Transplant workstream plans

- Audit workup times for last 20 donors and recipients in each centre
- Develop and implement 18 week pathway
- Create e-referral, with copy centrally
- Integration of AKCC and Tx nurses/coordinators
- Patient held work up sheet
- Pathway for high risk patients

Mysore Phanish and Nizam Mamode

Audit data

Time taken from nephrologist referral to Tx nurses to activation on the list- St Helier

N=20 (Last 20 Patients activated on to DD list)

Mean 239 days (30.14 weeks)

Median 214 days (30.5 weeks)

Range 98-413 days (14-59 weeks)

Excluding patients where delay was due to high BMI and undecided

St Helier

• Time to get a surgical slot once work-up complete- 4-12 weeks.

Living donors- St helier

 Time taken from referral to donor nephrectomy or registration on to KSS (Excluding those where delays are due to recipient factors such as stable eGFR, medical issues with recipient)

Median 217 (Range 140-329 days) 31 weeks (Range 20-47 weeks)
 Mean 224 days (32 weeks) . N=10

Deceased Donor Recipients (St George's)

20 newly activated recipients onto TWL

Referral received – Activation:

- ➤ Average = 273 days (39 weeks)
- \rightarrow Min = 28 days (4 weeks)
- \triangleright Max = 721 days (103 weeks)

Living Donor Tx Recipients (St George's)

Last 20 LDTx recipients

Referral received - Transplantation :

➤ Mean = 588 days (84 weeks); Min = 161 days (23 weeks); Max = 1337 days (191 weeks)

(Most of the delays due to stable eGFR)

Living Donors (St George's)

- Last 20 Living donors
- Referral received Donation:
 - \triangleright Ave = 490 days (70 weeks)
 - ➤ Min = 161 days (23 weeks)
 - \triangleright Max = 1309 days (187 weeks)

(Main reasons for delay- Recipient stable eGFR, donor-personal issues)

Kings data-Living donors

• N=6 (Audited 10, excluded 4 where delay was due to stable recipient eGFR, recipient medical issues)

Time taken from referral to donor nephrectomy:

Median= 273 days (Range 189-560 days) (39 weeks, Range 27-80 weeks)

Mean= 315 days 45 weeks

Kings data-DD listing

Mean 413 days, 59 weeks

Median 385 days (Range-154-861 days) 55 weeks (Range-22-123 weeks)

Guys: Donor audit n=20

- Total time: Median 346 days (36-1354)(49.42 weeks)
- Co-ordinator to surgery: Median 360 days (34-1354) (51 weeks)
- Co-ordinator to nephrologist: Median 67 days (5-659) (9.5 weeks)
- Nephrologist to surgeon: Median 41 days (0-458) (6 weeks)
- Surgeon to surgery: Median 196 days (23-158) (28 weeks)

Reasons for delay- donors

Reason for delay

Recipient not ready & KSS-no undue delay in donor work up

Donor MRSA and recipient not ready

Delay due to recipient (external referral)

NDAD-psychaitry and KSS

Echo, ETT, cystscopy and renal biopsy between nephrology and surgical appt and recipeint issues.

Another donor was going to proceed in the KSS, but not possible. Surgery postponed due to door and recipient complexity requireing further surical dicussion. Donor lesion on kidney.

ECH (initial screeng oen at ECH beofre referrin to GSTT)

No delay

GOSH-listing delayed due to recipient team.

Recipient not ready and donor needed APOL screening. Donor failed HTA and required psychology support.

KSS. Recipeint issues. Several other donors excluded before we looked at June. She was sure about donating.

Delayed once ready due to recipeint issues

KSS (originally presented in 2013. Recipient not suitable at the time.)

No delay

Delay due to issues with the child at ECH-surgery resceduled.

NDAD-psychiatry and KSS. Cardiology review (external) delayed entry into the April 2019 run.

Donor delay in replying after intial contact. Long wait for recipient clearance once donor ready

No donor delay. Recipient wasn't ready to proceed.

Recipient medical issues and other donors. Needed APOL1 scenning

Went on holday after initial contact. Delay in lisitng due to recipient cardiology

Recipient issues cause delays APOL1 testing causes delay NDADs take longer

Guys: recipients audit n=20 (10 DD, 10 LD, exc KSS)

- Time from referral to activation/surgery: Median 246 days (146-576) (35 weeks)
 - Median 300 D (42.8 weeks), 232 (33 weeks) LD
- Referral to investigations complete: Median 143 days (0-372)
 - Median 127 DD, 143 LD
- Investigations complete to surgical appointment: Median 0 days (mean 78) (0-432)
 - Median 66 DD, Median 0 LD
- Surgical appointment to activation/surgery: Median 115 days (23-290)
 - Median 74 DD, Median 139 LD

Recipient work-up comments

Delay in cardiology appointment, colonoscopy

• ? Delays due to donors

Time taken from referral to DD listing (Blue) and from Referral to donor nephrectomy (Orange)

■ LD-donor nephrectomy

39

42.8 33

Not excluding delays due

to recipient factors)

Time in weeks (Mean)

