

COLLABORATE. SUPPORT. **ENHANCE.**

ANNUAL REPORT 2006



CANADIAN COUNCIL FOR
DONATION AND TRANSPLANTATION

CONSEIL CANADIEN POUR
LE DON ET LA TRANSPLANTATION

TABLE OF CONTENTS

1	Message from the Leadership
2	The CCDT Team
4	Our Organization
5	How We Connect
7	Highlights of the Past Year
8	Donation Initiatives: Message from the Chair of the Committee
11	Tissue Initiatives: Message from the Chair of the Committee
12	Transplantation Initiatives: Message from the Chair of the Committee
15	Initiative Achievements in the Past Year
16	Financial Statements



CCDT LEADERSHIP

MESSAGE FROM THE LEADERSHIP

We invite you to review our 2006 Annual Report to learn about our year of progression, collaboration, and change.

Along with our initiative achievements in 2006, we oversaw a comprehensive, independent summative evaluation of our performance as required by our federal funding agreement. The evaluation confirmed that we have met or exceeded our objectives with strong support from our many stakeholders.

Our stakeholders agreed that the CCDT is the most appropriate organization to lead the development of Canadian consensus on organ and tissue donation and transplantation by virtue of our pan-Canadian perspective, federal support, and cross-sectoral representation. Our stakeholders told us that we made a difference in the organ and tissue donation and transplantation community by:

- > Increasing credibility for organ and tissue donation and transplantation.

- > Fostering productive discussion and debate among various stakeholders, including medical researchers and practitioners, ethicists, legal experts, cultural representatives, and donor families.
- > Producing a high-quality body of knowledge that is credible and evidence based.

Importantly, our evaluation recognized that the CCDT has built a strong foundation, but there is a great deal of work yet to be done in donation and transplantation in Canada.

The evaluation was an opportunity to reflect upon our past in order to plan for our future. Based on that knowledge, we have prepared an exciting and ambitious strategic plan for 2007 to 2012.

Our achievements during 2006 were possible only because of the immeasurable contribution of expertise and time graciously and generously offered by our Volunteers across the country. Their support of the CCDT has been greatly appreciated. Together, we all strive to improve the organ and tissue donation and transplantation system in Canada.

Leah Hollins
Chair of Council

Kimberly Young
Chief Executive Officer

ENGAGE

THE CCDT TEAM

THE CCDT TEAM AT THE 2006 AGM

Front row (L to R):

Dr. David Hollomby, Tess Palatino, Leah Hollins (Chair),
Kimberly Young (Chief Executive Officer), Wendy Trotter,
Donna Forbes, Dr. Charles Sun

Back row (L to R):

Liz Anne Gillham-Eisen, Dr. Sam Shemie,
Dr. Graham Scoles, Annie Robitaille, Dr. John Dossetor,
Katrin Nakashima, Dr. Vivian McAlister,
Dr. Rosalie Starzomski, Dr. Jonathan Lakey,
Dr. Vinay Dhingra, Dr. Marc Germain, Michele Lahey,
Rabbi Dr. Reuven Bulka, Ann Secord, Dr. Peter Nickerson

Missing:

Dr. Frank Markel, Dr. Paul Dubord, Wayne McKendrick,
Craig Knight, Brenda Payne, Mance Cl  roux



