



Australian Government
**Australian Organ and Tissue Donation
and Transplantation Authority**



Annual Report

2023–24



About us

The Australian Organ and Tissue Donation and Transplantation Authority, more commonly known as the Organ and Tissue Authority (OTA), was established in 2009 by the *Australian Organ and Tissue Donation and Transplantation Authority Act 2008*.

What we do

We deliver a nationally coordinated program to increase organ and tissue donation to improve opportunities for transplantation in Australia.

Since the national DonateLife program began in 2009

 **6,417**
deceased organ donors

 **18,144**
organ transplant recipients

Who we work with

The national DonateLife program is delivered in partnership with the DonateLife Network, state and territory governments, the donation and transplantation sectors, the eye and tissue sectors, hospitals, community organisations and the public.



DonateLife Network



State and territory governments



Donation and transplantation sectors



Eye and tissue sectors



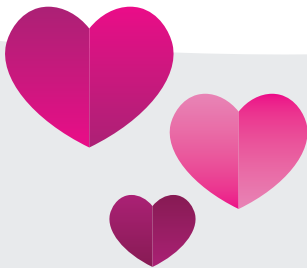
Hospitals



Community organisations



Public



Thank you

We thank all the generous donors and their families who have transformed the lives of people needing a transplant through organ and tissue donation.

We also acknowledge the dedication and commitment of donation specialist staff and transplantation teams. Transplantation is only possible through the donation of organs and tissues, and its life-changing benefits would not be possible without this shared commitment.

Purpose

To save and improve the lives of more Australians through organ and tissue donation and transplantation

Goals

Build support

More people say yes to donation

Optimise opportunities

Donation and transplantation services deliver the best outcomes

Enhance systems

Enable quality outcomes through information, technology and resources

Values and behaviours



Commitment

We are passionate about who we are, our work and our future



Collaboration

We work together to achieve shared goals



Excellence

We strive for the best quality national outcomes



Integrity

We operate with trust, respect, honesty and compassion



Innovation

We keep an open mind and have courage to make improvements

Why is organ and tissue donation important?

For someone who is seriously ill, an organ or tissue transplant can mean the difference between life and death, being healthy or sick, seeing or being blind, or being active and never walking again. Transplantation enables people to resume an active role in their family, workplace and community.

One organ donor can save the lives of up to 7 people and help many more through eye and tissue donation.

The first 10 years (2009–2019) of the DonateLife program saw a 122% increase in deceased donation rates, resulting in an 81% increase in the number of people who received an organ transplant.

The COVID-19 pandemic significantly impacted deceased organ donation rates. However, since 2022 there has been continued recovery in the sector.

With a 13% increase in deceased donation in 2023 (compared with 2022), the program is now only 6% down from pre-pandemic outcomes.

In 2023

~1,800

people were on a waitlist for a transplant

~14,000

additional people were on dialysis, many of whom could benefit from a kidney transplant

Register to be a donor

We call on all Australians to take 2 simple steps:

- **Register to be a donor on the Australian Organ Donor Register**
- **Tell your family you want to be a donor.**

It doesn't matter how old you are, your lifestyle, what country you're from or how healthy you are – you can still register as an organ and tissue donor.

Registering is easy and only takes one minute.

All you need is your phone and your Medicare card.



TAKE A MINUTE TO TALK TO YOUR FAMILY ABOUT ORGAN AND TISSUE DONATION.

DONATELIFE.GOV.AU

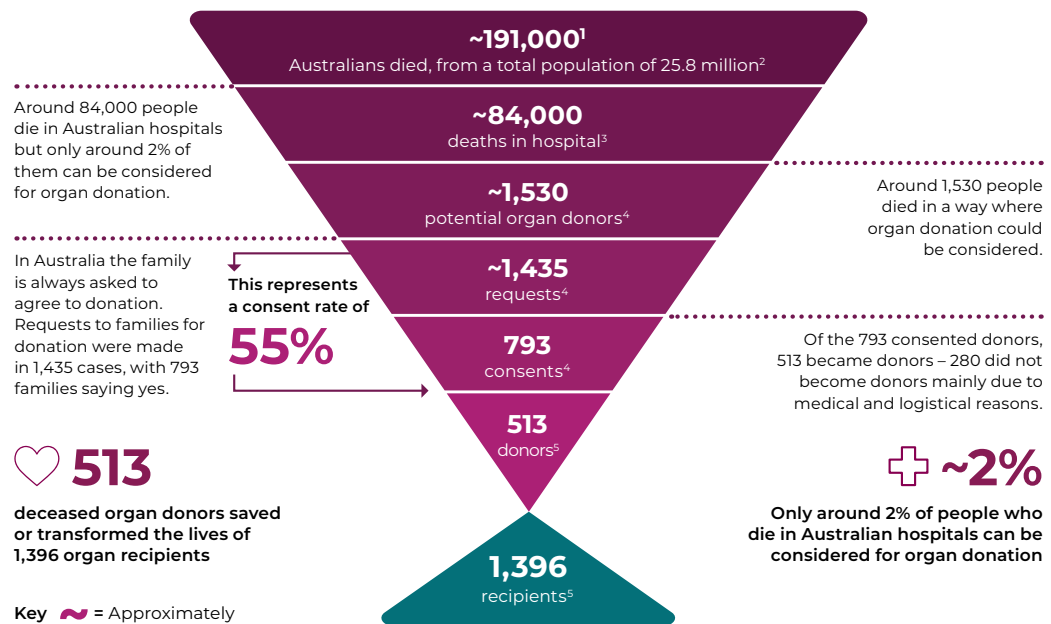


Very few people can become an organ donor

- ♥ A person must die in a hospital in specific circumstances, usually in an intensive care unit or emergency department, as organs need to be functioning well to be considered for transplantation.
- ♥ Only around 2% of people who die in Australian hospitals meet the criteria required to be an organ donor.
- ♥ In 2023 around 1,530 people (of the 84,000 people who died in Australian hospitals) died in a way where organ donation could be considered.
- ♥ Families were asked about donation in 1,435 cases.
- ♥ Of these, 793 families said yes to donation in the hospital – representing a national consent rate of 55% – with 513 people becoming organ donors.
- ♥ With only a small number of potential donors, increasing consent is critical to increasing our donation rate.
- ♥ Scan the QR code to view a video of how organ and tissue donation works in Australia.



Figure 1: Australia's potential deceased organ donor population and transplantation outcomes 2023



Sources

- 1 Australian Bureau of Statistics. Causes of death, Australia, 2022 (Released 27/09/2023).
- 2 Australian Bureau of Statistics. National, state and territory population, 30 June 2023 (Released 14/12/2023).
- 3 Australian Institute of Health and Welfare 2021. Admitted patient care 2020–21 (Released 31/05/2023).
- 4 OTA, DonateLife Audit, February 2024.
- 5 Deceased organ donation in Australia, Australia and New Zealand Organ Donation Registry, January 2024.

Our performance

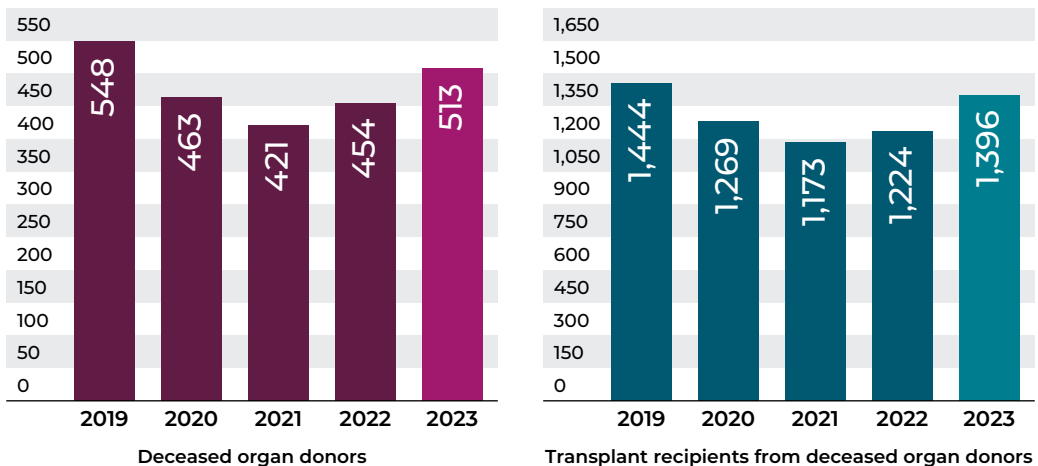
Performance against our purpose

- ♥ Across the 2023–24 reporting period we made positive progress towards our purpose of saving and improving the lives of more Australians through organ and tissue donation and transplantation.
- ♥ The lives of 1,649 Australians changed when they received an organ transplant, thanks to the generosity of 253 living donors and 513 deceased organ donors, and their families, who said yes to donation.

2023	2022	Difference
Deceased organ donors		
♥ 513	♥ 454	+13%
Deceased organ transplant recipients		
👤 1,396	👤 1,224	+14%

- ♥ In 2023 there was a 13% increase in deceased organ donors and a 14% increase in the number of people who received a transplant, compared to 2022 – our highest numbers of deceased organ donors and transplant recipients since the onset of COVID-19 in 2020.
- ♥ The highest numbers for both organ donors and transplant recipients occurred in 2019. Figure 2 illustrates the impact of the COVID-19 pandemic and gradual recovery.

Figure 2: Deceased organ donors and transplant recipients from deceased donors 2019–2023



Our performance measures and results

We track our performance against 12 measures, aligned to our purpose and the goals in the OTA's Strategy 2022–2027. These informed our key activities for the reporting period, as detailed in the OTA's Corporate Plan 2023–2024.

Our purpose measures for the DonateLife program are to Increase the donation rate and to Increase the transplantation rate.

Each of the 3 strategic goals of Build support, Optimise opportunities and Enhance systems has 3 specific measures.

Further information on our performance and our results can be found in Part 2 of this report.

We report our performance results as:

Met (100% of the target)	✓	Partially met (75–99% of the target)	✓
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Increase the donation rate	Increase the transplantation rate
<ul style="list-style-type: none"> ✓ 513 deceased organ donors, and their families, said yes to donation – 43 more donors than our target and a 13% increase compared to 2022. ✓ There were 253 living kidney donors – 40 more than our target and a 13% increase compared to 2022. 	<ul style="list-style-type: none"> ✓ 1,649 Australians received a transplant from deceased or living donors – 194 more than our target and a 14% increase compared to 2022.

Build support More people say yes to donation

- ✓ 36% of Australians are registered on the Australian Organ Donor Register – 1% short of our target and no increase since 2022.
- ✓ 78% of registered donors have discussed donation with their family – 2% short of our target, but a 1% increase compared to 2022.
- ✓ 28% of Australians are aware of the DonateLife brand – we met our target and there was a 2% increase compared to 2022.

Optimise opportunities Donation and transplantation services deliver the best outcomes

- ✓ 55% of families consented to donation – 3% short of our target, but a 1% increase compared to 2022.
- ✓ 85% of planned end-of-life cases were notified to DonateLife agencies – 1% short of our target, but a 2% increase compared to 2022.
- ✓ 84% of conversations with families about donation involved a donation specialist nurse – we exceeded our target by 2% and there was a 4% increase compared to 2022.

Enhance systems Enable quality outcomes through information, technology and resources

- ✓ We provided data dashboards and tailored analysis to the DonateLife Network to inform and monitor hospital clinical practice.
- ✓ National waitlist, donation and transplant activity metrics were publicly available.
- ✓ We increased the use of OrganMatch for waitlist management and nationally captured adverse events across the donation sector in a central database.

Letter of transmittal

The Hon Ged Kearney MP
Assistant Minister for Health and Aged Care
Assistant Minister for Indigenous Health
Parliament House
CANBERRA ACT 2600

Dear Assistant Minister

As the Accountable Authority for the Australian Organ and Tissue Donation and Transplantation Authority (Organ and Tissue Authority), I am very pleased to provide you with the Annual Report for the year ended 30 June 2024.

This report has been prepared in accordance with section 46 of the *Public Governance, Performance and Accountability Act 2013*, for presentation to Parliament.

The report also contains information required by other applicable legislation, including the Public Governance, Performance and Accountability Rule 2014, the *Environment Protection and Biodiversity Conservation Act 1999*, the *Freedom of Information Act 1982* and the *Work Health and Safety Act 2011*.

In addition, I certify that for 2023–24, the Organ and Tissue Authority has:

- prepared appropriate fraud and corruption risk assessments and a fraud and corruption control plan
- appropriate fraud and corruption prevention, detection, investigation and reporting mechanisms in place that meet the specific needs of the Organ and Tissue Authority
- taken all reasonable measures to appropriately deal with fraud and corruption relating to the Organ and Tissue Authority.

Yours sincerely



Lucinda Barry AM
Chief Executive Officer
Organ and Tissue Authority

15 October 2024

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Helena, Auntie Pat & Ray

helping us to raise awareness among
First Nations communities.

Helena had a kidney transplant.

Aunty Pat's brother Ross was an
organ donor.

Ray had a kidney transplant.

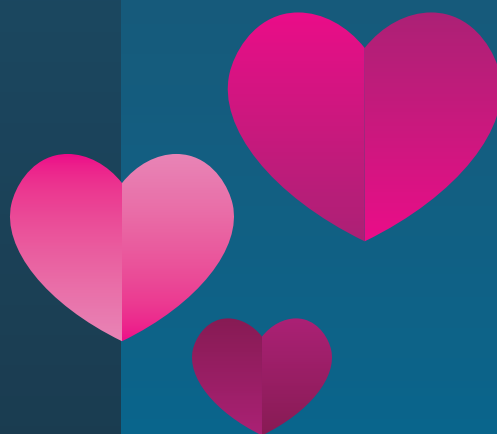


Helena, left; Aunty Pat, centre; Ray, right

Part 1

Overview

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Chief Executive Officer's review

On behalf of the Organ and Tissue Authority (OTA), I am pleased to present the OTA's Annual Report 2023–24.

We made positive progress towards our purpose of saving and improving the lives of more Australians through organ and tissue donation and transplantation. We thank all donors, and their families who said yes to donation.

In 2023 we saw the highest rates of deceased organ, eye and tissue donation and transplantation since the 2019 high before the pandemic. Growth continued from 2022, with a 13% increase in the number of deceased organ donors and a 14% increase in the number of people who had a transplant. Though outcomes vary across the states and territories, overall we have continued to recover from the impacts of COVID-19.

In 2023 there were 513 deceased organ donors and their families, and 253 living donors, who said yes to donation. Their generosity gave 1,649 Australians life-changing organ transplants. Tissue donation also changes lives. In 2023 more than 2,400 people had their eyesight restored through a corneal transplant, a 6% increase compared to 2022. There was a 20% increase in tissue donors compared to 2022, enhancing the lives of nearly 10,000 people who received tissue transplants from both living and deceased donors.

I am humbled and inspired every day by the passion and commitment of all who contribute to Australia's national DonateLife program, the DonateLife Network, the clinical sector, donor families, those who have received a transplant and our volunteers. I also see daily the dedication of the team at the OTA – who are 100% committed to our purpose and go over and beyond to deliver the national program.

Our 2023–24 performance

We continued to focus on our 5-year strategy to build support so more people say yes to donation; optimise opportunities for donation services to deliver the best outcomes; and enhance systems to enable quality outcomes through information technology and resources. We met or partially met all our strategic measures for increasing donation and transplantation rates.



These results show our commitment to saving and improving the lives of more Australians through our leadership of the national DonateLife program.

Working together to achieve our purpose

We continued collaborating with our stakeholders in the DonateLife Network, state and territory governments, donation and transplantation clinical sectors, eye and tissue sectors and the Australian community. We also collaborated with our international colleagues, sharing best practice and education opportunities.

A focus on best practice

During the reporting period, together with the DonateLife agency leadership team, we engaged with hospitals to promote best practice in organ donation. Our network drives key national program metrics – including routine referral of end-of-life patients to DonateLife for donation consideration; checking the patient's registration status on the Australian Organ Donor Register (AODR); and involving a donation nurse specialist in donation conversations.

Optimising these opportunities in hospitals influences the number of families who say yes to donation. Registration also has a direct impact on increasing consent, with 8 in 10 families saying yes if their family member was registered. In 2023, 793 families said yes to donation, which represents a national consent rate of 55%. We continue to focus on increasing this, which will increase Australia's donation rate.

National Strategy for Organ Donation, Retrieval and Transplantation

During the year, the OTA provided expert advice to the Australian Government Department of Health and Aged Care and state and territory governments. We supported the progress of the National Strategy for Organ Donation, Retrieval and Transplantation (the National Strategy), and worked with the sector to continue implementing the National Eye and Tissue Sector Framework.

The National Strategy is currently progressing for agreement from jurisdictional health ministers. If it is agreed, the OTA will work with governments to implement a nationally consistent approach across the end-to-end system by expanding our role to include oversight of organ retrieval and transplantation.

Donate a minute. Donate a lifetime.

In 2023 DonateLife Week – Australia’s major public awareness week to build support – succeeded in its goal of raising awareness of organ and tissue donation. In 2023 we achieved over 50,000 new registrations on the Australian Organ Donor Register and a total of 2,686 media items ran across TV, online print and radio.

The theme in 2023 was ‘Donate a minute. Donate a lifetime. – Can you donate 1 minute to give someone else a lifetime?’. I would like to thank our supporters, official DonateLife Partners and community partners for sharing DonateLife Week messages across Australia. With their help, we reached many segments of the community, such as young people, sports fans, First Nations people and culturally and linguistically diverse groups.

Our legislative framework

In February 2024, amendments to the *Australian Organ and Tissue Donation and Transplantation Authority Act 2008* came into effect. The amendments expand the definition of family members who can consent to publish, disseminate or disclose information about deceased organ or tissue donors or recipients in our community awareness and engagement program. Supporting more donor family members to tell their stories and commemorate their family member in remembrance services is very important for raising awareness and encouraging family discussion about donation.

Parliamentary inquiries

We welcomed the reports from the Western Australian and Victorian parliamentary inquiries demonstrating a focus to continue to improve the donation and transplantation system. We look forward to working with jurisdictions so more Australians have access to a life changing transplantation.

Looking forward

Increasing the consent rate remains one of the key areas for future growth in donation in Australia. Reaching a national consent rate of 70% would make Australia a world leader in donation rates and, critically, would give around 300 more people each year access to an organ transplant.

We will continue to focus on our OTA Strategy 2022–2027 to build support, optimise opportunities and enhance our systems and our collaboration with the sector on the National Strategy, which focuses on equitable access and increased capability and capacity across retrieval and transplantation.

Acknowledgements

In July 2023 we welcomed the OTA Advisory Board’s incoming Chair, Dr Helen Szoke AO, who has had a positive impact in her first year in the position.

During the year we said farewell to Ms Margie Kruger after 6 years serving on the OTA’s Board and Advisory Board. I thank Margie for her invaluable contribution to the national program.

I would like to acknowledge the OTA’s National Medical Director, Associate Professor Helen Opdam. In October 2023 she was appointed as President of the International Society for Organ Donation Professionals for 2023–2025.

Many people support and contribute to the DonateLife program, but none of this would be possible without the selfless giving of organ and tissue donors. Thank you for giving others the gift of life.



Lucinda Barry AM
Chief Executive Officer
Organ and Tissue Authority

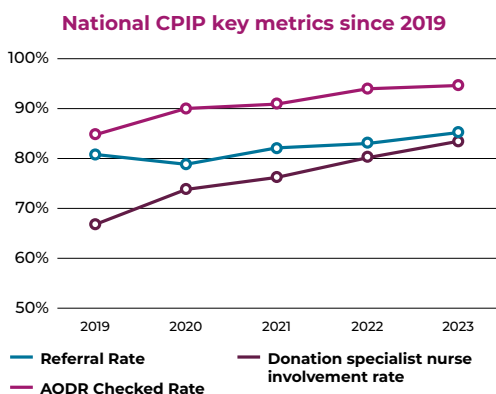
National Medical Director's review



In 2023 we saw another year of growth, with donation and transplantation numbers close to what they were in the peak years of 2018 and 2019. This is a result of the dedication and collaboration of the clinical and community stakeholders across the donation and transplantation sector.

Achieving best practice in organ donation

The Clinical Practice Improvement Program (CPIP) key metrics have continued to indicate steady improvement. The CPIP is the main mechanism for monitoring best donation practices in DonateLife hospitals. A key element is the routine referral to donation services of all patients approaching end-of-life in intensive care units and emergency departments to assess suitability and feasibility for donation. Rates of routine referral have increased to 85% of all patients in end-of-life care. Improvements have also occurred in process metrics related to family communication, with the AODR checked 95% of the time before donation being raised, and donation specialist nurse participation in 84% of instances when donation was offered to families.



Learning from international practices

Australian international presence in organ donation has grown through the engagement and attendance of OTA and DonateLife staff at international conferences, visits to international donation organisations and contributions to international activities. The International Society

for Organ Donation Professionals Congress was attended by OTA and DonateLife Network representatives, with many contributing to the program. International collaboration and relationship development is important for efficiently and effectively advancing Australia's program through providing opportunities for learning between countries.

Professional education

The OTA delivers a high-quality professional education and training program. In 2023–24 this included the ongoing delivery of the core and practical Family Donation Conversation workshops, the Introductory Donor Awareness Training workshops, nursing and medical donation specialist induction and development days, and a web-coaching program that provides computer-based live virtual communication training for nurse donation specialists.

The Education Working Group was formed in July 2023 to develop an education strategy and framework to meet the current and future needs of the health professionals involved in organ donation across the clinical sector. This work included reviewing advanced communication training for donation specialists, training for intensive care specialist trainees, hospital staff education, 'train the trainer' for education delivery, and professional development pathways for the DonateLife nursing network. Engagement with key professional groups is pivotal to this work, including with the College of Intensive Care Medicine of Australia and New Zealand, Organ Donation New Zealand, the Australian College of Critical Care Nurses, the Australian College of Perioperative Nurses and the Australian College of Emergency Nursing.

Facilitating organ donation after voluntary assisted dying

In September 2023 Australia became the fifth country to facilitate organ donation after voluntary assisted dying (VAD). Currently VAD is legal in all Australian states, and patients in these states who choose VAD also have the potential to participate in organ donation as part of their end-of-life-care journey. In 2023–24 there were 6 individuals who donated organs after VAD in Australia. The potential for organ donation in the context of VAD in Australia continues to be explored.

Supporting donor families

The report on the Donor Family Study's final wave (Wave 5) was released in September 2023 and provided an opportunity for families who made a donation decision in 2018 or 2019 to share feedback about their experience. The Donor Family Study has been important in informing practice improvements that enable families who are making a donation decision to receive care, information and support in the best possible manner. The OTA is committed to continuing to support quality assurance activities that focus on learning from and improving the experience of families who have made a donation decision.

Enhancing OrganMatch

The OTA has continued to drive enhancements to increase safe and equitable transplantation through the OrganMatch system – Australia's clinical donation, laboratory and transplantation system that facilitates compatibility matching of recipients and donors for organ transplantation. By working with our stakeholders, we have been able to improve the user experience, improve interactions with clinical practices and provide further enhancements to the system.

Vigilance and surveillance system

The OTA's Vigilance and Surveillance Expert Advisory Committee (VSEAC) continued to meet throughout 2023–24. VSEAC is a key component of the Australian Vigilance and Surveillance System for Organ Donation and Transplantation, which was established in 2017. It receives notifications of incidents from across the sector, providing national and independent oversight as part of a quality assurance and improvement process.

Further system improvements have included enhancing the notification submission process and database. Key learnings were disseminated throughout the year via the 2023 annual report and communiqués to the clinical sector.

Working with our clinical stakeholders

The OTA continues to work closely with clinical colleagues in the transplantation sector to optimise practice at the interface of donation and transplantation and to support best transplant outcomes. This includes supporting the work and projects undertaken by the Transplant Society of Australia and New Zealand (TSANZ), including updating key clinical guidelines such as the TSANZ Clinical Guidelines for Organ Transplantation from Deceased Donors.

Australia and New Zealand Paired Kidney Exchange (ANZKX) program

In 2023 the Australia and New Zealand Paired Kidney Exchange (ANZKX) program recorded the highest number of donors and transplants since the expansion of the program in 2019. This program enables living kidney donor transplantation to occur through matching incompatible donor and recipient pairs with other incompatible pairs across Australia and New Zealand.

Of the 253 living kidney donors in 2023, 55 were through the ANZKX program, a 31% increase from 2022 (42). In October 2023 the ANZKX expanded to include transplant centres in Wellington, Christchurch and Brisbane. This has facilitated greater access and more convenient care that is closer to home for both donors and transplant recipients. The OTA remains committed to increasing opportunities for living donor transplantation through supporting the development of a living donation strategy with the goal of expanding access.

Looking forward

The positive donation and transplantation outcomes in 2023 provide optimism for continued growth into the future, with our ongoing commitment to helping as many Australians as possible benefit from the life-changing gift of organ donation.

Associate Professor Helen Opdam

National Medical Director
Organ and Tissue Authority

Chief Operating Officer's review



It has been a great year at the OTA with a positive culture, solid operational foundation and strong financial performance continuing to enable us to make progress towards our purpose of saving more lives.

2024 APS employee census results

We are extremely proud of our 2024 APS employee census results, which demonstrate that we have a committed, engaged workforce whose values are aligned with the work we do. The consistency of our results in employee engagement, wellbeing and communication over the past 3 years is a direct outcome of previously implemented action plans. See page 75 for more details on our results.

In 2024–25 we will focus on maintaining our positive results and investing further in leadership development and our innovation mindset.

Fostering a culture of operational excellence and integrity

We continue to grow and uplift the agency's operational capability through actions in line with the APS Reform agenda, including the adoption of best practice recruitment and selection processes, developing the capability of our staff to build a skilled and confident workforce, and supporting an accountable and transparent culture where employees act with integrity and fairness.

In 2023–24 we bolstered integrity as a core value of our culture through training and awareness-raising sessions about staff responsibilities and the requirements of the legislative, policy, and governance frameworks we operate under.

A more modern workspace and better value for money

In December 2023 the OTA moved to a new office at 12 Moore Street, Canberra. The move provided the opportunity to seek better value for money in our lease arrangements and to design a new fit-out that incorporates technology and promotes adaptability, collaboration and productivity. The new fit-out created opportunities not only in where we work but in how we work. See page 86 for more information about our new working environment.

Improving workplace conditions

The OTA Enterprise Agreement 2024–2027 (EA) came into effect in March 2024 following a year of APS-wide bargaining to establish common terms and conditions for all APS employees, while the OTA considered any additional terms. The new EA delivered employees many benefits including increased parental leave and other leave options; greater access to flexible working; and negotiated pay rises over the next 3 years. Voting took place in January 2024, with 87% of staff participating and 100% voting yes to the EA.

Financial performance

The OTA's operating result for 2023–24 was a deficit of \$0.052 million. The OTA is committed to ensuring that resources are appropriately allocated to optimise our performance. We remain in a strong net asset position as at 30 June 2024, with net assets of \$3.054 million. Administered expenditure for 2023–24 was \$51.058 million towards the delivery of the DonateLife program, including \$48.375 million in grants expenditure, most of which supports dedicated donation specialists in hospitals and DonateLife agencies. The OTA's commitment to sound financial management is reflected in its financial performance and unqualified financial statements.

Belinda Small
Chief Operating Officer
Organ and Tissue Authority

About the Organ and Tissue Authority

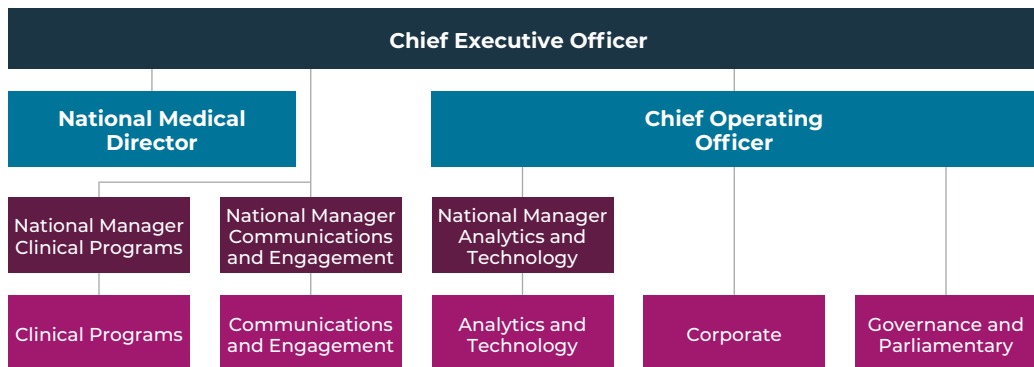
The Australian Organ and Tissue Donation and Transplantation Authority, more commonly known as the OTA, was established in 2009 by the *Australian Organ and Tissue Donation and Transplantation Authority Act 2008* to deliver a nationally coordinated program to increase organ and tissue donation to improve opportunities for transplantation in Australia.

Our DonateliLife program is delivered in partnership with the DonateLife Network, state and territory governments, the donation and transplantation sectors, the eye and tissue sectors, hospitals, community organisations and the public.

We are an extra-small agency within the Australian Government Health and Aged Care portfolio. The Hon Ged Kearney MP, Assistant Minister for Health and Aged Care and Assistant Minister for Indigenous Health, is responsible for the OTA.

OTA structure

Figure 3: OTA organisational structure at 30 June 2024



Further information on the OTA Executive is available on page 62.

Clinical Programs supports the development and delivery of key national initiatives for the DonateLife Network and the broader clinical community across the donation, retrieval and transplantation system in Australia.

Communications and Engagement delivers innovative and effective communication, marketing, stakeholder and community engagement strategies to the Australian public. Through the DonateLife brand, the team's focus is building public awareness about organ and tissue donation and increasing the number of registered donors – which contributes to increasing the rates of organ and tissue donation in Australia.

Analytics and Technology delivers a range of data collection, reporting, analysis and analytics functions. The team is also responsible for the development and enhancement of key national organ donation and transplantation information systems to support real-time donation activity

and to inform policy development and program delivery. The team provides analytical support to internal and external stakeholders across all jurisdictions.

Corporate oversees the financial management of approximately \$58 million in Commonwealth funds annually, consistent with the *Public Governance, Performance and Accountability Act 2013*. Other responsibilities include external reporting, human resource management, risk management and property.

Governance and Parliamentary provides parliamentary coordination, committee governance support and enables the delivery of requirements under the Commonwealth Performance Framework. The team also administers the legislative requirements for freedom of information, public interest disclosure and privacy.

The DonateLife Network

The Australian Government, through the OTA, provides funding to state and territory governments to deliver donation services consistent with the DonateLife program.

Each state and territory has a DonateLife agency; a leadership team; and hospital-based medical and nursing donation specialist staff. Agency staff also include educators, communication officers, donor family support officers, and data and audit personnel. These teams are referred to as the DonateLife Network.

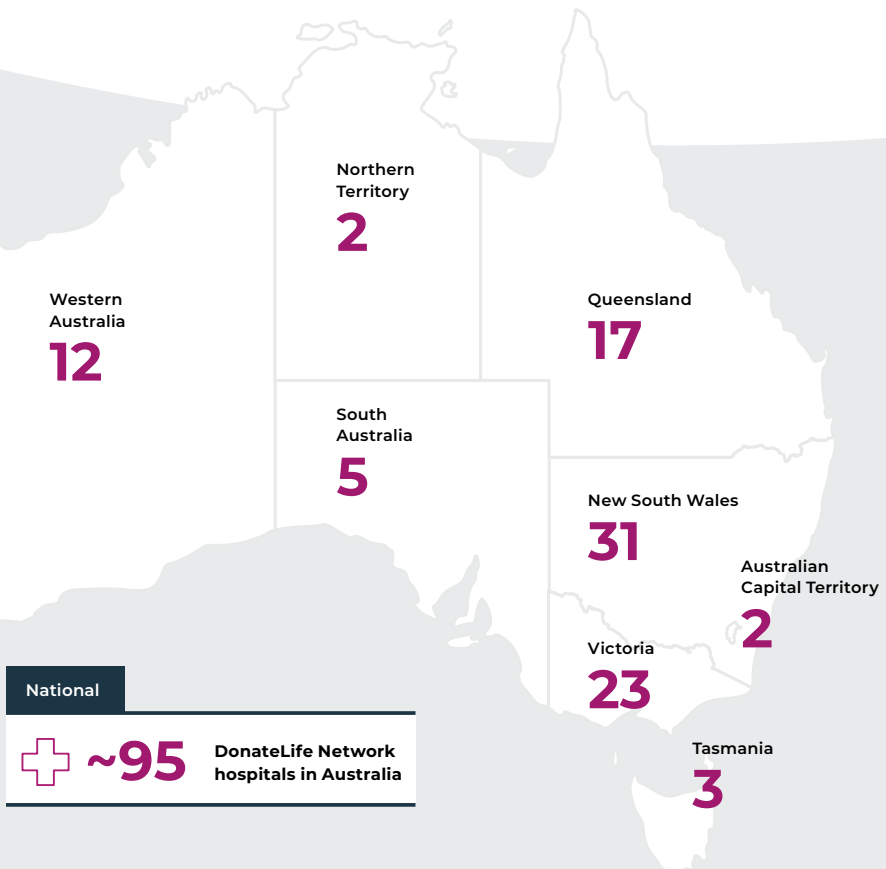
The DonateLife Network includes:

 **8**
DonateLife agencies

 **260+**
donation specialist staff

 **~95**
hospitals

Figure 4: DonateLife Network hospitals by jurisdiction



Our stakeholders

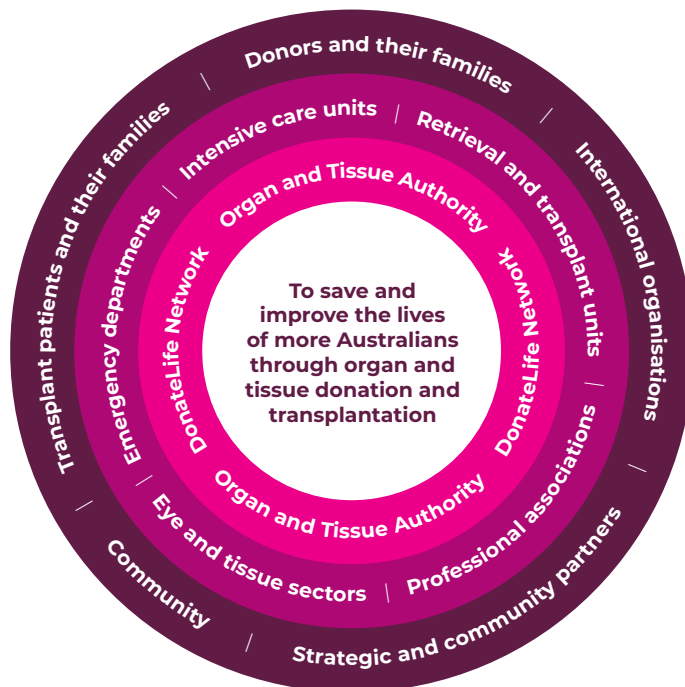
Collaboration is integral to increasing donation and transplantation in Australia.

The OTA and the DonateLife Network work with state and territory governments, the organ donation and transplantation clinical sectors, the eye and tissue sectors, hospitals,

DonateLife partners, community organisations and the public to increase donation and transplantation in Australia.

A comprehensive list of the OTA's key stakeholders is at Appendix 2.

Figure 5: Collaboration environment



Collaboration in 2023–24

Hospital engagement

The OTA's hospital engagement program involves meetings between OTA senior leaders, DonateLife agency leadership teams, and hospital executives and their teams. These meetings focus on promoting best practice in organ donation and addressing key DonateLife program metrics of routine referral of end-of-life patients to DonateLife for donation consideration, checking the patient's registration status on the Australian Organ Donor Register (AODR), and involving a donation nurse specialist in donation conversations. In 2023–24 the OTA met with hospitals in Brisbane, Perth, Canberra and Adelaide.

Transplantation Society of Australia and New Zealand (TSANZ)

The OTA continues its successful collaboration with TSANZ to support donation and transplantation sector improvements that will benefit transplant recipients. TSANZ leads several projects in collaboration with the OTA, including the Kidney Allocation Algorithm Review, Enhancing Clinical Best Practice Guidelines and Procedures Project and the Clinical Supports Project including the establishment of a Living Kidney Donation Clinical Working Group.

International engagement

Sharing best practices and improving organ donation and transplantation worldwide.



Alison Hodak, OTA National Manager, Clinical Programs; Lucinda Barry AM, CEO; and Brianna Elms, OTA National Manager, Communications and Engagement at the Commonwealth Tribute to Life Conference

Celebrating Diversity: Commonwealth Tribute to Life Conference

In March 2024 our CEO, as the regional coordinator representing the Pacific, and a specialist team from the OTA, joined other leading Commonwealth experts, practitioners, policymakers, and advocates in organ and tissue donation and transplantation at the Commonwealth Tribute to Life Conference in Gurugram, India.

