GET CONNECTED
WEBINAR SERIES

Referrals on the Rise: Strategies for Improving Timely Organ Referrals

September 10, 2019| 2-3pm ET

Speakers: Andrew Mullins, MBA, FACHE| Anne Willingham, MT(ASCP), CCTC |Michelle "Mike" Eckhard, MSN, RN-BC, NEA-BC

CEPTC Information

For more information:

Contact The Alliance at

info@odt-alliance.org

The Alliance

- **1.0 Category CEPTC credits** are being offered for this webinar as well as a Certificate of Attendance
- Participants must fill out the evaluation form within 30 days of the event; the link for the evaluation form will be sent to you via email within the next 48 hours
- You will receive a certificate via email upon completion of the evaluation
- Group Leaders - Please keep track the names of the participants in your group and share the evaluation link with them.

Nursing Contact Hours

- **1.0 Nursing contact hour** is being offered for this webinar.
- Participants desiring nursing contact hours must request their certificate within 14 days.
- We highly encourage you to provide us with your evaluation electronically. Detailed instructions will be in the email which will be sent to you within the next 48 hours
- You will receive a certificate via email upon completion of a certificate request or an evaluation.
- Group leaders, please share the follow-up email.

Certificate of Attendance

- Participants desiring CE's that are not being offered, should complete a certificate of attendance.
- Certificates should be claimed within 30 days of this webinar.
- We highly encourage you to provide us with your feedback electronically. Detailed instructions will be emailed to you within the next 24 hours.
- You will receive a certificate via email upon completion of a certificate request or an evaluation.
- Group leaders, please share the follow-up email.

WEBINAR SPEAKERS

Moderator:

Kathy Warhola
Regional Hospital Development Coordinator
Lifeline of Ohio
Columbus, OH

The Alliance

Andrew Mullins, MBA, FACHE
Chief Operating Officer,
Lifeline of Ohio
Columbus, OH

Anne Willingham, MT(ASCP), CCTC
Donation System Specialist,
LifeGift
Fort Worth, TX

Michelle "Mike" Eckhard, MSN, RN-BC, NEA-BC
Chief Nursing Informatics Officer,
CHRISTUS Trinity Mother Frances Hospital & Clinics
Tyler, TX






Importance of Early Referral

Andrew S. Mullins, MBA, FACHE
Chief Operating Officer

Lifeline of Ohio empowers our community to save and heal lives through organ, eye and tissue donation.

Lifeline of Ohio DONATE LIFE

Lifeline of Ohio

Lifeline of Ohio is an independent, non-profit organization which serves 37 Ohio counties and Wood and Hancock counties in West Virginia.

Lifeline of Ohio promotes and coordinates the donation of human organs and tissues for transplantation.

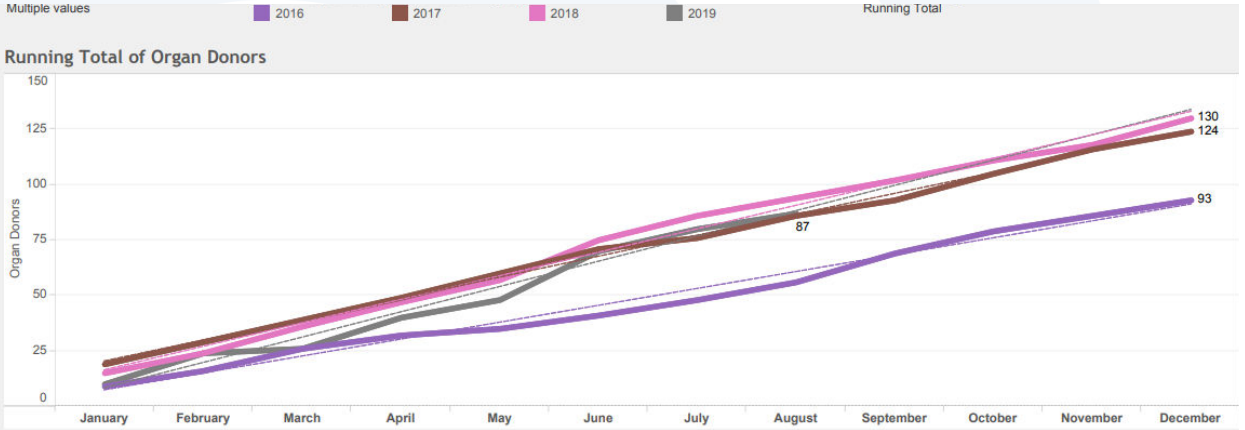
	2015	2016	2017	2018	2019	Difference 2018-2019
Eligible deaths	57	61	99	108	77	-31
DCD donors	12	12	11	16	22	6
Total organ donors	61	56	86	94	88	-6
DCD approaches	23	34	31	60	78	18