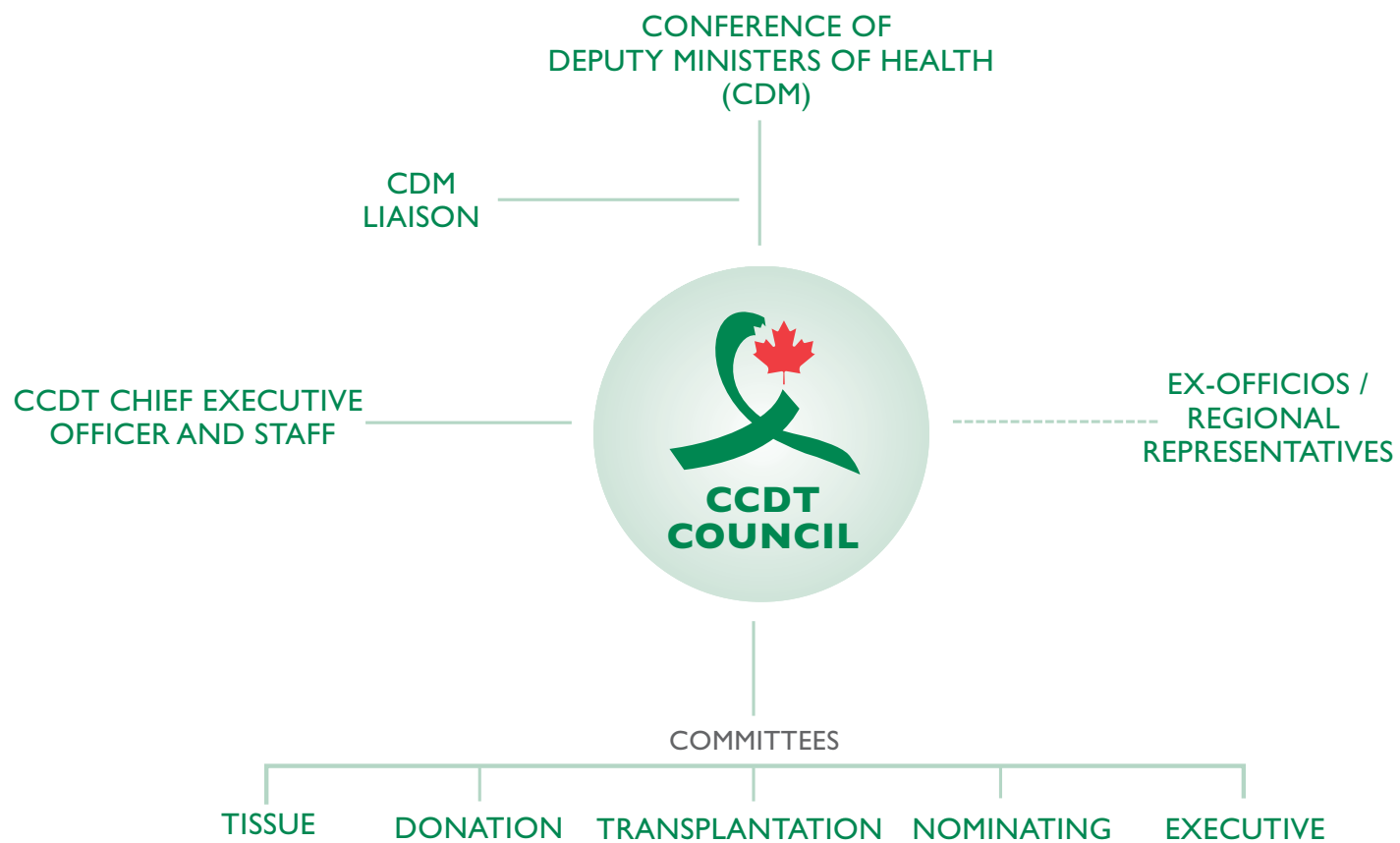
TEAMWORK



LIVES BETTERED. LIVES SAVED.