The OTA's presence and leadership at the conference provided networking and collaboration opportunities. We shared insights from Australia's DonateLife program – including policies and strategies for public awareness and education initiatives on organ and tissue donation and to increase donor registrations – with other Commonwealth stakeholders in this field whose programs are continuing to evolve.

The conference highlighted the shared commitment of Commonwealth countries to increasing their organ donation rates and collaborating to help identify additional opportunities and overcome barriers for countries, including Australia.

It was a great opportunity to share knowledge and opportunities that have been integral to the success of our DonateLife program.

Sharing knowledge about donation with US counterparts

In October 2023 the OTA's National Manager Clinical Programs visited the following key donation institutions across America to exchange knowledge on clinical programs and practices in the international donation sector.

Gift of Life Institute, Philadelphia: The Gift of Life Institute has guided the OTA's Family Donation Conversation workshops. With a review of our national education program underway, this visit was an invaluable opportunity to learn how the institute's training programs have developed.

United Network for Organ Sharing (UNOS), Richmond, Virginia: We gained insights from UNOS's approach to managing the waiting list, matching donors, managing organ transplant data and developing policies on allocation and equity – all of which will feed into the work we are doing with OrganMatch and our outcome registries.

New England Donor Services, Boston: As this service leads a similar program to our own DonateLife program, we learned about its extensive education program, its systems to share medical imaging as part of donor work-up and management, and its work in organ management with the use of machine perfusion.

Working with the ISODP

The International Society for Organ Donation Professionals (ISODP) advances organ donation through science, professional development and global networks. In October 2023 the OTA sent a specialist contingent to the ISODP Congress in Las Vegas, USA.

The 2023 congress, attended by DonateLife Network representatives and our donation and international counterparts, provided insights into international best practices in organ donation.

Our CEO, National Medical Director and National Manager Clinical Programs presented on Australia's national program, consent rates, education programs and data analytics approach.

Australia remains well placed to monitor the international landscape for emerging approaches in clinical practices through current representation on the ISODP Council – including the ISODP President (2023–2025) and 2 members representing the Oceania region.

Sharing insights with our New Zealand counterparts

In June 2024 the OTA hosted representatives from Organ Donation New Zealand to share insights on the development and maturity of Australia's organ and tissue donation program and to understand the current state and future plans for organ donation in New Zealand.

Over 2 days, we discussed the OTA's operations, our 5-year strategy, the Clinical Practice Improvement Program, key performance indicators, clinical governance structures our educational framework and resources for donation staff, our communication and engagement strategy and our key advisory committees.

It was a privilege to exchange our experiences, learnings and successes and learn more about the experience and challenges regarding organ donation in New Zealand. The visit helped to build the relationship with Organ Donation New Zealand and has resulted in the establishment of regular meetings between the 2 countries.



Delegates at the Commonwealth Tribute to Life Conference

Our environment

Currently there are around 1,800 Australians on the organ transplant waitlist and a further 14,000 people on dialysis, many of whom could benefit from a kidney transplant. This is due to the rising prevalence of chronic disease and advancements in medical technology that mean transplantation is the optimal and sometimes only treatment option for people with organ failure.

Evidence demonstrates that a coordinated and consistent national approach across the hospital system and clinical practice, with sustained public awareness, leads to improvements in donation and transplantation rates. The foundations of the DonateLife program to increase organ and tissue donation and transplantation have been developed with reference to international best practices and adapted for the Australian environment.

Australia has an 'opt-in' donation consent system. People can register their intent to be a donor on the AODR. Family agreement is sought when donation is possible, so it is important that people also let those closest to them know if they want to be a donor.

In 2023 the lives of 1,396 Australians changed when they received an organ transplant, thanks to the generosity of 513 deceased organ donors, and their families, who said yes to donation. This is a 13% increase in deceased organ donors, resulting in a 14% increase in the number of people receiving a transplant, compared with 2022. Deceased organ donation rates are now only 6% down on 2019 pre-COVID outcomes, showing a continued recovery in organ donation following the impacts of the COVID-19 pandemic on the health sector and the community more broadly.

Emerging technologies and innovation in donation

The Donatelife program has been developed to prioritise continuous improvement with reference to international best practices. We are continuing

to drive innovation in data collection and analysis as our datasets are critical to informing program design and driving clinical best practice outcomes.

Legislation

The legislative environment for donation and transplantation remains complex and challenging. Each Australian jurisdiction continues to regulate human organ and tissue donation and transplantation through its own human tissue legislation, including varying provisions around the disclosure of information to maintain the privacy of organ and tissue donors and transplant recipients.

Equity of access for all Australians

Equitable access for all Australians who would benefit from organ transplantation remains an area of focus. We will continue to focus on opportunities to raise awareness, knowledge and support for organ donation and work with the community, First Nations people, and culturally and linguistically diverse (CALD) communities to improve outcomes.

Sociocultural attitudes towards donation

Behavioural research shows organ donation is poorly understood by around 50% of Australians and tissue donation is even less understood (28%). There are many misunderstandings and myths around eligibility criteria, the organ donation process and what organs can be donated.

Australia is also a diverse and multicultural country. With 1 in 3 Australians born overseas and 1 in 5 Australians also speaking a language other than English at home, communicating about organ and tissue donation to CALD communities in a culturally safe way is important to increasing organ and tissue donation.

In 2023

~1,800

people were on a waitlist for a transplant










~14,000

additional people were on dialysis, many of whom could benefit from a kidney transplant

Our Strategy 2022–2027

The OTA's 5-year strategy is informed by insights from our advisory committees with clinical expertise and lived experience – including from donor families and those who have had a transplant.

The OTA aims to return donation and transplantation activity to pre-pandemic levels and to drive further improvements. We aim to achieve this through 3 key goals of building support across the community, optimising opportunities in the clinical sector and enhancing systems to enable quality outcomes.

Build support More people say yes to donation	Optimise opportunities Donation and transplantation services deliver the best outcomes	Enhance systems Enable quality outcomes through information, technology and resources
 Raise awareness	 Identify donors & increase consent	 Monitor, collect, analyse & report national performance
 Increase family discussion	 Drive excellence in donation services	 Advance quality, safety & efficiency
 Increase registration	 Increase safe & equitable transplantation	 Sustain specialist resources

Riley

"We will be forever grateful."
Riley's parents Samara and Jeff.

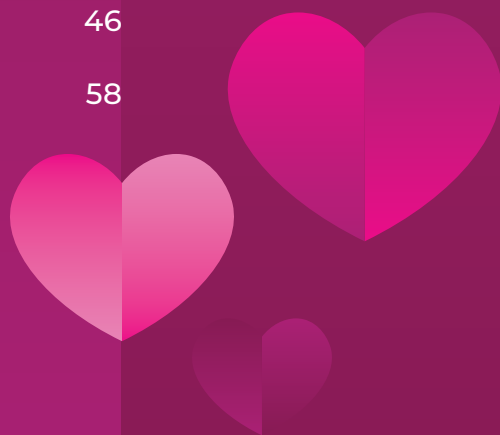
Riley received heart tissue. Riley was born with coronary heart disease and had her first open heart surgery when she was 2 weeks old.



Part 2

Annual Performance Statements

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Structure of the Annual Performance Statements

We report our performance results as:

Met
(100% of
the target)



Partially met
(75–99% of
the target)



The OTA operates within the Commonwealth performance framework in accordance with the *Public Governance, Performance and Accountability Act 2013* (PGPA Act).

The Annual Performance Statements detail results achieved against planned performance criteria set out in the OTA chapter of the Health and Aged Care Portfolio Budget Statements 2023–24 and the OTA Corporate Plan 2023–24.

The Annual Performance Statements demonstrate the link between the OTA's activities throughout the year and their contribution to achieving the OTA's purpose.

The Annual Performance Statements include:

- ♥ performance results against performance measures
- ♥ analysis of performance by goal and objective
- ♥ key achievements and challenges in 2023–24.

The OTA's performance measures are reported by calendar year to align with Australian and international donation and performance reporting practice. More information about the OTA's performance, can be found in the 2023 Australian Donation and Transplantation Activity Report at www.donatelife.gov.au/2023activityreport and the OTA's Corporate Plan 2023–24.

Statement of preparation

I, the CEO, as the Accountable Authority of the Organ and Tissue Authority (OTA), present the 2023–24 performance statements of the OTA, as required under section 39(1)(a) of the *Public Governance, Performance and Accountability Act 2013* (PGPA Act). In my opinion, these Annual Performance Statements accurately present the OTA's performance and comply with subsection 39(2) of the PGPA Act.

The statements below report the OTA's performance against the planned performance criteria set out in the Health and Aged Care Portfolio Budget Statements 2023–24 and the OTA's Corporate Plan 2023–24.

Yours faithfully

Lucinda Barry AM

Chief Executive Officer
Organ and Tissue Authority

15 October 2024










Our purpose and goals

Purpose

To save and improve the lives of more Australians through organ and tissue donation and transplantation

<h3>Outcome 1</h3> <p>Improved access to organ and tissue transplants, including through a nationally coordinated and consistent approach and system.</p>	<h3>Program 1.1</h3> <p>A nationally coordinated system for organ and tissue donation for transplantation.</p>
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Goals and objectives

Build support More people say yes to donation	Optimise opportunities Donation and transplantation services deliver the best outcomes	Enhance systems Enable quality outcomes through information, technology and resources
 Raise awareness	 Identify donors & increase consent	 Monitor, collect, analyse & report national performance
 Increase family discussion	 Drive excellence in donation services	 Advance quality, safety & efficiency
 Increase registration	 Increase safe & equitable transplantation	 Sustain specialist resources

Performance results

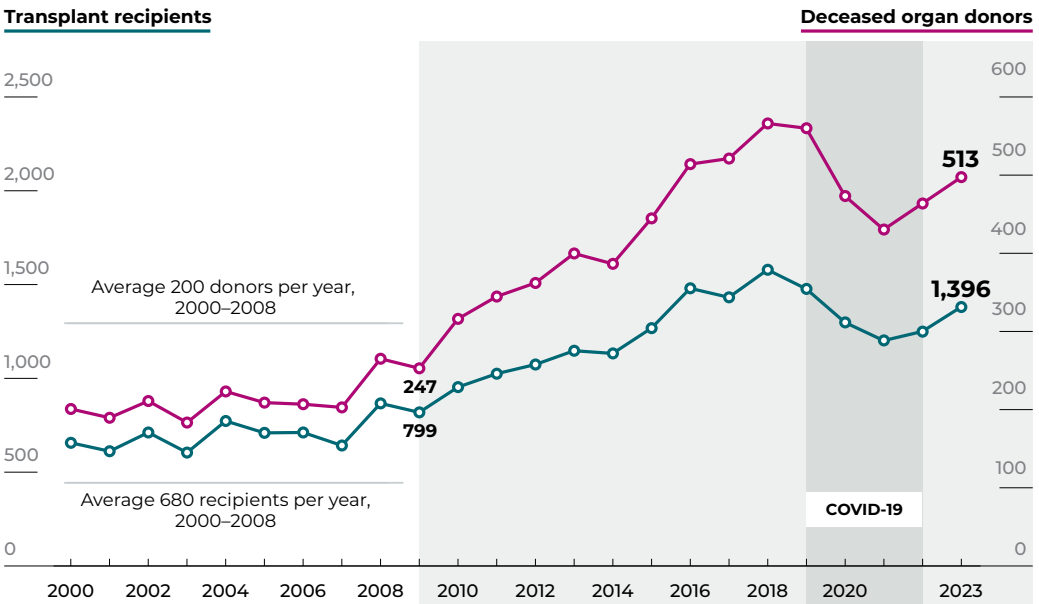
Since the national DonateLife program began in 2009

 **6,417**
deceased organ donors

 **18,144**
organ transplant recipients

- ♥ The Australian Government’s DonateLife program to improve opportunities for transplantation through increased organ and tissue donation began in 2009.
- ♥ The first 10 years of the DonateLife program saw a 122% increase in deceased donation rates, resulting in an 81% increase in the number of people who received an organ transplant.
- ♥ In 2020 we saw the emergence of the COVID-19 pandemic in Australia. In the 2 years following, there was a 23% reduction in the number of donors and the number of people who received a transplant.
- ♥ There has been continued recovery in the sector. In 2023, 1,396 Australians received an organ transplant, due to the generosity of 513 deceased organ donors and their families. This is a 13% increase (59 more) in the number of donors and a 14% increase (172 more) in the number of people receiving an organ transplant, compared with 2022.

Figure 6: Deceased organ donation and transplant recipients 2000–2023



Note: the DonateLife program commenced in 2009

The OTA met the targets for 8 of its 12 performance measures and partially met the targets for 4 performance measures, demonstrating that the OTA was largely successful in delivering activities to achieve against its purpose.

Performance summary 2023–24

Measure		2023 Target	2023 Results	
Increase the donation rate	Deceased organ donors per million population (dpmp)	18 dpmp*	19.3 dpmp	✓
	Estimated donors per year	470	513	
	Living organ donors per million population (dpmp)	8.8 dpmp	9.5 dpmp	✓
	Estimated living donors per year	215	253	
Increase the transplantation rate	Transplants per year, from deceased and living donors	1,455	1,649	✓
Build support	Eligible Australians (16 years and over) are registered on the AODR	37%	36%	✓
	Registered donors have discussed donation with their family	80%	78%	✓
	Eligible Australians (16 years and over) are aware of the DonateLife brand	28%	28%**	✓
Optimise opportunities	National organ donation consent rate	58%	55%	✓
	Routine notification to DonateLife of all planned end-of-life in an intensive care unit or emergency department	86%	85%	✓
	Donation conversations with families involve a donation specialist nurse	82%	84%	✓
Enhance systems	Hospital and jurisdictional performance data and analysis disseminated		Dashboards and tailored analysis are distributed broadly across the DonateLife Network in a variety of formats to inform and monitor hospital clinical practice	✓
	Waitlist, donation and transplantation data is publicly available		National waitlist, donation and transplant activity metrics are publicly available	✓
	Increased utilisation of donation and transplantation information systems		Increase use of OrganMatch for waitlist management. National capture of adverse events in the Serious and Adverse Event Reporting database	✓

* Performance targets have been adjusted to reflect a significant decrease in donation activity, with a gradual increase towards an agreed national target of 25 dpmp.

** As at 30 June 2024.

Saving and improving lives

Across the 2023–24 reporting period we made positive progress towards our purpose of saving and improving the lives of more Australians through organ and tissue donation and transplantation.

Performance results – our purpose

Measures	Met	Partially met
3	3 ✓	0 ✓

Increase the donation rate

- ♥ In 2023 we increased our donation rates compared to 2022.
- ♥ There were 513 deceased organ donors in 2023, which is a 13% increase compared to 2022.
- ♥ This result is the highest number of organ donors since the onset of COVID-19 in 2020.
- ♥ The national donation target for deceased donation is 25.0 dpmp.

Measure	2023 Target	2023 Results	2022	2021	2020	2019
Deceased organ donors per million population (dpmp) ^{1,2}	18 dpmp	19.3 dpmp ✓	17.5	16.4	18.0	21.6
Estimated donors per year	470	513	454	421	463	548
Living organ donors per million population (dpmp) ^{1,2}	8.8 dpmp	9.5 dpmp ✓	8.6	7.9	7.1	9.4
Estimated living donors per year	215	253	224	203	182	239

Sources

1 Australia and New Zealand Organ Donation Registry

2 Australian Bureau of Statistics, National, state and territory population

Deceased organ donation

- ♥ We met our 2023 deceased organ donation target.
- ♥ The 513 deceased organ donors in 2023 resulted in a donation rate of 19.3 dpmp. This was an increase on the rate in 2022 (17.5 dpmp).
- ♥ Jurisdiction outcomes in 2023 continued to demonstrate variation, with donation rates ranging from 11.3 dpmp to 36.7 dpmp.

Living organ donation

- ♥ We met our 2023 living donation target.
- ♥ Australia's dpmp rate for living donation increased in 2023 to 9.5 dpmp, an increase on the rate in 2022 (8.6 dpmp).
- ♥ There were 253 living kidney donors in 2023, 38 more than the target.
- ♥ This result is 13% higher than the 2022 outcome of 224, and also surpassed the 2019 outcome of 239 donors by 6%.
- ♥ There were no living liver donors in 2023.

Increase the transplantation rate

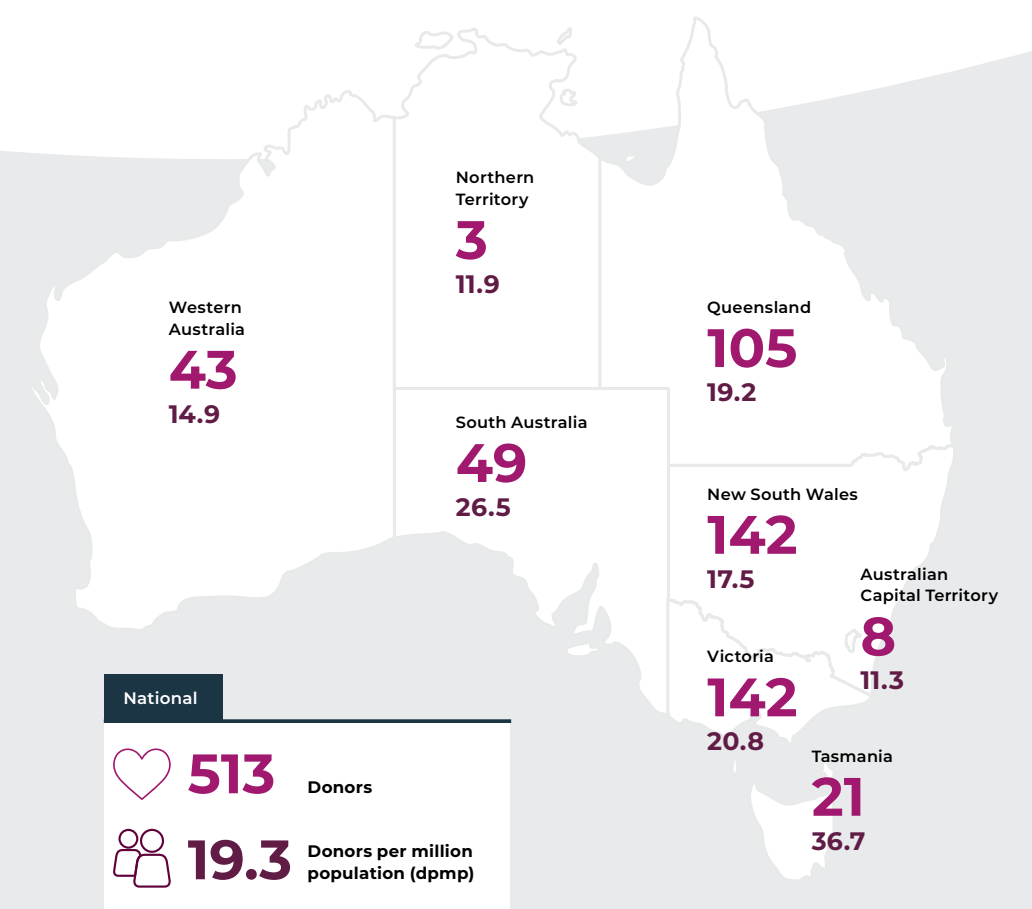
Measure	2023 Target	2023 Result	2022	2021	2020	2019
Transplants per year, from deceased and living donors	1,455	1,649	1,448	1,377	1,452	1,683

Source: Australia and New Zealand Dialysis and Transplant Registry

Transplants per year, from deceased and living donors

- ♥ In 2023 we increased our transplantation rate compared to 2022.
- ♥ In 2023, 1,649 Australians received a transplant from deceased (1,396) or living (253) donors – 194 more than our target and a 14% increase compared to 2022.
- ♥ This result is the highest in terms of the number of transplant recipients since the onset of COVID-19 in 2020.
- ♥ In 2023 there was an increase in transplant activity across all organ types, with the exception of intestines, compared to 2022.
- ♥ Of the 253 living kidney donors in 2023, 55 were through the ANZKX program, a 31% increase compared to 2022 (42) and the highest number of donors since the commencement of the ANZKX program.

Figure 7: Deceased organ donors and donation rates by state and territory in 2023



Build support

More people say yes to donation

Sustained community support for donation is crucial to improving donation outcomes in Australia. Donation is only possible through the generosity of individuals and their families who say yes to donation, to save and transform the lives of others.



Raise awareness

Objective

More Australians understand the need for organ and tissue donation and the benefits it gives to another person needing a transplant.



Increase family discussion

Objective

More Australians talk to their family about organ and tissue donation.



Increase registration

Objective

All Australians who want to be an organ and tissue donor register on the Australian Organ Donor Register.

Performance results – Build support

Measures	Met	Partially met
3	1 ✓	2 ✓

- ✓ 36% of Australians are registered on the Australian Organ Donor Register (AODR) – 1% short of our target and no increase since 2022.
- ✓ 78% of registered donors have discussed donation with their family – 2% short of our target, but a 1% increase compared to 2022.

- ✓ 28% of Australians are aware of the DonateLife brand – we met our target, with a 2% increase compared to 2022.


Eligible Australians are registered on the AODR

Measure	2023 Target	2023 Result	2022	2021	2020	2019
Eligible Australians (16 years and over) are registered on the AODR	37%	36% 	36%	36%	34%	34%

Source: AODR, Australian Bureau of Statistics, National, state and territory population

- ♥ There are close to 7.7 million people registered on the AODR. This is 36% of the eligible Australian population (aged 16 or over).
- ♥ The OTA continues to explore additional large-scale registration initiatives to significantly increase the number of people on the AODR.
- ♥ In 2023 there were 179,813 new registrations on the AODR – 14% fewer than in 2022 (208,861).

Registered donors have discussed donation with their family

Measure	2023 Target	2023 Result	2022	2021	2020	2019
Registered donors have discussed donation with their family	80%	78% 	77%		New measure	

Source: OTA DonateLife Audit

- ♥ In 2023, 78% of donors who were registered on the AODR had discussed donation with their family. This partially met our target.
- ♥ In 2023, 80% of families agreed to donation when their family member was registered as a donor on the AODR. Consent for donation was given in 62% of cases when the donor was not registered but the family knew their family member wanted to be a donor. Consent dropped to only 43% when the family member was not registered and the family was unaware if they wanted to be a donor.
- ♥ In Australia families of potential donors are always asked to consent to their family member becoming a donor in hospital. A family's consideration of organ and tissue donation comes at an intensely emotional time usually associated with the unexpected death of their family member. When donation is a possibility, it helps if families know what their family member wanted.
- ♥ The OTA delivers targeted community education and awareness initiatives and events to encourage Australians to register as organ and tissue donors and talk with their family about donation.

 **8/10**

families gave consent for donation when their family member was a registered donor


 **6/10**

families gave consent for donation when they knew their family member wanted to be a donor

 **4/10**

families gave consent for donation when their family member was not registered and the family was not aware

Eligible Australians are aware of the brand

Measure	2023 Target	2023 Result	2022	2021	2020	2019
Eligible Australians (16 years and over) are aware of the DonateLife brand	28%	28%* 	26%			New measure

Source: Community Survey via YouGov.

* This measure uses the most recent data available due to an increase in reporting frequency and result is at 30 June 2024.

- ♥ 28% of eligible Australians (16 years and over) were aware of the DonateLife brand. We met our target, with an increase of 2% compared to 2022.
- ♥ Brand recognition strategies help to raise awareness about DonateLife, the importance of organ and tissue donation, and to dispel myths and misconceptions while encouraging more people to register.
- ♥ The OTA uses data, insights and research to deliver targeted communication and engagement activities that increase DonateLife brand awareness and identify key opportunities for behavioural change to increase the number of new registrations on the AODR and prompt family discussion about donation.



The DonateLife brand in the community



Raise awareness

Our objective

More Australians understand the need for organ and tissue donation and the benefits it gives to another person needing a transplant.

Why it's important

Access to life-changing and often life-saving transplantation depends on the willingness of people to donate and public awareness and confidence in the donation process.

Engaging with the Australian public

In 2023–24 the OTA continued to deliver a range of public awareness activities, education initiatives, events and digital marketing to raise awareness, both locally and nationally, and encourage family discussion about organ and tissue donation.

We deliver these activities in collaboration with the DonateLife Network, DonateLife Partners and Community Awareness Grants recipients, alongside a vast network of passionate volunteers and advocates in the community, including donor families and those who have had a transplant.

DonateLife Week 2023 – Sunday 23 July – Sunday 30 July

DonateLife Week is the OTA's major awareness initiative. The theme in 2023 was 'Donate a minute. Donate a lifetime. – Can you donate 1 minute to give someone else a lifetime?'

DonateLife Week 2023 was launched on Sunday 23 July 2023 by the Hon Ged Kearney MP, Assistant Minister for Health and Aged Care, at the Queensland Children's Hospital transplant unit.

In 2023 we targeted advertising and public relations to already engaged Australians. However, we recognised the importance of also sharing our messages with strategic audience groups. We amplified DonateLife Week messages through DonateLife Partnerships and Community Awareness Grants activities, with projects targeting young people, sports fans, First Nations people and culturally and linguistically diverse (CALD) audiences. To create a groundswell of awareness, we also encouraged advocates and volunteers to engage in a café activation, with 242 cafés across Australia promoting DonateLife Week, providing stickers for coffee cups with registration QR codes to their customers.

Overall we achieved just over 50,000 new registrations on the AODR during the 2023 DonateLife Week activity period.

Community led awareness activities

Community led awareness activities are an important part of the DonateLife program. The OTA continued to support the public awareness activities led by community groups, such as the Gift of Life Walk, Jersey Day and Saffron Day. Local activations were supported by DonateLife agencies and volunteers across Australia, including hosting registration stalls at career expos, university orientation weeks, local shows and sporting events. We also provided guest speakers for workplaces, clubs and schools, such as addressing young people as part of the bstreetsmart road safety and P.A.R.T.Y (Prevent Alcohol and Risk-related Trauma) programs.

DonateLife Thank You Day – Sunday 19 November

DonateLife Thank You Day is a national day to acknowledge the generosity of organ and tissue donors and their families who said yes to donation.

In 2023 we encouraged Australians to share a message of thanks to organ and tissue donors on social media. We provided downloadable content and graphics with messaging about the generosity of donors and their families.

The Thank You Day digital activity ran from 3 to 29 November. We also asked Australians to mark Thank You Day by talking to their families about organ and tissue donation.

All our Thank You Day posts exceeded industry standards for engagement rates.

Our Thank You Day 2023 online reach:

201,000+

impressions across our channels

26,460

new visitors to our website

104

reshares of recipient and donor videos

137

uses of #thankyouday

3,008

views of our Thank You Day web page

DonateLife Partnerships – raising awareness of donation in the community

In 2023 we entered the third year of our DonateLife Partnerships program. Since 2021 the government-funded initiative has been a key component of the DonateLife program providing \$4 million over 4 years to boost organ and tissue donation awareness and support in Australia.

The program aims to increase awareness of organ and tissue donation and the DonateLife brand, and to encourage registration. DonateLife Partnerships grants have been awarded to organisations that demonstrate an expansive and national reach to key target audiences, and exceptional value for money, that government alone cannot deliver.

Our partnership program in 2023–24 included the following key highlights.

Melbourne Storm and Sunshine Coast Lightning

Our partnership with the Melbourne Storm National Rugby League team and Sunshine Coast Lightning Super Netball League team delivered DonateLife match day activations and a comprehensive digital media package, extending the reach of the DonateLife Week awareness campaign.

In 2023 the DonateLife Week partnership game for Melbourne Storm included a pre-game on-ground interview and a guard of honour. For the first time a DonateLife Award for the most courageous player was presented, with Marion Seve being the inaugural recipient. In 2023 social media engagement for these events doubled compared to 2022.

Sunshine Coast Lightning held their first full DonateLife match day in June 2024. Nine-year-old liver recipient Lara went along to meet the team, and living donation pair Adam and Glenn shared their story. The match day included all the same elements of the Melbourne Storm match day program, with social media and website advertising prompting registration among fans.



Melbourne Storm players supporting DonateLife

Western Bulldogs

In June 2024 the Western Bulldogs AFL team introduced their audience to junior mascot and 9-year-old heart recipient Willo, during a home game which linked the OTA's social channels with a new audience. A post on Instagram Live, in collaboration with the Western Bulldogs, reached 19,635 people within 12 hours, with 98% of these views from people who did not already follow DonateLife. The post received 2,550 likes in 12 hours, compared to the OTA's average of around 150 likes per post.

Associated highlights were:

- ♥ 148,400 impressions through the Western Bulldogs and AFL Instagram reel of Willo being asked to run out on the field by player Adam Treloar
- ♥ 22,500 impressions from the Western Bulldogs Instagram reel of Willo running out on the field with the team.

News Corp

Through our News Corp partnership we deliver advertising across News Corp channels and OTA-owned social media. We also secure prominent media stories across the country.

This partnership continued to deliver great editorial coverage and extends the reach of our messaging across Australia. In 2023–24 this included a front-page story in the *Herald Sun* and *Adelaide Advertiser* with updates on liver recipient Thea Hattersley and on liver recipients Mia and Anthony, and a feature story during

DonateLife Week. There was also a feature in News Corp's weekend magazines across the country about footballers supporting organ and tissue donation. It featured personal tales from AFL legends Jonathan Brown, Patrick Dangerfield and Phil Davis.

News Corp also delivered 3 native content pieces in DonateLife Week with 30,000 views each and advertising in Jonathan Brown's podcast where he spoke about his mum becoming a donor.

Pixel 42

Pixel 42 created and delivered television commercials across Australia's largest regional television broadcaster and news producer, WIN Network. For DonateLife Week 2023, Pixel 42 secured more than 2,200 ad placements on the WIN Network. This provides a way to connect our organ and tissue donation message with regional Australians.

Tonic Health Media

Our partnership with Tonic Health Media, Australia's largest health media network, delivered national engagement with general practitioners (GPs) about organ and tissue donation. This partnership included information kits for GPs that went to around 3,300 GP clinics in mid-June 2024. In April 2024 Tonic Health Media also ran a webinar for GPs focusing on the vital role they can play in raising awareness and encouraging registration. The webinar's host, Dr Norman Swan, was joined by the OTA's National Medical Director, Associate Professor Helen Opdam, Dr Greg Stewart (a GP whose brother was a liver recipient) and donor family Rusty and Helen Wilson sharing their son Mathew's donation story.



Our DonateLife Partnerships raising awareness together

The Western Bulldogs Australian Football League and Melbourne Storm National Rugby League teams were part of an editorial spread for 2023 DonateLife Week, focusing on waitlist stories from across the country. News Corp were provided exclusive waitlist figures, and interviews with DonateLife spokespeople to support the story.

Melbourne Storm and Western Bulldogs players with liver transplant recipients Layla Saxon and Amy Burrows-Dooley

Convenience Advertising

Convenience Advertising, Australia's leading bathroom advertising network, has been the most successful registration partner for DonateLife. Over the past 3 years, it has delivered more than 7,000 registrations. With the rise in use of smartphones and QR codes, the bathroom posters are an incredibly effective way to drive action. They have also significantly contributed to our brand awareness, with the bathroom posters being one of our most recognisable brand assets.

The QR code from these posters was scanned 13,173 times in 2023–24, resulting in 3,987 registrations.

Amending legislation on the disclosure of information about deceased donors or recipients

On 24 February 2024 the Australian Organ and Tissue Donation and Transplantation Authority Amendment (Disclosure of Information) Bill 2023 came into effect. It amends the *Australian Organ and Tissue Donation and Transplantation Authority Act 2008*.

The OTA worked with the Department of Health and Aged Care to introduce the amendments. The changes enable the OTA to disseminate, publish or disclose information about deceased donors in public awareness, promotional or educational activities and commemorative services, with consent from an authorised family member. The definition of an authorised family member was also broadened with the amendments, in line with the make-up of families today. Supporting more donor families to share their story helps to raise awareness and encourage family discussion about organ and tissue donation.

Many families are involved in raising awareness of organ and tissue donation and choose to publicly share their story as part of the OTA's communications and engagement activities. For example, with consent, families can be involved in DonateLife Week, media and social media engagement, community events, education, and volunteer opportunities.

Connecting with First Nations people about organ donation and transplantation

We continued to focus on opportunities to increase knowledge of and support for First Nations people, through community engagement and communication activities.

Implementing a framework for cultural safety

In 2023 a cultural needs assessment of the DonateLife program was commissioned to provide advice on how to improve cultural safety and awareness in the DonateLife Network. Following consultation a report was provided – *A framework for Aboriginal and Torres Strait Islander organ and tissue donation excellence*. The OTA has begun discussions with the DonateLife Network and jurisdictional health representatives on implementing the framework. The framework will support staff across the OTA and the DonateLife Network to safely co-design engagement with First Nations people on the topic of organ and tissue donation in clinical and community spaces.

Little Rocket

Little Rocket is a First Nations public relations and marketing company and a 2021 Community Awareness Grant recipient. Using this funding, it aims to help communicate about organ donation to First Nations trusted community leaders.

Following a delay due to the COVID-19 pandemic, Little Rocket released a video and a range of supporting assets in September 2023 to share the story of Aunty Julie – a liver recipient who had been waiting over 1,000 days for her second liver transplant – and talk about the importance of organ donation registration and conversation. They shared her story on social channels and through 50 Aboriginal Community Controlled Health Organisations (ACCHOs) and community stakeholders. Just one Instagram reel was viewed over 4,500 times.

Little Rocket also produced a number of print assets that have been shared through ACCHOs. Social posts were also shared by First Nations ambassadors, including Closing the Gap, which has 199,000 followers.

This activity reached 228,668 people on social media platforms, with 20,752 video views.

Donate a Minute. Donate a Lifetime.

Can you donate a minute to give someone a lifetime?

DonateLife Week is our unique opportunity for everyone who supports organ and tissue donation – including donor families, recipients, volunteers and partners – to get involved, support DonateLife, and create a groundswell of awareness-building activities. We aim to activate the community, get Australians talking about organ and tissue donation and get them registering to be a donor.

DonateLife Week ran from Sunday 23 July to Sunday 30 July 2023. Our focus was to drive awareness at a local and national level with ‘engaged’ Australians. With powerful human-interest storytelling, accompanied by compelling data, our goal was to encourage those Australians who already support organ and tissue donation to take the next step and register.

Our messages were simple and a clear call to action for the community – ‘It only takes one minute to register as an organ and tissue donor’ and ‘Talk to your family about donation’.

We saw record engagement and exposure over the DonateLife Week period:

- ♥ 31% of media stories included a message encouraging family conversation (21% above our target).
- ♥ DonateLife social channels gained 1,125 new followers.
- ♥ We reached more than a quarter of a million people through our social posts.
- ♥ The launch post for DonateLife Week 2023 was our top-performing reel on Instagram. It reached 28,246 people – over 3 times the number of DonateLife followers – and was shared more than 198 times, gaining 493 interactions.

Overall we achieved just over 50,000 new registrations on the Australian Organ Donor Register during DonateLife Week 2023.

TAKE A MINUTE TO TALK TO YOUR FAMILY ABOUT ORGAN AND TISSUE DONATION.

[DONATELIFE.GOV.AU](https://donatelife.gov.au)



LEVI RECEIVED A LIVER TRANSPLANT



Increase family discussion

Our objective

More Australians talk to their family about organ and tissue donation.

Why it's important

In Australia, families are always asked to agree to donation. It is important registered donors have discussed their donation wishes with their family.

Implementing communications and engagement strategies to increase discussion

In 2023–24 the OTA continued to implement a nationally consistent approach to communications and engagement strategies, events and activities that build DonateLife brand awareness, increase the number of Australians registered on the AODR and encourage family discussion about donation.

Research into attitudes and behaviours around organ donation

We commissioned a market research and behavioural insights project to inform strategies and understand the motivations, attitudes, behaviours and barriers to organ and tissue donation registration and family discussion. The objective of the research was threefold: to benchmark the OTA's engagement key performance indicators, to build an engagement framework and to refine audience segmentation. The research outcomes have provided us with a robust evidence base to inform any future policy positions, as well as guiding ongoing public awareness strategies and audience-focused education, engagement and promotional activities.

Targeting young Australians through the 2023 Community Awareness Grants program

The 2023 Community Awareness Grants were awarded to projects targeting people aged 16 to 25. These projects aimed to increase family discussion and awareness of organ and tissue donation and encourage young people to register as a donor on the AODR. These initiatives have been invaluable in reaching and influencing people and asking them to take action through unique ways.

