



The Model of Postgraduate Studies for Transplant Coordinators in Poland

500 Graduates in the Years 2007–2015

K. Gross-Issajewicz^{a,*}, A. Jakubowska-Winecka^b, T. Danek^c, T. Kubik^d, R. Becler^d, and J. Czerwiński^{c,e}

^aOperating Block, Nicolaus Copernicus' Hospital, Gdańsk, Poland; ^bDepartment of Health Psychology, Children's Health Memorial Institute, Warsaw, Poland; ^cDepartment of General and Transplant Nursing, Medical University of Warsaw, Warsaw, Poland; ^d2nd Department of Anesthesiology and Intensive Therapy, Medical University of Warsaw, Warsaw, Poland; and ^ePolish Transplant Coordinating Centre Poltransplant, Warsaw, Poland

ABSTRACT

Background. Since 2007, the Medical University of Warsaw has been organizing the Transplant Coordinators Postgraduate Studies, which are funded by the National Programme for the Development of Transplantation Medicine. The aim of the studies is to recruit medical professionals for every hospital with the potential of deceased donations. The goal of the present study was to formally evaluate the previous 16 editions of Transplant Coordinators Postgraduate Studies by assessing graduate profiles and analyzing the efficiency and sustainability of their education.

Methods. Graduate profiles were determined by gathering sociodemographic information contained in student records. Training efficiency and sustainability were defined by assessing the actual performance of the coordinators' functions in the hospital after taking the course.

Results. As of May 2015, the number of Transplant Coordinators Postgraduate Studies graduates totals 501. Approximately one half of the graduates ($n = 248$) had nursing degrees; training was also finished by 199 physicians, and 54 individuals had other medical education. The number of graduates per million population across the whole country totals 13. A total of 226 of the graduates (45%) were employed in the years 2007–2015 in hospitals as transplant coordinators; physicians (93 graduates), nurses (107 graduates) and other medical professionals (26 graduates).

Conclusions. The academic formula of the Transplant Coordinators Postgraduate Studies funded by public sources makes it possible to educate practicing staff (physicians and nurses alike) for a nationwide system of donor hospital transplant coordinators posted in >200 hospitals and maintained by a national transplant organization.

TRANSPLANT COORDINATORS ARE essential persons in the deceased donor recruitment and transplantation process. In Poland, the coordinator's tasks consist of organization, coordination, supervision of the donor's identification, evaluation, consent and authorization to donate, procurement (donor hospital coordinator), and distribution, transportation, and transplantation (transplant center coordinator) of organs and tissues. The transplant coordinator is also expected to participate in donor (living

donations) and organ recipient follow-up, to promote transplantation ideas in society, and to be responsible for statistics and reports [1]. The mandatory creation of a coordinator's position was established by fundamental legislation related to transplantation medicine in Poland,

*Address correspondence to Katarzyna Gross-Issajewicz, Ul. Grunwaldzka 64/18, 81-771 Sopot, Poland. E-mail: katia.gross@gmail.com

including among others, The Cell, Tissue and Organ Recovery, Storage and Transplantation Act of July 1, 2005, whereby the coordinator is a licensed and upskilled employee organizing the coordination of organ procurement and transplantation [2].

Developing a network of hospital coordinators is one of the tasks for European Union countries. In 2008, the European Parliament imposed the development of hospital coordinator's positions on member states by its resolution of April 22, 2008, on organ donation and transplantation. The European Parliament calls on European Union members to make full utilization of organs from deceased donors, through implementation of a hospital coordinator system. Their main task is to identify potential donors and contact their families [3]. In turn, the European Commission gave member states strategic tasks for the years 2009–2015, including increasing the amount of accessible organs to transplant, through the system of transplant coordinators established in every hospital; this system offers the possibility of identifying deceased donors [4].

These European initiatives are reflected in Polish legislation. The Ordinance of the Minister of Health of December 4, 2009, regarding detailed terms of procurement, storage, and transplantation of cells, tissues, and organs defined professional qualifications for coordinators of procurement and transplantation of cells, tissues, and organs. Applicants for the coordinator's job must have at least a secondary medical education and have completed the training course for transplant coordinators, supported by certificate [5]. In May 2010, another regulation was created: the Ordinance of the Minister of Health on educating persons whose actions have a direct impact on quality of cells, tissues, and organs, as well as on donors' and recipients' safety. The ordinance defines a framework program for initial, continuous and upgrading training courses for coordinators of procurement and transplantation of cells, tissues and organs. The ordinance concerns procurement, storage and transplantation of organs, bone marrow, hematopoietic stem cells from the peripheral blood and cord blood. This legislation also defines a method of recordkeeping the training processes, certificate specimen after training and detailed requirements for units that organize the courses. The competent authority in training courses is the Polish Transplant Coordinating Centre Poltransplant, a national transplant organization [6]. In October 2010, the Council of Ministers undertook a resolution concerning the establishment of a longstanding program for the years 2011–2020 entitled the National Program for the Development of Transplantation Medicine. As one part of this longstanding program, the following task was created: financing the activity of procurement coordinators along with training of the new coordinators. The government budget was detailed as a source of funding in part where the holder is the Minister of Health via the Polish Transplant Coordinating Centre Poltransplant [7].

The Transplant Coordinators Postgraduate Studies was created in the spring of 2007 at the Medical University of Warsaw. The strategic aim of the program is to educate transplant coordinators for every hospital in Poland. The teaching includes lectures, seminars, and workshops (including workshops with actors in the parts dedicated to the contact with the families of deceased donors and technical training with a Web tool [www.rejestrzy.net] connecting all the areas of transplantation medicine). Training lasts 99 hours, and it takes place over 6 weekend courses. Lectures and exercises are run by experts in the field of clinical transplantation, tissue transplantation, and intensive care. Faculty is composed of clinical psychologists, experienced transplant coordinators, and media representatives. Postgraduate studies end with an examination and issuance of a diploma [8].

During recruitment of candidates for these classes, the following criteria are taken into consideration: higher medical education (medicine, nursing, paramedic science, public health) and current practice in a hospital with organ donation potential, in an essential wards (intensive care units, emergency departments, invasive wards). The one class should consist of approximately 30 people.

In the course of studies, the following issues are discussed: history of transplantation medicine; European legislation and Polish regulations concerning transplantation medicine; condition of organ transplantation; transplant coordinator's position and role; concepts and criteria of human death; diagnosis of death, brain death and its consequences, and circulatory death; maintenance of the brain-dead organ donor; medical contraindications for procurement and transplantation of organs from deceased donors; psychological elements of dying and death; conversation with the family of the deceased patient; support of the family of a potential deceased organ donor; multiorgan cases, including surgical and organizational aspects; principles of prevention of organ ischemia and organ preservation; procurement process from the deceased organ donor after circulatory death; tissue compatibility system and principles of donor's and recipient's immune sampling; indications and requirements for organ and tissue transplantation; immunosuppression, including identifying and treatment of transplant rejection; hematopoietic cell transplantation; infectious complications (viral, bacterial, and fungal) after transplantation; differences in pediatric organ donation and transplantation; principles of transparency, safety, and supervision of transplantation; practical aspects of coordination, from the confirmation of death to surgery; quality and safety standards in organ transplantation; procurement and transplantation of eye tissues; biostatic transplants; living-donor kidney transplantation; the Organ Transplant Waiting List; principles of long-term care for organ recipients; organ's allocation and distribution; church attitudes toward organ procurement and transplantation; principles of documentation; sociocultural aspects of organ transplantation; promotion of the idea of transplantation in

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