OUR ORGANIZATION

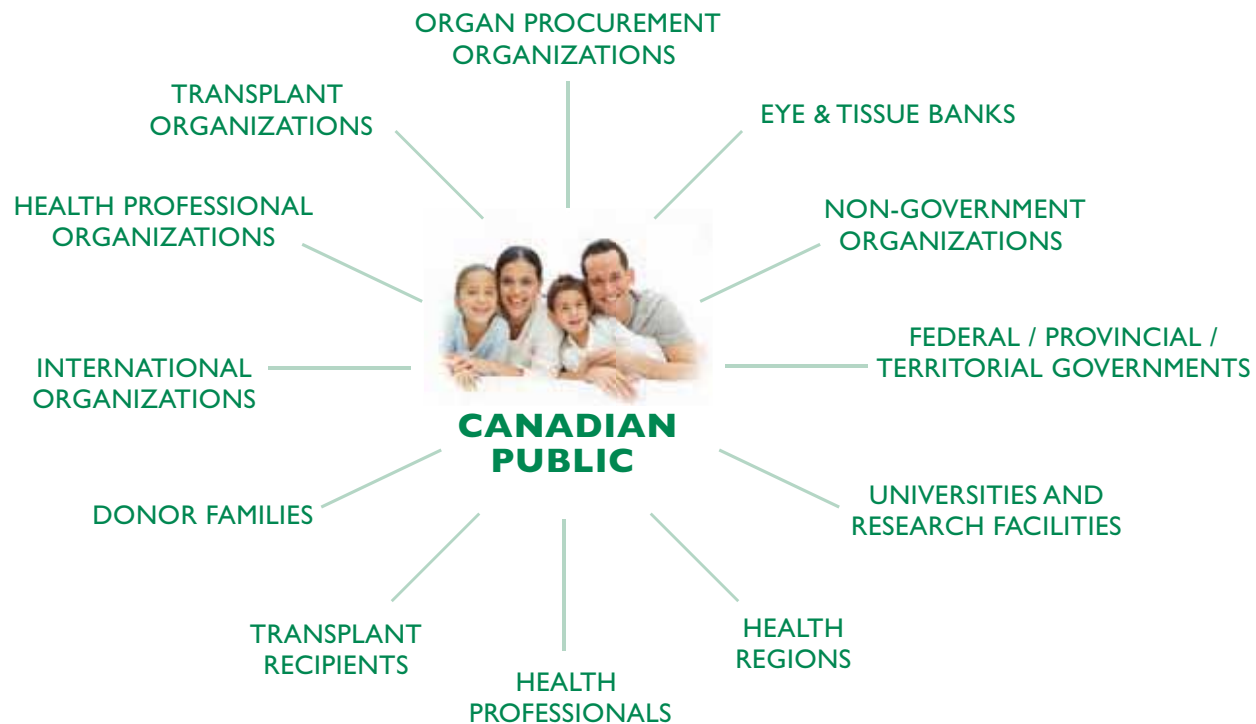




HOW WE CONNECT

The Canadian organ and tissue donation and transplantation system is a highly complex network situated within the greater context of Canadian societal considerations of ethics, legislation, culture, and faith.

The CCDT remains committed to bringing together interested and involved stakeholders for deliberation and dialogue about Canadian issues in donation and transplantation. In 2006, we continued to link directly to, or provided the means for others to link to, stakeholder groups such as governments, organ procurement organizations, transplant programs, non-profit groups, professional associations, research agencies, media, and the public.





LIVES BETTERED. LIVES **SAVED.**



HIGHLIGHTS OF THE PAST YEAR

The CCDT is a national, registered non-profit dedicated exclusively to the interests and issues of the organ and tissue donation and transplantation system in Canada.

Our mandate is to provide advice to the Federal/Provincial/Territorial Conference of Deputy Ministers of Health in support of its efforts to coordinate federal, provincial, and territorial activities relating to organ and tissue donation and transplantation. In 2006, the CCDT hosted national forums for stakeholder consultation in the areas of:

- > Enhancing Living Donation
- > Organ Allocation in Canada: Phase I: Kidney
- > Enhancing Tissue Banking in Canada: Phase I: Sustainability

Our Volunteers and Staff continue to work closely together to develop recommendations for enhancing the Canadian donation and transplantation system through in-depth research and extensive consultations with multiple and diverse stakeholders. To guide and support our work, the CCDT conducted a number of surveys in 2006, including those available to the public on our website (www.ccdt.ca):

- > Health Professional Awareness and Attitudes on Organ and Tissue Donation and Transplantation, Including Donation After Cardiocirculatory Death
- > Public Awareness and Attitudes on Organ and Tissue Donation and Transplantation
- > Kidney Allocation Survey of the Informed Public

Many of our recommendations relate to best practices and, in 2006, clinical practice guidelines from our Canadian forum reports were included in the Canadian Medical Association's INFOBASE:

- > Severe Brain Injury to Neurological Determination of Death
- > Medical Management to Optimize Donor Organ Potential
- > Assessment and Management of Immunologic Risk in Transplantation
- > Donation After Cardiocirculatory Death

The Canadian Medical Association Journal published the CCDT supplements:

- > Brain arrest: the neurological determination of death and organ donor management in Canada (March 2006)
- > National recommendations for donation after cardiocirculatory death in Canada (October 2006)

Our own publications for the year include:

- > Faith Perspectives on Organ and Tissue Donation and Transplantation
- > Evaluation of Surgical Bone Banking and Utilization in Canada

PROGRESS



DR. SAM SHEMIE

DONATION INITIATIVES MESSAGE FROM THE CHAIR OF THE COMMITTEE

Our committee is dedicated to increasing referrals, creating a standard for end-of-life care, and addressing the shortage of organ and tissues in Canada. Our initiatives are therefore developed in three key areas:

- > Engaging the public
- > Engaging health professionals
- > Developing the donation system

Our aim is not solely on increasing numbers of donors: our goal is increased support for families throughout the donation process, whether they say yes or no to donation. We have ensured that the family point of view is represented in health professional education and we are looking at other ways to engage the public.

Our committee held very successful consultations in 2006 with organ procurement organizations across the country. We also began the innovative Organ Donation Collaborative, an educational initiative meant to engage health professionals from various donation and transplant centres in the Western and Atlantic Provinces.