- ♥ **In-game advertising:** Make Mate developed digital advertisements for DonateLife Week targeting messages to young online gamers about the importance of organ and tissue donation. The ads were featured in around 500 games that are popular with Australians between 16 and 25 years old and resulted in a 4.4% click-through rate on the first day (the standard is up to 2%).
- ♥ **Australia's greatest eshay:** Wattle St launched a social media initiative in which the character 'David D'Lifer Miller', 'Australia's greatest eshay', connected with young men about organ donation for DonateLife Week. The campaign film was promoted on YouTube, reaching over 13,000 men between the ages of 18 and 24 years old. Fourteen micro-influencers shared the message, reaching an audience of more than 37,000. The story reached 24,900 YouTube accounts and received 16,996 post engagements, 33,682 video plays and 1,500 link clicks.
- ♥ **Don't give your heart away:** Make Mate ran a Valentine's Day initiative leading up to 14 February 2024. This included advertising on Tinder and a survey through a PedestrianTV article entitled '5 Vital Questions To Ask On A First Date This V-Day If You Wanna Weed Out Any Duds Early'. The initiative was incredibly successful, driving more than 50,000 unique users to the DonateLife website through advertising on Tinder that converted to 262 registrations on the AODR.
- ♥ **La Trobe University:** Researchers from La Trobe University co-designed a video content series with young people to fill an education-gap that was identified from their 2022 research. The videos were delivered as paid advertisements to Australians under 25. The advertisements were seen more than 750,000 times, resulting in almost 3,000 clicks through to the DonateLife website.

Knowing our audience

We want all Australians to talk about organ and tissue donation, but we know some people are more likely to register than others. We wanted to understand why.

In 2023–24, we engaged an independent market research company to undertake extensive audience research into attitudes, behaviours, drivers and barriers to organ and tissue donation.

The research showed that many Australians support organ and tissue donation but rarely think about it unless they are personally affected. Rather than targeting our communications tactics to certain demographics, we wanted to develop a framework to instead look at people’s likelihood to take action.

Looking at the Australian public on a spectrum from ‘already registered, very supportive’ through to ‘not supportive, never likely to register’ enabled us to develop 9 audience personas. From these 9 personas, we identified 5 primary focus areas we see as the most likely to convert to registrations and share the message.

The 5 primary focus personas are:

- ♥ Rationals have a pragmatic approach to life and think everyone should do their little bit to contribute.

- ♥ Compassionates are huge empathis who actively engage in the world around them and get involved in acts of service.
- ♥ Unawares are busy and community minded individuals with an enjoyment of everyday life.
- ♥ Deliberators are careful decision makers with limited bandwidth in life.
- ♥ Uncomfortables are less community minded and more introverted.

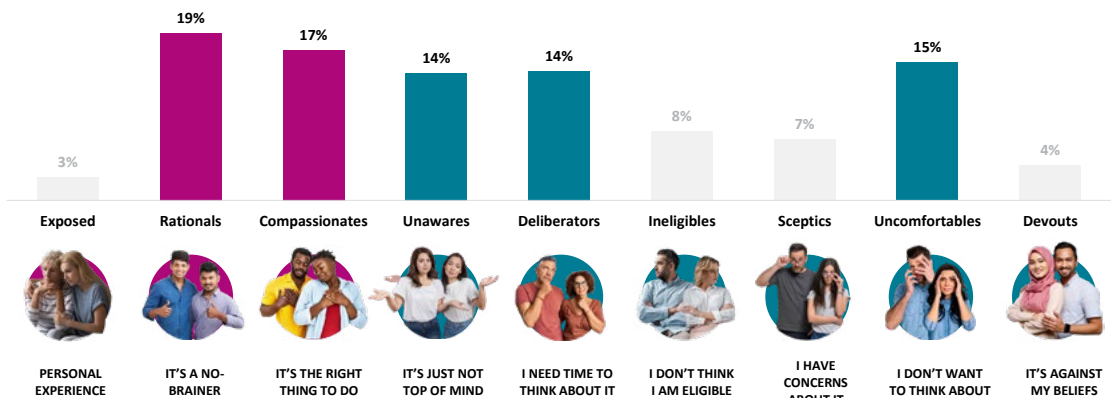
We are using these personas to shape our communications and engagement strategies and the way we engage with the public.

By better understanding our audience, we will use messages and tactics that resonate strongly with each persona. The research also provides a robust evidence base to inform any future policy positions, as well as guiding ongoing marketing strategies and audience-focused education, engagement and promotional activities.



REGISTERED (38%)

UNREGISTERED (62%)



PERSONAL EXPERIENCE



IT'S A NO-BRAINER



IT'S THE RIGHT THING TO DO



IT'S JUST NOT TOP OF MIND



I NEED TIME TO THINK ABOUT IT



I DON'T THINK I AM ELIGIBLE



I HAVE CONCERNS ABOUT IT



I DON'T WANT TO THINK ABOUT



IT'S AGAINST MY BELIEFS



Increase registration

Our objective

All Australians who want to be an organ and tissue donor register on the Australian Organ Donor Register.

Why it's important

Around 4 in 5 Australians aged 16 years and over support organ and tissue donation but only 1 in 3 have registered to be a donor. Being a registered donor has a direct impact on families agreeing to donation.

Throughout the year, we continued to explore options to generate mass registrations and significantly increase the number of people on the AODR.

Working in partnership to improve registration touch points

The OTA continues to strengthen the DonateLife digital presence, using data and insights about audience behaviour to optimise digital content and channels for target audience groups. During 2023–24 we supported a range of registration initiatives, in collaboration with states and territories, to improve digital registration touch-points:

- ♥ **Lifeblood:** Our research shows that there is a natural association for Australians when talking about organ and blood donation. In late October 2023, Lifeblood added a link to the DonateLife website on its Donate Blood app. In the first month, there were almost 500 conversions from around 2,000 click-throughs. This represents a conversion rate of almost 25%.
- ♥ **Service NSW:** Service NSW led promotional activity in support of DonateLife Week encouraging NSW residents to register through the Service NSW app. This activity resulted in 378 sessions and 296 conversions.
- ♥ **ACT Digital Health:** A banner was added to the homepage of the ACT's MyDHR website to coincide with DonateLife Week. This made it easy for people to link from the website or app straight through to the AODR. The banner, which was live for one month, resulted in 972 click-throughs and 452 conversions.

- ♥ **Services Australia:** Services Australia administers the AODR and has helped increase registrations and raise awareness through their channels. In 2023 Services Australia shared a news story about organ and tissue donation and registration on its internal NewsHub platform – which informs their network of 33,000 staff – that ranked in the top 25% for staff engagement. Services Australia also posted on its Facebook, Instagram, LinkedIn and X pages, reaching more than 23,000 people, with an engagement rate of just over 2%.

Increasing registrations through improvements in our digital channels

We continued to improve the OTA's website, guided by user research and insights, with a view to make it easier for people to learn about organ and tissue donation and register to be a donor. In November 2023 the DonateLife website received a GovCMS Community Website Award in the category 'Connecting with Community'. Members from the GovCMS community voted www.donatelife.gov.au the winner out of 50 government websites. GovCMS is an Australian Government content management system and web hosting service and every year the GovCMS organisation acknowledges impactful and innovative government websites that increase community engagement.

Looking forward

- ♥ The OTA will continue to work with governments to explore additional large-scale registration initiatives to significantly increase the number of people on the AODR. This includes through drivers licences and public awareness campaigns.
- ♥ We will evaluate the effectiveness of the DonateLife Partnerships Program, to raise awareness about organ and tissue donation.
- ♥ We will use behavioural insights, research and data as a robust evidence base to inform and guide ongoing marketing strategies, and audience-focused education, engagement and promotional activities.
- ♥ The 2024 Community Awareness Grant recipients will showcase innovative ways to encourage CALD communities, multicultural and faith groups to register as organ and tissue donors and have family conversations.
- ♥ The OTA and the DonateLife Network will progress cultural safety action plans that support engagement with First Nations people on the topic of organ and tissue donation in the clinical and community programs.
- ♥ We will continue to enhance the user experience of digital channels, including registration channels, and with partners, to improve digital registration touch points.

Figure 8: Our challenges to build support



Optimise opportunities

Donation and transplantation services deliver the best outcomes

Only around 2% of deaths in hospital occur in a way that organ donation is medically possible, so every donation opportunity is precious. A national approach enables as many Australians as possible to have the opportunity to donate, so that more people have access to life-changing transplantation.



Identify donors & increase consent

Objective

DonateLife receives notification of all patients approaching end-of-life in intensive care and emergency departments for assessment for potential organ donation.



Drive excellence in donation services

Objective

Lead, implement and monitor nationally consistent best donation practice in Australia through clinical practice improvement initiatives to provide exceptional care throughout the donation process.



Increase safe & equitable transplantation services

Objective

Support the donation and transplant sectors to adopt best clinical practices, policy and technology that enables optimal organ allocation and utilisation so more people have access to life-changing transplantation.


Performance results – Optimise opportunities

Measures	Met	Partially met
3	1	2

- 55% of families consented to donation – 3% short of our target, but a 1% increase compared to 2022.
- 85% of planned end-of-life cases were notified to DonateLife agencies – 1% short of our target, but a 2% increase compared to 2022.

- 84% of conversations with families about donation involved a donation specialist nurse – we exceeded our target by 2% and there was a 4% increase compared to 2022.

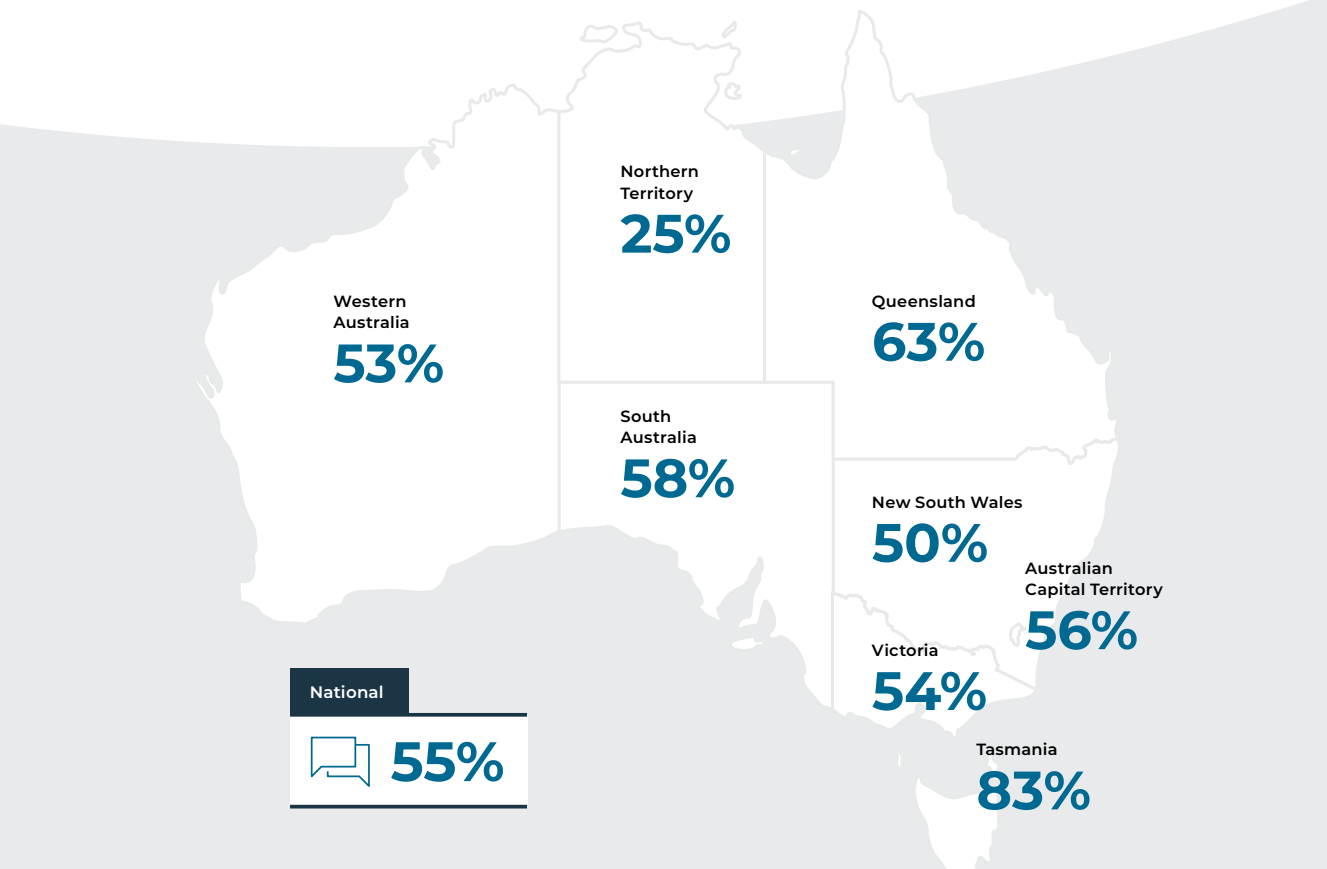
National organ donation consent rate

Measure	2023 Target	2023 Result	2022	2021	2020	2019
National organ donation consent rate	58%	55% 	54%	56%	58%	59%


Source: OTA, Donatelife Audit

- ♥ In 2023 the national consent rate was 55%, a 1% increase from 2022 (54%), with 793 families saying yes to donation. This result partially met our target of 58%.
- ♥ In Australia families of potential donors are always asked to consent to their family member becoming a donor in hospital.
- ♥ Increasing the consent rate among the small number of potential donors is critical to further growth in donation.
- ♥ In 2023 families were asked about donation in 1,435 cases, with 793 families saying yes. Of the 793 consented donors, 513 proceeded to donation; 280 did not proceed, mainly due to medical and logistical reasons.
- ♥ If Australia's consent rate increased to 70%, an additional 300 people each year would have access to a life-changing organ transplant.

Figure 9: Consent rates by state and territory in 2023




Routine notification to DonateLife of all planned end-of-life in an intensive care unit or emergency department

Measure	2023 Target	2023 Result	2022	2021	2020	2019
Routine notification to DonateLife of all planned end-of-life in an intensive care unit or emergency department	86%	85% 	83%	81%	79%	81%

Source: OTA, DonateLife Audit

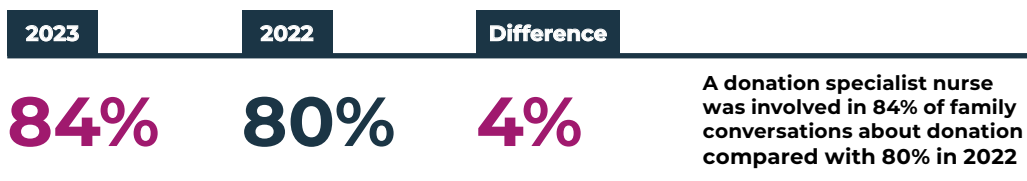
- ♥ In 2023, 85% of planned end-of-life cases that occurred in an intensive care unit (ICU) or emergency department (ED) were notified to DonateLife to explore the opportunity of donation with the family. This result partially met our target of 86%.
- ♥ There are around 260 donation specialist nurses, doctors and support staff covering around 95 hospitals across Australia.
- ♥ The donation specialists work with hospital critical care teams to ensure that, when appropriate, the opportunity for donation is offered to families.

Donation conversations with families involve a donation specialist nurse

Measure	2023 Target	2023 Result	2022	2021	2020	2019
Donation conversations with families involve a donation specialist nurse	82%	84% 	80%	77%	74%	67%

Source: OTA, DonateLife Audit

- ♥ In 2023, 84% of family conversations about donation involved a donation specialist nurse, compared with 80% in 2022. This result met our target of 82%.
- ♥ A key factor in increasing consent is having donation raised by a donation specialist nurse and providing families with high-quality information and care during the donation process.
- ♥ Families supported by a donation specialist nurse are more likely to receive the information required throughout the donation process. It also has shown to improve consent rates.
- ♥ In 2023, 54% of Australian families agreed to donate when supported by a donation specialist nurse. This dropped to 23% when there was no donation specialist nurse involved.



Identify donors & increase consent

Our objective

DonateLife receives notification of all patients approaching end-of-life in intensive care and emergency departments for assessment for potential organ donation.

Why it's important

Notification to DonateLife means the opportunity to donate is explored whenever it is possible and that the wishes of individuals are respected. Suitability for donation is ascertained and the person's registration status is checked so their wishes can be made known to their family. Donation specialists assist families through providing accurate information and support, including throughout the entire process if donation proceeds.

Only around 2% of people who die in Australian hospitals meet the criteria required to be an organ donor. With only a small number of potential donors, increasing consent and notification to DonateLife is critical to increasing our donation rate and ultimately the number of life-saving organs available for transplantation.

transplantation and results against key performance indicators: routine notification to DonateLife of all planned end-of-life in ICU or ED; routine checking of the AODR prior to raising donation with families; and having a donation nurse specialist in the donation conversation. Hospital engagement visits occurred in Brisbane, Perth, Canberra and Adelaide.

Collaborating to drive change in practice and process

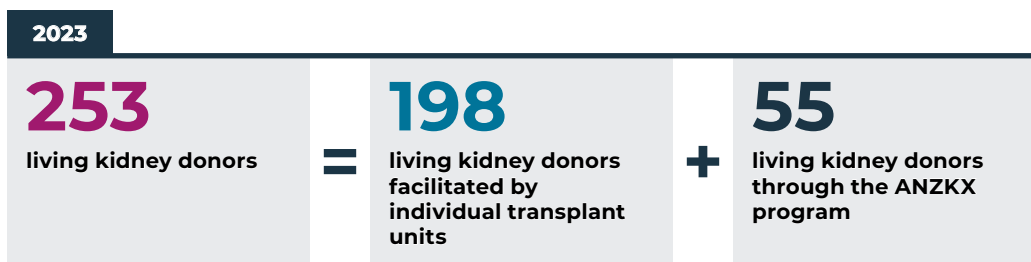
Collaboration is integral to further increasing donation and transplantation in Australia. The OTA continued to provide leadership to drive, implement and monitor a national approach in partnership with the DonateLife Network, which delivered the national DonateLife program in hospitals across Australia.

In February 2024 the OTA began a hospital engagement program. OTA and DonateLife leadership teams visited a range of donation hospitals to discuss successes and challenges in driving best practices in donation and

Increasing opportunities for living donation

A living organ donor is someone who donates a kidney, or on rare occasions a partial liver, to another person. Receiving an organ from a living donor is an alternative to waiting on the national transplant waitlist for an organ from a deceased donor.

There were 253 living kidney donors in 2023. This result is 13% higher than the 2022 outcome of 224, and also higher than the pre-COVID-19 outcome of 239 by 6%. There were no living liver donors in 2023.



The OTA continued to optimise access and outcomes in living donor transplantation by funding:

- ♥ the Australia and New Zealand Paired Kidney Exchange Program (ANZKX), which aims to increase the number of living kidney donations by matching incompatible donor and recipient pairs with other incompatible pairs across Australia and New Zealand. The 253 living kidney donors in 2023 included 55 through the ANZKX, a 31% increase from 2022 (42) and the highest number of donors since the ANZKX began in 2019. In October 2023 the ANZKX expanded to include transplant centres in Wellington, Christchurch and Brisbane.
- ♥ the Living Kidney Donation Clinical Working Group, a collaboration between the Transplantation Society of Australia and New Zealand (TSANZ) and Australian and New Zealand Society of Nephrology (ANZSN). It aims to optimise access and outcomes in living donor transplantation across Australia and New Zealand. The working group has developed recommendations that will assist in the development of a national living donation strategy focused on optimising access and outcomes for both donors and recipients.

We will continue to increase opportunities for living donation through the development and implementation of an agreed national strategy.

Organ donation after voluntary assisted dying

The OTA continued to monitor the international landscape for emerging clinical practices.

In September 2023 Australia became the fifth country to facilitate organ donation after voluntary assisted dying (VAD). Currently VAD is legal in all Australian states and patients in these states who choose VAD also may have the potential to participate in organ donation as part of their end-of-life care journey. Australian territories are navigating legislation to allow VAD legally.

The potential for organ donation in the context of VAD in Australia is still being explored. The OTA, in collaboration with key stakeholders, continues to monitor this area and the potential for a national position on organ donation in the context of VAD to guide and support nationally consistent process by donation specialists. In 2023–24 there were 6 individuals who donated organs after VAD in Australia.



Larna Woodyatt, DonatLife Donation Specialist

A donation specialist nurse's experience with organ donation after VAD

Larna Woodyatt, a DonatLife Nurse Donation Specialist in regional Victoria, was involved in the first donation after VAD case in Australia, which she describes as the most rewarding moment in her nursing career.

Larna's involvement has been both professionally and personally rewarding. She has been recognised for her knowledge and experience, with both national and international invitations to present and speak on this important topic.

In 2024 Larna will travel to Canada, as part of the Janette Hall Scholarship program, to observe, learn from and participate in the process of organ and tissue donation after medical assistance in dying (the Canadian term for VAD). Canada is a world-leading country in organ donation after VAD.

Clinical Practice Improvement Program

The Clinical Practice Improvement Program (CPIP) – a performance framework to guide donation specialist staff and monitor clinical best practice – is a key initiative under the DonateLife program.

The CPIP identifies the elements integral to achieving best practice organ and tissue donation in ICUs and EDs.

As well as measuring performance against our strategic measures, goals and objectives, the OTA also measures hospital and jurisdictional performance against the CPIP measures. Reporting against CPIP measures is a key component of funding agreements with the states and territories.

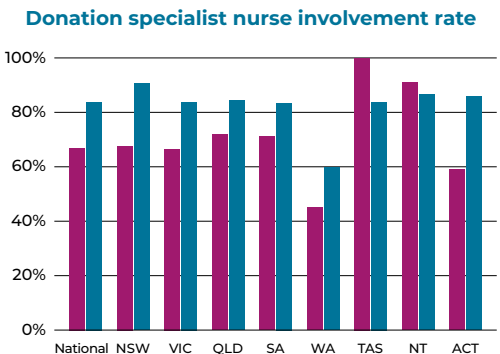
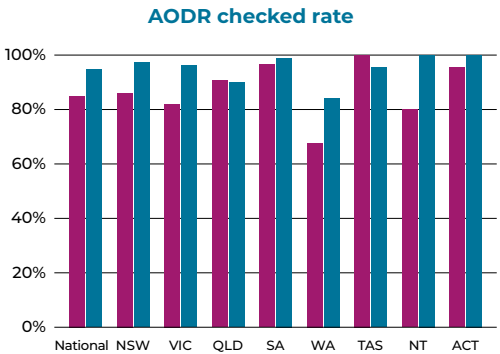
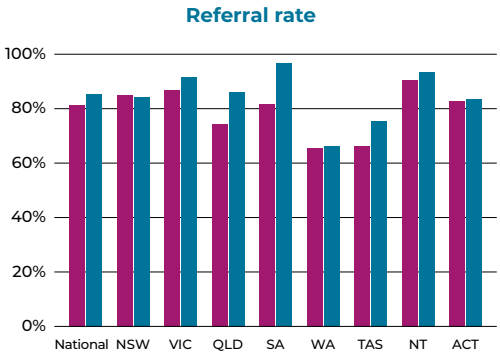
Three of the most important CPIP performance measures are:

- ♥ 100% of patients in ICUs and EDs with planned end-of-life care are routinely referred to the DonateLife agency. This enables all opportunities to be explored for donation.
- ♥ 100% routine checking of the AODR before the topic of donation is raised with families. We know that 8 out of 10 families give consent for donation when their family member is a registered donor.
- ♥ A donation specialist nurse actively participating in 100% of family donation conversations. We know that 6 out of 10 families give consent to donation when they are supported by a donation specialist nurse.

Throughout 2023–24 the OTA worked closely with DonateLife leadership teams and hospital executives to monitor and evaluate their performance against the CPIP metrics and to drive continuous improvement strategies. We recognise the unique challenges in smaller jurisdictions such as the Northern Territory, which has lower rates of organ donation due to population demographics, which in turn impact consent rates and medical suitability for organ donation.

The following graphs show jurisdictional performance against the 3 key CPIP measures in 2019 compared to 2023, and also against the overall national result for those years. **The target for all 3 of the measures is 100%.**

Performance against the CPIP metrics



2019 2023

★ Drive excellence in donation services

Our objective

Lead, implement and monitor nationally consistent best donation practice in Australia through clinical practice improvement initiatives to provide exceptional care throughout the donation process.

Why it's important

Donation leading to transplantation is a complex process with many steps. Optimising practices in donor identification, family approach, donor care and assessment, organ allocation and retrieval are important in enabling the best outcomes for donors, their families and for those on the transplant waitlist.

Delivering a nationally consistent education strategy

The OTA continued to work with the DonateLife Network, hospitals and international colleagues to deliver nationally consistent education and training. We formed the Education Working Group in July 2023 to develop an education strategy and framework to meet the current needs of the health professionals involved in organ donation across the clinical sector.

As part of its initial review, the Education Working Group has formed subgroups for 5 focus areas: advanced communication training for donation specialists; education for medical trainees; hospital-based staff education; 'train the trainer' for education delivery; and professional development pathways for donation specialist nurses.

The working group continues to foster and engage in professional working relationships with external stakeholders including the College of Intensive Care Medicine of Australia and New Zealand, Organ Donation New Zealand, the Australian College of Critical Care Nurses, the Australian College of Perioperative Nurses and the Australian College of Emergency Nursing.

Delivering professional education

In 2023–24 we continued to work with the DonateLife Network to deliver nationally consistent professional education. This included:

- ♥ **Grief Australia workshops** hosted by the OTA for DonateLife family support coordinators and donation specialist nurses. Two workshops were held including a beginner's session and another that explored advanced concepts and techniques when working with families experiencing complex grief.

- ♥ **Family Donation Conversation workshops** for our specialist staff to develop their skills in conducting informed donation discussions with families. In 2023–24 there were 13 Family Donation Conversation workshops across Australia and New Zealand.
- ♥ **induction and development days** hosted by the OTA for medical and nursing donation specialists in April and May in 2024. These followed the inaugural DonateLife induction days in June 2023.
- ♥ the OTA's **web-coaching program**, which now includes new scenarios that donation specialist nurses can use to increase their skills in donation conversations. There are now 3 active coaches, who conducted 95 sessions during 2023–24, across 6 different case scenarios. We are also expanding the web-coaching program to include training to further support skill development of donor family support coordinators.

The OTA participated in several international engagements to exchange knowledge on education programs and practices in the donation sector, including:

- ♥ attending the inaugural Commonwealth Tribute to Life conference in Gurugram (near New Delhi), India
- ♥ attending the International Society for Organ Donation Professionals Congress in Las Vegas, USA
- ♥ visiting key donation institutions in the USA.

For more detail on the OTA's international engagement during the reporting period, see pages 10–11.

Improving services for donor families

Since 2013 the OTA has gathered feedback on the experiences of donor families in the National Study of Family Experiences of Organ and Tissue Donation (Donor Family Study). These insights provide valuable evidence for the ongoing improvements in care and support for families before, during and after donation.

The report on the Donor Family Study final wave (Wave 5, which looked at donations that occurred in 2018 and 2019) was released in September 2023.

The Donor Family Study was commissioned by the OTA and conducted by an independent researcher, working with over 1,400 donor families who agreed to provide direct feedback on their experiences. Of the families who received support from DonateLife, over 95% stated they found the support helpful.

The study findings show the type of support needed will vary for each family member and that this can change over time. DonateLife works with, and is guided by, family members as to the right level of contact for them. The findings from all waves of the Donor Family Study are published on the DonateLife website.

The OTA's Family Support Advisory Group has commenced work on a quality improvement project focused on establishing a nationally consistent approach for contacting donor families to seek feedback on their donation experience, with a view to inform improvements in clinical practices.

Increasing capability through professional development – Janette Hall Scholarship

The OTA continued to provide support for DonateLife Network staff to increase their capability through training and development opportunities. The Janette Hall Professional Training and Development Scholarship Program was established by the OTA in 2011 in memory of Janette Hall, a donation specialist nurse who died and became an organ and tissue donor.

The purpose of the scholarship program is to support professional development opportunities for nursing and allied health staff in the DonateLife Network that will drive improvements to the clinical practices and patient outcomes in organ donation and transplantation.

Eleven scholarships were awarded over 2 rounds in July 2023 and February 2024, for activities such as attending bereavement training courses and participating in national and international conferences.

Medical donation specialists at a development workshop



Janette Hall Scholarship

The Janette Hall Professional Training and Development Scholarship Program is provided in memory of Janette Hall, a donation specialist nurse who became an organ and tissue donor in December 2010.

The Janette Hall Scholarship promotes and supports the professional development of staff working within the DonateLife Network.

In 2023–24, 11 scholarships were awarded for activities including:

- ♥ attendance at the Transplant Procurement Management Advanced International Training Course in Barcelona
- ♥ a study tour to Canada focusing on organ and tissue donation after medical assistance in dying
- ♥ attendance and presentation at The Transplantation Society International Congress in Istanbul
- ♥ attendance and presentation at the International Society of Organ Donation Professionals (ISODP) Congress in Las Vegas
- ♥ an internship with the Donation and Transplantation Institute in Barcelona

- ♥ presentation at the Intensive Care Annual Scientific Meeting in Brisbane
- ♥ online training for grief and bereavement support, staff engagement, and employee strengths coaching.

One of the recipients was Kathrin Lawson, a Donation Specialist Nursing Coordinator with DonateLife Victoria, who received a scholarship to present at the ISODP Congress in Las Vegas in October 2023.

Kathrin presented a donation referral initiative at the Royal Melbourne Hospital that uses the electronic medical record to send automated notifications from the ED to donation specialist nurses when patients transition to end-of-life care. This has led to an increase in routine referrals and identification of potential organ and tissue donors.

By attending the congress Kathrin was able to learn about new and emerging approaches and international best practice in organ donation and transplantation.



Lucinda Barry AM, CEO, with Kathrin Lawson



Increase safe & equitable transplantation

Our objective

Support the donation and transplant sectors to adopt best clinical practices, policy and technology that enables optimal organ allocation and utilisation so more people have access to life-changing transplantation.

Why it's important

Transplantation is the best and sometimes only treatment option for organ failure, saving or enhancing the life of the recipient, and providing benefits to their family and the broader community. Supporting the sectors to adopt robust practices, policies and frameworks will improve access to and outcomes from organ transplantation.

Developing best practice donation processes and guidelines

Ethical guidelines

In 2023–24 the OTA continued to work with the National Health and Medical Research Council to progress the drafting of new ethical guidelines for cell, tissue and organ donation and transplantation in Australia. Following clinical and public consultations in 2023–24, the guidelines are scheduled for completion by the end of 2024.

Review of the Australian Donor Risk Assessment Interview

DonateLife staff use the Australian Donor Risk Assessment Interview (AUS-DRAI) tool to collect relevant medical and social history from families of all potential donors.

In 2023–24 the AUS-DRAI review continued, with an analysis of the current questions to determine whether they remain relevant in today's environment for screening for risks of potential donor derived infection transmission. The working group includes clinical experts from the organ and tissue donation and transplantation sectors. The review is expected to conclude by mid 2025.

Transplantation Society of Australia and New Zealand projects

The OTA continued its successful collaboration with the TSANZ to support sector improvements that will benefit transplantation outcomes and recipients. TSANZ leads a number of projects supported through a combination of OTA funding and project arrangements. Projects across the reporting period included:

- ♥ the Kidney Allocation Working Group, which has been set up to deliver enhancements and specifications on the revised Australian kidney allocation algorithm
- ♥ the Living Kidney Donation Clinical Working Group, a collaboration between TSANZ and the ANZSN aiming to optimise access and outcomes in living donor transplantation across Australia and New Zealand
- ♥ the Enhancing Clinical Best Practice Guidelines and Procedures project, which aims to improve the review process and the management and implementation of TSANZ's Clinical Guidelines for Organ Transplantation from Deceased Donors.

In 2023

 **1,546**

deceased eye donors

 **328**

deceased tissue donors

 **513**

deceased organ donors

Working with the eye and tissue sector

Working with the eye and tissue sector remains an integral part of the OTA's strategy. Through the OTA's Eye and Tissue Advisory Committee, which has representation from state and territory eye and tissue banks, we continue to implement strategies to improve systems and processes to increase the number of deceased eye and tissue donors.

Eye and Tissue Working Group

In September 2023 the Jurisdictional Organ and Tissue Steering Committee (JOTSC), chaired by the Department of Health and Aged Care with representation from all governments and the OTA CEO, established the time-limited Eye and Tissue Working Group. The group's purpose is to provide expert advice to the JOTSC on eye and tissue sector priorities and the implementation of the National Eye and Tissue Sector Framework. The framework represents a commitment from all governments to provide a policy basis for the effective, evidence-based future of the Australian eye and tissue sectors. It highlights the future approach needed for the Australian eye and tissue sectors to achieve safe, equitable and ethical access to transplantation for all Australians.

The working group's membership consists of eye and tissue bank representatives, including members of the OTA's Eye and Tissue Advisory Committee, clinical representatives, professional organisations, community and consumer representatives, and representatives from the OTA and the Therapeutic Goods Association.

Eye and tissue donation and transplantation

Unlike organs, many more people can become eye and tissue donors as these can be donated following death outside of hospital, and tissue can be stored for longer periods of time.

In 2023 there were 1,546 deceased eye donors. This is a 5% increase in the number of eye donors compared with 2022 (1,477). Of the 513 deceased organ donors in 2023, 250 also donated eyes and/or other tissue.

In 2023 there were a total of 3,286 tissue donors, which is a 20% increase compared with 2022 (2,748) but still 15% below pre-pandemic levels in 2019 (3,857). The number of deceased tissue donors increased by 19% to 328 donors compared with 276 in 2022. Deceased tissue donor outcomes have varied since the first year of the pandemic when there was a 7% decrease in donors. The 2023 outcome is 5% higher than 2019 levels and the highest outcome since 2018, showing signs of recovery in the sector.

Paediatric Working Group

During 2023–24, the OTA continued to work with paediatric donation and transplantation experts through the Paediatric Working Group, with a focus on issues such as the characteristics of patients deemed unsuitable for organ donation in the paediatric ICUs; proposed research on neonatal organ and tissue donation; managing complex paediatric donors, potential use of a family readiness assessment tool; and analysis of paediatric data.

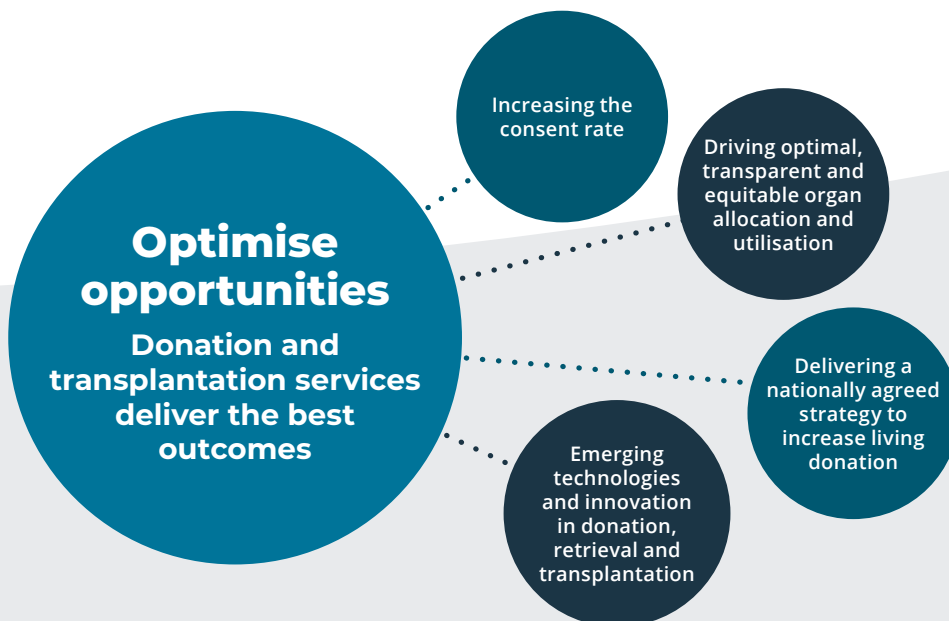


Mia had a liver transplant

Looking forward

- ♥ The OTA will continue to support the progress of the final draft of the National Strategy for Organ Donation, Retrieval and Transplantation, and if agreed, will work with governments to implement a nationally consistent approach in donation.
- ♥ We will continue to support the proposal by the Australian Government Department of Health and Aged Care for harmonisation of human tissue Acts being considered by the Attorney-General's Department for inclusion on the Australian Law Reform Commission (ALRC) agenda.
- ♥ We will implement our National Education Program to further develop the skill set of DonateLife donation specialists and clinicians, who play a critical role in caring for the donor, managing the process, engaging with families, and providing care in the hospital.
- ♥ We will continue to support donor families through:
 - the review of the AUS-DRAI tool so information on donors is collected in a caring and supportive way with families and so that the information is relevant and useful to the transplantation sector
 - a quality improvement project to capture an understanding of families' experience before, during and after the donation process, identifying opportunities to improve clinical practice and the family experience
 - expansion of the web-coaching training and professional development for DonateLife family support coordinators, to provide development and skill enhancement to specialist staff enabling best practice support and care provision to donor families.
- ♥ We will continue to increase opportunities for living donation through the development and implementation of a national agreed strategy.

