



## The Canadian Association of Critical Care Nurses



# Position Statement

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## Deceased Organ and Tissue Donation

### Introduction

Critical Care Nurses play a key role in creating and maintaining a transparent, safe and supportive environment of care. Critical Care nurses provide expert physical and emotional care to patients and families who may potentially donate organs and tissues, as well as playing a central role in the care of patients and families who may receive donated organs and tissues. As such, nurses are uniquely situated to act as facilitators of the organ donation process and to provide essential support throughout the experience. Critical care nurses are healthcare professional that patients and their families look to for support and information related to organ and tissue donation. CACCN believes that as critical care nurses, we play a pivotal role in the future of donation in Canada.

### Statement

The Canadian Association of Critical Care Nurses (CACCN) acknowledges that there is a disparity in Canada between the number of Canadians waiting for an organ transplant and the number of organs donated. The CACCN believes that all eligible persons have a right to choose to donate their organs and/or tissues. The CACCN further believes it is important that critical care nurses understand the physical, emotional, organizational and legislative process associated with organ and tissue donation in Canada. Critical care nurses forge unique relationships with patients and family members providing them the opportunity to explore and advocate for pursuing donation wishes at end of life

### Background

In Canada, many thousands of adults and children are on the waiting list for organ and tissue donations (Canadian Institute for Health Information, 2012). One person dies every 1.5 days while on the wait list (Canadian Institute for Health Information, 2012). Canada's demand for organs for transplantation is predicted to increase 152% by 2020 (Baxter & Smerdon, 2000).

Organ and tissue donation is a life-saving and life-enhancing procedure for medically suitable patients and their families. In Canada, there are two mechanisms by which an individual can be identified as an organ donor at the end-of-life of their life; donation after neurological determination of death (NDD), and donation after cardiocirculatory death (DCD). Tissue donation is possible in both end-of -life contexts.

The CACCN endorses the following responsibilities of the critical care nurse, critical care nursing units and organizations in providing care to potential organ and tissue donation candidates.

### **Responsibilities of the Critical Care Nurse**

- Advocate for organ and tissue donation options as an essential component of end-of-life care.
- Support and participate in the organ and tissue donation process in accordance with Canadian and provincial legislation and hospital policy.
- Identify potential organ and tissue donors.
- Activate the appropriate resources and process for exploring options with the patient and family in a timely manner.
- Collaborate with donation specialists and interdisciplinary team members throughout the donation process.
- Facilitate end-of-life care discussions which respect and support patient and family decisions.
- Provide support and information through the donation decision-making process.
- Maintain ethical practice at all times (CNA, 2008; CACCN, 2009).
- Provide for the patient's and family's social, cultural, religious and/or spiritual needs.
- Access support and other resources as needed (e.g. social worker, spiritual leader).
- Maintain current knowledge and skills related to the organ and tissue donation process.
- Provide informational, emotional and process support to colleagues and peers engaged in the donation process with patient and family members.
- Protect and respect donor anonymity and family confidentiality in accordance with current Canadian and provincial/territorial legislation and the applicable nursing code of ethics (CNA, 2008; Storch, Rodney & Starzomski, 2004).

### **Expectations of Critical Care Nursing Units / Organizations**

- Integrate Accreditation Canada's *Organ and Tissue Donation Standards for Deceased Donors* into unit-based policies and practices.
- Integrate organ and tissue donation options as the standard of care at end of life.
- Ensure identification mechanisms and processes are in place so all eligible patients and families are provided the option of organ and tissue donation.
- Support organ and tissue donation education for critical care nurses.
- Facilitate a culture of care where the patient's and family's unique cultural, spiritual, and social needs can be identified and addressed.
- Evaluate the process and outcomes of organ donation services to ensure continuous quality improvement.

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## Glossary

- Donation after Cardiocirculatory Death (DCD): Patients who do not fulfill neurological criteria for death or for whom continuing medical care may be considered futile. When there has been an agreement between families and the healthcare team to withdraw life-sustaining therapy and prior to withdrawal, consent for organ donation is requested. Death is anticipated to occur imminently upon withdrawal of life-sustaining therapy ([Canadian Council for Donation and Transplantation] (CCDT), 2005; Kootstra, Daemen, Oomen, 1995).
- Family: “A group of individuals who are bound by strong emotional ties, a sense of belonging, and a passion for being involved in one another’s lives” (Wright & Leahey, 2013, p. 54). Family includes appointed substitute decision makers.
- Neurological Determination of Death (NDD): The irreversible loss of the capacity for consciousness combined with the irreversible loss of all brain stem functions, including the capacity to breathe (CCDT, 2004).

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