In our initiatives in the area of developing the donation system, we particularly looked at legal issues and donation costing last year. Our consultative session on legal issues in organ and tissue donation and transplantation will invite government representatives and clinical, legal and ethical experts to discuss and confirm a matrix and prioritization of legal issues in organ and tissue donation and transplantation in Canada. Our consideration of donation costing was the development of a costing framework from the perspectives of the operating room, intensive care units, transplant programs, and emergency departments.

We look forward to the challenges of information management in our next work plan. Such an endeavor has the potential for solving problems in waitlist management through the development and implementation of a system that is real time. It will create new ways to survey and report adverse events, and it will give Canadians a national voice by facilitating a connection with stakeholders.

As Chair of the Committee, I extend a most sincere thank you to the Committee members for their contribution over the past year. We are looking forward to continuing to engage the public and health professionals in the overall development of the donation system.

Dr. Sam Shemie
Chair, Donation Committee

CONNECT



LIVES BETTERED. LIVES SAVED.



LIVES BETTERED. LIVES SAVED.



DR. MARC GERMAIN

TISSUE INITIATIVES MESSAGE FROM THE CHAIR OF THE COMMITTEE

The Tissue Committee experienced an exceptionally busy year in 2006. The hard work and participation of our members led to the completion of a number of initiatives and allowed for great strides in others. I would like to state my appreciation to the Committee members for making this a successful and enjoyable year.

At the end of November, the Enhancing Tissue Banking initiative held its first major taskforce dedicated to the topic of sustainability. Its guest list was comprised of the end-users of tissue products, such as dentists and surgeons, as well as tissue and eye bankers and other health professionals. Discussion centered on the importance of internal sustainability and leading experts in the field were given the chance to discuss how best to meet the needs of Canadians.

Additionally, the Tissue Committee has been working to understand the extent of the utilization of demineralized bone products in Canada with the intention of assessing the need for a Canadian

manufacturing source. We have also begun to explore the use of surgical bone banking to offset the supply shortages that currently exists. Work was suggested surrounding the development of a shipping model for surgical bone and a national standardization framework to improve availability by decreasing the average rejection and deferral rates of surgical bone recovered.

Our committee was invited to participate in events held external to the CCDT including:

- > The American Association of Tissue Banks
- > Conference of Chief Coroners and Medical Examiners of Canada
- > The Eye Bank Association of America
- > Transplant Atlantic

Time was also devoted to a consultation with tissue banking stakeholders to share and receive feedback on past work and future plans. Much remains to be done in the area of tissue banking and transplantation; however, I am confident that we can achieve our goals through partnerships with our stakeholders.

Dr. Marc Germain
Chair, Tissue Committee

PROMOTE



DR. DAVID HOLLOMBY

TRANSPLANTATION INITIATIVES MESSAGE FROM THE CHAIR OF THE COMMITTEE

The gift of organs is an incredible life-saving altruistic act and the Transplantation Committee is devoted to ensuring these gifts are used in the best way possible. Our hope is to establish a sustainable, more efficient, and ethical framework for transplantation in Canada.

Waitlists for transplants continue to grow. New medical technologies, such as the Berlin Heart, will extend these already long lists. Our group is exploring the potential to maximize the opportunities for organ transplantation through extended criteria donation and other possibilities.

Last year was an exciting time for us because we are beginning to see some advances in the field resulting, at least in part, from our work. In February 2006 our committee hosted the Enhancing Living Donation Forum in Vancouver, BC. The impact of this event is making a difference in the lives of patients and families

across Canada; recommendations from the forum about the removal of financial disincentives for living donors are already underway.

In addition, we held a notable forum on kidney allocation in October of 2006. This event was an opportunity for health professionals to share and begin to develop a framework for a safe, fair, and transparent system of organ allocation for transplantation. Our committee felt it to be particularly rewarding because this forum was the outcome of a number of years of preparation and was the first in a series of such meetings.

We are currently working on far-reaching and significant initiatives regarding legal and ethical issues in the field. Information management is also becoming a prominent focus; more specifically, in 2006 we realized the beginnings of a registry for highly-sensitized Canadians waiting for kidneys.

In closing, I would like to thank the Committee for their perseverance and dedication over the past year.

Dr. David Hollomby
Chair, Transplantation Committee

INFORM



LIVES BETTERED. LIVES SAVED.



LIVES BETTERED. LIVES SAVED.