Figure 10: Our challenges to optimise opportunities



Enhance systems

Enable quality outcomes through information, technology and resources

Underpinning a coordinated and consistent national approach is the effective use of enabling capability – information, technology, and resources – an essential part of achieving continuous improvements in clinical practice and community awareness.



Monitor, collect, analyse & report national performance

Objective

Monitor, collect, analyse and report information and data to provide evidence, support decision-making and drive continuous improvement in organ and tissue donation and transplantation.



Advance quality, safety & efficiency

Objective

The organ donation and transplantation system is safe, efficient and effective through clinical guidelines, timely surveillance practices and the adoption of state-of-the-art technology.



Sustain specialist resources

Objective


Dedicated resources are available through collective funding from the Commonwealth and state and territory governments to enable the system to have the infrastructure and expertise necessary to support donation and transplantation.

Performance results – Enhance systems

Measures	Met	Partially met
3	3	0

- We provided data dashboards and tailored analysis to the DonateLife Network to inform and monitor hospital clinical practice.
- National waitlist, donation and transplant activity metrics were publicly available.
- We increased the use of OrganMatch for waitlist management and nationally captured adverse events across the donation sector in a central database.


Hospital and jurisdictional performance data and analysis disseminated

Measure	2023 Result
Hospital and jurisdictional performance data and analysis disseminated	Dashboards and tailored analysis are distributed broadly across the DonatLife Network in a variety of formats to inform and monitor hospital clinical practice 

Source: OTA, DonatLife Audit; Australia and New Zealand Organ Donation Registry

- ♥ Across the reporting period the OTA continued to evolve dashboard reporting, through the collection of data to monitor, assess and inform the DonatLife program, driving clinical best practice across DonatLife hospitals.
- ♥ The OTA engaged with a range of DonatLife hospitals to discuss successes and challenges in implementing the CPIP and its key metrics:
 - routine referral to DonatLife agencies of all patients with planned end-of-life care in ICUs and EDs to determine potential for organ and tissue donation
 - routine checking of the AODR prior to raising donation with families, and
 - having a donation nurse specialist in the donation conversation.
- ♥ The OTA developed the Hospital Organ Donation Report (HODR) dashboard. The automated system, implemented in early 2024, offers near real-time access to critical data that provides advanced analytics and year-to-date comparison data. It allows DonatLife hospitals to monitor and evaluate their activities more effectively, leading to more responsive and targeted decision-making.


Waitlist, donation and transplantation data is publicly available

Measure	2023 Result
Waitlist, donation and transplantation data is publicly available	National waitlist, donation and transplant activity metrics are publicly available 

Source: Australia and New Zealand Organ Donation Registry; LifeBlood, OrganMatch

- ♥ On 27 February 2024 the OTA released the 2023 Australian Donation and Transplantation Activity Report, in collaboration with Australia and New Zealand Organ Donation (ANZOD).
- ♥ The report provides an annual snapshot of key metrics on organ, eye and tissue donation and transplantation – both deceased and living – as well as comparison and trend data from previous years and across the states and territories. It also provides data on consent rates and registration rates, and information on the rarity of donation.
- ♥ The report also includes the number of people on the organ waitlists. In 2023 there were around 1,800 Australians waitlisted for an organ transplant and around 14,000 additional people on dialysis – many of whom could benefit from a kidney transplant.
- ♥ Figure 11 shows data at a glance from the 2023 Australian Donation and Transplantation Activity Report.
- ♥ Organ donation and transplantation data was also made publicly available through the ANZOD Registry. ANZOD collects data on organ, eye and tissue donation through various clinical systems, including the Electronic Donor Record (EDR) and OrganMatch, to produce a wide range of statistics and information to support the organ donation and transplantation process.





Increased utilisation of donation and transplantation information systems

Measure	2023 Result
Increased utilisation of donation and transplantation information systems	Increase use of OrganMatch for waitlist management National capture of adverse events in the Serious and Adverse Event Reporting database 

Source: LifeBlood, OrganMatch; OTA, Serious Adverse Event Reporting database

- ♥ Overall there was a 7% increase in users of the OrganMatch system over the reporting period. Users include immunogenetics laboratories and donation and transplantation specialists.
- ♥ The vigilance and surveillance system continues to develop, enhancing the notification submission process, the notification database, and information dissemination via regular communiqués including international sharing of serious adverse events and reactions trends. The 2023 Australian Vigilance and Surveillance System for Organ Donation and Transplantation annual report contains an analysis of 43 serious adverse event and/or reaction (SAER) notifications. This is an increase from 32 in 2022.

Figure 11: 2023 data at a glance

		Difference to 2022
 Deceased organ donation and transplantation	513 Deceased organ donors	+13%
	1,396 Organ transplant recipients	+14%
	55% Families consented to donation	+1%
	7.7 million Eligible Australians are registered to be a donor	+2%
 Living organ donation and transplantation	253 Living kidney donors	+13%
	55 Donors through the ANZKX program	+31%
  Eye and tissue donation and transplantation	1,546 Deceased eye donors	+5%
	328 Deceased tissue donors	+19%
	2,486 Corneal transplant recipients	+6%

Q Monitor, collect, analyse & report national performance

Our objective

Monitor, collect, analyse and report information and data to provide evidence, support decision-making and drive continuous improvement in organ and tissue donation and transplantation.

Why it's important

Clinical data informs program design and delivery, which drives best clinical practices and efficiencies in donation and transplantation practices.

Data about community attitudes, beliefs and expectations is critical in addressing barriers to donation and informing the approach to increase donation consent rates.

National performance data is distributed to support strategic decision-making and continuous improvement across the donation and transplantation sectors.

Release of the 2023 Australian Donation and Transplantation Activity Report

The OTA continued to distribute national performance data to support strategic decision-making and continuous improvement across the donation and transplantation sectors.

In February 2023 the OTA released the 2023 Australian Donation and Transplantation Activity Report. The report provides an annual snapshot of key data on organ, eye and tissue donation and transplantation – both deceased and living – as well as comparison and trend data from previous years. It also provides data on consent rates and registration rates in Australia. The 2023 report also included additional outcomes on jurisdictional transplant activity by organ type.

As part of our data management practices, we use trusted data sources to develop the activity report, and our analytics reporting and models are built in collaboration with internal and external stakeholders so that our insights are well informed and representative. Our commitment to accuracy extends to routine audits of our data, including reviews by our stakeholders. The report informs the OTA's Annual Performance Statements and provides information on the data sources for the performance measures.

The 2023 report was launched by the Assistant Minister for Health and Aged Care, the Hon Ged Kearney MP, at Parliament House.

Media coverage from the release included exclusive syndicated stories with News Corp and the Australian Broadcasting Corporation, with prerecorded radio 'grabs' by the assistant minister and the CEO broadcast across the country. Release highlights included interviews with donor family members Brenda Platt and Oren Klemich, and coverage on the ANZKX program's record-breaking year.



OTA Advisory Board member Mr Oren Klemich, a donor family member, speaking at the launch of the 2023 Australian Donation and Transplantation Activity Report. With Lucinda Barry AM, CEO, Helen Szoke AO, Advisory Board Chair and the Hon Ged Kearney MP.

Using our data to support decision-making and drive continuous improvement

Data analysis continued to inform the DonateLife program in 2023–24. The collection, analysis and reporting of data to monitor, provide evidence and support decision-making is integral to organ and tissue donation and transplantation continuous improvement activities. Across the sectors, data analysis informs our community engagement, development of family donation conversation training for hospital-based staff, medical suitability assessments, donation processes, organ allocation, and transplant practices.

Over the reporting period we delivered a number of initiatives to drive continuous improvement.

- ♥ **DonateLife Audit:** We use the DonateLife Audit to collect clinical data of patients for whom organ donation may have been feasible in all DonateLife Network hospital ICU and EDs. Using this data collection tool, the OTA produced detailed reports, which were shared with our clinicians and DonateLife staff to refine practices and drive continuous improvement initiatives.

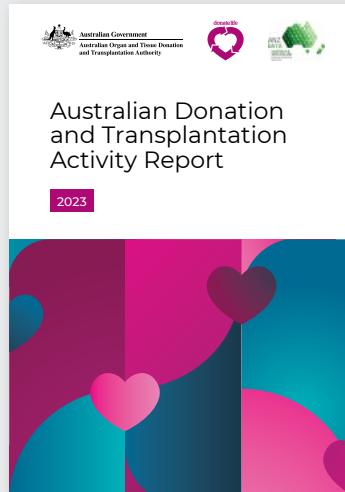
- ♥ **Advanced data analyses:** In addition to routine reporting, the OTA conducted around 230 analyses and predictive modelling exercises and 120 presentations to our key advisory committees and operational working groups, reporting on factors impacting donation rates and uncovering potential opportunities to increase organ and tissue donation.

- ♥ **Enhanced data visualisations and reporting:** We continued to develop visual data dashboards, introducing 10 new dashboards that provide key donation metrics to drive best practices and improve outcomes.

- ♥ **New initiatives:** We implemented a new strategy to enhance the OTA's data capabilities, focusing on automating data collection, improving data security, and providing deeper insights through advanced analytics. The OTA conducted more than 50 strategic stakeholder meetings to align these initiatives with broader organisational goals.

Our data sources

- ♥ **DonateLife Audit** – a nationally consistent system for collecting data on all patients for whom organ donation may have been feasible in all DonateLife Network hospital ICUs and EDs. This includes deceased organ donation and consent data.
- ♥ **Australia and New Zealand Organ Donation Registry** – for deceased organ donation and transplantation data.
- ♥ **Services Australia** – for AODR data.
- ♥ **Australia and New Zealand Dialysis and Transplant Registry** – for living kidney donation and waitlist data.
- ♥ **Australian Bureau of Statistics** – for population and death data.
- ♥ **Australian Institute of Health and Welfare** – for admitted patient care data.



Working with stakeholders to enhance data reporting

The OTA collaborated with ANZOD on a number of key projects, including a focus on waitlist data and its impact on kidney allocation. This collaboration led to the production of several comprehensive reports emphasising the importance of data-driven decisions in optimising organ allocation practices.

Continuous engagement with data experts in groups like the Data and Audit Working Group and the National Allocation User Group provided feedback that was instrumental in refining clinical practices and data-reporting strategies. These groups held over 20 meetings during 2023–24.

Other key data working groups are detailed below.

Australia and New Zealand Organ Donation Registry Working Group

The ANZOD Working Group continued to advise on the current and future direction of organ, eye and tissue donation reporting for ANZOD. Co-chaired by Australia and New Zealand Dialysis and Transplant Registry's Director of Analytics and Reporting and the OTA's National Medical Director, the ANZOD Working Group met 4 times in 2023–24. The group has commenced a review of the ANZOD reports, with a view to identifying improvements to their content and usability.

Electronic Donor Record Working Group

The Electronic Donor Record Working Group (EDRWG) continued to collaborate with the DonateLife Network and representatives from the eye banks, ANZOD and the transplant sector. This collaboration informs the ongoing development and utilisation of the EDR to manage and share clinical donor information required for organ and tissue referral, donation and transplantation processes in Australia. The EDWRG met 4 times over the reporting period. Further detail on the enhancements made to the EDR in 2023–24 can be found on page 55.

Clinical Data Working Group

Established in 2023, the Clinical Data Working Group engaged with the DonateLife Network to focus on building the network's understanding of existing donation and transplantation data repositories. The group continues to move forward opportunities for data analysis, research and publication. The working group met 3 times in 2023–24.

Enhancing data security and compliance

Maintaining data security and compliance with Commonwealth standards remained a top priority. We reviewed and strengthened our data management processes and implemented measures focused on the privacy, security and ethical handling of data. Specifically, the OTA delivered specialised training sessions to staff of the OTA and across the DonateLife Network to equip them with the knowledge and skills to manage data responsibly in accordance with national regulations.

Data-driven decision-making – the Hospital Organ Donation Report dashboard

Data is integral to our decision-making. Clinical data informs program design and delivery, which drives best clinical practices and efficiencies in donation and transplantation practices.



DonateLife donation specialists supporting the donation process

In 2023 our Analytics and Technology team began developing an automated system as part of our broader digitalisation effort. In early 2024 the team implemented the Hospital Organ Donation Report (HODR) dashboard offering the DonateLife Network near real-time access to critical data. The dashboard system replaces static PDF reports and provides advanced analytics and year-to-date comparison data allowing our DonateLife hospitals to monitor and evaluate their activities more effectively, in turn providing more responsive and targeted decision-making.

Through extensive user acceptance testing, the team worked with clinicians and staff in the DonateLife Network to determine system compatibility and provide tailored features. Key functionality includes:

- ♥ **Data visualisation:** Data is presented through intuitive charts, graphs, and tables, making it easy for users to interpret and analyse information.

- ♥ **Customisation:** Users can adjust the dashboard layout, add or remove widgets, and tailor the settings to their specific needs.
- ♥ **Data export:** Users can export data in formats such as CSV and Excel for further analysis or reporting.
- ♥ **Alerts and notifications:** Users can set up notifications to stay informed about key metrics and updates.
- ♥ **Help and support:** Users can access comprehensive support, including a detailed instruction guide, a contact option for the support team, and interactive feedback features.

With the HODR replacing more than 300 static PDF reports each year, it demonstrates the OTA's commitment to promoting data-driven decision-making and enhancing the technology systems that support donation and transplantation to drive clinical best practice.



Advance quality, safety & efficiency

Our objective

The organ donation and transplantation system is safe, efficient and effective through clinical guidelines, timely surveillance practices and the adoption of state-of-the-art technology.

Why it's important

Transplant recipients, donors and families, as well as the Australian community, trust that the organ donation and transplantation system is as safe and effective as possible.

Optimal systems and state of-the-art technology enable improvements in efficiency, equity of access, donation and transplant outcomes, and mitigation of emerging risks.

Strengthening the governance of OrganMatch

OrganMatch is Australia's organ waitlisting, matching and allocation system.

In 2023–24 the OrganMatch Operational Governance Committee held monthly meetings to discuss operational and governance matters relating to OrganMatch. These included prioritisation of development work in OrganMatch, management of change request proposals, review of any relevant serious adverse events and reactions, as well as budget and contract monitoring and management and risk management.

The OrganMatch donation portal, transplant portal and laboratory portal user groups continued to meet regularly and provide useful insight into the user experience, interactions with clinical practices and recommendations to enhance and improve the system. All user groups have been involved in the development of the organ offer management and urgent patient listing capabilities within OrganMatch.

Transition to virtual crossmatch (VXM)

The Australian organ donation and transplantation system historically used complement-dependent cytotoxicity (CDC) crossmatches to determine compatibility between organ donors and transplant recipients. Internationally, many transplant programs have moved to conducting virtual crossmatches (VXM), which can provide greater detail regarding the compatibility of the donor organ and the recipient, as well as providing time efficiencies in the process.

In February 2023 all prospective CDC crossmatches ceased in Australia. Our work since then has been focused on partnering with TSANZ to make sure there is ongoing monitoring and governance around VXM, as well as clear reporting mechanisms for any serious adverse events and reactions. The VXM Working Group, together with the TSANZ and the OTA, developed the National Histocompatibility Assessment Guideline for Solid Organ Transplantation, which supports clinical practice by identifying acceptable and unacceptable antigens for transplant recipients in Australia.

Enhancements to the Australian Vigilance and Surveillance System for Organ Donation and Transplantation

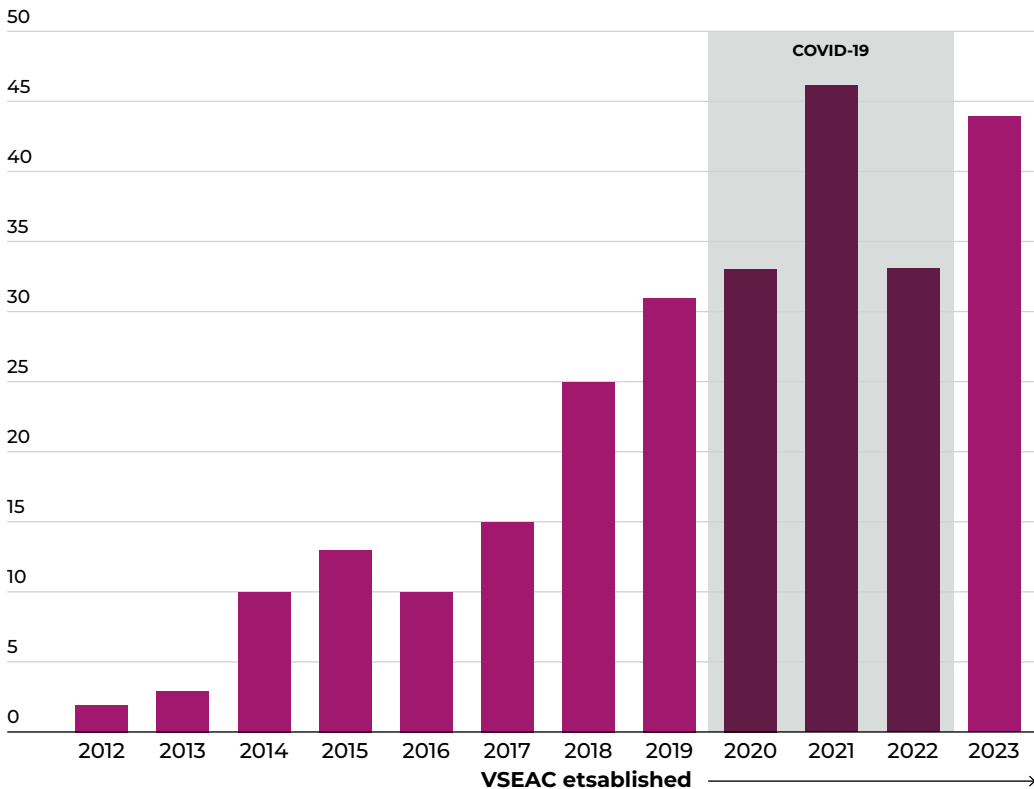
The Australian Vigilance and Surveillance System for Organ Donation and Transplantation plays a vital role in improving quality and safety across the organ donation and transplantation sectors. In 2023–24 the OTA evolved the system through streamlining the notification process and enhancing the effectiveness of the analysis and reporting of the SAER received.

In June 2024 the OTA released the 2023 annual report of the Australian Vigilance and Surveillance System for Organ Donation and Transplantation. The annual report provides a high-level summary of learnings and trends that have been reported throughout 2023. The number of SAER notifications has continued to increase, with 43 notifications in 2023 compared to 32

in 2022. This increase is likely due to the growing awareness of the role and value of the vigilance and surveillance system, leading to increased submission of notifications.

The OTA and Vigilance and Surveillance Expert Advisory Committee (VSEAC) continue to strongly encourage the reporting of actual or potential adverse events and reactions so that knowledge can be gained to help inform future advice, recommendations and guidelines. The OTA, through VSEAC, continually reviews systems and processes to identify improvements in user interface and experience, accessibility for notification of SAER, and database and reporting capabilities.

Figure 12: Serious adverse event and reaction notifications from 2012–2023



Enhancing the Electronic Donor Record system for optimal organ and tissue donation management

Evolving clinical practices, data management complexity and technological advancements have all been key drivers for recent enhancements to our Electronic Donor Record (EDR) system.



DonateLife donation specialist supporting the donation process

The EDR is our digital system for capturing, storing, and managing data related to organ and tissue donation processes. It plays a vital role in ensuring that all relevant clinical data is accurately recorded and easily accessible to our clinicians involved in organ and tissue donation.

In 2023–24, we undertook a comprehensive review of the EDR and implemented a series of targeted enhancements:

- ♥ **Improved system efficiency to manage complex clinical data:** The introduction of the Hospital Development Module (developed in response to managing complex clinical data during the COVID-19 pandemic) and national EDR disposition codes (a way of providing standardised information about the outcomes of organs that have been recovered for potential transplantation) have significantly improved the efficiency of data management processes and system usability.

- ♥ **Enhanced data quality and analysis:** The integration of key datasets and improved data management processes allowed us to produce over 100 reports analysing critical metrics. These reports provided valuable insights to inform both national and jurisdictional strategies for organ and tissue donation.
- ♥ **Strengthened data security:** Enhancements to data security and compliance measures have been critical in the context of increasing cybersecurity threats.
- ♥ **Training and stakeholder engagement:** We conducted 15 specialised training sessions for staff using the EDR to make sure they are equipped with the knowledge and skills to manage data responsibly, and to adapt to the system changes.

These enhancements have significantly strengthened our ability to support clinical decision-making and drive continuous improvement in organ and tissue donation practices.

Sustain specialist resources

Our objective

Dedicated resources are available through collective funding from the Commonwealth and state and territory governments to enable the system to have the infrastructure and expertise necessary to support donation and transplantation.

Why it's important

Resourcing should not be a barrier to donation and transplantation. An effective system requires funding to employ specialist staff and cover associated donation and transplantation costs.

Funding to support donation

The OTA funds the state and territory governments to deliver donation services as part of the DonateLife program. The states and territories use this Commonwealth funding to employ specialist staff across the DonateLife Network and to deliver a nationally consistent donation service in each jurisdiction.

The new funding agreements came into effect from 1 July 2023 and include over \$93 million in payments to state and territory governments over the next 3 years. This is further supplemented by activity-based Organ Donation Hospital Support Funding, which provides support to hospitals for costs associated with organ donation.

In 2023–24 the jurisdictions embedded the new funding agreements. This included a new delivery model of a core set of DonateLife agency positions to deliver the DonateLife

program, with allocation of nursing and medical donation specialist staff based on modelling that considers scale, complexity, geography, and donor (actual and intended) and referral rates based on previous peak donation activity for each jurisdiction.

In addition to this delivery model, all states and territories agreed to implement clinical best practice processes and the CPIP, report SAERs to the Australian Vigilance and Surveillance System for Organ Donation and Transplantation, and use the EDR, the DonateLife Audit and OrganMatch. Over the year compliance and performance across these areas was reported in progress reports and quarterly acquittals provided by each jurisdiction.

The funding breakdown for DonateLife Network positions by state and territory is provided below:

Table 1: Funding for the DonateLife Network (2023–24)

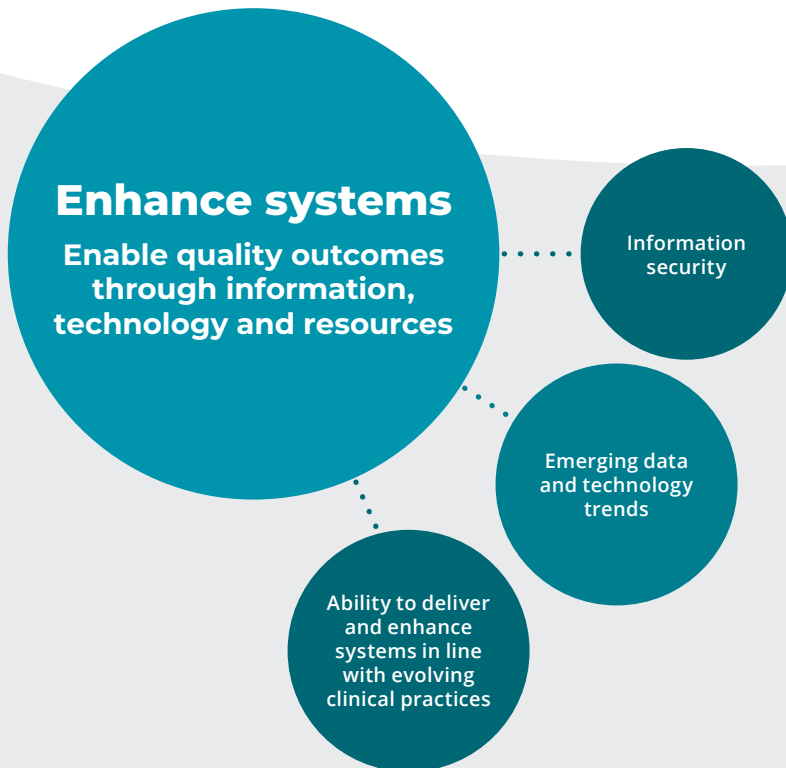
State/Territory	DonateLife Agency Staff (\$m)	Hospital Based Staff (\$m)	Total (\$m)	Percentage of total funding
NSW	2.945	4.958	7.903	25%
VIC	1.430	6.271	7.701	24%
QLD	2.630	2.963	5.593	18%
WA	0.844	2.424	3.268	10%
SA	0.902	2.053	2.955	10%
TAS	0.608	0.969	1.577	5%
ACT	0.653	0.650	1.303	4%
NT	0.674	0.528	1.202	4%
Total	10.686	20.816	31.502	100%

NOTE: amounts exclude funding for professional education, travel, the National Medical Director and other adjustments. In NSW and QLD nursing staff are based in both the DonateLife agency and the hospital.

Looking forward

- ♥ The OTA will continue to focus on enhancements to our technology and systems, such as the EDR and OrganMatch, that support donation and transplantation to drive clinical best practice.
- ♥ Our dashboards will remain integral mechanisms for the distribution of national and jurisdictional performance data, and we will continue to work with our hospitals and DonateLife Network staff to support strategic decision-making and continuous improvements based on key CPIP data.
- ♥ We will continue to use appropriate systems, such as the DonateLife Audit, the EDR and OrganMatch, to monitor, collect, analyse and report waitlist, mortality, donation and transplantation data.
- ♥ We will continue to analyse clinical data to inform program design and delivery, in turn driving best clinical practices and efficiencies in organ donation processes.
- ♥ A review of the Australian Vigilance and Surveillance System for Organ Donation and Transplantation will focus on system improvements including user interface and experience, accessibility for notification of SAERs and database and reporting capabilities.
- ♥ We will continue to contribute to collective funding with the state and territory governments to enable the system to have the expertise necessary to support organ and tissue donation and transplantation.

Figure 13: Our challenges to enhance systems



Financial performance

Departmental

Operating result

The OTA's operating result for 2023–24 was a deficit of \$0.052 million, compared with the initial forecast budget deficit of \$0.405 million, which includes unfunded depreciation and amortisation expenses. The operating result was impacted by a reclassification of \$0.500 million from administered to departmental revenue which was required to rebalance resources across funding types. The OTA's commitment to sound financial management is reflected in its financial performance and unqualified financial statements (see Part 4).

Departmental income

The OTA received \$6.765 million in revenue from government in 2023–24, compared with \$6.089 million in 2022–23. The increase reflects additional departmental funding received to rebalance resources across funding types.

Departmental expenses

The OTA's expenses for 2023–24 were \$6.907 million, which was an increase of \$0.607 million from 2022–23 (9.6% increase). The increase is the result of additional staffing and pay rises, increased supplier costs and an increase in depreciation expense associated with the acquisition of new fit-out assets as part of the office relocation.

Net asset position

Net assets increased by \$0.223 million from 2022–23 to 2023–24, which comprised the following movements:

- ♥ Total assets increased by \$2.533 million due to the recognition of a right-of-use asset for the office lease at 12 Moore St and the construction of the new office fit-out. This was partially offset by a reduction in appropriation receivable used to finance the fit-out works.
- ♥ Total liabilities increased by \$2.310 million, driven mainly by the take-up of the lease liability for the 7-year office lease at 12 Moore Street.

Capital budget

In 2023–24 the OTA received a capital budget of \$0.272 million. Capital expenditure during the year consisted primarily of assets related to the new office fit-out.

Administered

Administered income

No administered income was received during the period.

Administered expenses

For 2023–24 the OTA reported supplier expenses of \$2.684 million. Supplier expenses primarily related to costs associated with:

- ♥ Electronic Donor Record licensing and support
- ♥ increasing community awareness and education through creative material production; public relations and merchandise
- ♥ delivery of the national professional education package across Australia, including delivery of eLearning modules to our health professionals and development of a web-based platform to host professional development sessions for specialist donor coordinators who participate in donor family conversations.

Grant expenses were \$48.375 million. The OTA provided grant funding to:

- ♥ state and territory governments for dedicated donation specialist staff across the Donatelife Network to deliver a nationally consistent organ and tissue donation service
- ♥ public and some private hospitals to contribute to the costs associated with organ donation activity, based on actual and intended organ donors through Organ Donation Hospital Support Funding
- ♥ support outcome registries and donation and transplantation systems
- ♥ partner with organisations to undertake community awareness and engagement activities to increase the awareness and promote family discussion about organ and tissue donation, as well as to increase registration on the AODR.

Administered assets

As at 30 June 2024 the OTA held total assets of \$0.932 million, which is \$0.085 million lower than the previous year. This consists of \$0.263 million in cash holdings, \$0.621 million in GST receivable from the Australian Taxation Office, and \$0.048 million in prepayments.

Administered liabilities

Total administered liabilities increased by \$0.213 million to \$10.206 million, resulting from an increase in suppliers payable at 30 June 2024.

Table 2: OTA resource statement 2023–24

	Actual available appropriation for 2023–24 (\$)	Payments made 2023–24 (\$)	Balance remaining 2023–24 (\$)
Departmental			
Annual appropriations – ordinary annual services ¹	11,584,530	9,084,726	2,499,804
Total departmental annual appropriations²	11,584,530	9,084,726	2,499,804
Administered			
Annual appropriations – ordinary annual services ¹	51,566,000	41,097,736	
Total administered annual appropriations	51,566,000	41,097,736	
Total ordinary annual services	63,150,530	50,182,462	
Total resourcing and payments for OTA	63,150,530	50,182,462	

1 Appropriation Acts (No. 1 and 3). This may also include prior year departmental appropriation, section 74 retained revenue receipts, and amounts subject to quarantine under section 51.

2 Includes an amount of \$0.272 million in 2023–24 for the departmental capital budget. For accounting purposes this amount has been designated as ‘contributions by owners’.

Outcome 1

Improved access to organ and tissue transplants, including through a nationally coordinated and consistent approach and system.

Program 1.1

A nationally coordinated system for organ and tissue donation for transplantation.

Table 3: Expenses for Outcome 1

	Budget ¹ 2023–24 (\$)	Actual expenses 2023–24 (\$)	Variation 2023–24 (\$)
PROGRAM 1.1			
Administered expenses			
Ordinary annual services (Appropriation Act No. 1)	51,066,000	51,058,390	7,610
Departmental expenses			
Departmental appropriation ²	6,520,000	6,173,985	346,015
Expenses not requiring appropriation in the budget year	753,000	732,618	20,382
Total for Program 1.1	58,339,000	57,964,993	374,007
Total expenses for Outcome 1	58,339,000	57,964,993	374,007
		2022–23	2023–24
Average staffing level (number)		28.12	29.92

1 Full year budget including any subsequent adjustment made to the 2023–24 budget at Additional Estimates.

2 Departmental appropriation combines ordinary annual services (Appropriation Acts No. 1 and 3) and retained revenue receipts under section 74 of the *Public Governance, Performance and Accountability Act 2013*.

Emmy

"...an abundance of gratitude for my donor and their family. And also, for modern medicine. What a privilege and one I will forever be grateful for."

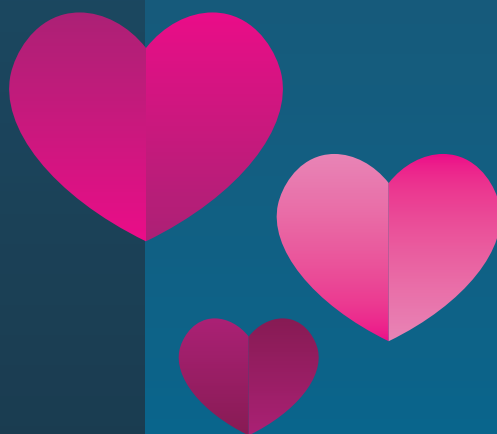
Emmy had a kidney transplant. While on dialysis for 26 months, Emmy changed her life, focusing on positivity and fitness. She is now inspiring her children and others to greet every day with gratitude.



Part 3

Management and accountability

Corporate governance	62
Our people	71
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Corporate governance

The OTA operates within a robust governance framework that enables effective planning, optimal resource utilisation, and ethical conduct.

We operate in accordance with the legislative foundations provided by the *Australian Organ and Tissue Donation and Transplantation Authority Act 2008* (OTA Act), the *Public Service Act 1999*, and the *Public Governance, Performance and Accountability Act 2013* (PGPA Act).

Figure 14: Corporate governance model



Our corporate governance model contains 4 key pillars – strategy, structures, systems, and values – and is guided by the 6 foundation principles of public sector governance:

- ♥ **Accountability:** Being answerable for decisions and having appropriate mechanisms in place to ensure the agency adheres to all applicable standards.
- ♥ **Transparency and openness:** Having clear procedures, roles and responsibilities for making decisions and exercising power.
- ♥ **Integrity:** Acting impartially, ethically and in the interests of the agency.
- ♥ **Stewardship:** Using every opportunity to enhance the value of the public assets and institutions that have been entrusted to the agency's care.
- ♥ **Efficiency:** Ensuring the best use of resources to further the aims of the organisation.
- ♥ **Leadership:** Achieving an agency-wide commitment to good governance through leadership.

Accountability structure

Responsible minister

The Hon Ged Kearney MP, Assistant Minister for Health and Aged Care, Assistant Minister for Indigenous Health, is responsible for the OTA.

Accountable authority and executive

The Chief Executive Officer (CEO) is the accountable authority under the PGPA Act.

The OTA Executive consists of the CEO (the accountable authority), the Chief Operating Officer and the National Medical Director. The executive provides guidance and leadership on our overall direction, responsibilities and culture.

Lucinda Barry AM, Chief Executive Officer

Lucinda Barry commenced as the CEO in 2017. Lucinda has extensive experience in health care, both clinical and policy. She has held senior leadership roles within government, the public service, and health service management and delivery.

Lucinda represents the Australian Government on a number of national and international committees, including the National Indigenous Kidney Transplantation Taskforce and the Commonwealth 'Tribute to Life' International Advisory Panel. In addition, she is a member of the Jurisdictional Organ and Tissue Steering Committee. Lucinda is the Australian Government's national media spokesperson on organ and tissue donation and is an invited speaker at national and international conferences. In the 2023 Australia Day Honours, Lucinda became a Member of the Order of Australia (AM) for her significant service to public health policy in executive roles and to medicine.

Belinda Small, Chief Operating Officer

Belinda Small commenced as the Chief Operating Officer in 2021. She is responsible for ensuring corporate operations enable OTA to achieve its strategic goals. Functional responsibilities include finance, risk, governance, human resources, and analytics and technology.

Belinda has extensive experience in leading organisational strategy, complex transformation agendas and corporate teams. She is passionate about shaping positive workplace cultures, building sustainable capability in organisations, and collaborating to achieve positive outcomes for the community. Belinda holds a Bachelor of Commerce and is certified as a change management practitioner. She has previously held positions at the Bureau of Meteorology, the Department of Health and the Department of Finance. Belinda is also a member of the Cancer Australia Audit and Risk Committee.

Associate Professor Helen Opdam, National Medical Director

Associate Professor Helen Opdam MBBS FRACP FCICM was appointed as the OTA National Medical Director in 2014. She is a Senior Intensive Care Specialist at the Austin Hospital in Melbourne and Director of Warringal Private Hospital Intensive Care Unit.

Helen is responsible for providing expert clinical advice to the OTA CEO, DonateLife Network staff, clinical organisations, the Australian Government Department of Health and Aged Care and other government agencies and key stakeholder groups. She is the current President of the International Society for Organ Donation Professionals. Helen participates both nationally and internationally on working groups and committees, as a conference speaker, and as an author for medical journal and guideline publications. Helen has been involved in organ donation since 1998, initially in developing an audit to determine the potential for organ donation. This process has evolved into the current DonateLife audit that provides key metrics for Australia's donation performance and monitors the effective implementation of the national program within hospitals. Helen was the inaugural Victorian State Medical Director for organ and tissue donation at the initiation of the DonateLife program in 2009.

Committees

The OTA has 3 types of committees that contribute to our governance:

- ♥ statutory committees – required or established by law
- ♥ advisory committees – composed of stakeholders who bring unique knowledge and skills to provide strategic direction, guide quality improvement, and assess our national DonateLife program effectiveness against our strategy
- ♥ operational working groups – established to provide input into the overall operations of the DonateLife program. These groups may be ongoing or established as temporary working groups to achieve specified goals, information sharing and/or group discussions about a subject.

