



Department
of Health &
Social Care

[REDACTED]
*Parliamentary Under-Secretary of State
for Health Innovation and Safety*

*39 Victoria Street
London
SW1H 0EU*

5 May 2026
[REDACTED]

HM Assistant Coroner A Farrow
Coroner's Court
1 Mount Tabor Street
Stockport
SK1 3AG
[REDACTED]

Dear Mr Farrow,

Thank you for the Regulation 28 report of 27/02/2026 sent to the Secretary of State of the Department of Health and Social Care about the death of Maisie Kate Almond. I am replying as the Minister with responsibility for organ transplantation.

Firstly, I would like to say how saddened I was to read of the circumstances of Maisie Kate Almond's death and I offer my sincere condolences to their family and loved ones. The circumstances your report describes are concerning and I am grateful to you for bringing these matters to my attention.

The report raises concerns over:

1. A national shortage of donor livers generally and particularly for children in the "super urgent" category.
2. Clinical guidance not to use donation after circulatory death (DCD) livers.
3. A reduction of around one third in donor liver availability has extended waiting times from within 48 hours to up to a week.

In preparing this response, my officials have made enquiries with NHS Blood and Transplant (NHSBT) to ensure we adequately address your concerns. I note NHSBT will also be issuing a direct response.

I recognise and share your concerns about the current constraints on donor liver availability, particularly for children requiring super urgent transplantation. Liver transplantation depends on the availability of suitably matched deceased donor organs, and factors such as size, blood group and clinical urgency can mean that a compatible organ is not always found in time.

While it is important to acknowledge that not every death can be prevented, the issues you highlight underline the need for continued scrutiny of transplant pathways, organ utilisation, and the systems that support timely access to suitable

organs for those most in need, alongside continued research into treatments for liver failure that may help stabilise patients and bridge the gap while a suitable donor organ is identified. In this response, I will outline actions underway to improve donor organ availability and access to transplantation.

National shortage of donor liver availability and access to transplantation

There is a national shortage of donor livers, which continues to place pressure on access to transplantation and extend waiting times, particularly for patients requiring urgent care. This shortage is driven by a combination of factors, including declines in donor numbers and donation consent rates, as well as changes in donor demographics. Regrettably, in this case, a suitable donor liver was not made available in time for Maisie Kate Almond.

The Department recognises that delays in access to suitable donor livers, particularly for children requiring super urgent transplantation, present a significant clinical risk. The actions set out below are intended to address the risks you have identified and to reduce the likelihood of similar circumstances arising in future.

The Department is working with NHSBT and wider system partners to improve access to transplantation and reduce waiting times by increasing the overall supply of donor organs and maximising the use of those available. This includes work to:

- a. Increase the overall supply of donor organs:** While the availability of donated organs is variable, increasing registration on the NHS Organ Donor Register and improving family consent rates may increase transplant opportunities for people on the waiting list. In cases such as Maisie Kate Almond's, where altruistic living donation was not possible and an urgent deceased donor liver was required, a higher number of successful donations may have increased the likelihood of a suitable organ becoming available.

Organ Donation Joint Working Group (ODJWG)

- The Department and NHSBT jointly established the [Organ Donation Joint Working Group \(ODJWG\)](#) to identify actions to maximise the number of lives saved through deceased organ donation, build on positive developments, such as legislative change, and learn from less successful approaches.
- The Group brought together national and international experts in organ donation, including donor families and service providers, and set out ten actions to improve deceased organ donation in the UK. These actions, set out in the Group's final report, [A bolder, braver approach for organ donation in the UK](#), published in January 2026, are now being taken forward by NHSBT and system partners.

Education and public awareness

- NHSBT undertakes a range of activity to raise awareness of organ donation, particularly in communities where donation rates are lower. This includes targeted work during Organ Donation Week, partnerships with trusted organisations such as the National BAME Transplant Alliance, and a Community Grant Programme which support community and faith-based organisations to drive awareness and understanding of organ donation.
- In addition, the Department for Education revised the Relationships, Sex and Health Education guidance, to make education on organ donation a mandatory part of the secondary school curriculum from September 2026, helping to improve understanding and enable young people to make informed decisions about donation.

b. Maximise the use of available organs: Alongside efforts to increase organ donation, the Department has prioritised work to improve organ utilisation. Even where organs are donated, barriers in assessment, preservation or system capacity can mean that opportunities for transplantation are missed. Improving organ utilisation is therefore critical to reducing delays and ensuring that patients waiting for urgent transplants have the best possible chance of receiving a suitable organ in time.