INITIATIVE ACHIEVEMENTS IN THE PAST YEAR

We believe that:

- > **Canadians should have the opportunity to participate in the donation process and to know that their contribution is recognized and valued.**
- > **Canadians needing transplants should have timely and fair access to organs and tissues.**
- > **Canadians should have positive health outcomes and an improved quality of life as a result of the donation and transplantation process.**

We created the Organ Donation Collaborative to facilitate health education to improve donor rates in Western and Atlantic Provinces. Twenty-one multidisciplinary teams were accepted and invited to attend three interactive learning sessions; the first session was held in 2006. These sessions are meant to close the gap between what is known and what is applied through a collaborative structure where teams can easily learn from each other and from recognized experts in specific topic areas.

We held the Enhancing Living Donation Forum to build national agreement on strategies to maximize living donation, while ensuring a safe and ethical environment for this type of activity and overcoming the barriers that are current disincentives to live organ donation in Canada.

The objectives of the forum were to:

- > Describe and confirm current and recommended practices for evaluating potential donors as well as determining eligibility.
- > Address consent and ethical issues.
- > Explore considerations in donor follow-up.
- > Recommend options to financial barriers including insurance issues.
- > Identify implications to healthcare system.
- > Identify key areas for future study.
- > Facilitate national and international networking.

We are pursuing, in partnership, an information and communications technology process for tissue traceability, post-transplant surveillance, and adverse event reporting. Such a process will address the quality and safety concerns of our stakeholders, including the public.

We have begun several significant, forward-thinking, and collaborative projects on a national level in the area of information management. First, we are developing a national registry for highly-sensitized people waiting for a kidney transplant. Second, our proposed paired-kidney exchange registry will expand the possibilities for living non-related donation throughout the country. Finally, we are now consulting with others about plans for a real-time, computerized waitlist for solid organ transplants.

STRENGTHEN



FINANCIAL STATEMENTS

AUDITORS' REPORT

To the Council of Canadian Council for Donation and Transplantation

The accompanying summarized statement of financial position and statement of operations are derived from the complete financial statements of Canadian Council for Donation and Transplantation as at March 31, 2006 and for the year then ended on which we expressed an opinion without reservation in our report dated May 17, 2006. The fair summarization of the complete financial statements is the responsibility of management. Our responsibility, in accordance with the applicable Assurance Guideline of The Canadian Institute of Chartered Accountants, is to report on the summarized financial statements.

In our opinion, the accompanying financial statements fairly summarize, in all material respects, the related complete financial statements in accordance with the criteria described in the Guideline referred to above.

These summarized financial statements do not contain all the disclosures required by Canadian generally accepted accounting principles. Readers are cautioned that these statements may not be appropriate for their purposes. For more information on the entity's financial position, results of operations and cash flows, reference should be made to the related complete financial statements.

*Edmonton, Canada
May 17, 2006*

Stout & Company LLP
Chartered Accountants

MANAGEMENT'S RESPONSIBILITY FOR FINANCIAL REPORTING

The accompanying summarized financial statements of Canadian Council for Donation and Transplantation and all the information in the annual report are the responsibility of management and have been reviewed and approved by the Chairperson of the Council. The financial statements have been prepared by management in accordance with Canadian generally accepted accounting principles.

Council is responsible for ensuring that management fulfills its responsibilities for financial reporting and is ultimately responsible for the financial statements. Council carries out this responsibility principally through its Executive Committee. The Executive Committee, which is composed of Council Members, reviews and approves the financial statements.

Leah Hollins
Chair of Council
May 17, 2006

Kimberly Young
Chief Executive Officer



FINANCIAL STATEMENTS

SUMMARIZED STATEMENT OF FINANCIAL POSITION

As at March 31, 2006

Assets	
Current assets	\$ 292,340
Capital assets	254,772
	<u>\$ 547,112</u>
Liabilities	
Current liabilities.....	\$ 280,088
Deferred contributions related to capital assets.....	254,772
	<u>534,860</u>
Net assets, unrestricted.....	12,252
	<u>\$ 547,112</u>

SUMMARIZED STATEMENT OF OPERATIONS

Year ended March 31, 2006

Revenues	<u>\$3,765,271</u>
Expenditures	
Initiatives	2,380,508
Materials and meetings	418,705
Administrative costs	371,888
Facility expenditures	205,574
Council costs	200,360
Consultation and evaluation	175,984
	<u>3,753,019</u>
Excess of revenue over expenditures for the year.....	<u>\$12,252</u>