Statutory committees

The OTA has 3 statutory committees that are either required or established by law.

Audit and Risk Committee

The Audit and Risk Committee has been established by the accountable authority in compliance with section 45 of the PGPA Act and section 17 of the Public Governance, Performance and Accountability Rule 2014 (PGPA Rule) – Audit committee for Commonwealth entities.

The Audit and Risk Committee plays an essential role in the OTA's corporate governance. It provides assessment and advice to the CEO on the OTA's:

- ♥ financial and performance reporting responsibilities
- ♥ risk oversight and management
- ♥ systems of internal control.

Our Audit and Risk Committee is chaired by an independent external member, Ms Gayle Ginnane.

During 2023–24 the other members were Mr Don Cross and Mr Robert Antich, both independent external members.

The OTA CEO, Chief Operating Officer and Chief Financial Officer, the Australian National Audit Office and our internal assurance staff are invited to attend meetings as required. The Audit and Risk Committee Charter is available at www.donatelife.gov.au/OTA-Audit-and-Risk-Committee-Charter.

Committee members collectively have a broad range of skills and experience. In 2023–24 the committee met 4 times.

Audit and Risk Committee members

Gayle Ginnane, Committee Chair

Ms Ginnane is an experienced executive with significant board and audit committee experience. Formerly the CEO of the Private Health Insurance Regulator, Gayle has broad experience as a senior manager in an insurance and regulatory environment in both the public and commercial sectors and an in-depth understanding of governance and risk management. She has a degree in statistics and economics and a postgraduate degree in defence studies. Gayle was appointed to the Audit and Risk Committee in September 2018.

4 meetings attended / 4 meetings total

Total annual remuneration \$7,880 (GST inclusive)

Don Cross

Mr Cross has a background in financial statement audit, internal audit, management assurance and performance and program management. He leverages this background, skills and experience as the chair or as a member of audit and risk committees for federal government departments and corporate Commonwealth entities delivering policy, regulatory and service delivery functions. He is a Fellow of the Institute of Chartered Accountants in Australia and New Zealand and a certified practising accountant. Don was appointed to the Audit and Risk Committee in December 2019.

4 meetings attended / 4 meetings total

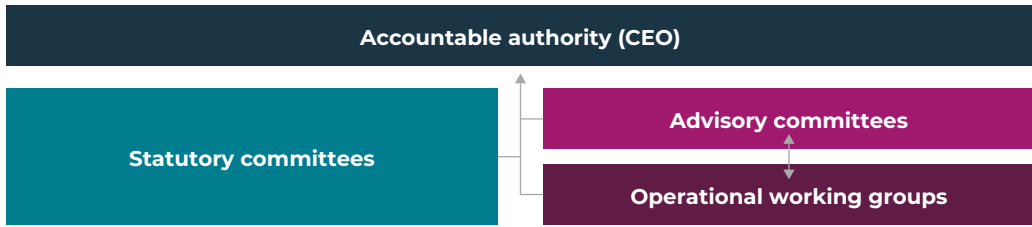
Total annual remuneration \$7,700 (GST inclusive)

Robert Antich

Mr Antich has extensive experience in senior executive roles at the Australian Department of Finance, including in federal Budgets, in procurement policy and as the national manager of the Australian Government's liability insurer and risk manager (Comcover) for 3 years. He has significant governance and risk management expertise in government and as a consultant and has designed and implemented risk management frameworks for multiple Australian Government entities, overseas governments and the World Bank. Robert was appointed to the Audit and Risk Committee in July 2021.

4 meetings attended / 4 meetings total

Total annual remuneration \$5,200 (GST inclusive)

Figure 15: Committee structure

OTA Advisory Board

The Advisory Board is responsible for advising the CEO about the objectives, strategies and policies to be followed by the OTA in the performance of its functions and organ or tissue donation and transplantation matters. It is established under the OTA Act.

The Advisory Board comprises the chair and 5 members. During the reporting period, Ms Margaret Kruger completed her membership term (on 31 December 2023) and Ms Shelly Park resigned from her position as a member in January 2024. The OTA subsequently welcomed 2 new ministerial appointments to the Advisory Board on 2 February 2024, Ms Kelli Owen and Adjunct Professor Terry Slevin. In addition, members Professor Carol Pollock AO and Mr Oren Klemich were appointed for a further term.

The Advisory Board met 4 times during the reporting period.

In 2023–24 the Advisory Board members were:

- ♥ Dr Helen Szoke AO (Chair)
- ♥ Professor Carol Pollock AO (Deputy Chair)
- ♥ Mr Oren Klemich
- ♥ Mr Nicholas Brown
- ♥ Ms Margaret Kruger (1 July–31 December 2023)
- ♥ Ms Shelly Park (1 July 2023–25 January 2024)
- ♥ Ms Kelli Owen (from 2 February 2024)
- ♥ Adjunct Professor Terry Slevin (from 2 February 2024).

The members bring a wealth of knowledge to the Advisory Board including experience in the clinical sector, business management and lived experience of the DonateLife program. Biographies of the Advisory Board members are available at www.donatelife.gov.au/our-board.



Ms Kellie Owens, Prof Carol Pollock AO, Dr Helen Szoke AO, the Hon Ged Kearney MP, Assoc Prof Helen Opdam, Ms Lucinda Barry AM, Mr Oren Klemich

Our Advisory Board Chair

In July 2023 we welcomed Dr Helen Szoke as Chair of the OTA Advisory Board. Helen has had a career spanning community, health, education, regulation and international development and holds senior positions on a range of boards.

'The Advisory Board Chair is a role that's consistent with the long interest I've had in the power of self-determination. I've spent the majority of my career in the not-for-profit and community sector. Through my work with the Victorian Equal Opportunity and Human Rights Commission, in other roles and during my time as CEO at Oxfam Australia, the main lesson I've learned is to listen to people – to hear what they say they need; that's self-determination,' Helen says.

'My colleagues on the Board are largely people with lived experience – families of those who have become donors and transplant recipients. There are also some extremely dedicated clinicians. There's enormous wisdom and insight there, and my role is something of an advocate to bring all of the amazing ideas together to help steer the OTA forward,' Helen says.

Helen encourages people to explore the option of registering as a donor and talking to your family about your choice. 'It may not seem like much, but this is where much bigger change can start,' she says.



Dr Helen Szoke AO

Vigilance and Surveillance Expert Advisory Committee

The Vigilance and Surveillance Expert Advisory Committee (VSEAC) monitors the performance of the Australian Vigilance and Surveillance System and provides advice on emerging risks identified in the organ donation and transplantation sectors. It is a statutory committee established by the OTA CEO under the OTA Act.

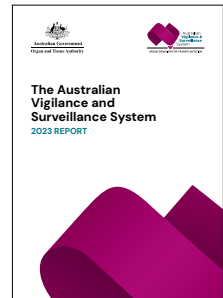
The committee is chaired by Professor Jeremy Chapman AC and its membership comprises the OTA National Medical Director and high-level technical specialists with relevant expertise from key clinical stakeholders and government.

VSEAC produces and publishes an annual report each year detailing its work in monitoring the vigilance and surveillance system established to safeguard and improve quality and safety in organ donation and transplantation and, importantly, to identify trends and avoid recurrences of serious adverse events and/or reactions (SAER).

In June 2024 VSEAC released the Australian Vigilance and Surveillance System for Organ Donation and Transplantation 2023 Report,

covering SAER notifications received from 1 January to 31 December 2023. The report provides the Australian community with a clear view of vigilance and surveillance in the system and provides confidence to those who need a transplant that the sector is doing everything it can to make the process as safe as possible.

In addition to the annual report, VSEAC regularly dispatches clinical communiqués to raise awareness of current recommended clinical practices and convey new issues, risks and recommendations to enhance patient safety, donation and transplantation outcomes. VSEAC issued 4 communiqués to the clinical sector in 2023–24.



Advisory committees

Collaboration is integral to the implementation of the DonateLife program, focused on achieving a best practice clinical system alongside increased community awareness. Our advisory committees provide input, advice and recommendations to support the delivery of the DonateLife program.

All advisory committees report to the CEO.

Jurisdictional Advisory Group

The Jurisdictional Advisory Group is the key advisory committee on the DonateLife program. The group considers and makes recommendations to the OTA CEO about all aspects of the program, including strategic priorities, clinical and data governance, community engagement and program planning and resources for the DonateLife Network. The Jurisdictional Advisory Group works to ensure the DonateLife program is consistent with state and territory legislation, policies and processes. Chaired by the OTA CEO, the group comprises jurisdictional and Commonwealth health department representatives, the OTA National Medical Director, the OTA Chief Operating Officer, DonateLife state medical directors and agency managers.

Clinical Governance Committee

The Clinical Governance Committee is the key clinical advisory committee for the DonateLife Network. It is chaired by the OTA National Medical Director and comprises the OTA CEO, the DonateLife state medical directors and clinical agency managers, and representatives of both the eye and tissue professional bodies. The committee provides a forum for sharing experiences and new initiatives and agrees on practices related to the implementation of the Clinical Practice Improvement Program in DonateLife hospitals. The committee makes recommendations relating to clinical aspects of the DonateLife program. Where there are policy or funding implications, these are referred to by the Jurisdictional Advisory Group for consideration.

OTA Transplant Advisory Group

The OTA Transplant Advisory Group facilitates engagement with the transplantation sector on matters relevant to the DonateLife program and provides advice to the OTA CEO on issues and emerging trends that have implications for transplantation matters more broadly. It is chaired by Professor Steve Chadban. Membership comprises the OTA National Medical Director, representatives from transplant, medical and nursing professional bodies and donation specialists, with Transplant Australia and Kidney Health Australia representing consumers.

Eye and Tissue Advisory Committee

The Eye and Tissue Advisory Committee provides advice on matters relevant to eye and tissue donation and transplantation, with a key focus on donation coordination by the DonateLife Network. This collaboration helps to improve systems and processes to increase the number of deceased eye and tissue donations for transplantation in Australia. The committee is chaired by OTA National Manager Clinical Programs and its membership comprises representatives from Australian eye and tissue banks, as well as the Australian Government's Department of Health and Aged Care and the Therapeutic Goods Administration.

Community Engagement Group

The Community Engagement Group works collaboratively to inform communications and engagement activities undertaken as part of the DonateLife program. The group is chaired by OTA Advisory Board member Mr Oren Klemich, a donor family member. Its membership comprises representatives from a broad range of community organisations and a number of individuals. These include organisations working to promote awareness of organ and tissue donation, including target audiences such as First Nations people, young people, and culturally and linguistically diverse groups. The Community Engagement Group gives the OTA a community perspective on relevant issues, emerging trends and opportunities.

Operational working groups

We have a number of purpose-specific working groups established by the CEO, including:

- ♥ Clinical Data Working Group
- ♥ Data and Audit Working Group
- ♥ Electronic Donor Record Working Group
- ♥ DonateLife Communications
- ♥ Education Coordinators Network
- ♥ Family Support Advisory Group
- ♥ Paediatric Working Group
- ♥ OrganMatch Operational Governance Committee
- ♥ Education Working Group
- ♥ Australian Donor Risk Assessment Interview (AUS-DRAI) Review Working Group.

Working together to build support

The DonatLife Communications team (DLC) was formed in 2023 and consists of communications experts from the OTA and DonatLife Network.



Members of the DonatLife Communications team

Together the DLC provide a nationally consistent approach to deliver outcomes grounded in local knowledge and insights.

In 2023–24 the team met to discuss national priorities and strategies and to share learnings. The DLC established project groups to reduce duplication of effort and present opportunities for shared problem solving. Project groups that began in 2023–24 were brand, resources, volunteers, schools and case studies.

Highlights from 2023–24 included:

- ♥ establishing nationally consistent ways of gathering information for storytelling
- ♥ identifying gaps in information resources and establishing processes to fill those gaps
- ♥ providing the groundwork to establish a volunteer program across the country
- ♥ researching better ways to engage with schools, particularly years 9 and 10.

This new way of working has already resulted in positive outcomes and has set up the DonatLife Communications and Engagement program for future success.

In 2024–25 the team will continue laying foundational work for their work program with a focus on establishing a community engagement framework, conducting further research with culturally and linguistically diverse audiences and uplifting brand application and awareness.

Corporate planning

Our Strategy 2022–2027 clearly articulates our goals and objectives. Our strategic planning processes are undertaken in consultation with our key stakeholders and informed by insights from our advisory committees.

The OTA operates within the Commonwealth Performance Framework in accordance with the PGPA Act. Corporate planning aligns our activities and resources with our strategic priorities to support the achievement of our purpose.

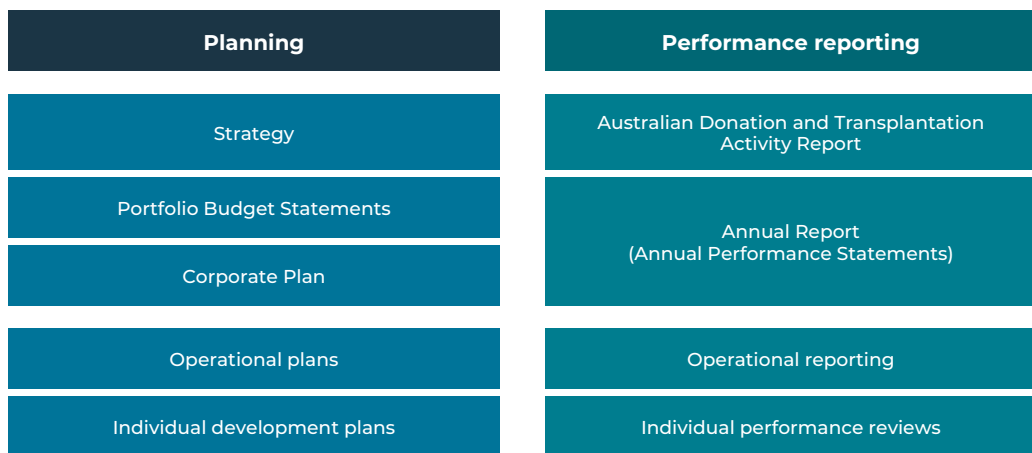
Our Corporate Plan 2023–24 was prepared in accordance with the requirements of the PGPA Act and provides further detail about the OTA's operating environment, capability and objectives.

The OTA's Strategy 2022–2027 and Corporate Plan 2023–24 are available online at: www.donatelife.gov.au/about-us/strategy-and-performance.

Implementation planning is undertaken internally to enable the OTA to achieve its purpose.

Overall DonateLife program performance is reported annually in the Australian Donation and Transplantation Activity Report, available at www.donatelife.gov.au. Results against the OTA's performance measures are presented in the Annual Performance Statements in Part 2 of this annual report. Performance measures are reported by calendar year to align with Australian and international donation performance reporting.

Figure 16: Planning and performance reporting framework



Legislative changes and parliamentary inquiries

Amending legislation on the disclosure of information about deceased donors or recipients

On 24 February 2024 the Australian Organ and Tissue Donation and Transplantation Authority Amendment (Disclosure of Information) Bill 2023 came into effect. It amends the *Australian Organ and Tissue Donation and Transplantation Authority Act 2008*.

The OTA worked with the Department of Health and Aged Care to introduce the amendments. The changes enable the OTA to disseminate, publish or disclose information about deceased donors in public awareness, promotional or educational activities and commemorative

services, with consent from an authorised family member. The definition of an authorised family member was also broadened with the amendments, in line with the make-up of families today. Supporting more donor families to share their story helps to raise awareness and encourage family discussion about organ and tissue donation.

Many families are involved in raising awareness of organ and tissue donation and choose to publicly share their story as part of the OTA's communications and engagement activities. For example, with consent, families can be involved in DonateLife Week, media and social media engagement, community events, education, and volunteer opportunities.

Parliamentary inquiries into organ and tissue donation

In 2023 the Parliaments of Western Australia and Victoria both established parliamentary inquiries to explore opportunities to improve organ and tissue donation.

The OTA, along with the respective jurisdictional DonateLife agencies, welcomed the opportunity to provide submissions to both inquiries.

The Western Australian Legislative Council Standing Committee on Public Administration inquiry into organ and tissue donation tabled its report on 27 February 2024, with 26 recommendations. The Victorian Legislative Assembly Legal and Social Issues Committee inquiry into increasing the number of registered organ and tissue donors tabled its report on 20 March 2024, with 41 recommendations.

Broadly, the themes of the recommendations covered awareness raising and education opportunities across the community and the sector, mechanisms for registering and capturing organ donation decisions, living donation, donation conversations and family consent, and clinical and technological aspects of donation.

Both inquiries identified recommendations to scope methods for registering as an organ donor on the AODR through drivers licence channels.

External scrutiny

The OTA is committed to transparency and accountability, and welcomes external scrutiny. During 2023–24 there were:

- ♥ no judicial decisions, decisions of administrative tribunals, or decisions by the Australian Information Commissioner that have had, or may have, a significant impact on our operations
- ♥ no reports on our operations by a parliamentary committee or the Commonwealth Ombudsman
- ♥ no legal actions lodged against us.

Other scrutiny

During 2023–24 the OTA:

- ♥ was not required to appear before the Senate Community Affairs Legislation Committee for Senate estimates hearings
- ♥ received 135 questions on notice arising from Senate estimates hearings.

We welcome feedback, research, insight and other forms of scrutiny from the general public and community organisations, as this plays an important role in guiding the donation and transplantation system.

Freedom of information

During 2023–24 the OTA received 3 freedom of information requests.

As an agency subject to Part II of the *Freedom of Information Act 1982*, the OTA is required to publish information to the public as part of the Information Publication Scheme. All information published in accordance with these requirements is available at www.donatelife.gov.au/about-us/corporate-transparency/freedom-of-information.

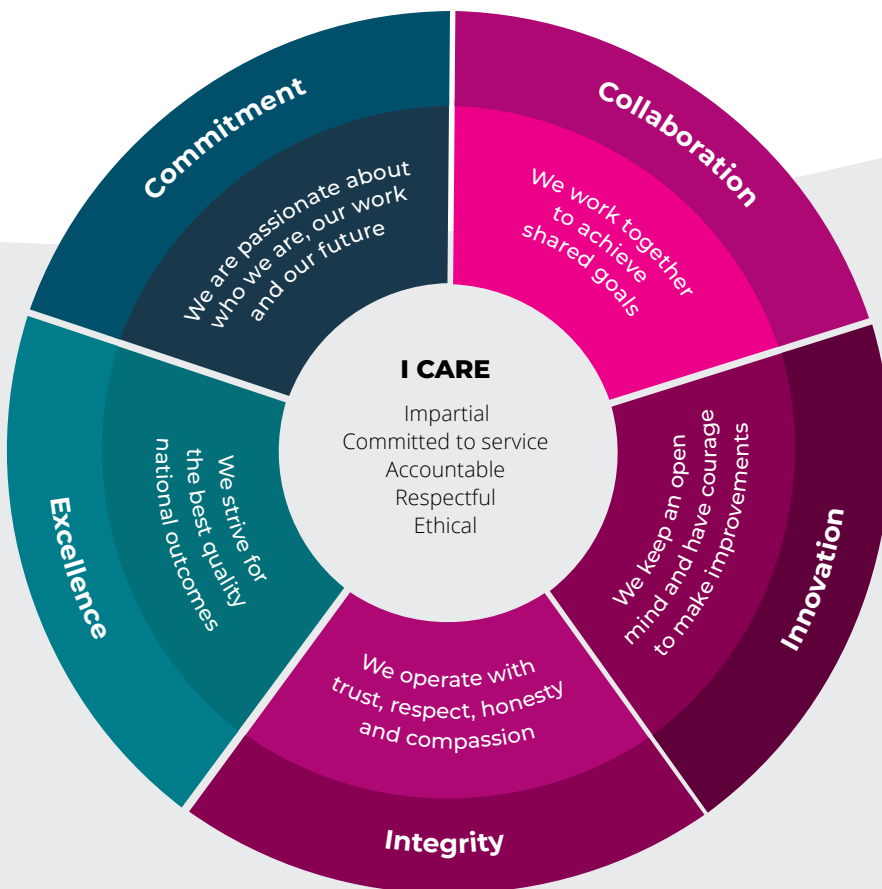
Our people

Our values and behaviours

We are committed to promoting and supporting the Australian Public Service (APS) Values and Code of Conduct, as set out in the *Public Service Act 1999*.

In addition to the APS Values (I CARE), through a collaborative process with employees we have developed a set of values specific to the OTA, which embody what we stand for and the core principles and beliefs that guide our behaviour and decision-making.

Figure 17: The OTA and APS values



Employee profile

At 30 June 2024 the OTA had 31 employees in addition to the CEO. Our staff are located in the Australian Capital Territory, Victoria and New South Wales. The workforce was predominantly female (74%).

Appendix 1 provides a breakdown of the OTA's workforce by classification, gender, full-time and part-time status, ongoing and non-ongoing employment, salary ranges, location and employment arrangements. For the 2023–24 reporting period all employee figures are reported as headcount as at 30 June 2024.

In 2023–24 there were:

- ♥ no employees who identified as Indigenous
- ♥ no performance payments.

Our workforce brings to the organisation a diverse range of valuable skills and expertise, helping us to foster productive relationships in the health and community sector. Many OTA employees are recognised experts in their fields and bring to their roles important local and national experience.

Employment type



Ongoing



Non-ongoing

Gender breakdown



Female



Male

Employment status



Full-time



Part-time

Location



ACT



VIC



NSW

Inclusion and diversity

The OTA is dedicated to an inclusive, safe and positive environment. We are committed to providing an inclusive workplace culture that provides equal opportunity for all staff to contribute, participate and progress.

We value, support and celebrate the diversity in backgrounds, culture, gender and experience of our employees. Our recruitment practices welcome individuals from varied cultures, languages and abilities, promoting fairness and accessibility.

We leverage our partnership arrangement with the Department of Health and Aged Care to provide staff with access to networks and established groups to support and celebrate their diversity.

To promote an inclusive workplace, we support awareness-raising activities each year. In 2023–24 we held events for Giving Day (Ovarian Cancer Australia), Harmony Day, International Nurses Day, The Biggest Morning Tea, NAIDOC Week, and R U OK? Day.

As part of our ongoing commitment to workplace inclusivity and diversity, the OTA is developing its first Reconciliation Action Plan (RAP). Our 'Reflect' RAP will aim to improve our cultural awareness, strengthen our relationship with First Nations people and engage in reconciliation meaningfully. The RAP will be developed in collaboration with Reconciliation Australia, First Nations stakeholders and OTA staff, and will identify actions, timelines and measurable outcomes to identify and strengthen relationships, build a vision for reconciliation, and create opportunities to strengthen our engagement.

During 2024–25 the OTA will:

- ♥ develop and finalise our 'Reflect' RAP
- ♥ raise awareness of neurodiversity and deploy initiatives to support neurodiversity in the workplace
- ♥ explore further strategies to manage and minimise psychosocial risk in our workplace.



OTA staff united to celebrate Australia's Biggest Morning Tea, to fundraise for people impacted by cancer

Disability reporting

Australia's Disability Strategy 2021–2031 (the Strategy) is the overarching framework for inclusive policies, programs and infrastructure that will support people with disability to participate in all areas of Australian life.

The Strategy sets out where practical changes will be made to improve the lives of people with disability in Australia.

It acts to ensure the principles underpinning the United Nations Convention on the Rights of Persons with Disabilities are incorporated into Australia's policies and programs that affect

people with disability, their families and carers. All levels of government have committed to deliver more comprehensive and visible reporting under the Strategy. A range of reports on progress of the Strategy's actions and outcome areas will be published and available at www.disabilitygateway.gov.au/ads.

Disability reporting is included in the Australian Public Service Commission's State of the Service reports and the APS Statistical Bulletin. These reports are available at www.apsc.gov.au.



OTA staff at a planning day

APS Reform

We are committed to growing and uplifting the capability of our agency through actions in line with the APS Reform agenda, including the adoption of best practice recruitment and selection processes, developing the capability of our staff to build a skilled and confident workforce, and supporting an accountable and transparent culture where employees act with integrity and fairness.

In line with the APS Strategic Commissioning Framework, we have identified our core job families. As a small agency we limit the outsourcing of work to an external workforce, and we recognise that the use of external expertise should enhance the knowledge and capability of the OTA.

As part of our workforce planning strategy, we continue to invest in staff development so that we have the capability to do our job well and deliver on our priorities.

We continue to bolster the integrity of our workforce and culture through training and awareness-raising sessions about staff responsibilities and the requirements of the legislative, policy, and assurance and governance frameworks we operate under.

We proudly publish our APS census results and use these to deliver better performance through our census action plan.

Further information on the APS Reform is available at www.apsreform.gov.au.

2024 APS employee census results

The results of the 2024 APS employee census demonstrate that we have a committed, engaged workforce whose values are aligned with the work that we do.

We are particularly proud of the consistency in our results in employee engagement, leadership and communication, which are a direct result of previously implemented action plans. The 2024 survey was completed by 84% of eligible staff at the time.



1st out of 104

agencies for our employee engagement (3rd year as no. 1)



2nd out of 104

agencies for our communication index



3rd out of 104

agencies for our wellbeing policy and support

Highlights include:

100%

are proud to work at the OTA

100%

believe strongly in the purpose and objectives of the OTA

100%

feel a strong personal attachment to the OTA

100%

agree their Senior Executive Service (SES) manager ensures that work effort contributes to the strategic direction of the agency and the APS

100%





believe the OTA cares about their health and wellbeing

People and culture capability

We are committed to building a positive culture and harnessing our diverse skills, experience and qualities to achieve our purpose. Our Corporate Plan 2023–24 identified several areas which were the focus of our people and culture capability development over the last year:

- ♥ We engaged in proactive workforce planning activities to attract and retain the right people. This included actively identifying succession planning opportunities, identifying opportunities for cross-skilling and knowledge sharing, and mapping all positions to job families.
- ♥ The introduction of the OTA's new Enterprise Agreement (EA) brought several new employment conditions and benefits for staff, including flexible working options, salary increases, improved parental leave and additional leave entitlements.
- ♥ We moved into a modern workplace which provides opportunities for enhanced collaboration, stronger engagement with our stakeholders and improved technology options. The workspace was also designed with the health and wellbeing of our employees in mind and provides natural lighting, ergonomic furniture and a wellness room.
- ♥ We began developing our RAP. This is an important step in our cultural development journey and an opportunity for our staff to learn more about the significance of First Nations people, communities, histories and culture.
- ♥ Following the results from the 2023 APS employee census we identified 4 focus areas for our APS census action plan (Figure 18). We met 3 of our 4 action plan goals in the 2024 census results, with further work needed to encourage innovation.

Figure 18: Our 2023 census action plan

Our areas of focus	Our goal	Our actions
 Wellbeing	We sustain a healthy working environment that supports employees to do their best work	<ul style="list-style-type: none"> ♥ Maintain an annual Health and Wellbeing Program ♥ Maintain flexible and hybrid working arrangements ♥ Proactive planning of key deliverables and peak periods to adequately allocate resources
 Leadership	Leadership is effective in enabling high-performing teams	<ul style="list-style-type: none"> ♥ Engage in regular planning and strategic discussions ♥ Improve communication and clarity on priorities for employees ♥ Provide regular and timely informal feedback, and recognition of work achievements ♥ Invest time for leadership development
 Innovation	We have a continuous improvement mindset that enables us to grow our skills, improve our delivery and embrace opportunities	<ul style="list-style-type: none"> ♥ Create opportunities to test and trial new approaches ♥ Continue to support an adaptive mindset ♥ Undertake proactive forward planning to harness opportunities and identify risks
 Communication	We work together across teams, and have access to the information we need to effectively perform our roles	<ul style="list-style-type: none"> ♥ Opportunities are provided for employees to communicate across teams and attend stakeholder meetings ♥ Opportunities are provided for all employees to engage with strategic priorities ♥ Review and revise current internal communication materials ♥ Deliver inclusive activities suitable for virtual and face-to-face working environments

Professional and personal development

During 2023–24 we continued our commitment to leading and developing our employees to achieve our purpose and support the government's priorities.

We recognise the importance of ensuring that all employees continue to develop their skills. This is facilitated through on-the-job training, sourced in-house training programs, and external accredited training programs. Other development opportunities include stakeholder engagement and attendance at conferences, seminars and learning institutions.

During 2023–24 OTA staff attended a number of conferences including the Australian Human Resources Institute Conference, Technology in Government, the Transplantation

Society of Australia and New Zealand's Annual Scientific Meeting, the International Society for Organ Donation Professionals Congress. The OTA also attended the Australasian Reporting Awards and Seminar where we received a gold award for excellence in transparency and performance reporting, as well as being a finalist in Best of Sector Public Administration National.



Building employee capabilities

Jessie Song started with the OTA at the beginning of 2022 as a Financial Accountant in the Corporate team. Opportunities for career development at a small agency can sometimes be limiting. To allow for further growth and development while continuing to work at the OTA, Jessie began working in the Analytics and Technology team as a data analyst one day a week. With Jessie's background in financial data and her analytical skills, this was a fantastic fit.

Working in the Analytics and Technology team has allowed Jessie to develop new skills in Tableau (a visual analytics platform), create dashboards, and strengthen cross-team collaboration. One of Jessie's first projects was to analyse paediatric donation data.

Jessie has been able to bring these new skills to her accountant position as well as giving her a broader understanding of how data drives our clinical best practice processes and reporting.



Jessie Song creating dashboards for the DonateLife Network

Connection to purpose – Bernie Dwyer

The OTA is very proud that 100% of respondents to our APS employee census feel a strong personal attachment to the OTA and believe strongly in our purpose. This is Bernadine (Bernie) Dwyer's connection to purpose.



Lucinda Barry AM, CEO; Bernie Dwyer; and Helen Opdam, National Medical Director

In 2002 Bernie commenced working as a donor coordinator with DonatLife Victoria and later moved into the role of National Training Coordinator for the OTA. Before joining the donation sector, Bernie worked as an Intensive Care Unit (ICU) nurse at St Vincent's Hospital and was involved in auditing all ICU deaths to identify potential missed donors.

'When I worked in ICU as a donor coordinator, I loved caring for families when their relative was at the end of their life. I realised that I had the ability to be present with families in their grief and could help them navigate the journey of their loved one's last hours or days. Becoming a donor coordinator continued that journey of being with families through difficult times. Knowing the difference we make in people's lives, for both donor families and recipients, has kept me motivated. That includes knowing that many families find great comfort in their loved one becoming an organ donor and

that for recipients, lives are changed forever by the gift of donation' Bernie said.

'My role as National Training Coordinator focused primarily on our national Family Donation Conversation workshops. Our aim is that participants in the workshops gain a greater understanding of family experiences in ICU and that they have the skills to support and discuss organ donation with families and ensure they are supported to make a donation decision based on accurate information.'

'Two things have kept me in the sector – the amazing, committed colleagues that I work with and of course the families. The stories of lives being saved and families having the courage and commitment to support their loved one becoming an organ donor will forever stay with me.'

Bernie, thank you for your outstanding service to the Australian organ and tissue donation program.

Performance management

All employees participate in our performance and development agreement cycle.

A performance and development agreement is designed to provide staff with a clear line of sight between individual effort, learning and development opportunities, and the OTA's corporate goals and priorities. It provides a structure through which a common and clear understanding of performance expectations, and a plan to meet those expectations, is agreed.

The OTA's Performance and Development Policy provides staff with access to the tools they need to engage in performance discussions.

The policy seeks to:

- ♥ clarify individual employees' understanding of their work tasks, their responsibilities and the performance standards expected
- ♥ provide feedback on performance and improve communication between supervisors and their staff
- ♥ provide a basis for determining salary advancement
- ♥ identify learning and development needs
- ♥ identify and manage instances of underperformance.

Employment arrangements

All terms and conditions of employment for non-SES employees are provided in our Enterprise Agreement 2024–2027.

OTA Enterprise Agreement 2024–2027

The EA outlines employment terms and conditions, including pay, for OTA APS employees. In March 2023, APS-wide bargaining began to establish common terms and conditions for all APS employees, while the OTA considered any additional terms.

The OTA kept staff informed throughout the process, including updates on APS-wide conditions and pay adjustments. Voting on the EA took place from 10 to 17 January 2024, with 87% of staff participating and 100% voting yes for the EA. The Fair Work Commission approved the EA 2024–2027, and the EA took effect on 1 March 2024.

Individual determinations

Terms and conditions of employment for SES employees are provided by individual determinations made under section 24(1) of the *Public Service Act 1999*.

Non-salary benefits

The Enterprise Agreement and other employment arrangements provide a range of non-salary benefits in addition to those consistent with national employment standards and the *Fair Work Act 2009*. The non-salary benefits available to staff include:

- ♥ influenza vaccinations
- ♥ time off for blood donations
- ♥ access to an Employee Assistance Program
- ♥ flexible and hybrid working arrangements, including home-based working, flexible hours and part-time arrangements
- ♥ a cultural or religious holidays substitution scheme
- ♥ cultural, ceremonial and NAIDOC leave
- ♥ lactation and breastfeeding support
- ♥ family and domestic violence support
- ♥ disaster support
- ♥ relocation assistance
- ♥ support for personal and professional development
- ♥ reimbursement of costs associated with obtaining financial advice for staff undertaking voluntary retrenchment.

Workplace health and safety

The OTA is strongly committed to the health, safety and wellbeing of its employees, as well as contractors and visitors to its premises.

Consistent with the legislative requirements of the *Work Health and Safety Act 2011*, we have comprehensive work health and safety (WHS) policies and guidelines in place. We provide employees with a safe workplace by eliminating or reducing the risk of hazards, conducting regular hazard inspections, and encouraging the reporting of any incidents or hazards. There are systems in place for employees to readily report any risks, hazards, near misses, injuries or incidents, and we quickly take corrective action, including applying first aid, if required.

As part of our health and safety management arrangements, our Workplace Consultative Committee meets quarterly to ensure a proactive approach to the health and safety of all employees. This enables management and employees to work together to effectively manage WHS risks and hazards. In 2023–24 the committee identified that a new position of Mental Health First Aid Officer should be introduced to assist with mitigating any possible psychosocial risks at the OTA. In April 2024 a staff member attended mental health first aid training and was appointed to the position.

The OTA conducts WHS inspections every quarter. Workstation assessments form part of the induction process for all employees, including home-based workers, with reasonable adjustments being made to ensure work can be conducted in a comfortable and safe manner.

The OTA's relocation to a new premises in December 2023 provided the opportunity to:

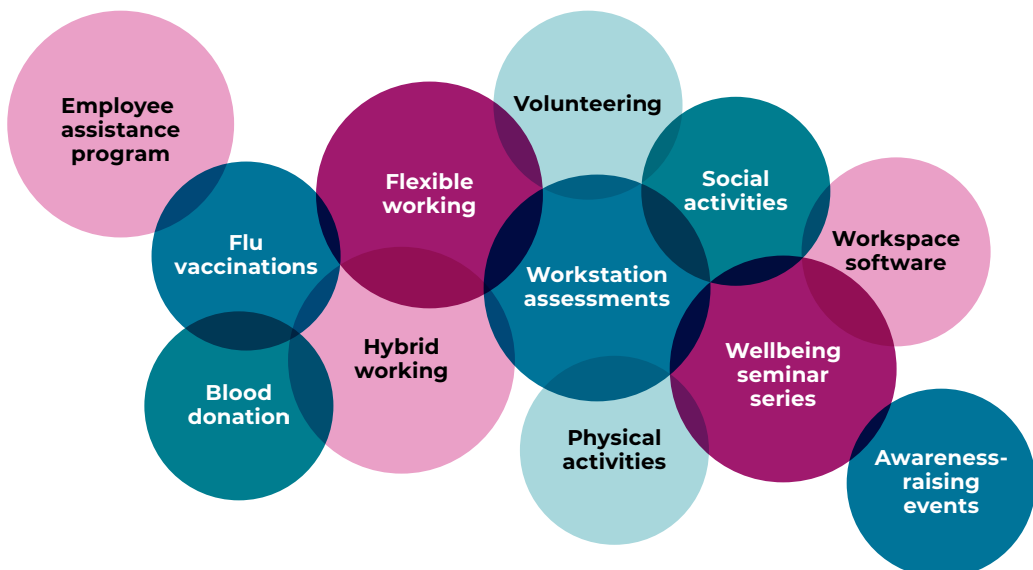
- ♥ audit all desks and chairs to ensure safe working order and procure new furniture if required
- ♥ improve our physical security with an electronic visitor sign-in system and an after-hours security system to ensure the protection of our people and information
- ♥ incorporate a wellness room that staff can use for activities such as accessing and applying first aid, expressing/breastfeeding, changing infants, prayer or stretching.