Implementation Steering Group for Organ Utilisation

- The Department established the [Implementation Steering Group for Organ Utilisation \(ISOU\)](#), which concluded in December 2025, to deliver the recommendations of the [Organ Utilisation Group](#) and maximise opportunities for transplantation. The Group, which concluded in December 2025, focused on improving collaboration across transplant services and supporting fair and equitable access to transplantation.
- The ISOU has supported wider system improvements, including strengthening clinical leadership, standardising pathways, promoting collaboration between transplant centres, and enabling innovation in how organs are assessed and allocated. Clinical Leads for Organ Utilisation have been established in all transplant centres to drive local improvement and shared learning.
- As the ISOU concludes the Department is committed to maintaining momentum to continue to improve organ utilisation and achieving better outcomes for patients and families across the UK.

Assessment and Recovery Centres

- Through the ISOU, the Department provided funding to support the development and mobilisation of Assessment and Recovery Centre (ARC) pilot schemes. ARCs are specialist centres designed to assess, repair and optimise donor organs prior to transplantation,

with the aim of improving organ utilisation, reducing unwarranted variation and supporting more transplants to occur.

- The ARC programme is being developed as a national multi-organ approach, with early pilots for lungs, liver and kidneys launching in phases during 2026. ARCs have the potential to deliver significant numbers of additional organs available for transplantation each year, thereby helping to improve access to transplantation and reduce waiting times.

DCD Livers in Paediatric liver transplantation

The Department recognises the concerns raised in your report about the impact that limitations on suitable donor liver availability can have on children requiring super urgent transplantation. Decisions regarding the clinical suitability of organs for transplantation, including the use of DCD livers, are made by clinicians and are based on the best available evidence. NHSBT has advised that, while DCD livers are an important source of organs when transplanted as whole livers, they are not routinely split, which is often required for paediatric cases. This is because splitting DCD livers is associated with a higher risk of graft failure and poorer outcomes for recipients.

This guidance is kept under regular review, and NHSBT, together with the wider transplant community, continue to monitor emerging evidence and technological developments. When robust evidence demonstrates that changes in practice can be made safely and improve outcomes for patients, clinical guidance can and will be updated.

Research into the Prevention and Treatment of Liver Failure

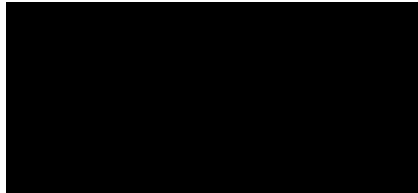
Alongside action to increase the supply of donated organs and maximise the use of those available, the Department also supports research into preventing and treating liver failure, including approaches that can stabilise patients while they await transplantation. This includes investment of over £1.7 billion each year on research through the National Institute for Health and Care Research (NIHR), which funds clinical, public health and social care research, works in partnership with the NHS, universities, local government, other research funders, patients and the public, and supports global health research. This investment supports the NIHR BioResource which includes a cohort of participants with Non-Alcoholic Fatty Liver Disease (NAFLD) who have consented to be recalled for research. Researchers can apply for access to participant's data or recall participants from the NAFLD BioResource to support studies aimed at improving our understanding of liver disease or developing new treatments to improve patient care. Further information about NIHR Awards for research in Liver Failure is available on the [NIHR's Funding and Awards website](#).

I recognise the profound impact Maisie Kate Almond's death has had on her family and loved ones, and I am grateful to you for raising these concerns. The Department is continuing to work closely with NHSBT, NHS England and the transplant and

research communities to increase donor organ availability and maximise organ utilisation and support access to transplantation.

I hope this response is helpful. Thank you for bringing these concerns to my attention.

Yours sincerely,



**Parliamentary Under-Secretary of State
for Health Innovation and Safety**