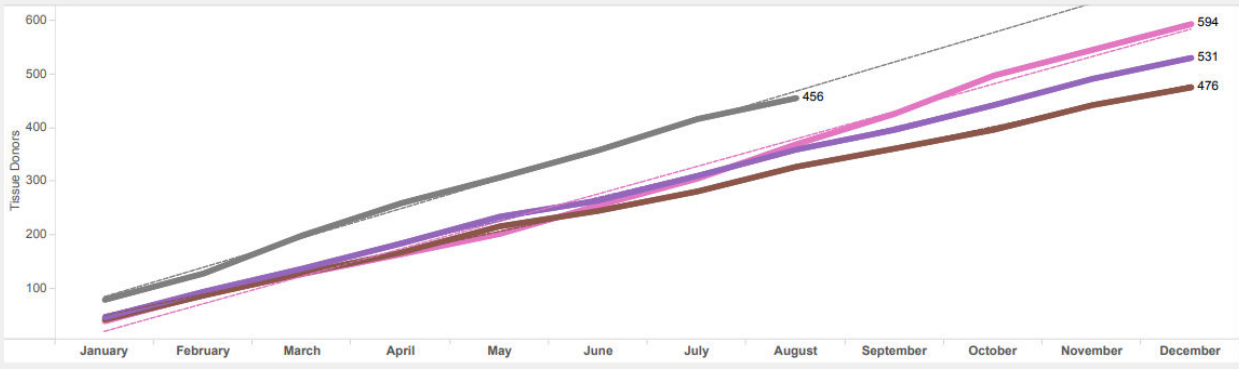
**Data above January through August for 2015-2018. 2019 data January through August 18, 2019

Difference between Jan. 1 - August 30, 2018 versus Jan. 1 - August 18, 2019

	Eligible deaths	DCD donors	Total organ donors	DCD approaches	Ventilated Referral volume
OhioHealth Grant	-6	4	3	14	0
OhioHealth Riverside	-1	same	-2	3	-8
Wexner	-5	-1	-2	1	-13
Nationwide	-4	1	-1	3	-4
Mount Carmel St. Ann's	3	1	4	-2	35
Mount Carmel East	-3	2	2	same	25
Mount Carmel West/Grove City	-11	-3	-10	-3	-13
OhioHealth Mansfield	same	1	1	same	3
SOMC	same	same	3	same	-7
Camden Clark	3	-1	2	same	15
Genesis	-1	1	-1	3	4
St. Ritas	-2	same	-1	same	-5
OhioHealth Marion	1	same	same	same	1
Fairfield	same	same	same	same	-5
OhioHealth Doctors	same	same	1	-3	13

Lifeline of Ohio DONATE LIFE





Lifeline of Ohio DONATE LIFE

Clinical trigger revision

Current clinical triggers

Please call within one hour when the following neurological clinical triggers are met:

- Patient is on a vent
- GCS of 5 or less
- No continuous sedatives or paralytics

Also call if any of the following occur:

- Donation is mentioned by the family
- Brain death testing is ordered
- Decision to withdraw care

New clinical triggers

Refer all ventilated patients within 60 minutes of meeting ANY condition listed below:

1. DCD Potential – Anticipated family meeting to discuss: (Any GCS)
    a. End of life
    b. Palliative goals
    c. Deceleration of care (vasopressors, code status, etc…)
2. BD Potential – GCS 5 or less off paralytics or when Brain Death testing is planned
3. Family mentions donation

Reminders:

1. WAIT BEFORE YOU EXTUBATE!
2. All imminent deaths regardless of age or diagnosis
3. Please refrain from mentioning donation or Lifeline of Ohio to family
4. Lifeline of Ohio will evaluate all donation potential and huddle with the care team prior to any family discussion
5. Cardiac trigger: Call within 60 minutes of cardiac death

Lifeline of Ohio DONATE LIFE

Why is the early referral so important?