Staff are required to complete mandatory Safety Essentials training every 2 years.

There were no claims for injury in 2023–24 and no return-to-work programs conducted.

There were no reportable incidents lodged with Comcare during 2023–24.

Figure 19: Health and Wellbeing Program 2024



Risk management

The OTA's CEO, as the accountable authority, is responsible for risk oversight and management.

The OTA has an appropriate system of risk oversight, management and internal control consistent with section 16 of the PGPA Act, the Commonwealth Risk Management Policy and *AS/NZS ISO 31000:2018 – Risk management – principles and guidelines*.

Our risk management practices are also informed by internal assurance activities that assess the effectiveness of our current controls and whether further measures are necessary. The OTA's Audit and Risk Committee, established in compliance with section 45 of the PGPA Act, also reviews and advises on the appropriateness of the OTA's audit and risk frameworks.

The OTA strives to have a positive and effective risk culture through evidence-based decision-making, implementing improvements to better engage with risk in its day-to-day work and seizing opportunities. The OTA regularly reviews its risk management practices and behaviours to enable a supportive and collaborative workplace culture that openly discusses risk regularly, explores new ideas, and empowers everyone to act and learn from every decision. We are also working to gain a better understanding of the risks we share with our stakeholders.

Risk culture

Our risk culture is a shared set of values, attitudes and behaviours that shape how staff engage with risk in the activities they complete at work.

The OTA strives to have an environment that supports open discussion about uncertainties and opportunities, supports evidence-based decision-making every day, encourages staff to speak up, and provides a channel for the escalation of concerns where necessary.

Our risk culture in practice includes:

- ♥ proactively identifying and managing risks
- ♥ using available risk training resources and tools
- ♥ adopting a reflective and lessons-learned attitude to risk
- ♥ engaging in open and honest conversations about risk
- ♥ clearly identifying risk responsibilities, decision-making roles and escalation procedures
- ♥ working closely with our partners and stakeholders to understand our shared risks
- ♥ having leaders at all levels model our desired risk culture.

Risk appetite and tolerance





We face a range of risks reflecting the diversity of activities we undertake to fulfil our purpose: to save and improve the lives of more Australians through organ and tissue donation and transplantation.

To achieve our objectives, we work with the DonateLife Network, state and territory governments, the donation and transplantation clinical sectors, the eye and tissue sectors and the community to deliver the Australian Government's DonateLife program to improve organ and tissue donation and transplantation outcomes in Australia.

We have 4 core areas identified as enterprise-level risks that may impact our ability to achieve our purpose. These are people, engagement,

delivery, and information and technology. The OTA has management strategies to mitigate each of these risks.

Table 4: Enterprise risks, management strategies and tolerance

Risk statement	Management strategies	Tolerance level and statement
People 		
Failure to attract, engage and retain high-quality, committed people leads to insufficient capability to deliver	<ul style="list-style-type: none"> ♥ Offer a flexible workplace culture that invests in staff wellbeing and life-long learning ♥ Actively and regularly engage with staff through staff surveys and employee consultation – taking action as required ♥ Leverage our workforce strategy, to enable the right capability to be attracted and retained into the future 	We have a low tolerance for any activities that may cause harm to the safety and wellbeing of our people. We have a high tolerance for taking a flexible approach to recruiting and retaining an engaged, diverse and skilled workforce.
Engagement 		
Ineffective collaboration with a range of stakeholders, advocates and partners means that we do not build public support for donation and we fail to increase donation rates so that more people can receive a transplant	<ul style="list-style-type: none"> ♥ Design communications and engagement initiatives using data, insights and research to maximise awareness opportunities, specific to audience needs ♥ Maintain formal governance structures to collaborate and seek expertise from a range of stakeholders and partners ♥ Build and maintain key relationships through consultation, sharing knowledge and developing solutions with a focus on shared outcomes 	We have a high tolerance for engaging with our stakeholders and partners to build support for donation, optimise opportunities in the clinical sector and enhance systems to enable quality outcomes.
Delivery 		
Failure to optimise opportunities with the clinical sector or improve quality outcomes leads to decreased or less effective donation and transplantation outcomes	<ul style="list-style-type: none"> ♥ Maintain formal governance structures to collaborate and seek expertise ♥ Work with key stakeholders to ensure the most appropriate and effective processes, systems and resources to deliver services ♥ Build and maintain key relationships through consultation, sharing knowledge and developing solutions with a focus on shared outcomes ♥ Use evidence, standards, evolving technology and techniques to drive clinical innovation ♥ Increase capability and capacity in organ donation and transplantation 	We have a low tolerance for any activities that may cause harm to the safety of the community. We have a high tolerance for optimising opportunities with the clinical sector to improve the quality of donation and transplantation outcomes.
Information and technology 		
Inadequate information and technology systems and infrastructure leads to interruption of critical services and or loss of key data	<ul style="list-style-type: none"> ♥ Partner with trusted suppliers to enable information and technology to be available, secure and well maintained and enhance our cybersecurity posture ♥ Ensure adequate business continuity processes are in place to respond to disaster events ♥ Improve governance processes in line with new legislation and changes in clinical and data best practices 	We have a low tolerance for inappropriate, illegal or fraudulent access to systems, which might result in the exposure of personal data and critical information. We have a high tolerance for innovative information technology and consistent practices for lawful sharing of data and information.

Monitoring of risks involves comparing our risk exposure against our defined risk appetite and adjusting decision-making, resourcing or activities to better align them.

Our formal monitoring and reporting structures include:

- ♥ quarterly reporting to the OTA CEO, as the accountable authority, and the OTA's senior leadership team on overall risk exposure and alignment with risk policy
- ♥ quarterly risk reporting to the Audit and Risk Committee
- ♥ reviewing project/program-specific risk assessment plans on an as-needs basis, with reporting to the Chief Operating Officer.

More frequent reporting is completed when required – for example, in response to new or emerging risk areas or significant changes in the risk environment.

We recognise that effective risk management is a critical component of sound corporate governance, particularly in relation to the delivery of outcomes, transparency and accountability to the portfolio ministers and the parliament.

Our risk appetite statement

The OTA engages with higher levels of risk, particularly for innovation to achieve community and clinical outcomes. However, the OTA does not want to engage with risks that could harm our people, the DonateLife Network or the community.

We only tolerate risks that enable us to:

- ♥ achieve our stated objectives efficiently and effectively
- ♥ comply with all applicable laws and regulations
- ♥ conduct our business in a safe and sound manner.

Our tolerance for risk is highly dependent on the activity undertaken and the views of our partners and stakeholders.



OTA Audit and Risk Committee members
Mr Don Cross, Ms Gayle Ginnane and Mr Robert Antich

Business continuity management

Business continuity management is a key element to ensure that critical resources and processes remain available. The OTA's business continuity planning involves the development of comprehensive recovery plans to enable the continuation, or timely resumption, of critical resources and business processes to normal operations following a business interruption event.

Under our Business Continuity Plan, if a business interruption occurs, a business continuity team is convened by the recovery director (Chief Operating Officer). The team is the central point of communications and coordination for the OTA's response and recovery.

During 2023–24 the OTA:

- ♥ reviewed and updated our Business Continuity Plan and recovery plans, including incorporating lessons learned from previous disruptions
- ♥ reported any business disruptions (actual or potential).

During 2024–25 the OTA will test the updated Business Continuity Plan and recovery plans.

Internal audit and assurance

Due to limited internal resources, it is important that audit and assurance activities lead to incremental practical improvements in agency operations without diverting resources away from the delivery of the DonateLife program.

Following recommendations from the Audit and Risk Committee, the OTA has established an ongoing internal assurance checklist to monitor compliance with legislation and with relevant external policies and guidelines. Reporting against the checklist is undertaken on a quarterly basis back to the Audit and Risk Committee. This checklist is supplemented by independent audits, with topics recommended by the Audit and Risk Committee. This approach enables the OTA to scale assurance activities to the agency's size and complexity, improve value for money and seek external advice on an as-needs basis.

During 2023–24 an audit was conducted of the Community Awareness Grants and DonateLife Partnerships Program. During 2024–25 the OTA will:

- ♥ implement findings from the Community Awareness Grants and DonateLife Partnerships Program audit
- ♥ conduct an evaluation of the DonateLife Partnerships Program.

Fraud and corruption control

Fraud against the Commonwealth is a criminal offence. It reduces the funds available for delivering programs, can undermine the integrity of the public's confidence in government, and can place public safety at risk. We understand that the Australian community rightly expects entities and officials to acknowledge and fulfil their responsibilities as stewards of public funds and we make every effort to protect public resources.

We take fraudulent and corrupt conduct seriously, with a zero-tolerance approach to such behaviour. We have taken all reasonable measures to prevent, detect and deal with fraud, as required by section 10 of the PGPA Rule, and we regularly evaluate the effectiveness of our fraud control strategies.

Our Fraud and Corruption Control Plan aligns with the Commonwealth Fraud and Corruption Control Framework and identifies our approach to prevention, detection, reporting and investigation measures. It addresses the application of appropriate actions to remedy the harm from fraud and corruption, recovery of the proceeds of fraudulent or corrupt activity, and mandatory fraud and corruption awareness training for all staff. It also addresses external scrutiny of, and accountability for, fraud and corruption control activities.

During 2023–24 the OTA:

- ♥ reviewed and updated our Fraud and Corruption Control Plan and associated documents to align with the new Commonwealth Fraud and Corruption Control Framework that came into effect on 1 July 2024
- ♥ updated our fraud and corruption risk assessments, which identify the likelihood and consequences of fraud and corruption occurring and assess the effectiveness of existing controls to prevent, detect or respond to fraud and corruption risks
- ♥ conducted activities to raise awareness of the new National Anti-Corruption Commission, an independent agency that prevents, detects, investigates and reports on serious or systemic corruption in the Commonwealth public sector
- ♥ required employees to undertake mandatory fraud and corruption training.

During 2024–25 the OTA will regularly review our fraud and corruption controls to ensure that they are fit for purpose.

The OTA is not aware of any allegations of fraud and there are no ongoing investigations arising from the 2023–24 financial year.

Cybersecurity and the Protective Security Policy Framework

Security underpins our ability to improve the lives of Australians through optimising every potential organ and tissue donation for transplantation. We continuously work to uplift our security governance, information security, personnel security and physical security. This enables us to maintain operational effectiveness, protect our information and ensure the public's continued confidence in the OTA, the Donatelife Network and the overarching organ and tissue donation system in Australia.

Each financial year, the OTA must report on our security posture to our portfolio minister and the Department of Home Affairs through the Protective Security Policy Framework Assessment Report. This report provides assurance to government and the Australian public that entities are implementing security measures that proportionately address their unique security risk environments. The OTA has been able to demonstrate incremental improvements in security maturity against the criteria of the report.

As a small agency the OTA partners with the Department of Health and Aged Care and with external IT suppliers to specifically manage information security and cybersecurity risks, including compliance with the Australian Government's Essential Eight protection strategies.

Resource management

The OTA is an extra-small agency committed to leading the delivery of best practice outcomes in organ and tissue donation and transplantation within the Commonwealth Resource Management Framework.

Our staff have several duties outlined by the PGPA Act and have built strong processes and systems to meet these requirements. We are committed to ensuring compliance by providing internal reporting to the CEO on a monthly basis and the Audit and Risk Committee on a quarterly basis.

This helps us to identify areas of concern and improve work practices. It also ensures the efficient, effective, economical and ethical use of Commonwealth resources in a way that is consistent with the policies of the Australian Government.

There were no significant non-compliance issues in 2023–24 that required reporting to the Assistant Minister.

Asset management

Our asset management strategy allows us to strategically plan and maintain the optimal asset mix for the effective delivery of our program. It includes:

- ♥ a capital management plan that details our actual and anticipated capital expenditure, and how it will be funded
- ♥ an asset register, subject to an annual stocktake of fixed and intangible assets. This stocktake helps to confirm the location – and identify the condition – of assets, along with reducing surplus and underperforming assets.

In 2023–24 the OTA entered into a new lease for office space which included a major fit-out project. The project was completed in December 2023.

There were no additional major asset acquisitions or replacement projects during the year. Further information on the value, acquisition and disposal of assets in 2023–24 can be found in Part 4, Financial statements.

Property strategy – a more modern workspace and better value for money

In December 2023 the OTA moved to a new office at 12 Moore Street, Canberra. The move provided the opportunity to seek better value for money in our lease arrangements and to design a new fit-out that incorporates technology and promotes adaptability, collaboration and productivity.

The new fit-out created opportunities not only in where we work but in how we work. It provides:

- ♥ workspaces for collaboration and teamwork to improve business outcomes and productivity
- ♥ accessible workspaces and a wellness room for a more inclusive environment
- ♥ improved technology and meeting rooms to enhance collaboration with our external stakeholders

- ♥ improvements in our physical security
- ♥ improved end-of-trip facilities to encourage our staff to be more active.

The workspace was also designed with the health and wellbeing of our employees in mind and provides natural lighting and ergonomic furniture.

OTA staff using an interactive workspace



Purchasing

In 2023–24 the OTA's purchasing policies and practices were driven by the principles set out in the Commonwealth Procurement Rules.

Procurement policies and supporting guidelines ensure the organisation undertakes competitive, non-discriminatory procurement processes; obtains value for money; encourages competition among actual and potential suppliers; promotes the use of resources in an efficient, effective, economical and ethical manner; and is accountable and transparent during the procurement process.

Reportable consultancy contracts

During 2023–24 the OTA entered into one new reportable consultancy contract, involving total actual expenditure of \$55,000.

No other consultancy contracts were active during the period.

Annual reports contain information about actual expenditure on reportable consultancy contracts. Information on the value of reportable consultancy contracts is available on the AusTender website.

Decisions to engage a consultant are made in accordance with the PGPA Act and related regulations, including the Commonwealth Procurement Rules and relevant internal policies.

The OTA selects consultants through the use of panel arrangements or by making an open approach to market. The OTA primarily engages consultants when:

- ♥ skills are unavailable within the agency
- ♥ there is a need for specialised or professional skills
- ♥ there is a need for independent research or assessment.

Table 5: Expenditure on reportable consultancy contracts current report period (2023–24)

	Number	Expenditure \$'000 (GST incl)
New contracts entered into during the reporting period	1	55
Ongoing contracts entered into during a previous reporting period	0	0
Total	1	55

Table 6: Organisations receiving a share of reportable consultancy contract expenditure (2023–24)

	Expenditure \$'000 (GST incl)
Ernst and Young (75 288 172 749) was engaged to conduct an internal audit of the Community Awareness Grants and DonateLife Partnerships Program	55

Reportable non-consultancy contracts

During 2023–24 the OTA entered into 30 new reportable non-consultancy contracts, involving total actual expenditure of \$1.178 million. In addition, 24 ongoing reportable non-consultancy contracts were active during the period, involving total actual expenditure of \$4.606 million.

Annual reports contain information about actual expenditure on reportable non-consultancy contracts.

Information on the value of reportable non-consultancy contracts is available on the AusTender website.

Table 7: Expenditure on reportable non-consultancy contracts current report period (2023–24)

	Number	Expenditure \$'000 (GST incl)
New contracts entered into during the reporting period	30	1,178
Ongoing contracts entered into during a previous reporting period	24	4,606
Total	54	5,784

Table 8: Organisations receiving a share of reportable non-consultancy contract expenditure (2023–24)

	Expenditure \$'000 (GST incl)
Evolve FM Pty Ltd (52 605 472 580) ongoing engagement for Project Management Services – Office Fit Out	2,870
Transplant Connect (N/A US company) new and ongoing engagements to provide support and maintenance for the Electronic Donor Record and OrganMatch interface	1,090
National Mutual Life Nominees Pty Ltd (98 004 387 133) new engagement for the provision of leased office space at 12 Moore Street Canberra	236
NTT Australia Pty Ltd (65 003 371 239) new engagement to provide Microsoft Azure web application and cloud infrastructure support	190
MCR Computer Resources Pty Ltd (74 003 647 943) ongoing engagement to manage cloud hosting services	130

Advertising campaigns

The OTA is a non-corporate Commonwealth entity. During 2023–24 we did not conduct any advertising campaigns.

Australian National Audit Office access clauses

Our standard contract templates include provisions which allow for the Australian National Audit Office to access a contractor's premises.

We did not enter into any contracts in 2023–24 that included a variation to the standard terms and conditions allowing such access.

Exempt contracts

During 2023–24 we did not enter into any contracts or any standing offers that were exempt from being published on AusTender.

In accordance with the reporting requirements of the Commonwealth Procurement Rules, details of all contracts with a value of \$10,000 or more are published on AusTender.

Procurement initiatives to support small business

The OTA supports small business participation in the Commonwealth Government procurement market. Small and medium enterprise (SME) and small enterprise participation statistics are available on the Department of Finance's website.

The OTA is committed to sourcing at least 20% of procurement by value from SMEs and to procuring 35% (by value) of contracts with a value up to \$20 million from SMEs. OTA officials apply procurement practices that do not unfairly discriminate against SMEs and provide appropriate opportunities for SMEs to compete. Between 1 July 2023 and 30 June 2024 the OTA sourced 84.4% of our procurements by value from SMEs, for contracts with a value of up to \$20 million.

We encourage the participation of small business through the use of the Department of Finance's Commonwealth Contracting Suite (except where placing official orders under panel arrangements) for low-risk procurements valued under \$200,000 (inclusive of GST). These contract templates streamline the procurement processes for small businesses, in particular, by reducing process costs; removing repetition and ambiguity; simplifying liability, insurance and indemnity requirements; and creating consistency.

The OTA recognises the importance of ensuring that small businesses are paid on time. Our small but dedicated finance team ensures the majority of invoices submitted are paid within a week of acceptance. We also facilitate payment by credit card if and where appropriate. The results of the Survey of Australian Government Payments to Small Business are available on the Treasury's website at www.treasury.gov.au.

Our Melbourne Storm partners promoting community awareness



Grant programs

Funding is provided through grant programs across the clinical and community sectors. Funding provided through grants in 2023–24 supported:

- ♥ state and territory governments and local area health districts for a dedicated DonateLife agency in each jurisdiction and the dedicated donation clinical specialists supporting the clinical program in hospitals
- ♥ public and some private hospitals to remove cost barriers to organ and tissue donation
- ♥ transplant outcome registries
- ♥ the delivery of the Australian organ-matching system, OrganMatch
- ♥ partnerships with sporting, corporate and community organisations to support community awareness and education
- ♥ Community Awareness Grants awarded to deliver a range of events and digital activities across Australia which help increase awareness about organ and tissue donation throughout the year. Many of these are also involved with DonateLife Week.

Information on grants awarded by the OTA during the period 1 July 2023 to 30 June 2024 is available at www.donatelifegov.au/our-partners and on the Australian Government's grant information system, GrantConnect, at www.grants.gov.au.

Environmental sustainability

Ecologically sustainable development and environmental performance

The *Environment Protection and Biodiversity Conservation Act 1999* requires that Australian Government organisations report annually on their environmental performance and contribution to ecologically sustainable development. As an extra-small agency, our main environmental impact comes from office space energy consumption.

In 2023–24 we continued our commitment to ecologically sustainable development by ensuring we effectively delivered corporate strategic priorities while minimising environmental impact. This included a considered approach to planning, implementing and monitoring our environmental performance in accordance with current legislation, whole-of-government requirements and environmental best practice.

The move to the OTA's new office at 12 Moore Street, Canberra, provided an opportunity for us to consider the inclusion of environmentally sustainable options in design. The new office has lighting and heating that operate on timers and uses more energy-efficient appliances, thus reducing the overall energy consumption. The OTA reused existing furniture where possible and donated old office furniture to local sporting and community groups consistent with our commitment to support a circular economy and minimise waste.

Australian Public Service Net Zero 2030

APS Net Zero 2030 is the government's policy for the APS to reduce its greenhouse gas emissions to net zero by 2030 and transparently report on its emissions. As part of the Net Zero in Government Operations Strategy, non-corporate Commonwealth entities, corporate Commonwealth entities, and Commonwealth companies are required to report on their operational greenhouse gas emissions.

The Greenhouse Gas Emissions Inventory presents greenhouse gas emissions over the 2023–24 period. Results are presented on carbon dioxide equivalent (CO₂-e) emissions. Greenhouse gas emissions have been calculated in line with the APS Net Zero Emissions Reporting Framework, consistent with the whole of Australian Government approach as part of the APS Net Zero 2030 policy. Not all data sources were available at the time of publication, and amendments to the data may be required in future reports.

The OTA's Emissions Reduction Plan provides a pathway to contribute to the achievement of the APS Net Zero 2030 target through emissions reduction activities. This plan encompasses our existing and new priorities and actions to reduce emissions. It is available on the DonatLife website.

Table 9: Greenhouse Gas Emissions Inventory – location-based method (2023–24)

Emission source	Scope 1 t CO ₂ -e	Scope 2 t CO ₂ -e	Scope 3 t CO ₂ -e	Total t CO ₂ -e
Electricity (location based approach)	N/A	26,585	2,121	28,706
Natural gas	-	N/A	-	-
Solid waste*	N/A	N/A	-	-
Refrigerants**	-	N/A	N/A	-
Fleet and other vehicles	-	N/A	-	-
Domestic commercial flights	N/A	N/A	61,193	61,193
Domestic hire car*	N/A	N/A	-	-
Domestic travel accommodation*	N/A	N/A	15,129	15,129
Other energy	-	N/A	-	-
Total t CO₂-e	-	26,585	78,443	105,028

Note: the table above presents emissions related to electricity usage using the location-based accounting method. t = tonne, CO₂-e = carbon dioxide equivalent.

* indicates emission sources collected for the first time in 2023–24. The quality of data is expected to improve over time as emissions reporting matures.

† indicates optional emission source for 2023-24 emissions reporting.

Table 10: Electricity greenhouse gas emissions (2023–24)

Emission source	Scope 2 t CO ₂ -e	Scope 3 t CO ₂ -e	Total t CO ₂ -e	Percentage of electricity use
Electricity (location based approach)	26,585	2,121	28,706	100.00%
Market-based electricity emissions	2,275	0,281	2,556	7.15%
Total renewable electricity	-	-	-	92.85%
Mandatory renewables ¹	-	-	-	18.72%
Voluntary renewables ²	-	-	-	74.13%

Note: the table above presents emissions related to electricity usage using both the location-based and the market-based accounting methods.

t = tonne, CO₂-e = carbon dioxide equivalent.

1 Mandatory renewables are the portion of electricity consumed from the grid that is generated by renewable sources. This includes the renewable power percentage.

2 Voluntary renewables reflect the eligible carbon credit units surrendered by the entity. This may include purchased large-scale generation certificates, power purchasing agreements, GreenPower and the jurisdictional renewable power percentage (ACT only).

Jaylan

"I've no idea how to even start to say thank you for something like this. There are no words."

Jaylyn had a heart transplant. He was a seemingly healthy 17-year-old when urgently listed for a transplant due to undiagnosed cardiomyopathy. He is now a DonateLife volunteer.



Part 4

Financial statements

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Financial summary

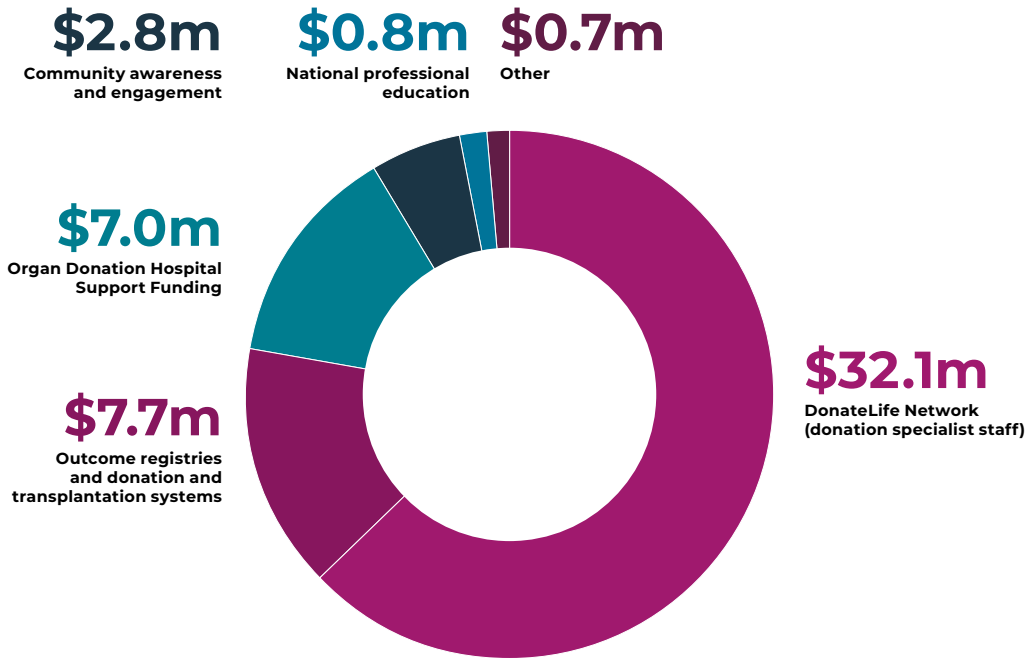
Total departmental expenditure

\$6.9m

Total administered expenditure

\$51.1m

Administered expenditure 2023–24



Statement of financial position

\$7.0m

Total assets

\$4.0m

Total liabilities

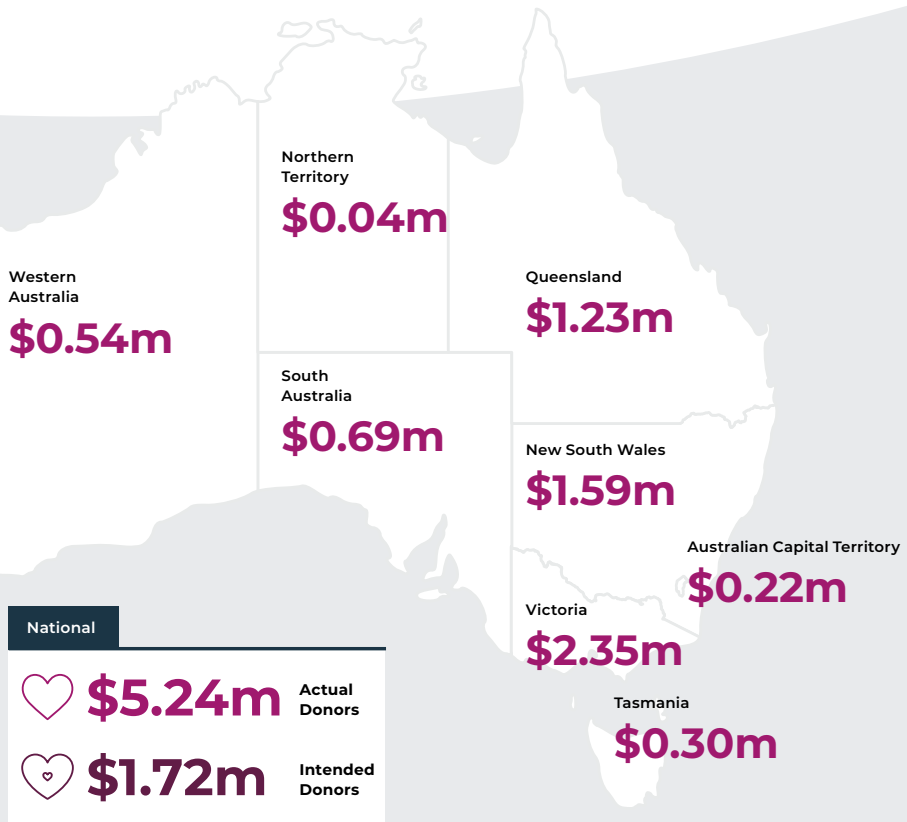
\$3.0m

Total equity

Organ Donation Hospital Support Funding

The OTA provides funding to public and some private hospitals to contribute to the costs associated with organ donation activity, based on actual and intended organ donors through Organ Donation Hospital Support Funding (ODHSF).

The map shows the ODHSF contribution by state and territory in 2023–24 and the table displays a comparison to 2022–23.



State	2023–24			2022–23		
	Actual Donors (\$)	Intended Donors (\$)	Total (\$)	Actual Donors (\$)	Intended Donors (\$)	Total (\$)
NSW	1,260,000	330,000	1,590,000	1,360,000	390,000	1,750,000
VIC	1,690,000	660,000	2,350,000	1,340,000	550,000	1,890,000
QLD	930,000	300,000	1,230,000	1,000,000	350,000	1,350,000
SA	490,000	200,000	690,000	440,000	190,000	630,000
WA	410,000	130,000	540,000	440,000	230,000	670,000
TAS	260,000	40,000	300,000	190,000	50,000	240,000
NT	30,000	10,000	40,000	20,000	-	20,000
ACT	170,000	50,000	220,000	90,000	20,000	110,000
Australia	5,240,000	1,720,000	6,960,000	4,880,000	1,780,000	6,660,000

Source: OTA, DonateLife Audit; Australia and New Zealand Organ Donation Registry

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Independent Auditor's Report



INDEPENDENT AUDITOR'S REPORT

To the Assistant Minister for Health and Aged Care

Opinion

In my opinion, the financial statements of the Australian Organ and Tissue Donation and Transplantation Authority (the Entity) for the year ended 30 June 2024:

- (a) comply with Australian Accounting Standards – Simplified Disclosures and the *Public Governance, Performance and Accountability (Financial Reporting) Rule 2015*; and
- (b) present fairly the financial position of the Entity as at 30 June 2024 and its financial performance and cash flows for the year then ended.

The financial statements of the Entity, which I have audited, comprise the following as at 30 June 2024 and for the year then ended:

- Statement by the Chief Executive Officer and Chief Financial Officer;
- Statement of Comprehensive Income;
- Statement of Financial Position;
- Statement of Changes in Equity;
- Cash Flow Statement;
- Administered Schedule of Comprehensive Income;
- Administered Schedule of Assets and Liabilities;
- Administered Reconciliation Schedule;
- Administered Cash Flow Statement; and
- Notes to and forming part of the financial statements, comprising material accounting policy information and other explanatory information.

Basis for opinion

I conducted my audit in accordance with the Australian National Audit Office Auditing Standards, which incorporate the Australian Auditing Standards. My responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Statements* section of my report. I am independent of the Entity in accordance with the relevant ethical requirements for financial statement audits conducted by the Auditor-General and their delegates. These include the relevant independence requirements of the Accounting Professional and Ethical Standards Board's APES 110 *Code of Ethics for Professional Accountants (including Independence Standards)* (the Code) to the extent that they are not in conflict with the *Auditor-General Act 1997*. I have also fulfilled my other responsibilities in accordance with the Code. I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my opinion.

Accountable Authority's responsibility for the financial statements

As the Accountable Authority of the Entity, the Chief Executive Officer is responsible under the *Public Governance, Performance and Accountability Act 2013* (the Act) for the preparation and fair presentation of annual financial statements that comply with Australian Accounting Standards – Simplified Disclosures and the rules made under the Act. The Chief Executive Officer is also responsible for such internal control as the Chief Executive Officer determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the Chief Executive Officer is responsible for assessing the ability of the Entity to continue as a going concern, taking into account whether the Entity's operations will cease as a result

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of an administrative restructure or for any other reason. The Chief Executive Officer is also responsible for disclosing, as applicable, matters related to going concern and using the going concern basis of accounting, unless the assessment indicates that it is not appropriate.

Auditor's responsibilities for the audit of the financial statements

My objective is to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes my opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with the Australian National Audit Office Auditing Standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of the financial statements.

As part of an audit in accordance with the Australian National Audit Office Auditing Standards, I exercise professional judgement and maintain professional scepticism throughout the audit. I also:

- identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for my opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control;
- obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Entity's internal control;
- evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the Accountable Authority;
- conclude on the appropriateness of the Accountable Authority's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Entity's ability to continue as a going concern. If I conclude that a material uncertainty exists, I am required to draw attention in my auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify my opinion. My conclusions are based on the audit evidence obtained up to the date of my auditor's report. However, future events or conditions may cause the Entity to cease to continue as a going concern; and
- evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

I communicate with the Accountable Authority regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that I identify during my audit.

Australian National Audit Office



Jeffrey Hobson

Executive Director

Delegate of the Auditor-General

Canberra

23 September 2024

Statement by the Accountable Authority

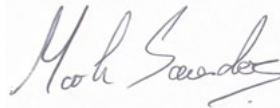
In our opinion, the attached financial statements for the year ended 30 June 2024 comply with subsection 42(2) of the *Public Governance, Performance and Accountability Act 2013* (PGPA Act), and are based on properly maintained financial records as per subsections 41(2) of the PGPA Act.

In our opinion, at the date of this statement, there are reasonable grounds to believe that the Australian Organ and Tissue Donation and Transplantation Authority (OTA) will be able to pay its debts as and when they fall due.



Ms Lucinda Barry AM
Chief Executive Officer

20 September 2024



Mr Mark Saunders
Chief Financial Officer

20 September 2024

Financial statements

Statement of comprehensive income

For the period ended 30 June 2024

	Notes	2024 \$	2023 \$	Original Budget \$
Net cost of services				
Expenses				
Employee benefits	1.1A	5,138,784	4,828,814	5,156,000
Suppliers	1.1B	1,070,817	944,408	922,000
Finance costs	1.1C	51,250	2,842	45,000
Depreciation and amortisation	3.2A	642,618	521,044	650,000
Write-down and impairment of other assets		3,134	3,034	-
Total expenses		6,906,603	6,300,142	6,773,000
Own-source income				
Own-source revenue				
Other revenue	1.2A	90,000	100,000	103,000
Total own-source revenue		90,000	100,000	103,000
Total own-source income		90,000	100,000	103,000
Net cost of services		(6,816,603)	(6,200,142)	(6,670,000)
Revenue from Government	1.2B	6,765,000	6,089,000	6,265,000
Deficit		(51,603)	(111,142)	(405,000)
Total comprehensive loss		(51,603)	(111,142)	(405,000)

The above statement should be read in conjunction with the accompanying notes.

Statement of financial position

As at 30 June 2024

	Notes	2024 \$	2023 \$	Original Budget \$
Assets				
Financial assets				
Cash and cash equivalents	3.1A	106,147	120,825	113,000
Trade and other receivables	3.1B	2,401,646	3,888,442	1,473,000
Total financial assets		2,507,793	4,009,267	1,586,000
Non-financial assets¹				
Buildings	3.2A	3,753,541	170,693	4,032,000
Property, plant and equipment	3.2A	592,365	134,417	192,000
Computer software	3.2A	95,855	146,743	367,000
Prepayments		76,648	32,497	133,000
Total non-financial assets		4,518,409	484,350	4,724,000
Total assets		7,026,202	4,493,617	6,310,000
Liabilities				
Payables				
Suppliers	3.3A	144,320	51,653	151,000
Other payables	3.3B	287,727	264,847	341,000
Total payables		432,047	316,500	492,000
Interest bearing liabilities				
Leases	3.4A	2,023,018	110,289	2,217,000
Total interest bearing liabilities		2,023,018	110,289	2,217,000
Provisions				
Employee provisions	6.1A	1,517,274	1,235,499	990,000
Total provisions		1,517,274	1,235,499	990,000
Total liabilities		3,972,339	1,662,288	3,699,000
Net assets		3,053,863	2,831,329	2,611,000
Equity				
Contributed equity		4,477,000	4,205,000	4,477,000
Asset revaluation reserve		-	666,478	666,000
Accumulated deficit		(1,423,137)	(2,040,149)	(2,532,000)
Total equity		3,053,863	2,831,329	2,611,000

The above statement should be read in conjunction with the accompanying notes.