50

40

20

10

5TH

SGH

Kings

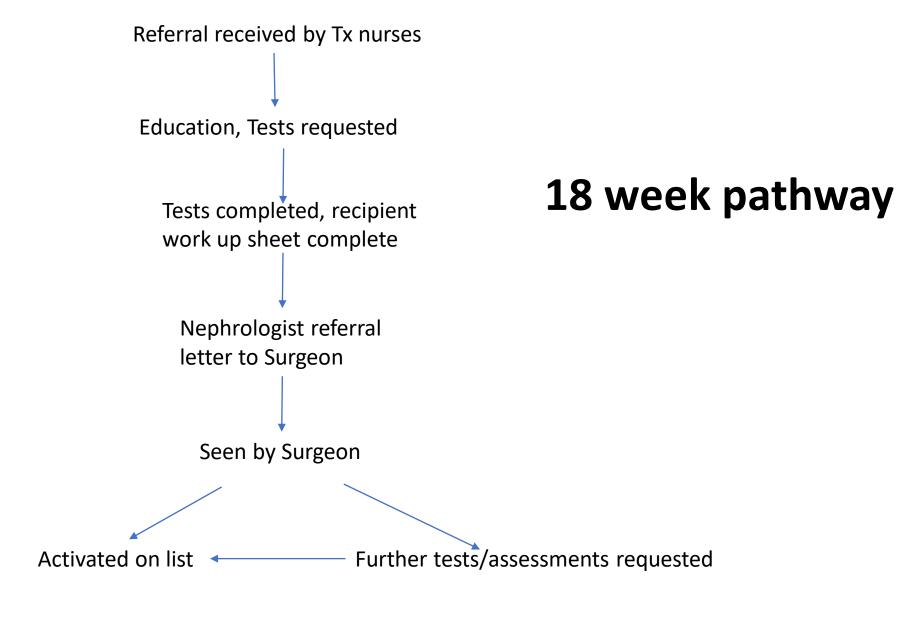
Guys

Median (weeks) 30.5 31

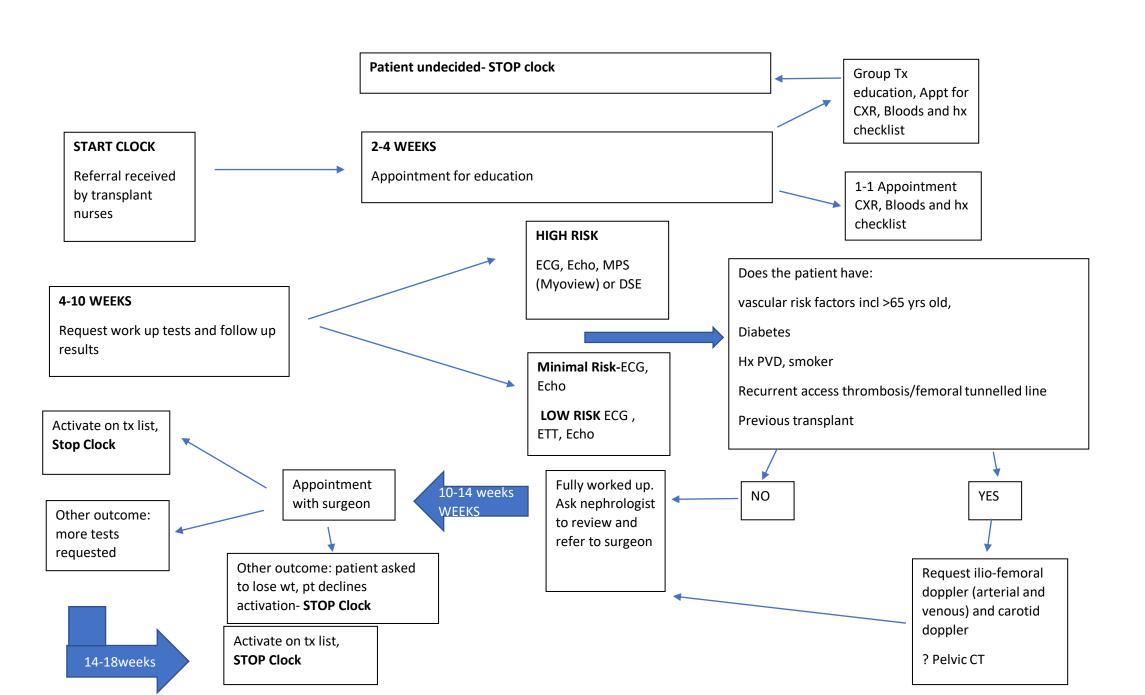
Conclusions from audit

• 18 week pathway is exceeded everywhere, for donors and recipients

Drilling down on the data is difficult



18 weeks



Summary and Future

What we have achieved so far:

- 1. The data collection- shows that it takes >30 weeks to list patients on DD list and for donor nephrectomy from the time of referral
 - 2. 18 wk pathway –Designed- decide how to implement
- 3. My transplant journey sheet (List of tests given to patients at the time of 1st visit to see the tx nurse)- Done
 - 4. IT access- achieved across SW

Next steps

- Agreeing and implementing 18wk pathway
- Further data collection to identify delays in each step so that tailored measures can be taken after identifying centre specific issues.
- E referrals
- High risk pathway
- PREMs/D-PREMs
- Agreeing (or not) if Tx first tool is a useful addition.

Name:	Date of Birth / /
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Once all tests are done please contact the transplant team on 020 8296 4521 or email Joanna.Pope@nhs.net with the test dates and the name of the hospital at which they were done

TEST	TO BE DONE	DONE
ETT – Exercise Test		
ECG – Heart Reading		
ECHO – Heart Ultrasound		
MPS / STRESS ECHO – Medically		
Induced Stress Test on Heart		
CORONARY ANGIO – Heart		
Investigation		
LEG DOPPLER – scan of blood vessels in		
legs		
NECK DOPPLER – scan of blood vessels		
in neck		
CT PELVIS – Scan of Pelvis to look at		
blood vessels in more detail		
SMEAR - screening for cervical Cancer		
MAMMOGRAM – screening for breast		
cancer		
BOWEL SCREEN – screening for bowel		
cancer		
CHEST XRAY		
ANY ADDITIONAL TESTS		