Lifeline of Ohio DONATE LIFE

A Few Observations

- Families making decision earlier to withdraw life-sustaining therapy
- When families are making this decision, they want it to occur now
- DCD opportunity increasing
- Once referral has been made to OPO, the referral is now in our court

Lifeline of Ohio DONATE LIFE

Key takeaway:

Look at your current clinical triggers and determine if a revision is needed

Lifeline of Ohio DONATE LIFE

Questions?

Contact:

Andrew S. Mullins, MBA, FACHE
Chief Operating Officer
amullins@lifelineofohio.org
614-384-7370

Lifeline of Ohio's mission is to empower our community to save and heal lives through organ, eye and tissue donation.

Referrals on the Rise: Strategies for Improving Timely Organ Referrals

Anne Willingham, MT(ASCP), CCTC
Donation System Specialist –LifeGift, Ft. Worth, TX

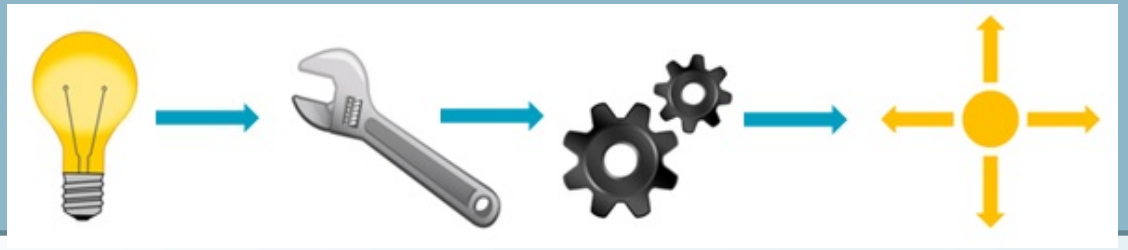
LIFEGIFT

Key Elements of OPO Hospital Development in the Referral Process

- Educate

- Collaborate

- Plan and Implement



Educate

- ICU/ED Staff meetings
- New Nurse Orientations
- Critical Care Classes
- Purposeful Rounding
- Case follow up

Working Alone Does Not Work

- “One is too small a number to achieve greatness”

...author unknown

Collaborative Team

"A group is a bunch of people in an elevator. A team is a bunch of people in an elevator, but the elevator is broken." - *Bonnie Edelstein*

Members should include Key Donation Champions:

- Hospital Executive Leadership
- ICU Managers/Directors
- ED Managers/ Directors
- OR Managers Directors
- Hospital Educators
- Quality
- IT/EMR
- Chaplains/Social Workers

Collaborate with Passion

Instill passion for Donation in your donor champions:

- Donor Memorial Events

-Connect to Purpose

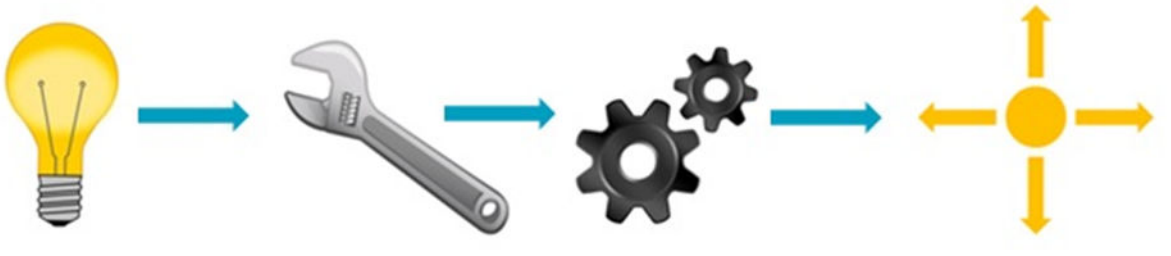
-include Hospital Champions in OPO meetings

Review and Plan

a. Review Data and hospital Dashboards

b. Identify reasons for missed or untimely referrals:

   - Educational needs
   - Staffing (time)
   - Understanding of impact



Plan and Implement

Devise a plan

a. Aim: a good aim addresses an issue that is important to those involved;

b. it is specific, measurable, and addresses these questions:

- How good?
- By when?
- For whom (or what system)?