1. Right-of-use assets are included in the following line items: Buildings.

Statement of changes in equity

For the period ended 30 June 2024

	Notes	2024 \$	2023 \$	Original Budget \$
Contributed equity				
Opening balance				
Balance carried forward from previous period		4,205,000	3,941,000	4,205,000
Adjusted opening balance		4,205,000	3,941,000	4,205,000
Transactions with owners				
Contributions by owners				
Departmental capital budget		272,000	264,000	272,000
Total transactions with owners		272,000	264,000	272,000
Closing balance as at 30 June		4,477,000	4,205,000	4,477,000
Retained earnings				
Opening balance				
Balance carried forward from previous period		(2,040,149)	(1,929,007)	(2,127,000)
Recognition of previously expensed assets ¹		2,137	-	-
Adjusted opening balance		(2,038,012)	(1,929,007)	(2,127,000)
Comprehensive income				
Deficit for the period		(51,603)	(111,142)	(405,000)
Total comprehensive income/(loss)		(51,603)	(111,142)	(405,000)
Transfers between equity components ²		666,478	-	-
Closing balance as at 30 June		(1,423,137)	(2,040,149)	(2,532,000)
Asset revaluation reserve				
Opening balance				
Balance carried forward from previous period		666,478	666,478	666,000
Adjusted opening balance		666,478	666,478	666,000
Comprehensive income				
Transfers between equity components ²		(666,478)	-	-
Closing balance as at 30 June		-	666,478	666,000
Total equity				
Opening balance				
Balance carried forward from previous period		2,831,329	2,678,471	2,744,000
Recognition of previously expensed assets ¹		2,137	-	-
Adjusted opening balance		2,833,466	2,678,471	2,744,000
Comprehensive income				
Deficit for the period		(51,603)	(111,142)	(405,000)
Other comprehensive income		-	-	-
Total comprehensive income		(51,603)	(111,142)	(405,000)
Transactions with owners				
Contributions by owners				
Departmental capital budget		272,000	264,000	272,000
Total transactions with owners		272,000	264,000	272,000
Closing balance as at 30 June		3,053,863	2,831,329	2,611,000

Statement of changes in equity

For the period ended 30 June 2024

The above statement should be read in conjunction with the accompanying notes.

1. Previously expensed furniture valued at \$2,137 was credited to retained earnings.
2. The asset revaluation reserve was reversed and the balance transferred to equity as the assets to which it related were disposed of as part of the office relocation.

Accounting policy

Equity injections

Amounts appropriated which are designated as 'equity injections' for a year (less any formal reductions) and Departmental Capital Budgets (DCBs) are recognised directly in contributed equity in that year.

Cash flow statement

For the period ended 30 June 2024

	Notes	2024 \$	2023 \$	Original Budget \$
Operating activities				
Cash received				
Appropriations		8,346,804	6,016,136	8,265,000
Net GST received		324,329	110,159	165,000
Section 74 receipts		121,196	149,364	-
Total cash received		8,792,329	6,275,659	8,430,000
Cash used				
Employees		(5,049,335)	(4,715,296)	(5,156,000)
Suppliers		(1,263,118)	(963,950)	(819,000)
Interest payments on lease liabilities		(51,250)	(2,842)	(45,000)
Section 74 receipts transferred to OPA		(121,196)	(149,364)	-
Other		(324,329)	(110,159)	(165,000)
Total cash used		(6,809,228)	(5,941,611)	(6,185,000)
Net cash from operating activities		1,983,101	334,048	2,245,000
Investing activities				
Cash used				
Purchase of buildings		(1,898,889)	(15,000)	-
Purchase of property, plant and equipment		(549,052)	(5,998)	(2,272,000)
Purchase of computer software		(4,700)	(52,760)	-
Total cash used		(2,452,641)	(73,758)	(2,272,000)
Net cash used by investing activities		(2,452,641)	(73,758)	(2,272,000)
Financing activities				
Cash received				
Contributed equity		723,242	73,758	272,000
Total cash received		723,242	73,758	272,000
Cash used				
Principal payments of lease liabilities		(268,380)	(326,449)	(245,000)
Net cash used		(268,380)	(326,449)	(245,000)
Net cash from(used by) financing activities		454,862	(252,691)	27,000
Net increase/(decrease) in cash held		(14,678)	7,599	-
Cash and cash equivalents at the beginning of the reporting period		120,825	113,226	113,000
Cash and cash equivalents at the end of the reporting period	3.1A	106,147	120,825	113,000

The above statement should be read in conjunction with the accompanying notes.

Budget variances commentary

For the period ended 30 June 2024

Statement of comprehensive income

Suppliers

Supplier payments were greater than budgeted due to a combination of factors including price increases, relocation expenses associated with the OTA's office move and an increase in the amount of travel undertaken throughout the year.

Other revenue

Other revenue relates to resources received free of charge for external audit fees. These fees have reduced compared with the prior year level on which the budgeted amount was based.

Statement of financial position

Trade and other receivables

The budget for trade and other receivables included a preliminary estimate of the reduction in appropriation receivable that would result from financing office fit-out costs. The variance noted reflects that these costs were less than the initial estimate as well as additional appropriation receivable from the net cash operating surplus.

Buildings

The budget for buildings was based upon an initial estimate of the right of use asset that would result from a new office lease prior to the OTA's accommodation strategy being finalised. The variance represents a lower actual lease liability compared with the initial estimate.

Property, plant and equipment

The variance for property, plant and equipment is a result of the new office fit-out which resulted in heavily depreciated assets being replaced with new assets.

Computer software

Computer software decreased in value across the year as a result of depreciation which differed to the budget assumption for additional investment in this area.

Prepayments

Prepayments were less than estimated in budget assumptions. The total amount of prepayments is not considered large and is influenced by the timing of cash payments close to the end of the year.

Suppliers and other payables

Supplier and other payables are close to the budgeted amount. This variance noted is due to the timing of services received, the receipt of tax invoices, and a general strategy to pay liabilities by 30 June where possible.

Leases

The budget for lease liabilities was based on an initial estimate for a new office lease prior to the finalisation of the OTA's accommodation strategy. Actual lease liabilities at 30 June were less than the initial budget estimate.

Employee provisions

Employee provisions were greater than budgeted in line with an increase in staffing that occurred throughout the year as well as the impact of pay rises and increased salary growth rate assumptions.

Budget variances commentary

For the period ended 30 June 2024

Statement of changes in equity

Variances noted are consistent with the operating result flowing through the statement of changes in equity and also the transfer of the asset revaluation reserve to retained earnings. This was necessary as the assets to which the reserve related were disposed of as part of the office relocation.

Cash flow statement

Variances against budget in the Cash flow statement are broadly consistent with the explanations provided for expenses. The timing of payments, particularly for suppliers, will be dependent on the receipt of the goods and services and their related invoices and so can vary between reporting periods.

No budget was provided for in the Cash flow statement for the transfer of section 74 receipts to the Official Public Account.

The variances noted against investment activity categories reflect the budget for the office relocation components being held against property, plant and equipment compared with actual costs allocated across multiple categories.

Administered schedule of comprehensive income

For the period ended 30 June 2024

	Notes	2024 \$	2023 \$	Original Budget \$
Net cost of services				
Expenses				
Suppliers	2.1A	2,683,526	2,611,119	5,488,000
Grants	2.1B	48,374,864	46,509,840	46,078,000
Total expenses		51,058,390	49,120,959	51,566,000
Total revenue		-	-	-
Net cost of services		(51,058,390)	(49,120,959)	(51,566,000)
Deficit		(51,058,390)	(49,120,959)	(51,566,000)
Total comprehensive loss		(51,058,390)	(49,120,959)	(51,566,000)

The above statement should be read in conjunction with the accompanying notes.

Administered schedule of assets and liabilities

As at 30 June 2024

	Notes	2024 \$	2023 \$	Original Budget \$
Assets				
Financial assets				
Cash and cash equivalents	4.1A	263,324	88,851	143,000
Trade and other receivables	4.1B	620,514	795,194	723,000
Total financial assets		883,838	884,045	866,000
Non-financial assets				
Prepayments		48,181	132,990	55,000
Total non-financial assets		48,181	132,990	55,000
Total assets administered on behalf of Government		932,019	1,017,035	921,000
Liabilities				
Payables				
Suppliers	4.2A	102,763	106,214	148,000
Grants	4.2B	10,103,283	9,887,309	8,546,000
Total payables		10,206,045	9,993,523	8,694,000
Total liabilities administered on behalf of Government		10,206,045	9,993,523	8,694,000
Net liabilities		(9,274,026)	(8,976,488)	(7,773,000)

The above statement should be read in conjunction with the accompanying notes.

Administered budget commentary

As at 30 June 2024

Schedule of comprehensive income

Suppliers and grants

Suppliers and grants were in total very close to the budgeted amount reflecting a close to full spend of available appropriation.

Supplier payments appears less than budgeted (and grant payments greater than budgeted) because measure funding for the national waitlisting and matching system (OrganMatch) has been designated as being for supplier payments whereas actual expenditure was facilitated through grant funding.

Schedule of assets and liabilities

Cash and cash equivalents

Cash is more than budgeted reflecting the inherent difficulty in predicting cash balances into the future. Total financial assets are close to budget and in line with the general strategy of keeping only minimal balances on hand.

Supplier and grants payables

The variance in supplier and grant payables compared to budget is a reflection of timing of payments made to key suppliers and grant recipients at 30 June 2024.

Administered reconciliation schedule

For the period ended 30 June 2024

Notes	2024 \$	2023 \$
Opening assets less liabilities as at 1 July	(8,976,488)	(7,733,175)
Net cost of services		
Income	-	-
Expenses		
Payments to entities other than corporate Commonwealth entities	(51,058,390)	(49,120,959)
Transfers (to)/from the Australian Government		
Appropriation transfers from Official Public Account		
Net GST appropriations	(178,351)	22,327
Annual appropriations		
Payments to entities other than corporate Commonwealth entities	50,939,203	47,855,319
Closing assets less liabilities as at 30 June	<u>(9,274,026)</u>	<u>(8,976,488)</u>

The above statement should be read in conjunction with the accompanying notes.

Accounting policy

Administered cash transfers to and from the Official Public Account

Revenue collected by the OTA for use by the Government rather than the OTA is administered revenue. Collections are transferred to the Official Public Account (OPA) maintained by the Department of Finance. Conversely, cash is drawn from the OPA to make payments under Parliamentary appropriation on behalf of Government. These transfers to and from the OPA are adjustments to the administered cash held by the OTA on behalf of the Government and reported as such in the schedule of administered cash flows and in the administered reconciliation schedule.

Administered cash flow statement

For the period ended 30 June 2024

	Notes	2024 \$	2023 \$
OPERATING ACTIVITIES			
Cash received			
Net GST received		1,112,099	925,351
Total cash received		1,112,099	925,351
Cash used			
Suppliers		(3,110,119)	(3,006,058)
Grants		(48,588,360)	(45,851,168)
Total cash used		(51,698,478)	(48,857,227)
Net cash used by operating activities		(50,586,379)	(47,931,876)
Cash from Official Public Account			
Appropriations		50,939,203	47,855,320
GST appropriation		933,748	959,667
Total cash from Official Public Account		51,872,951	48,814,987
Cash to Official Public Account			
Return of GST appropriations to the Official Public Account		(1,112,099)	(937,340)
Total cash to Official Public Account		(1,112,099)	(937,340)
Net increase/(decrease) in cash held		174,473	(54,229)
Cash and cash equivalents at the beginning of the reporting period		88,851	143,080
Cash and cash equivalents at the end of the reporting period	4.1A	263,324	88,851

The above statement should be read in conjunction with the accompanying notes.

Notes to and forming part of the financial statements

For the period ended 30 June 2024

Overview

The Organ and Tissue Donation and Transplantation Authority, also known as the Organ and Tissue Authority (OTA) is an Australian Government non-corporate entity that administers funds associated with the delivery of the Australian Government's national DonateLife program to optimise potential organ and tissue donation for transplantation. Funding is provided to jurisdictions to deliver organ and tissue donation services in selected public and private hospitals. State and territory governments use these funds to employ donation specialist staff - the Donate Life Network - to deliver organ and tissue donation services. The OTA's registered office is Level 12, 12 Moore Street, Canberra in the Australian Capital Territory.

The basis of preparation

The financial statements are required by section 42 of the *Public Governance, Performance and Accountability Act 2013*. The financial statements have been prepared in accordance with:

- Public Governance, Performance and Accountability (Financial Reporting) Rule 2015; and
- Australian Accounting Standards and Interpretations – including simplified disclosures for Tier 2 Entities under AASB 1060 issued by the Australian Accounting Standards Board (AASB) that apply for the reporting period.

The financial statements have been prepared on an accrual basis and in accordance with the historical cost convention, except for certain assets at fair value. Except where stated, no allowance is made for the effect of changing prices on the results or the financial position. The financial statements are presented in Australian dollars.

The continued existence of the OTA is dependent on government policy and on continuing funding by Parliament for the OTA's activities and programs.

Taxation

The OTA is exempt from all forms of taxation except Fringe Benefits Tax (FBT) and the Goods and Services Tax (GST).

Reporting of administered activities

Administered revenues, expenses, assets, liabilities and cash flows are disclosed in the administered schedules and related notes. Except where otherwise stated, administered items are accounted for on the same basis and using the same policies as for departmental items, including the application of Australian Accounting Standards.

Events after the reporting period

Departmental

There was no subsequent event that had the potential to significantly affect the ongoing structure and financial activities of the OTA.

Administered

There was no subsequent event that had the potential to significantly affect the ongoing structure and financial activities of the OTA.

Notes to and forming part of the financial statements

For the period ended 30 June 2024

1. Financial performance

This section analyses OTA's financial performance for the year ended 30 June 2024.

1.1 Expenses

	2024 \$	2023 \$
1.1A: Employee benefits		
Wages and salaries	3,943,259	3,641,472
Superannuation:		
Defined benefit plans	155,815	186,950
Defined contribution plans	565,182	475,537
Leave and other entitlements	462,518	520,510
Other employee expenses	12,010	4,345
Total employee benefits	5,138,784	4,828,814

Accounting policy

Accounting policies for employee related expenses is contained in the People and Relationships section.

1.1B: Suppliers

Goods and services supplied or rendered

Contractors and consultants	72,641	94,432
Equipment and software	126,998	148,867
Facilities	176,279	76,444
Staff recruitment and training	30,444	44,288
Travel	158,900	99,466
Office supplies and stationery	6,459	3,340
Printing and publishing	13,622	10,963
Resources received free of charge	90,000	100,000
Shared services MoU	236,438	225,809
Other	124,962	95,145
Total goods and services supplied or rendered	1,036,743	898,754
Goods supplied	6,459	6,652
Services rendered	1,030,284	892,102
Total goods and services supplied or rendered	1,036,743	898,754

Other suppliers

Low value leases	352	1,681
Workers compensation expenses	33,722	43,973
Total other suppliers	34,074	45,654
Total suppliers	1,070,817	944,408

The OTA has one lease commitment of low-value assets (less than \$10,000 per asset) that is a month to month lease arrangement.

Accounting policy

Short-term leases and leases of low-value assets

The OTA has elected not to recognise right-of-use assets and lease liabilities for short-term leases of assets that have a lease term of 12 months or less and leases of low-value assets (less than \$10,000). The OTA recognises the lease payments associated with these leases as an expense on a straight-line basis over the lease term.

1.1C: Finance costs

Interest on lease liabilities	51,250	2,842
Total finance costs	51,250	2,842

The above lease disclosures should be read in conjunction with the accompanying notes 3.2 and 3.4.

Notes to and forming part of the financial statements

For the period ended 30 June 2024

1.2 Own-source revenue and gains

	2024 \$	2023 \$
Own-source revenue		
1.2A: Other revenue		
Resources received free of charge		
Remuneration of auditors	90,000	100,000
Total other revenue	90,000	100,000

Resources received free of charge include services provided by the Australian National Audit Office for the end of financial year statement audit.

Accounting policy

Resources received free of charge

Resources received free of charge are recognised as revenue when, and only when, a fair value can be reliably determined and the services would have been purchased if they had not been donated. Use of those resources is recognised as an expense. Resources received free of charge are recorded as revenue or gains depending on their nature.

Revenue

Revenue from the sale of goods and rendering of services is recognised when control has transferred to the buyer.

Revenue from Government

1.2B: Revenue from Government

Departmental appropriations	6,765,000	6,089,000
Total revenue from government	6,765,000	6,089,000

Accounting policy

Revenue from Government

Amounts appropriated for departmental appropriations for the year (adjusted for any formal additions and reductions) are recognised as Revenue from Government when the OTA gains control of the appropriation, except for certain amounts that relate to activities that are reciprocal in nature, in which case revenue is recognised only when it has been earned. Appropriations receivable are recognised at their nominal amounts.

Notes to and forming part of the financial statements

For the period ended 30 June 2024

2. Income and expenses administered on behalf of Government

This section analyses the activities that the OTA does not control but administers on behalf of the Government. Unless otherwise noted, the accounting policies adopted are consistent with those applied for departmental reporting.

2.1 Administered – expenses

	2024 \$	2023 \$
2.1A: Suppliers		
Goods and services supplied or rendered		
Board fees	38,010	40,130
Contractors and consultants	84,166	348,534
Public relations and research	259,310	78,766
Travel	182,644	168,153
Software licence and maintenance	1,624,809	1,338,337
Other	494,587	637,199
Total goods and services supplied or rendered	2,683,526	2,611,119
Goods supplied	128,182	21,323
Services rendered	2,555,344	2,589,796
Total goods and services supplied or rendered	2,683,526	2,611,119
Total suppliers	2,683,526	2,611,119
2.1B: Grants		
Public Sector		
State and Territory Governments	40,330,248	37,911,461
Private Sector		
Not-for-profit organisations	8,044,616	8,598,379
Total grants	48,374,864	46,509,840

Accounting policy

The OTA administers a number of grant schemes on behalf of the Government. Grant liabilities are recognised to the extent that (i) services required to be performed by the grantee have been performed or (ii) the grant eligibility criteria have been satisfied, but payments due have not been made. When the Government enters into an agreement to make these grants and services, but services have not been performed or criteria satisfied, this is considered a commitment.

Notes to and forming part of the financial statements

For the period ended 30 June 2024

3. Financial position

This section analyses OTA's assets used to conduct its operations and the operating liabilities incurred as a result. Employee related information is disclosed in the People and Relationships Section.

3.1 Financial assets

	2024 \$	2023 \$
3.1A: Cash and cash equivalents		
Cash on bank or on deposit	106,147	120,825
Total cash and cash equivalents	106,147	120,825

Accounting policy

Cash is recognised at its nominal amount. Cash and cash equivalents includes:

- a) cash on hand; and
- b) demand deposits in bank accounts with an original maturity of 3 months or less that are readily convertible to known amounts of cash and subject to insignificant risk of changes in value.

3.1B: Trade and other receivables

Goods and services receivables

Other	97,927	2,304
Total goods and services receivables (net)	97,927	2,304

Appropriation receivables

Appropriation receivable	2,288,658	3,876,179
Total appropriation receivables	2,288,658	3,876,179

Other receivables

GST receivable from the Australian Taxation Office	15,061	9,959
Total other receivables	15,061	9,959
Total trade and other receivables (gross)	2,401,646	3,888,442

Total trade and other receivables (net)	2,401,646	3,888,442
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No indicators of impairment were found for trade and other receivables in 2024 (2023: nil).

Credit terms for goods and services were within 20 days (2023: 30 days).

Accounting policy

Financial assets

Trade receivables and other receivables that are held for the purpose of collecting the contractual cash flows where the cash flows are solely payments of principal and interest, that are not provided at below-market interest rates, are subsequently measured at amortised cost using the effective interest method adjusted for any loss allowance.

Notes to and forming part of the financial statements

For the period ended 30 June 2024

3.2 Non-financial assets

3.2A: Reconciliation of the opening and closing balances of property, plant and equipment, and intangibles

	Buildings \$	Property, plant and equipment \$	Computer software \$	Total \$
As at 1 July 2023				
Gross book value	1,516,750	207,379	556,562	2,280,691
Accumulated depreciation, amortisation and impairment	(1,346,057)	(72,962)	(409,819)	(1,828,838)
Total as at 1 July 2023	170,693	134,417	146,743	451,853
Additions				
Purchase	2,034,100	549,052	4,700	2,587,852
Reused assets	-	2,137	-	2,137
Right-of-use assets	2,045,671	-	-	2,045,671
Depreciation and amortisation	(201,715)	(90,107)	(55,588)	(347,410)
Disposals	-	(3,134)	-	(3,134)
Depreciation on right-of-use assets	(295,208)	-	-	(295,208)
Total as at 30 June 2024	3,753,541	592,365	95,855	4,441,761
Total as at 30 June 2024 represented by:				
Gross book value ¹	4,094,771	751,657	561,262	5,407,690
Accumulated depreciation, amortisation and impairment	(341,230)	(159,292)	(465,407)	(965,929)
Total as at 30 June 2024 represented by	3,753,541	592,365	95,855	4,441,761
Carrying amount of right-of-use assets	1,875,199	-	-	1,875,199

1. Gross book value includes assets under construction amount for computer software of nil (2023: \$52,760).

Revaluations of non-financial assets and intangible assets

OTA entered into a new lease agreement at a new office location in October 2023, which involved significant fit-out activities and the acquisition of new fixed assets. More than 92% of the OTA's fixed assets were newly acquired as part of the office relocation. As a result it was determined that a revaluation was not necessary for 2023-24 with the next revaluation scheduled for 2026-27.

Contractual commitments for the acquisition of property, plant, equipment and intangible assets

There are no contractual commitments for the acquisition of property, plant and equipment. There are no contractual commitments for the acquisition of intangible assets as at 30 June 2024 (2023: Nil).

Notes to and forming part of the financial statements

For the period ended 30 June 2024

Accounting policy

Assets are recorded at cost on acquisition except as stated below. The cost of acquisition includes the fair value of assets transferred in exchange and liabilities undertaken. Financial assets are initially measured at their fair value plus transaction costs where appropriate.

Assets acquired at no cost, or for nominal consideration, are initially recognised as assets and income at their fair value at the date of acquisition, unless acquired as a consequence of restructuring of administrative arrangements. In the latter case, assets are initially recognised as contributions by owners at the amounts at which they were recognised in the transferor's accounts immediately prior to the restructuring.

Asset recognition threshold

Purchases of property, plant and equipment are recognised initially at cost in the Statement of financial position, except for purchases costing less than \$1,000 which are expensed in the year of acquisition (other than where they form part of a group of similar items which are significant in total).

The initial cost of an asset includes an estimate of the cost of dismantling and removing the item and restoring the site on which it is located.

Lease Right of Use (ROU) Assets

Leased ROU assets are capitalised at the commencement date of the lease and comprise of the initial lease liability amount, initial direct costs incurred when entering into the lease less any lease incentives received. These assets are accounted for by Commonwealth lessees as separate asset classes to corresponding assets owned outright, but included in the same column as where the corresponding underlying assets would be presented if they were owned.

Revaluations

Following initial recognition at cost, property, plant and equipment (excluding ROU assets) are carried at fair value (or an amount not materially different from fair value) less subsequent accumulated depreciation and accumulated impairment losses. Valuations were conducted with sufficient frequency to ensure that the carrying amounts of assets do not differ materially from the assets' fair values as at the reporting date. The regularity of independent valuations depends upon the volatility of movements in market values for the relevant assets.

Revaluation adjustments are made on a class basis. Any revaluation increment was credited to equity under the heading of asset revaluation reserve except to the extent that it reversed a previous revaluation decrement of the same asset class that was previously recognised in the surplus/deficit. Revaluation decrements for a class of assets were recognised directly in the surplus/deficit except to the extent that they reverse a previous revaluation increment for that class. Any accumulated depreciation as at the revaluation date is eliminated against the gross carrying amount of the asset and the asset restated to the revalued amount.

Depreciation

Depreciable property plant and equipment assets are written-off to their estimated residual values over their estimated useful lives to the OTA using, in all cases, the straight-line method of depreciation. Depreciation rates (useful lives), residual values and methods are reviewed at each reporting date and necessary adjustments are recognised in the current, or current and future reporting periods, as appropriate. Depreciation rates applying to each class of depreciable asset are based on the following useful lives:

	2024	2023
Buildings	Lease term	Lease term
Plant and equipment	5 to 10 years	3 to 5 years

Notes to and forming part of the financial statements

For the period ended 30 June 2024

Impairment

All assets were assessed for impairment at 30 June 2024. Where indications of impairment exist, the asset's recoverable amount is estimated and an impairment adjustment made if the asset's recoverable amount is less than its carrying amount.

The recoverable amount of an asset is the higher of its fair value less costs to sell and its value in use. Value in use is the present value of the future cash flows expected to be derived from the asset. Where the future economic benefit of an asset is not primarily dependent on the asset's ability to generate future cash flows, and the asset would be replaced if the OTA were deprived of the asset, its value in use is taken to be its depreciated replacement cost.

Derecognition

An item of property, plant and equipment is derecognised upon disposal or when no further future economic benefits are expected from its use or disposal.

Intangibles

The OTA's intangibles comprise purchased software. These assets are carried at cost less accumulated amortisation and accumulated impairment losses. Software is amortised on a straight-line basis over its anticipated useful life. The useful life of the OTA's software is 5 years (2023: 1 to 5 years). All software assets were assessed for indications of impairment as at 30 June 2024.

Notes to and forming part of the financial statements

For the period ended 30 June 2024

3.3 Payables

	2024 \$	2023 \$
3.3A: Suppliers		
Trade creditors and accruals	144,320	51,653
Total suppliers	144,320	51,653

Settlement was usually made within 14 days (2023: 20 days).

3.3B: Other payables

Salaries and wages	153,078	141,367
Superannuation	19,127	16,929
Other	115,522	106,551
Total other payables	287,727	264,847

Accounting policy

Payables are recognised at the present value of expected future cashflow. Trade creditors and accruals are recognised to the extent that the goods and services have been received (irrespective of having been invoiced).

3.4 Interest bearing liabilities

3.4A: Leases

Lease liabilities	2,023,018	110,289
Total leases	2,023,018	110,289

Total cash outflow for leases for the year ended 30 June 2024 was \$319,392 (2023: \$326,449)

Maturity analysis – contractual undiscounted cash flows

Within 1 year	323,236	110,515
Between 1 to 5 years	1,450,425	-
More than 5 years	541,667	-
Total leases	2,315,328	110,515

The OTA in its capacity as lessee entered into a seven-year non-cancellable lease at 12 Moore Street, Canberra ACT from 1 December 2023. Lease payments are subject to annual increases in accordance with the lease agreement.

The above lease disclosures should be read in conjunction with the accompanying notes 1.1B, 1.1C and 3.2.

Accounting policy

For all new contracts entered into, the OTA considers whether the contract is, or contains a lease. A lease is defined as 'a contract, or part of a contract, that conveys the right to use an asset (the underlying asset) for a period of time in exchange for consideration'.

Once it has been determined that a contract is, or contains a lease, the lease liability is initially measured at the present value of the lease payments unpaid at the commencement date, discounted using the interest rate implicit in the lease, if that rate is readily determinable, or the department's incremental borrowing rate.

Subsequent to initial measurement, the liability will be reduced for payments made and increased for interest. It is remeasured to reflect any reassessment or modification to the lease. When the lease liability is remeasured, the corresponding adjustment is reflected in the right-of-use asset or profit and loss depending on the nature of the reassessment or modification.

Notes to and forming part of the financial statements

For the period ended 30 June 2024

4. Assets and liabilities administered on behalf of the Government

This section analyses assets used to conduct operations and the operating liabilities incurred as a result the OTA does not control but administers on behalf of the Government. Unless otherwise noted, the accounting policies adopted are consistent with those applied for departmental reporting.

4.1 Administered – financial assets

	2024 \$	2023 \$
4.1A: Cash and cash equivalents		
Cash on hand or on deposit	263,324	88,851
Total cash and cash equivalents	263,324	88,851

Accounting policy

Cash is recognised at its nominal amount. Cash and cash equivalents includes:

- a) cash on hand; and
- b) demand deposits in bank accounts with an original maturity of 3 months or less that are readily convertible to known amounts of cash and subject to insignificant risk of changes in value.

4.1B: Trade and other receivables

Other receivables

GST receivable from the Australian Taxation Office	620,514	795,194
Total other receivables	620,514	795,194
Total trade and other receivables (gross)	620,514	795,194
Total trade and other receivables (net)	620,514	795,194

No indicators of impairment were found for trade and other receivables in 2024 (2023: nil).

Credit terms for goods and services were within 20 days (2023: 30 days).

Notes to and forming part of the financial statements

For the period ended 30 June 2024

4.2 Administered – payables

	2024 \$	2023 \$
4.2A: Suppliers		
Trade creditors and accruals	102,763	106,214
Total suppliers	102,763	106,214

Settlement was usually made within 14 days (2023: 20 days)

4.2B: Grants		
State and Territory Governments	9,625,314	9,555,102
Non-profit organisations	477,969	332,207
Total grants	10,103,283	9,887,309

Settlement was made according to the terms and conditions of each grant within 14 days (2023: 20 days) of performance or eligibility.

Notes to and forming part of the financial statements

For the period ended 30 June 2024

5. Funding

This section identifies OTA's funding structure.

5.1 Appropriations

	2024 \$	2023 \$
5.1A: Annual appropriations ('Recoverable GST exclusive')		
Departmental		
Ordinary annual services		
Annual appropriation	6,765,000	6,194,000
Receipts retained under PGPA Act – Section 74	121,196	149,364
Total appropriation	6,886,196	6,343,364
Appropriation applied (current and prior years)	8,037,154	5,898,377
Variance¹	(1,150,958)	444,987
Capital Budget		
Annual departmental capital budget ²	272,000	264,000
Payments for non-financial assets ³	723,242	73,758
Variance⁴	(451,242)	190,242
Administered		
Ordinary annual services		
Annual appropriation ⁵	51,566,000	49,131,000
Total appropriation	51,566,000	49,131,000
Appropriation applied (current and prior years)	50,764,730	47,855,319
Variance⁶	801,270	1,275,681

- The variance of \$1,150,958 is attributable to drawing down prior year appropriation receivable in order to finance the new office fit-out combined with a small net cash operating surplus and the timing of accruals at the start and end of the financial year.
- Departmental capital budgets are appropriated through Appropriation Acts (No. 1, 3, 5). They form part of ordinary annual services, and are not separately identified in the Appropriation Acts.
- Payments made for non-financial assets include asset purchases and capitalised expenditure.
- The variance of \$451,242 is attributable to the capitalised office fit-out being funded from the drawing down of prior year appropriation receivable.
- Administered annual appropriation includes an amount of \$500,000 which has been quarantined by the Department of Finance but remains a legal entitlement for the OTA as at 30 June 2024.
- The variance of \$801,270 for administered ordinary annual services includes \$500,000 under quarantine by the Department of Finance. The remaining balance reflects the timing of supplier and grant payments.

Notes to and forming part of the financial statements

For the period ended 30 June 2024

	2024 \$	2023 \$
5.1B: Unspent annual appropriations ('Recoverable GST exclusive')		
Departmental		
Appropriation Act (No.1) 2021-22 – Departmental Capital Budget		187,242
Supply Act (No.1) 2022-23	-	12,059
Supply Act (No.3) 2022-23 ¹	105,000	3,517,878
Supply Act (No.1) 2022-23 – Departmental Capital Budget	-	110,000
Supply Act (No.3) 2022-23 – Departmental Capital Budget	-	154,000
Appropriation Act (No.1) 2023-24	1,788,657	-
Appropriation Act (No.3) 2023-24	500,000	-
Cash at bank	106,147	120,825
Total Departmental	2,499,804	4,102,005
Administered		
Appropriation Act (No.1) 2020-21	-	1,846
Appropriation Act (No.1) 2021-22	40,946	40,946
Supply Act (No.3) 2022-23	10,041	9,851,508
Appropriation Act (No.1) 2023-24	10,468,264	-
Cash at bank	263,324	88,851
Total administered	10,782,575	9,983,151

1. \$105,000 of 2022-23 departmental annual appropriation was quarantined under section 51 of the PGPA Act due to government decisions. This remains a legal entitlement for the OTA as at 30 June 2024.

5.2 Net cash appropriation arrangements

Total comprehensive income/(loss) as per the Statement of Comprehensive Income	(51,603)	(111,142)
<i>Plus: depreciation/amortisation of assets funded through appropriations (departmental capital budget funding and/or equity injections)¹</i>	347,410	221,678
<i>Plus: depreciation of right-of-use assets²</i>	295,208	299,366
<i>Less: lease principal repayments²</i>	268,380	(323,606)
Net cash operating surplus	322,635	86,296

- From 2010-11, the Government introduced net cash appropriation arrangements where revenue appropriations for depreciation/amortisation expenses of non-corporate Commonwealth entities and selected corporate Commonwealth entities were replaced with a separate capital budget provided through equity appropriations. Capital budgets are to be appropriated in the period when cash payment for capital expenditure is required.
- The inclusion of depreciation/amortisation expenses related to ROU leased assets and the lease liability principal repayment amount reflects the impact of AASB 16 Leases, which does not directly reflect a change in appropriation arrangements.

Notes to and forming part of the financial statements

For the period ended 30 June 2024

6. People and relationships

This section provides a range of employment and post employment benefits provided to our people and our relationships with other key people.

6.1 Employee provisions

	2024 \$	2023 \$
6.1A: Employee provisions		
Leave	1,517,274	1,235,499
Total employee provisions	1,517,274	1,235,499

Accounting policy

Liabilities for 'short-term employee benefits' and termination benefits expected within twelve months of the end of reporting period are measured at their nominal amounts.

Other long-term employee benefit liabilities are measured as the net total of the present value of the defined benefit obligation at the end of the reporting period minus the fair value at the end of the reporting period of plan assets (if any) out of which the obligations are to be settled directly.

Leave

The liability for employee benefits includes provision for annual leave and long service leave.

The leave liabilities are calculated on the basis of employees' remuneration at the estimated salary rates that will be applied at the time the leave is taken, including OTA's employer superannuation contribution rates to the extent that the leave is likely to be taken during service rather than paid out on termination.

The liability for long service leave has been determined with reference to the Australian Government shorthand method. The estimate of the present value of the liability takes into account attrition rates and pay increases through promotion and inflation.

Separation and redundancy

Provision is made for separation and redundancy benefit payments. OTA recognises a provision for termination when it has developed a detailed formal plan for the terminations and has informed those employees affected that it will carry out the terminations.

Superannuation

The OTA's staff are members of the Commonwealth Superannuation Scheme (CSS), the Public Sector Superannuation Scheme (PSS), the PSS accumulation Plan (PSSap) or other superannuation funds held outside the Australian Government. The CSS and PSS are defined benefit schemes for the Australian Government. The PSSap and other compliant superannuation funds are defined contribution schemes.

The liability for defined benefits is recognised in the financial statements of the Australian Government and is settled by the Australian Government in due course. This liability is reported in the Department of Finance's administered schedules and notes.

The OTA makes employer contributions to the employees' defined benefit superannuation scheme at rates determined by an actuary to be sufficient to meet the current cost to the Government. The OTA accounts for the contributions as if they were contributions to defined contribution plans. The liability for superannuation recognised as at 30 June represents outstanding contributions for the number of days between the last pay period in the financial year and 30 June.

Notes to and forming part of the financial statements

For the period ended 30 June 2024

6.2 Key management personnel remuneration

Key management personnel are those persons having authority and responsibility for planning, directing and controlling the activities of OTA, directly or indirectly, including any director (whether executive or otherwise) of that entity. The OTA has determined the key management personnel to be the Chief Executive Officer and the Chief Operating Officer. Key management personnel remuneration is reported in the table below:

	2024 \$	2023 \$
Short-term employee benefits	585,264	553,616
Post-employment benefits	90,131	87,072
Other long-term employee benefits	20,520	11,752
Total key management personnel remuneration expenses¹	695,915	652,440

The total number of key management personnel that are included in the above table are 2 (2023: 2).

1. The above key management personnel remuneration excludes the remuneration and other benefits of the Portfolio and Cabinet Minister. The Portfolio Minister's remuneration and other benefits are set by the Remuneration Tribunal and are not paid by the entity.

6.3 Related party disclosures

Related party relationships

The parent entity to OTA is the Department of Health and Aged Care. The OTA is an Australian Government controlled entity. Related parties to the OTA are key management personnel, the Portfolio Minister and Executive, and other Australian Government entities.

Transactions with related parties

Given the breadth of Government activities, related parties may transact with the government sector in the same capacity as ordinary citizens. These transactions have not been separately disclosed in this note.

Giving consideration to relationships with related entities, and transactions entered into during the reporting period by the OTA, it has been determined that there are no related party transactions to be separately disclosed.

Notes to and forming part of the financial statements

For the period ended 30 June 2024

7. Managing uncertainty

This section analyses how OTA manages financial risks within its operating environment.

7.1 Contingent assets and liabilities

7.1A: Contingent asset and liabilities

Quantifiable contingencies

The OTA had no quantifiable contingencies as at the reporting date.

Unquantifiable contingencies

The OTA provided an indemnity to the lessors of the OTA's leased premises in relation to certain actions, claims, demands, losses, damages, costs and expenses for which the lessor shall, may or does become liable. These can arise from the negligent use by the lessee of water, gas, electricity, lighting, overflow or leakage of water and other services and facilities. The indemnity releases the lessor from all claims and demands of any kind and from all liability which may arise in respect of any death of, or injury to, any person, and any accident or damage to property of whatever kind except to the extent that the lessor's negligence contributed to the death, injury, loss or damage.

