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Andrew Howlett
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Dear Mr Howlett

Consideration of Petition PE1453

Thank you for your letter of 13 December 2012 seeking information in relation to the introduction of an opt-out system of organ donation in Scotland. Please see below our response to the following questions:

Q1. What has been the initial response to the Respect My Dying Wish Campaign?

Following the launch of the "Respect My Dying Wish" campaign on October 8th 2012 the campaign has received a very positive response from the media, cross party Scottish politicians and the public at large who have engaged in considerable numbers via the social media campaign platforms.

The campaign was targeted at young adults and indeed sparked a schools speaking competition within Glasgow City which generated enthusiasm from head teachers and pupils alike. This was the main aim of the campaign – i.e. to get young people talking about their support for organ donation and to ensure that those on the donor list made the effort to tell their families that they wished their organs to be donated in the event of their death.

The Greater Glasgow and Clyde Organ Donation Committee had previously identified that a considerable number of registered donors (15 per cent) did not end up having their organs donated due to the refusal to give consent by relatives. This was perceived to be due to a lack of awareness of the strong wish of those registered donors that donation should happen.

Our campaign's primary message was to ensure those who wanted to donate were allowed to donate by relatives. It was not our primary aim to drive people to register for donation although on all our campaign materials we created links to enable passive viewers to make that choice to go at register. We have little evidence that our campaign encouraged many people to register – indeed many of the thousands who participated in debate forums online were already registered donors but voiced their support for the core campaign message ... that they wished no-one to over-rule their wish to donate at their time of death.

The campaign social media elements include a bespoke website, Twitter and Facebook but by far the most activity has been seen on Facebook where the statistics who that by January 10th 2013 the campaign had a reach of 158,841 people of which 39.5per cent were under the age of 34 years and 28.2 per cent were between 35 and 44 years of age. The geographical breakdown of those participating in the Facebook campaign platform was primarily Glasgow City with a strong presence across the whole of Scotland. The third biggest element of comment and views came from England and Ireland with a smaller spread of input and support from around the world.

The Sunday Times newspaper picked up the campaign as media supporters and promoted it every week for eight weeks in a row carrying major features and news stories – some of the articles broadened the organ issues into the areas of presumed consent and garnered the views of Respect My Dying Wish supporters those views were mixed

The initial response from the public and from those more closely engaged with donation (recipients, live donors and indeed clinicians) is strongly in favour of pushing the Respect My Dying Wish campaign more openly and that at the end of the day – whether the country adopts or does not adopt presumed consent the final decision on donation will always still lie with the relatives or loved ones of the deceased and therefore Respect My Dying Wish is a valid campaign that should be taken forward nationally

We are aware that at this three month stage of the campaign it is too early to assess any true impact on refusal rates.

Q2. What previous approaches have proved to be successful or unsuccessful in increasing levels of organ donation?

We have implemented the recommendations of the UK Task Force but although this has improved organisation and awareness as yet it has not been successful in increasing the level of organ donation within NHS Greater Glasgow and Clyde.

Q3. What steps other than the above campaign are currently being taken, or considered, to increase levels of organ donation?

We are implementing three main categories of work, namely:

- Better Donor identification and referral.
 - a. All parts of the NHS must embrace organ and tissue donation as a usual, not unusual event.
- 2. Better Donor co-ordination
- 3 Better Organ retrieval and donor optimisation (including category 2 donation).
- Q4. Have you any other views on what the petition seeks?

There are potential benefits and risks of introducing an opt out system that depend upon the mood of the general public regarding this issue and it is a matter for Government to judge if and when this would be appropriate

Yours sincerely

Robin Reid Chair - Organ Donation Committee