Aim: "Have 100% timely referral rate and no missed referrals within 3 months of implementation of BPA (Best Practice Alert)in the Neuro ICU"

Review and adjust

- Choosing Measures:
  - Review data at collaborative meetings

Developing changes:

- Reassign calls (Charge Nurse/HUC)
- Best Practice Alerts
- eReferrals/iReferrals

Test Changes:

- follow up with Bedside RNs/Charge RNs

EDUCATE, COLLABORATE and DEVELOP CHANGE

The OPO Role:

- Hospital Development is Key to assuring notification of organ, tissue and eye referrals:
  - Assess suitability
  - Assess situational dynamics

CHRISTUS® TRINITY MOTHER FRANCES
Health System

Referrals on the Rise: Strategies for Improving Timely Organ Referrals

Best Practices for High Performing Hospitals

Mike Breen Eckhard, MSN, RN-BC, NEA-BC

Chief Nursing Informatics Officer

CHRISTUS Trinity Mother Frances Health System, Tyler, TX

iCARE.

Recommend Collaborative Team

- Passionate about donation
- Engaged
- Stewards of change
- Interpret Quality Indicators for hospital
- Project administration

iCARE.

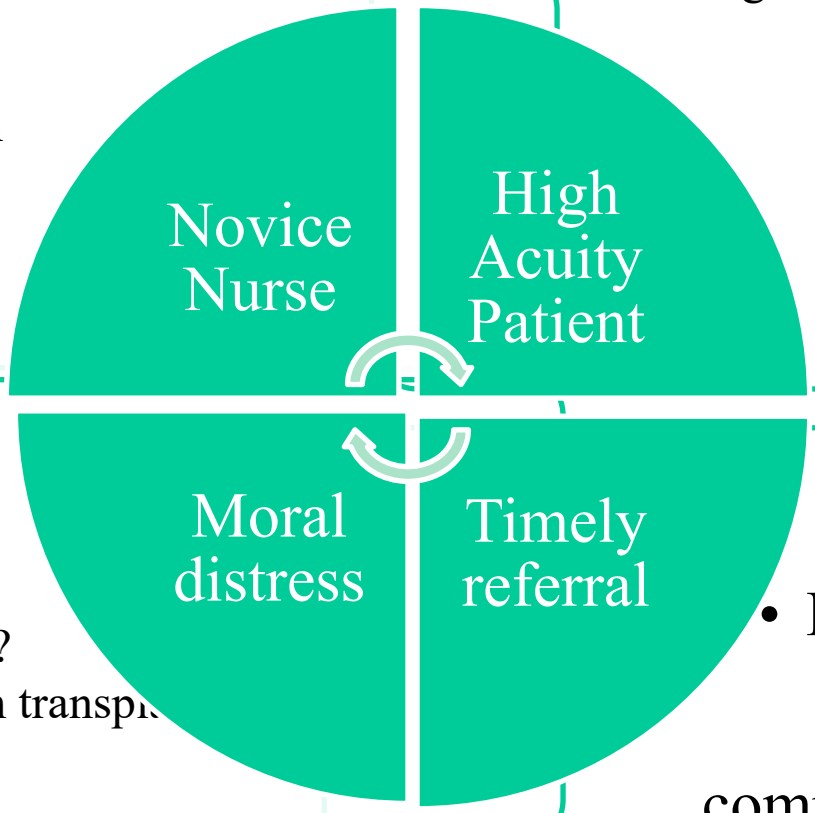
Interpret Quality Indicators for hospital

CQO, CNO-understand the data and

What were we trying to solve?

- Timely referral rate initially 82%
- Our Goal is 100%

Challenge: Timely Notification of OPO



- Knowledge base
- Overwhelmed
- Recognize situation

- High level of care required
- Busy, busy, busy
- Constant changes
- Family dynamics
- 3 ICUs

- Giving up?
- Am I right?
- Legal requirements?
- Agree/disagree with transpl

- Maintain organs while following through long, complicated process

PROJECT SPECIFICS

- Demonstrate how we successfully reduce the time nurses are spending away from the bedside to comply with reporting of data
- Increase the timeliness of referrals by using hospital EMR

