



Donor Update



A Partnership of New Mexico Donor Services and the New Mexico Hospital Association

JCAHO Surveyors Focus on Organ Donation

If your hospital is due for a JCAHO visit, scheduled or non-scheduled, you need to know that your Organ Donation Conversion Rate will affect how detailed your review will be.

“Organ Donation and Procurement - Surveyors will evaluate organ procurement issues based upon the conversion rate:

- **Tier 3 (61%-100% conversion rate)** survey limited to discussion with leaders in the Opening Conference.
- **Tier 2 (41%-60% conversion rate)** in addition to discussion with leaders, surveyors will address issues during tracer activities. Topics may include the process to notify family of potential donors of its options to donate organs, tissues, or eyes; education; or program effectiveness.
- **Tier 1 (0-40% conversion rate)** in addition to discussion in the Opening Conference, tracers will focus on organ procurement through the selection of charts involving the ED and ICU, and at least 1 death chart will be reviewed to address OPO notification, response and outcome. The topic is also addressed in the Data Use System Tracer.”

JCAHO Hospital Survey Activity Guide
Also see JCAHO Standard LD.3.110

“We actively support the life-saving efforts of a coordinated organ procurement process and encourage hospitals to actively work with donor families and agencies.”

Jeff Dye, President and CEO
New Mexico Hospital Association

“As we review the numbers and strive for improvement, we remain focused on our mission. We are committed to saving and improving lives, connecting one life to another, through donation and transplantation.”

Patricia Niles, Executive Director
New Mexico Donor Services

What is the Conversion Rate?

Health and Human Services (HHS) has been working closely with Organ Procurement Organizations (OPOs), and has set a goal for hospital organ donation conversion rates to be 75%. The difference can be life or death.

New Mexico Hospital Conversion Rates for 7/1/07 – 6/30/08

| City | Hospital | Conversion Rate |
|-------------|-------------------------------------|-----------------|
| Albuquerque | Lovelace Downtown Medical Center | 66.7% |
| | Presbyterian Hospital | 60% |
| | University of NM Hospital | 70.8% |
| Artesia | Artesia General Hospital | 100% |
| Carlsbad | Carlsbad Medical Center | 0% |
| Clovis | Plains Regional Medical Center | 0% |
| Farmington | San Juan Regional Medical Center | 100% |
| Las Cruces | Memorial Medical Center | 100% |
| | Mtn. View Regional Medical Center | 0% |
| Santa Fe | Christus St. Vincent Medical Center | 50% |
| Silver City | Gila Regional Medical Center | 100% |

NM hospitals that had no eligible deaths from 7/07-6/08 are not listed.

Eligible deaths are specifically defined as the death of a patient 70 years old or younger, legally declared brain dead according to hospital policy and who exhibit none of several medical rule-outs (for example, current malignant neoplasms, multisystem organ failure, specific viral infections, etc.). Hospital conversion rates can be accessed at www.USTransplant.org. (Choose Program and OPO Data, Transplant Program and OPO Specific Reports, New Mexico.)

For current conversion rates, call NMDS at 505-843-7672 and ask for Hospital Development.

Number of organ donors **Conversion**
Number of “eligible” deaths = Rate

Example: If the hospital had 15 “eligible” deaths, but only 5 became donors, the hospital's conversion rate would be: $5/15 = 33\%$

There are an estimated 15,000 potential organ donors in the US each year, yet less than half become organ donors. HHS' goal of increasing national hospital conversion rates to 75% would save the lives of an additional 15,000 transplant recipients each year.

CMS Surveyors will review the following documentation:

1. Current hospital policies and procedures, approved by the governing body, addressing organ recovery responsibilities.
2. Evidence of training for all patient care staff to verify that they are aware of organ recovery policies and procedures.
3. A copy of the current written, signed agreement with New Mexico Donor Services that includes all requirements contained in the Federal Acute Care Hospital Regulation, TAG A0886, “OPO Agreement.”
4. Verification, by review of death records, that the hospital has implemented its organ recovery policies and procedures.
5. Evidence that the organ, tissue and eye program is integrated into the hospital's quality assurance / performance improvement program.