Accounting policy

Contingent liabilities and contingent assets are not recognised in the statement of financial position but are reported in the notes. They may arise from uncertainty as to the existence of a liability or asset or represent an asset or liability in respect of which the amount cannot be reliably measured. Contingent assets are disclosed when settlement is probable but not virtually certain and contingent liabilities are disclosed when settlement is greater than remote.

7.1B: Administered contingent asset and liabilities

Quantifiable contingencies

The OTA had no quantifiable contingencies as at the reporting date.

Unquantifiable contingencies

The OTA provided an indemnity in relation to the provision of ICT services supporting the Electronic Donor Record system in relation to all actions, claims, demands, losses, damages, costs and expenses for which the contractor shall, may or does become liable. The indemnity releases the contractor from any liability arising from the contract in excess of the contractor's required insurance levels.

Accounting policy

Indemnities and/or guarantees

The maximum amounts payable under the indemnities given is disclosed above, where relevant. At the time of completion of the financial statements, there was no reason to believe that the indemnities and or guarantees would be called upon, and no recognition of any liability was therefore required.

Notes to and forming part of the financial statements

For the period ended 30 June 2024

7.2 Financial instruments

	2024 \$	2023 \$
7.2A: Categories of financial instruments		
Financial Assets		
Financial assets at amortised cost		
Cash and cash equivalents	106,147	120,825
Trade and other receivables	97,927	2,304
Total financial assets at amortised cost	204,074	123,129
Total financial assets	204,074	123,129
Financial Liabilities		
Financial liabilities measured at amortised cost		
Trade creditors	144,320	51,653
Total financial liabilities measured at amortised cost	144,320	51,653
Total financial liabilities	144,320	51,653

Accounting policy

Financial assets

Financial assets are classified as financial assets measured at amortised cost.

The classification depends on both the OTA's business model for managing the financial assets and contractual cash flow characteristics at the time of initial recognition. Financial assets are recognised when the OTA becomes a party to the contract and, as a consequence, has a legal right to receive or a legal obligation to pay cash and derecognised when the contractual rights to the cash flows from the financial asset expire or are transferred upon trade date.

Financial assets at amortised cost

Financial assets included in this category need to meet two criteria:

1. the financial asset is held in order to collect the contractual cash flows; and
2. the cash flows are solely payments of principal and interest on the principal outstanding amount.

Amortised cost is determined using the effective interest method.

Effective interest method

Income is recognised on an effective interest rate basis for financial assets that are recognised at amortised cost.

Impairment of financial assets

Financial assets are assessed for impairment at the end of each reporting period based on Expected Credit Losses, using the general approach which measures the loss allowance based on an amount equal to lifetime expected credit losses where risk has significantly increased, or an amount equal to 12-month expected credit losses if risk has not increased.

The simplified approach for trade, contract and lease receivables is used. The approach always measures the loss allowance as the amount equal to the lifetime expected credit losses.

A write-off constitutes a derecognition event where the write-off directly reduces the gross carrying amount of the financial asset.

Financial liabilities

Financial liabilities are classified as other financial liabilities. Financial liabilities are recognised and derecognised upon 'trade date'.

Financial liabilities at amortised cost

Other financial liabilities include supplier and other payables, which are recognised at amortised cost. Liabilities are recognised to the extent that the goods or services have been received (and irrespective of having been invoiced).

Notes to and forming part of the financial statements

For the period ended 30 June 2024

7.2B: Net gains or losses on financial assets

There is no interest income and expense from financial assets not at fair value through profit or loss in the years ending 30 June 2024 and 30 June 2023.

7.2C: Net income and expense from financial liabilities

There is no interest income and expense from financial liabilities not at fair value through profit or loss in the years ending 30 June 2024 and 30 June 2023.

Notes to and forming part of the financial statements

For the period ended 30 June 2024

7.3 Administered financial instruments

	2024 \$	2023 \$
7.3A: Categories of financial instruments		
Financial assets		
Financial assets at amortised cost		
Loans and receivables		
Cash and cash equivalents	263,324	88,851
Total financial assets at amortised cost	263,324	88,851
Total financial assets	263,324	88,851
Financial liabilities		
Financial liabilities measured at amortised cost		
Trade creditors	102,763	106,214
Grants payable	10,103,283	9,887,309
Total financial liabilities measured at amortised cost	102,763	9,993,523
Total financial liabilities	10,206,045	9,993,523

7.3B: Net gains or losses on financial assets

There is no interest income or expense from financial assets not at fair value through profit or loss in the years ended 30 June 2024 and 30 June 2023.

7.3C: Net gains or losses on financial liabilities

There is no interest income or expense from financial liabilities not at fair value through profit or loss in the years ended 30 June 2024 and 30 June 2023.

Notes to and forming part of the financial statements

For the period ended 30 June 2024

7.4 Fair value measurements

The following tables provide an analysis of assets and liabilities that are measured at fair value. The remaining assets and liabilities disclosed in the Statement of financial position do not apply the fair value hierarchy.

Accounting policy

The OTA engaged the services of an independent valuer Jones Lang LaSalle Public Sector Valuations to conduct the desktop revaluation of all non-financial assets at 30 June 2021 and has relied upon those outcomes to establish carrying amounts. An annual assessment is undertaken to determine whether the carrying amount of the assets is materially different from the fair value. Comprehensive valuations are carried out at least once every three years with the exception of the 2023–24 financial year. As at 30 June 24 approximately 92% of non-financial assets were newly acquired following an office relocation and fit-out and the fair value of these assets has been assessed as being equal to the cost of the assets less depreciation.

7.4: Fair value measurements

	Fair Value measurements at the end of the reporting period	
	2024 \$	2023 \$
Non-financial assets		
Buildings	1,878,342	45,957
Property, plant and equipment	592,365	134,417
Total non-financial assets	2,470,707	180,374

The remaining assets and liabilities reported by the OTA are not measured at fair value in the Statement of Financial Position.

Notes to and forming part of the financial statements

For the period ended 30 June 2024

8. Other information

8.1 Current/Non-current distinction for assets and liabilities

	2024 \$	2023 \$
8.1A: Departmental – current/non-current distinction for assets and liabilities		
Assets expected to be recovered in:		
No more than 12 months		
Cash and cash equivalents	106,147	120,825
Trade and other receivables	2,401,646	3,888,442
Other non-financial assets	63,898	32,497
Total no more than 12 months	2,571,691	4,041,764
More than 12 months		
Buildings	3,753,541	170,693
Property, plant and equipment	592,365	134,417
Computer software	95,855	146,743
Other non-financial assets	12,750	-
Total more than 12 months	4,454,511	451,853
Total assets	7,026,202	4,493,617
Liabilities expected to be settled in:		
No more than 12 months		
Suppliers	144,320	51,653
Other payables	287,727	264,847
Leases	243,598	110,289
Employee provisions	550,350	491,170
Total no more than 12 months	1,225,995	917,959
More than 12 months		
Leases	1,779,420	-
Employee provisions	966,924	744,329
Total more than 12 months	2,746,344	744,329
Total liabilities	3,972,339	1,662,288

Notes to and forming part of the financial statements

For the period ended 30 June 2024

	2024 \$	2023 \$
8.1B: Administered – current/non-current distinction for assets and liabilities		
Assets expected to be recovered in:		
No more than 12 months		
Cash and cash equivalents	263,324	88,851
Trade and other receivables	620,514	795,194
Other non-financial assets	48,181	132,990
Total no more than 12 months	932,019	1,017,035
Total assets	932,019	1,017,035
Liabilities expected to be settled in:		
No more than 12 months		
Suppliers	102,763	106,214
Grants	10,103,283	9,887,309
Total no more than 12 months	10,206,045	9,993,523
Total liabilities	10,206,045	9,993,523

Karen

At 21 years of age, Karen's son Adam became a donor.

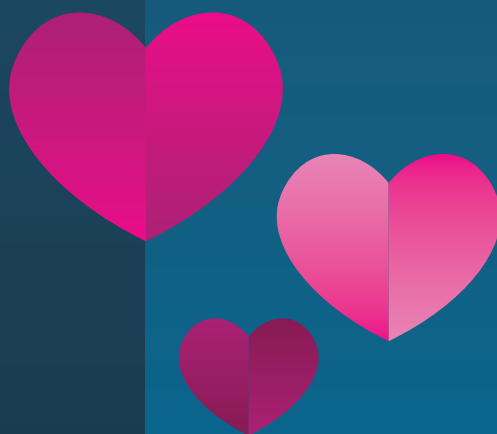
"Adam was always wanting to help people, so I knew he would be happy with that decision, that his family chose for someone else to have a better life and more opportunities."



Part 5

Appendices

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Appendix 1: Employee statistics

The tables in this appendix provide a breakdown of the OTA workforce by classification, gender, full-time and part-time status, ongoing and non-ongoing employment, salary ranges, location and employment arrangements.

For the 2023–24 reporting period all employee figures are reported as headcount as at 30 June 2024.

Table 11: Information about remuneration for key management personnel

	Lucinda Barry Chief Executive Officer	Belinda Small Chief Operating Officer
Short-term benefits (\$)		
Base salary	339,045	220,672
Bonuses	-	-
Other benefits and allowances	-	25,547
Post-employment benefits (\$)		
Superannuation contributions	52,654	37,477
Other long-term benefits (\$)		
Long service leave	9,941	10,579
Other long-term benefits	-	-
Termination benefits (\$)		
	-	-
Total remuneration (\$)		
	401,640	294,275

Table 12: All ongoing employees current report period (2023–24)

	Male			Female			Indeterminate			Total
	Full time	Part time	Total	Full time	Part time	Total	Full time	Part time	Total	
ACT	7	0	7	13	7	20	0	0	0	27
NSW	0	1	1	0	0	0	0	0	0	1
VIC	0	0	0	1	0	1	0	0	0	1
Total	7	1	8	14	7	21	0	0	0	29

Table 13: All non-ongoing employees current report period (2023–24)

	Male			Female			Indeterminate			Total
	Full time	Part time	Total	Full time	Part time	Total	Full time	Part time	Total	
ACT	0	0	0	1	0	1	0	0	0	1
VIC	0	0	0	1	0	1	0	0	0	1
Total	0	0	0	2	0	2	0	0	0	2

Table 14: All ongoing employees previous report period (2022–23)

	Male			Female			Indeterminate			Total
	Full time	Part time	Total	Full time	Part time	Total	Full time	Part time	Total	
ACT	7	1	8	12	6	18	0	0	0	26
NSW	0	1	1	0	0	0	0	0	0	1
VIC	0	0	0	1	0	1	0	0	0	1
Total	7	2	9	13	6	19	0	0	0	28

Table 15: All non-ongoing employees previous report period (2022–23)

	Male			Female			Indeterminate			Total
	Full time	Part time	Total	Full time	Part time	Total	Full time	Part time	Total	
ACT	1	0	1	1	0	1	0	0	0	2
Total	1	0	1	1	0	1	0	0	0	2

Table 16: Australian Public Service Act ongoing employees current report period (2023–24)

	Male			Female			Indeterminate			Total
	Full time	Part time	Total	Full time	Part time	Total	Full time	Part time	Total	
SES 1	0	0	0	1	0	1	0	0	0	1
EL 2	4	0	4	5	0	5	0	0	0	9
EL 1	3	1	4	6	6	12	0	0	0	16
APS 6	0	0	0	0	1	1	0	0	0	1
APS 5	0	0	0	2	0	2	0	0	0	2
Total	7	1	8	14	7	21	0	0	0	29

Table 17: Australian Public Service Act non-ongoing employees current report period (2023–24)

	Male			Female			Indeterminate			Total
	Full time	Part time	Total	Full time	Part time	Total	Full time	Part time	Total	
EL 2	0	0	0	1	0	1	0	0	0	1
APS 6	0	0	0	1	0	1	0	0	0	1
Total	0	0	0	2	0	2	0	0	0	2

Table 18: Australian Public Service Act ongoing employees previous report period (2022–23)

	Male			Female			Indeterminate			Total
	Full time	Part time	Total	Full time	Part time	Total	Full time	Part time	Total	
SES 1	0	0	0	1	0	1	0	0	0	1
EL 2	4	1	5	4	0	4	0	0	0	9
EL 1	4	1	5	5	6	11	0	0	0	16
APS 5	0	0	0	2	0	2	0	0	0	2
Total	8	2	10	12	6	18	0	0	0	28

Table 19: Australian Public Service Act non-ongoing employees previous report period (2022–23)

	Male			Female			Indeterminate			Total
	Full time	Part time	Total	Full time	Part time	Total	Full time	Part time	Total	
EL 1	1	0	1	1	0	1	0	0	0	2
Total	1	0	1	1	0	1	0	0	0	2

Table 20: Australian Public Service Act employees by full-time and part-time status current report period (2023–24)

	Ongoing			Non-ongoing			Total
	Full time	Part time	Total	Full time	Part time	Total	
SES 1	1	0	1	0	0	0	1
EL 2	9	0	9	1	0	1	10
EL 1	9	7	16	0	0	0	16
APS 6	1	0	1	1	0	1	2
APS 5	2	0	2	0	0	0	2
Total	22	7	29	2	0	2	31

Table 21: Australian Public Service Act employees by full-time and part-time status previous report period (2022–23)

	Ongoing			Non-ongoing			Total
	Full time	Part time	Total	Full time	Part time	Total	
SES 1	1	0	1	0	0	0	1
EL 2	8	1	9	0	0	0	9
EL 1	10	6	16	2	0	2	18
APS 5	2	0	2	0	0	0	2
Total	21	7	28	2	0	2	30

Table 22: Australian Public Service Act employment type by location current report period (2023–24)

	Ongoing	Non-ongoing	Total
ACT	27	1	28
NSW	1	0	1
VIC	1	1	2
Total	29	2	31

Table 23: Australian Public Service Act employment type by location previous report period (2022–23)

	Ongoing	Non-ongoing	Total
ACT	26	2	28
NSW	1	0	1
VIC	1	0	1
Total	28	2	30

Table 24: Australian Public Service Act employment arrangements current report period (2023–24)

	SES	Non-SES	Total
Enterprise Agreement (EA)	0	24	24
<i>Public Service Act 1999</i> 24(1) Determinations	1	0	1
EA and approved individual flexibility arrangements	0	6	6
Total	1	30	31

Table 25: Australian Public Service Act employment salary ranges by classification level (minimum/maximum) current report period (2023–24)

Classification	Minimum salary (\$)	Maximum salary (\$)
SES 1	183,685	226,772
EL 2	133,559	164,450
EL 1	111,942	132,779
APS 6	91,093	106,878
APS 5	82,574	90,640
APS 4	75,918	83,425
APS 3	67,009	77,245
APS 2	57,985	65,807
APS 1	50,158	57,948
Minimum/Maximum range	50,158	226,772

Appendix 2: Stakeholders

The following are key stakeholders we have worked with to deliver the DonateLife program.

Government

- ♥ ACT Health
- ♥ Australian Government Department of Health and Aged Care (including the Therapeutic Goods Administration)
- ♥ Australian Government National Health and Medical Research Council
- ♥ Australian Government Services Australia
- ♥ Australian Health Ethics Committee
- ♥ Department for Health and Wellbeing, South Australia
- ♥ Department of Health, Tasmania
- ♥ Department of Health, Victoria
- ♥ Department of Health, Western Australia
- ♥ NSW Ministry of Health
- ♥ NT Health
- ♥ Queensland Health

Professional associations

- ♥ Australasian College for Emergency Medicine
- ♥ Australasian Donation and Transplant Coordinators Association
- ♥ Australian and New Zealand Intensive Care Society
- ♥ Australian and New Zealand Society of Nephrology
- ♥ Australian College of Critical Care Nurses
- ♥ Australian Medical Association
- ♥ Biotherapeutics Association of Australasia
- ♥ College of Intensive Care Medicine of Australia and New Zealand
- ♥ Eye Bank Association of Australia and New Zealand
- ♥ Transplant Nurses Association
- ♥ Transplantation Society of Australia and New Zealand

Eye and tissue banks

New South Wales

- ♥ Australian Biotechnologies
- ♥ Australian Tissue Donation Network
- ♥ Hunter New England Bone Bank
- ♥ NSW Tissue Bank
- ♥ Rachel Forster Bone Bank
- ♥ Sydney Heart Valve Bank

Victoria

- ♥ Barwon Health Bone Bank
- ♥ Donor Tissue Bank of Victoria
- ♥ Lions Eye Donation Service Victoria

Western Australia

- ♥ Australian Allografts
- ♥ Lions Eye Bank WA
- ♥ PlusLife (Perth Bone and Tissue Bank)

Queensland

- ♥ Queensland Tissue Bank

South Australia

- ♥ South Australian Eye Bank
- ♥ South Australian Tissue Bank

Community engagement and education

Community Engagement Group member organisations

- ♥ Aussie Transplant Mates
- ♥ Donor Mate
- ♥ Ethan 'Jimmy' Foundation
- ♥ Eurobodalla Renal Support Group
- ♥ Gift of Life Foundation
- ♥ Gift of Life Incorporated
- ♥ James Ackerman Legacy
- ♥ Kidney Health Australia
- ♥ Liver Kids Australia Inc
- ♥ Saffron Day (Shrimad Rajchandra Mission Dharampur)
- ♥ The Nathan Gremmo Community Fund Inc
- ♥ The Sweetest Gift
- ♥ Transplant Australia

DonateLife Partnerships grant recipients

- ♥ A-Leagues
- ♥ Convenience Advertising
- ♥ News Corp
- ♥ Pixel 42
- ♥ Tonic Health Media
- ♥ Valimanda Group (Melbourne Storm and Sunshine Coast Lightning)
- ♥ Western Bulldogs

Community Awareness Grant 2023 recipients

- ♥ Gift of Life Incorporated
- ♥ LaTrobe University
- ♥ Make Mate
- ♥ Pixel 42
- ♥ University of Newcastle
- ♥ Wattle St Technical Marketing

Donation and transplantation outcome registries

- ♥ Australia and New Zealand Dialysis and Transplant Registry
- ♥ Australia and New Zealand Islet and Pancreas Transplant Registry
- ♥ Australia and New Zealand Liver and Intestinal Transplant Registry
- ♥ Australia and New Zealand Organ Donation Registry
- ♥ Australian Corneal Graft Registry

Other organisations

- ♥ Australia Post
- ♥ Australian Red Cross Lifeblood
- ♥ Qantas
- ♥ ShareLife
- ♥ StarTrack
- ♥ Transplant Connect

International organisations

- ♥ Canadian Blood Services
- ♥ Commonwealth Tribute to Life
- ♥ Donation and Transplantation Institute, Spain
- ♥ Gift of Life Donor Program, USA
- ♥ International Registry on Organ Donation and Transplantation
- ♥ International Society for Organ Donation Professionals
- ♥ MOHAN Foundation, India
- ♥ National Health Service Blood and Transplant, UK
- ♥ National Organ and Tissue Transplant Organisation, India
- ♥ National Transplant Organization, Spain
- ♥ Organ Donation New Zealand (Te Whatu Ora)
- ♥ Project Notify
- ♥ The Transplantation Society
- ♥ United Network for Organ Sharing, USA
- ♥ World Health Organization

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Appendix 4: Abbreviations

ACT	Australian Capital Territory
ANZKX	Australian and New Zealand Paired Kidney Exchange Program
ANZOD	Australian and New Zealand Organ Donation Registry
AODR	Australian Organ Donor Register
APS	Australian Public Service
CEO	Chief Executive Officer
COVID-19	SARS-CoV-2
CPIP	Clinical Practice Improvement Program
dpmp	donors per million population
ED	Emergency Department
EDR	Electronic Donor Record
GST	goods and services tax
ICU	intensive care unit
MP	Member of Parliament
ISODP	International Society for Organ Donation Professionals, previously known as the International Society for Organ Donation and Procurement.
NSW	New South Wales
NT	Northern Territory
OTA	Australian Organ and Tissue Donation and Transplantation Authority / Organ and Tissue Authority
QLD	Queensland
SA	South Australia
SES	Senior Executive Service
TAS	Tasmania
trpmp	transplant recipients per million population
TSANZ	Transplantation Society of Australia and New Zealand
USA	United States of America
VIC	Victoria
VSEAC	Vigilance and Surveillance Expert Advisory Committee
WA	Western Australia

Appendix 5: Glossary

Term	Definition
Australian Donation and Transplantation Activity Report	The OTA's annual report released in February that provides the donation and transplantation outcomes.
Australian Organ and Tissue Donation and Transplantation Authority (OTA)	A statutory body established under the <i>Australian Organ and Tissue Donation and Transplantation Authority Act 2008</i> to deliver the DonateLife program. Also known as the Organ and Tissue Authority (OTA), based in Canberra.
Australian and New Zealand Paired Kidney Exchange (ANZKX) Program	A paired kidney donation program between Australia and New Zealand. It aims to increase living donor kidney transplants for patients who are eligible for a kidney transplant and have a living donor who is willing but unable to donate because of an incompatible blood type or tissue type. Incompatible pairs are enrolled in the program and are matched against other incompatible pairs.
Australian Organ Donor Register (AODR)	The national register for Australians to record their organ and tissue donation decision.
Best Practice Guideline for Offering Organ and Tissue Donation in Australia	A guideline developed to outline the best practice approach when speaking with families about organ and tissue donation. The guideline includes the goals of family communication, staff roles and responsibilities, timing and elements of the family donation conversation, training requirements and review of practice.
Clinical Guidelines for Organ Transplantation from Deceased Donors	Guidelines developed by the Transplantation Society of Australia and New Zealand that inform eligibility and assessment criteria for organ transplantation, and for allocation of deceased donor organs to waitlisted patients.
Clinical Practice Improvement Program (CPIP)	A program providing clinical strategic focus comprised of 7 elements with associated reportable key performance indicators (KPIs). These KPIs are key to achieving best practice organ and tissue donation in the intensive care and emergency department. The CPIP Phase 4 is implemented in all DonateLife hospitals and are fundamental to the work of hospital donation specialists and the DonateLife agencies.
Consent rate	The number of consents as a percentage of all requests made to potential deceased donor families in the hospital.
DonateLife	The Australian Government brand for all initiatives undertaken as part of the DonateLife program to increase organ and tissue donation for transplantation.
DonateLife agencies	Agencies responsible for delivering the DonateLife program in their respective state or territory. They employ specialist staff in organ and tissue donation coordination, professional education, donor family support, communications, and data and audit roles.
DonateLife Audit	A nationally consistent retrospective audit to collect data about hospital deaths in the context of organ donation.

Term	Definition
DonateLife Network	The national network of state-based donation agencies and hospital-based staff focused on increasing organ and tissue donation.
DonateLife Thank You Day	A national day to acknowledge organ and tissue donors and families who agreed to donation.
DonateLife Week	A national awareness week promoting organ and tissue donation.
Electronic Donor Record	A national electronic web-based IT system for managing the donation process and offering organs for transplantation.
Ethical guidelines for organ transplantation from deceased donors	Guidelines that inform ethical practice and decision-making by everyone involved in assessing the eligibility of an individual for transplantation, assessing the suitability of donor organs for transplantation, and allocating organs from deceased donors.
Family Donation Conversation workshop	Workshop-based training that provides health professionals with the knowledge and skills to communicate with families about death and donation, and to support families to make an informed donation decision.
Hospital-based staff	Specialist hospital staff, including medical and nursing donation specialists, funded by the Australian Government to facilitate organ and tissue donation and to educate and support the hospital staff involved.
Machine perfusion	Is an artificial perfusion technique used for organ preservation to help facilitate organ transplantation.
Organ Donation Hospital Support Funding	Australian Government funding provided to state and territory health departments, local health districts or individual hospitals for the bed and other infrastructure costs associated with organ donation to ensure costs are not a barrier for organ donation to proceed.
OrganMatch	Australia's sophisticated IT system that facilitates recipient waitlisting, organ offering and allocation.
Portfolio Budget Statements	Statements prepared by portfolios to explain the Budget appropriations in terms of outcomes and programs.
Virtual crossmatch	The project to transition to a national virtual crossmatch assessment of organ compatibility, replacing physical crossmatch testing and streamlining the process of identifying suitable organ recipients.

Appendix 6: List of requirements

PGPA Rule Reference	Part of Report	Description	Requirement	Page
17AD(g)	Letter of transmittal			
17AI		A copy of the letter of transmittal signed and dated by accountable authority on date final text approved, with statement that the report has been prepared in accordance with section 46 of the Act and any enabling legislation that specifies additional requirements in relation to the annual report.	Mandatory	vi
17AD(h)	Aids to access			
17A(j)(a)		Table of contents (print only).	Mandatory	vii
17A(j)(b)		Alphabetical index (print only).	Mandatory	153
17A(j)(c)		Glossary of abbreviations and acronyms.	Mandatory	144–146
17A(j)(d)		List of requirements.	Mandatory	147–152
17A(j)(e)		Details of contact officer.	Mandatory	Inside back cover
17A(j)(f)		Entity's website address.	Mandatory	Inside back cover
17A(j)(g)		Electronic address of report.	Mandatory	Inside back cover
17AD(a)	Review by accountable authority			
17AD(a)		A review by the accountable authority of the entity.	Mandatory	2–3
17AD(b)	Overview of the entity			
17AE(1)(a)(i)		A description of the role and functions of the entity.	Mandatory	7
17AE(1)(a)(ii)		A description of the organisational structure of the entity.	Mandatory	7
17AE(1)(a)(iii)		A description of the outcomes and programmes administered by the entity.	Mandatory	17
17AE(1)(a)(iv)		A description of the purposes of the entity as included in corporate plan.	Mandatory	17
17AE(1)(aa)(i)		Name of the accountable authority or each member of the accountable authority	Mandatory	62
17AE(1)(aa)(ii)		Position title of the accountable authority or each member of the accountable authority	Mandatory	62
17AE(1)(aa)(iii)		Period as the accountable authority or member of the accountable authority within the reporting period	Mandatory	vi
17AE(1)(b)		An outline of the structure of the portfolio of the entity.	Portfolio departments – mandatory	N/A
17AE(2)		Where the outcomes and programs administered by the entity differ from any Portfolio Budget Statement, Portfolio Additional Estimates Statement or other portfolio estimates statement that was prepared for the entity for the period, include details of variation and reasons for change.	If applicable, Mandatory	N/A

PGPA Rule Reference	Part of Report	Description	Requirement	Page
17AD(c)	Report on the Performance of the entity			
Annual Performance Statements				
17AD(c)(i); 16F		Annual performance statement in accordance with paragraph 39(1)(b) of the Act and section 16F of the Rule.	Mandatory	15–59
17AD(c)(ii)	Report on Financial Performance			
17AF(1)(a)		A discussion and analysis of the entity's financial performance.	Mandatory	6, 58–59
17AF(1)(b)		A table summarising the total resources and total payments of the entity.	Mandatory	59
17AF(2)		If there may be significant changes in the financial results during or after the previous or current reporting period, information on those changes, including: the cause of any operating loss of the entity; how the entity has responded to the loss and the actions that have been taken in relation to the loss; and any matter or circumstances that it can reasonably be anticipated will have a significant impact on the entity's future operation or financial results.	If applicable, Mandatory.	N/A
17AD(d)	Management and Accountability			
Corporate Governance				
17AG(2)(a)		Information on compliance with section 10 (fraud systems)	Mandatory	84
17AG(2)(b)(i)		A certification by accountable authority that fraud risk assessments and fraud control plans have been prepared.	Mandatory	vi
17AG(2)(b)(ii)		A certification by accountable authority that appropriate mechanisms for preventing, detecting incidents of, investigating or otherwise dealing with, and recording or reporting fraud that meet the specific needs of the entity are in place.	Mandatory	vi
17AG(2)(b)(iii)		A certification by accountable authority that all reasonable measures have been taken to deal appropriately with fraud relating to the entity.	Mandatory	vi
17AG(2)(c)		An outline of structures and processes in place for the entity to implement principles and objectives of corporate governance.	Mandatory	62–70
17AG(2)(d) – (e)		A statement of significant issues reported to Minister under paragraph 19(1)(e) of the Act that relates to non compliance with Finance law and action taken to remedy non compliance.	If applicable, Mandatory	N/A
Audit Committee				
17AG(2A)(a)		A direct electronic address of the charter determining the functions of the entity's audit committee.	Mandatory	64
17AG(2A)(b)		The name of each member of the entity's audit committee.	Mandatory	64
17AG(2A)(c)		The qualifications, knowledge, skills or experience of each member of the entity's audit committee.	Mandatory	64

PGPA Rule Reference	Part of Report	Description	Requirement	Page
17AG(2A)(d)		Information about the attendance of each member of the entity's audit committee at committee meetings.	Mandatory	64
17AG(2A)(e)		The remuneration of each member of the entity's audit committee.	Mandatory	64
External Scrutiny				
17AG(3)		Information on the most significant developments in external scrutiny and the entity's response to the scrutiny.	Mandatory	70
17AG(3)(a)		Information on judicial decisions and decisions of administrative tribunals and by the Australian Information Commissioner that may have a significant effect on the operations of the entity.	If applicable, Mandatory	N/A
17AG(3)(b)		Information on any reports on operations of the entity by the Auditor General (other than report under section 43 of the Act), a Parliamentary Committee, or the Commonwealth Ombudsman.	If applicable, Mandatory	N/A
17AG(3)(c)		Information on any capability reviews on the entity that were released during the period.	If applicable, Mandatory	N/A
Management of Human Resources				
17AG(4)(a)		An assessment of the entity's effectiveness in managing and developing employees to achieve entity objectives.	Mandatory	71–79
17AG(4)(aa)		Statistics on the entity's employees on an ongoing and non ongoing basis, including the following: (c) statistics on full time employees; (d) statistics on part time employees; (e) statistics on gender; (f) statistics on staff location.	Mandatory	72, 136–137
17AG(4)(b)		Statistics on the entity's APS employees on an ongoing and non ongoing basis; including the following: <ul style="list-style-type: none"> • Statistics on staffing classification level; • Statistics on full time employees; • Statistics on part time employees; • Statistics on gender; • Statistics on staff location; • Statistics on employees who identify as Indigenous. 	Mandatory	72, 137–139
17AG(4)(c)		Information on any enterprise agreements, individual flexibility arrangements, Australian workplace agreements, common law contracts and determinations under subsection 24(1) of the <i>Public Service Act 1999</i> .	Mandatory	79, 139
17AG(4)(c)(i)		Information on the number of SES and non SES employees covered by agreements etc identified in paragraph 17AG(4)(c).	Mandatory	139
17AG(4)(c)(ii)		The salary ranges available for APS employees by classification level.	Mandatory	139

PGPA Rule Reference	Part of Report	Description	Requirement	Page
17AG(4)(c)(iii)		A description of non salary benefits provided to employees.	Mandatory	79
17AG(4)(d)(i)		Information on the number of employees at each classification level who received performance pay.	If applicable, Mandatory	N/A
17AG(4)(d)(ii)		Information on aggregate amounts of performance pay at each classification level.	If applicable, Mandatory	N/A
17AG(4)(d)(iii)		Information on the average amount of performance payment, and range of such payments, at each classification level.	If applicable, Mandatory	N/A
17AG(4)(d)(iv)		Information on aggregate amount of performance payments.	If applicable, Mandatory	N/A
Assets Management				
17AG(5)		An assessment of effectiveness of assets management where asset management is a significant part of the entity's activities	If applicable, mandatory	86
Purchasing				
17AG(6)		An assessment of entity performance against the Commonwealth Procurement Rules.	Mandatory	87
Reportable consultancy contracts				
17AG(7)(a)		A summary statement detailing the number of new reportable consultancy contracts entered into during the period; the total actual expenditure on all such contracts (inclusive of GST); the number of ongoing reportable consultancy contracts that were entered into during a previous reporting period; and the total actual expenditure in the reporting period on those ongoing contracts (inclusive of GST).	Mandatory	87
17AG(7)(b)		A statement that "During [reporting period], [specified number] new reportable consultancy contracts were entered into involving total actual expenditure of \$[specified million]. In addition, [specified number] ongoing reportable consultancy contracts were active during the period, involving total actual expenditure of \$[specified million]".	Mandatory	87
17AG(7)(c)		A summary of the policies and procedures for selecting and engaging consultants and the main categories of purposes for which consultants were selected and engaged.	Mandatory	87
17AG(7)(d)		A statement that "Annual reports contain information about actual expenditure on reportable consultancy contracts. Information on the value of reportable consultancy contracts is available on the AusTender website."	Mandatory	87

PGPA Rule Reference	Part of Report	Description	Requirement	Page
Reportable non-consultancy contracts				
17AG(7A)(a)		A summary statement detailing the number of new reportable non-consultancy contracts entered into during the period; the total actual expenditure on such contracts (inclusive of GST); the number of ongoing reportable non-consultancy contracts that were entered into during a previous reporting period; and the total actual expenditure in the reporting period on those ongoing contracts (inclusive of GST).	Mandatory	88
17AG(7A)(b)		A statement that "Annual reports contain information about actual expenditure on reportable non-consultancy contracts. Information on the value of reportable non-consultancy contracts is available on the AusTender website."	Mandatory	88
17AD(daa)	Additional information about organisations receiving amounts under reportable consultancy contracts or reportable non-consultancy contracts			
17AGA		Additional information, in accordance with section 17AGA, about organisations receiving amounts under reportable consultancy contracts or reportable non-consultancy contracts.	Mandatory	87-88
Australian National Audit Office Access Clauses				
17AG(8)		If an entity entered into a contract with a value of more than \$100 000 (inclusive of GST) and the contract did not provide the Auditor General with access to the contractor's premises, the report must include the name of the contractor, purpose and value of the contract, and the reason why a clause allowing access was not included in the contract.	If applicable, Mandatory	88
Exempt contracts				
17AG(9)		If an entity entered into a contract or there is a standing offer with a value greater than \$10 000 (inclusive of GST) which has been exempted from being published in AusTender because it would disclose exempt matters under the FOI Act, the annual report must include a statement that the contract or standing offer has been exempted, and the value of the contract or standing offer, to the extent that doing so does not disclose the exempt matters.	If applicable, Mandatory	88
Small business				
17AG(10)(a)		A statement that "[Name of entity] supports small business participation in the Commonwealth Government procurement market. Small and Medium Enterprises (SME) and Small Enterprise participation statistics are available on the Department of Finance's website."	Mandatory	89
17AG(10)(b)		An outline of the ways in which the procurement practices of the entity support small and medium enterprises.	Mandatory	89

PGPA Rule Reference	Part of Report	Description	Requirement	Page
17AG(10)(c)		If the entity is considered by the Department administered by the Finance Minister as material in nature – a statement that “[Name of entity] recognises the importance of ensuring that small businesses are paid on time. The results of the Survey of Australian Government Payments to Small Business are available on the Treasury’s website.”	If applicable, Mandatory	89
Financial Statements				
17AD(e)		Inclusion of the annual financial statements in accordance with subsection 43(4) of the Act.	Mandatory	93-133
Executive Remuneration				
17AD(da)		Information about executive remuneration in accordance with Subdivision C of Division 3A of Part 2 3 of the Rule.	Mandatory	136
17AD(f) Other Mandatory Information				
17AH(1)(a)(i)		If the entity conducted advertising campaigns, a statement that “During [reporting period], the [name of entity] conducted the following advertising campaigns: [name of advertising campaigns undertaken]. Further information on those advertising campaigns is available at [address of entity’s website] and in the reports on Australian Government advertising prepared by the Department of Finance. Those reports are available on the Department of Finance’s website.”	If applicable, Mandatory	N/A
17AH(1)(a)(ii)		If the entity did not conduct advertising campaigns, a statement to that effect.	If applicable, Mandatory	88
17AH(1)(b)		A statement that “Information on grants awarded by [name of entity] during [reporting period] is available at [address of entity’s website].”	If applicable, Mandatory	89
17AH(1)(c)		Outline of mechanisms of disability reporting, including reference to website for further information.	Mandatory	74
17AH(1)(d)		Website reference to where the entity’s Information Publication Scheme statement pursuant to Part II of FOI Act can be found.	Mandatory	70
17AH(1)(e)		Correction of material errors in previous annual report	If applicable, mandatory	N/A
17AH(2)		Information required by other legislation	Mandatory	80, 90-91

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Alternative format

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Enquiries

We welcome feedback on our annual report, particularly about its readability and usefulness. If you would like to comment on this annual report, or have any queries, please refer to the contact details below.

Contact phone number (02) 5156 6662
Contact email address enquiries@donatelifelife.gov.au
Website www.donatelifelife.gov.au

Acknowledgement of Country

The Organ and Tissue Authority acknowledges Traditional Owners of Country throughout Australia and recognises the continuing connection to the land, waters and communities. We pay our respects to Aboriginal and Torres Strait Islander cultures, and to their Elders past and present.

Aboriginal and Torres Strait Islander people should be aware that this document may contain images or names of people who have since passed away.

Aunty Kylie

Artwork by Aunty Kylie