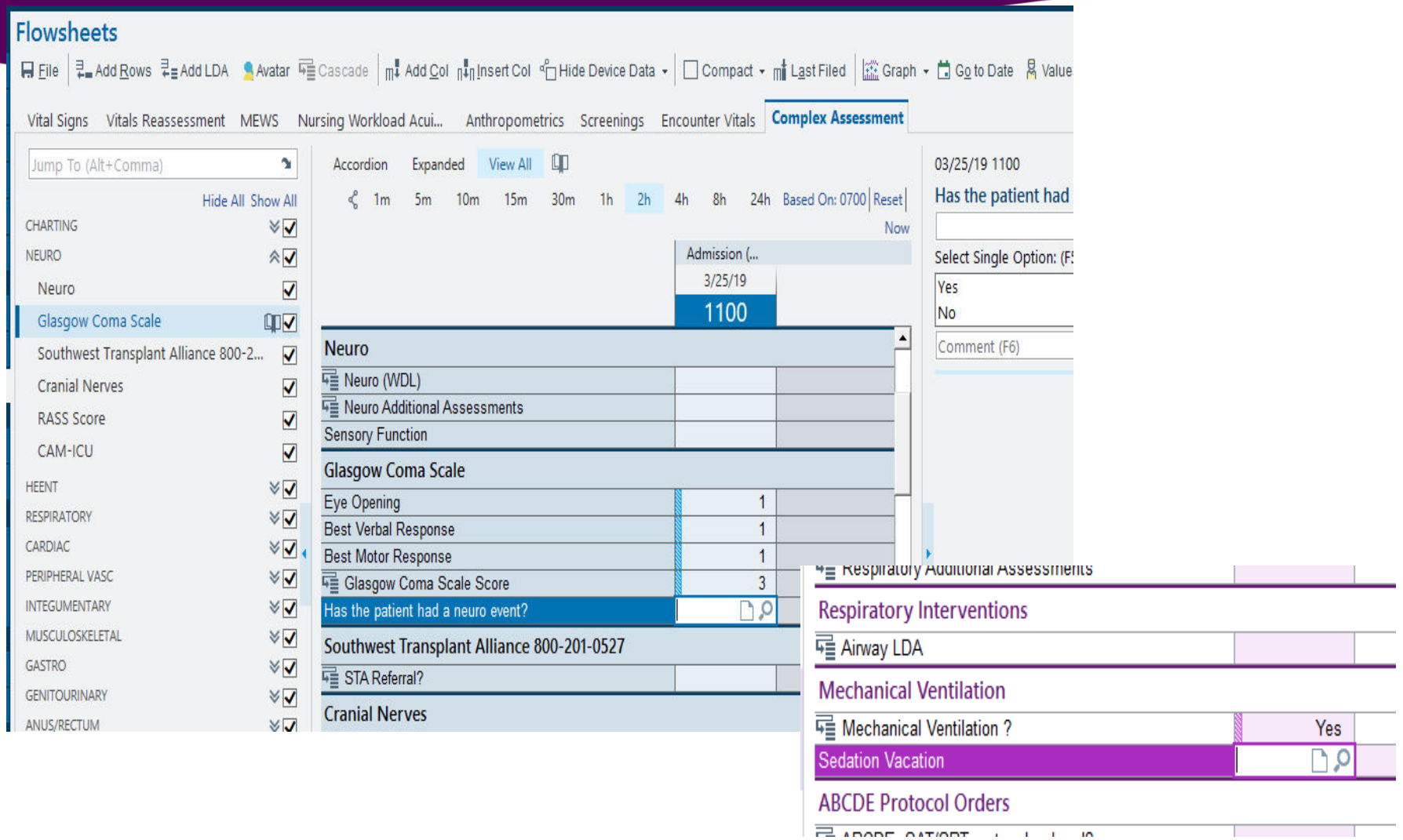
What if ……..

We created an alert to notify nurses when patients met criteria?

