in 2015.

**2. Funding model**

Transplantation's teams and coordinators should be adequately paid, according to the already agreed model based on extra working hours (maximum 80 hours per month). Equipment necessary for legal determination of brain death needs to be provided to donor hospitals; therefore public procurement for that equipment should be centralized through MoH as a priority and interventional purchase

**3. Organ Allocation Criteria**

National Experts Committee for Transplantation recently appointed should specify and adopt organ allocation criteria.

**4. International collaboration**

Efforts in preparation for Eurotransplant candidate membership are to be intensified. In that respect contact with newly appointed Medical Director Dr. Undine Samuel and Professor Bruno Meiser, President of the Board, needs to be revitalized. For Lung transplant program there is a Twinning Agreement between Clinical Center Serbia and AKH – (Allgemeines Krankenhaus, Vienna). Agreements for pediatric heart and kidney transplants are still pending.

2.3.4 Expert mission to Albania Competent Authority (Ministry of Health) – Follow-up visit, 13/11/2014

Transplantations from deceased donors are currently not carried out due to the lack of the “culture” of donation and lack of legislative framework for brain death determination.

The legislative sanction for the determination of brain death has been realized through a governmental Committee of Ministers, but there is no enthusiasm within the professional community to achieve this important next step.

2.3.5 Expert mission to Federation of Bosnia and Herzegovina Competent Authority (Federal Centre for Transplant Medicine) – Follow-up visit, 14/11/2014

**Further steps agreed in collaboration with RHDC Croatia:**

1. To facilitate Center to provide a 24/7 duty desk for coordination of organ donation and transplantation activities within the Federation of Bosnia and Herzegovina
2. To enable full functionality of delivered IT system for management of central waiting list and organ allocation within the Federation
3. To facilitate Tissue typing center in Sarajevo to apply for EFI accreditation
4. To facilitate Center to provide all necessary logistic and support to ensure Donor Reporting system development based on Croatian model
5. To facilitate Center to monitor performance in donation process in 3 selected hospitals (Mostar, Tuzla and Sarajevo)

2.3.6 Expert mission – Implementation of Deceased Donor Program in selected hospitals (University Clinical Centers) in Federation of BiH (September/October/November 2014)

In September, October and November 2014, hospital based 3-day, face to face training has been provided by the RHDC Croatian expert (dr Zvezdana Kotorac-Kreček) for key donation persons/ transplant coordinators in 3 selected clinical centers (Sarajevo, Mostar and Tuzla), with presence of hospital coordinators from Regional hospitals, to harmonize best practices in deceased donation process.

## **2.4 BILATERAL COOPERATION**

### **2.4.1 Montenegro**

Kidney Transplantation Program and Deceased Donor Program successfully launched in collaboration with RHDC Croatia

Successful cooperation in the establishment and implementation of transplant network and donor program in Montenegro continued in 2014. So far 17 kidney transplants (16 living donors, one deceased organ donor) have been successfully performed in Clinical Centre of Montenegro under the twinning cooperation with transplant teams from University Hospital Centre Zagreb and Clinical Centre of Montenegro (three living kidney transplants have been performed in period 28.09.-06.10.2014).

Development of sustainable and self-sufficient deceased donor and transplant program in Montenegro remains as considerable scope under the framework of this collaboration.

## **3. CONCLUSIONS**

Regional Centre on Organ Donation and Transplant Medicine in cooperation with the Competent Authorities and professionals in this health care field carried out a series of activities with the aim of improving transplantation programs in the SEE Region.

In the past three years, significant accomplishments in transplant medicine have been achieved in Montenegro (kidney transplant program and Deceased Donor Program launched), Serbia (revitalization of liver transplant program), Macedonia (living kidney transplants increased, Deceased Donor Program re-established), Romania (donor rate doubled), Bulgaria (increase in donor rate), Moldova (Deceased Donor Program established), Bosnia and Hercegovina (Federal Competent Authority established in Federation of BiH).