Project administration

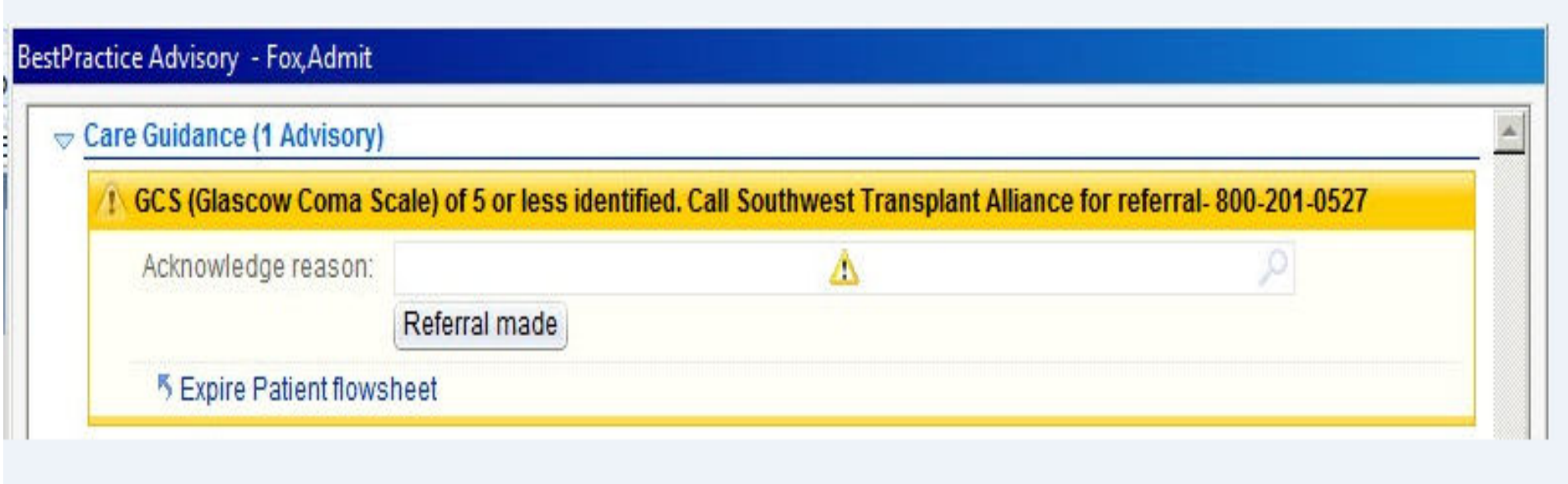
Define goals with key players (assure that all understand the impact of projects and details)

connect IT department with nursing staff (connect to purpose)


Flowsheets
File
Add Rows
Add LDA
Avatar
Cascade
Add Col
Insert Col
Hide Device Data
Compact
Last Filed
Graph
Go to Date
Value
Vital Signs
Vitals Reassessment
MEWS
Nursing Workload Acui...
Anthropometrics
Screenings
Encounter Vitals
Complex Assessment
Jump To (Alt+Comma)
Hide All
Show All
CHARTING
NEURO
Neuro
Glasgow Coma Scale
Southwest Transplant Alliance 800-2...
Cranial Nerves
RASS Score
CAM-ICU
HEENT
RESPIRATORY
CARDIAC
PERIPHERAL VASC
INTEGUMENTARY
MUSCULOSKELETAL
GASTRO
GENITOURINARY
ANUS/RECTUM
Accordion
Expanded
View All
1m
5m
10m
15m
30m
1h
2h
4h
8h
24h
Based On: 0700
Reset
Now
Admission (...
3/25/19
1100
Neuro
Neuro (WDL)
Neuro Additional Assessments
Sensory Function
Glasgow Coma Scale
Eye Opening
1
Best Verbal Response
1
Best Motor Response
1
Glasgow Coma Scale Score
3
Has the patient had a neuro event?
Southwest Transplant Alliance 800-201-0527
STA Referral?
Cranial Nerves
03/25/19 1100
Has the patient had
Select Single Option: (F
Yes
No
Comment (F6)
Respiratory Additional Assessments
Respiratory Interventions
Airway LDA
Mechanical Ventilation
Mechanical Ventilation ?
Yes
Sedation Vacation
ABCDE Protocol Orders

BPA

Alert to notify nurse when patient meets criteria



Roll out the Change

Instill practice change with front line staff in ED and ICU

Managers/Directors/Educators

Hurdles and Considerations

BPA Overload!!! (Best Practice Alert)

Adjustments for CVICU-narrowing the criteria for BPA

Malfunction or system downtime—assure staff does not rely on BPA.

Begin work—KEEP MOMENTUM

Define aim with timeframe, outcome desired and method to achieve.

Overcome hurdles by never losing sight of the goal!!

iCARE.

RESULTS!!

2015

- Timely referral: 90%

2016

- Timely referral: 96%

2017

- Timely referral: 98%

2018

- Timely referral: 99%

Success and Beyond

Timeliness of initial referral call significantly increased, continuing review of data showed concerns with call backs prior to extubation- “green tie indicator project”.

eReferral and iReferral project automated initial referral call-revolutionizing organ, tissue and eye referrals.