

KQUIP Transplant First: Focus on Living Donation

North West Region

Smeeta Sinha

UK Kidney Week 2019



KQuIP

Regional Landscape

Geography and population demographics

- Challenges that come with large areas
- Changing catchments areas
- Varying ethnic, socio-economic and deprivations status

Regional re-organisation

- Merger of RLBUHT and Aintree
- GM re-organisations on going

Loss of strategic clinical networks

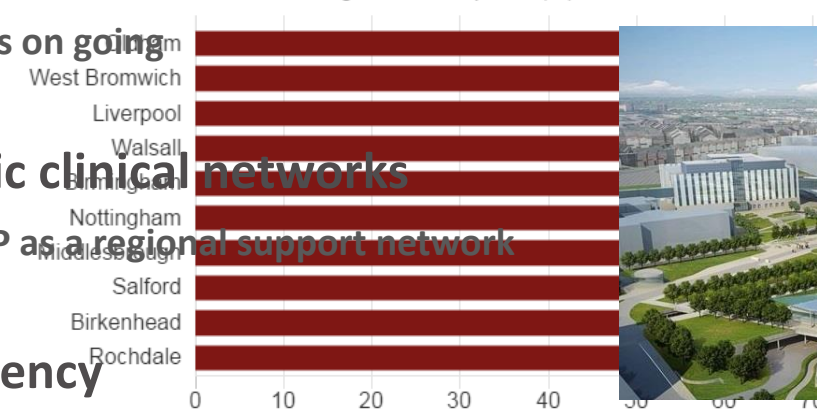
- Emergence of KQuIP as a regional support network

Carillion insolvency
BREXIT

Most deprived towns and cities in England

North West has five out of 10 worst affected

How much of the area is among the most deprived (%)



Source: ONS



BBC

The KQuIP NW Team

- KQuIP team (Leeanne Lockley NW programme)
- Aintree University Hospital NHS Foundation Trust
- Royal Liverpool & Broadgreen University Hospitals NHS Trust
- Wirral University Teaching Hospital NHS Foundation Trust
- Lancashire Teaching Hospitals NHS Trust
- Manchester University NHS Foundation Trust
- Northern Care Alliance (Salford Royal NHS Foundation Trust & Pennine Acute NHS Trust)

KQuIP Launch Event 2018

National Projects were shared

Widespread engagement and support across the region

Opted for 2 projects

Transplant First

MAGIC

Managing Access by
Generating Improvements in Cannulation

Aintree



What changes have we made

- Increasing capacity for low clearance CKD education
 - Dedicated specialist nurse for education with more time
 - Dedicated home therapy nurse to support education
- Patients now have more than 1 visit for low clearance education
- Protected stream for low clearance
- Moved towards virtual low clearance review
 - Focus assessment based on checklist so that all patients receive same standard
 - Cover areas such as transplant referral / work-up, modality of choice, vascular access and blood test



What are we doing now for transplant

- We now ready to work on transplant pathway
- Mapped our pathway
- We have no issue with investigations such as cardiac as well supported by other departments in Aintree

What we really need to do

- Getting our patients to be involved
 - To help engage consultants and doctors
 - To provide patient story
 - To provide patient perspective on the pathway and process map

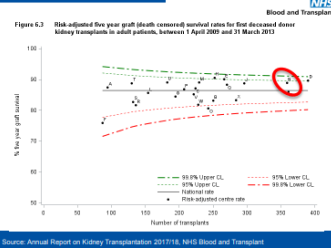
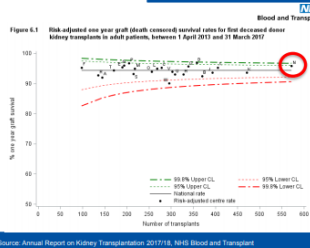
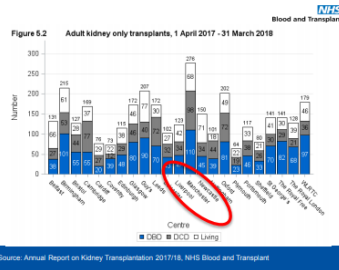
Strengths

- Quality Improvement Expertise
- Collaborative approach to cardiac work up

Challenges

- Patient engagement

Manchester Foundation Trust



- Recipient identification
GFR<15 Tx status?
Pre-emptive 2nd
- Donor: Record of living donor exploration
Increase no recipients with donor offer
Barriers
- Work up
Attrition
Time through work up process
- Staff
Ratio, coordinators,

Strengths

- Access to detailed data sets
- Collaborative approach to LD with Transplant team

Challenges

- Time through work up process
- Staff to support the process

Salford Royal

EXPECT DELAYS

OUTDATED



- Late referrals to Advanced Kidney Care clinic when eGFR already <15
- Delays for transplant workup clinic (6 weeks vs ideal 2 wks)
- Delays in cardiac stress tests
- Delays in reporting of radiology tests
- Renal website outdated
- High ethnic minority population with low living donation rate

- Patient involvement at meetings including patient from South Asian community
- Committed MDT approach to all meetings & events
- Use of GMKIN social media for engagement
- New live donor video and blog (father to son)
- Rochdale BME engagement event 12/3/19
- Media events to publicise living donation on World Kidney Day
 - Manchester Evening News and BBC Radio Manchester
- Weekly “One-stop” Transplant workup clinic now includes dobutamine stress echo – fewer visits & quicker workup



Strengths

- Media campaign and stakeholder engagement Talk @25
- One stop ‘work up’ clinic

Challenges

- Cardiology work up
- Late Referrals

Royal Preston Hospital

- An established Pre Transplant team. Consisting of 3 consultants, 1 associate specialist and 1 transplant nurse.
- The current Pre tx pathway is at 12 weeks
- Strong patient and staff education programme
- Successful LD programme – highest pre-emptive transplants (ppp) in the North West
- Introduction of the 'One Stop Clinic' and 'Fast Track Clinic'
'One Stop Clinic' started 01/04/19 – reducing pathway by 6-10 weeks.
- Additional clinic
- Education Session – Joint Pre Tx and LD 'Transplant on Tour'

Challenges

- Changing Current Practice (habits) – Referral when eGFR is 20
- Increase number of referrals
- Long waiting time for cardiology
- Live Donor GFR – Change in testing modality.
- Clinic capacity
- Increased workload



Strengths

- Established team with a successful programme
- Programme of education for patients and staff

Challenges

- Cardiology work up
- Referrals @ eGFR 20

Royal Liverpool & Broadgreen

Communication between different NHS Trusts

- nhs.net emails
- Sending confidential/secure e-mails
- Faxing
- Accessing other units results

Positives

- New transplant assessment appointments:
Individualised care 1:1
- Patient education meetings
- Good working relationships

Strengths

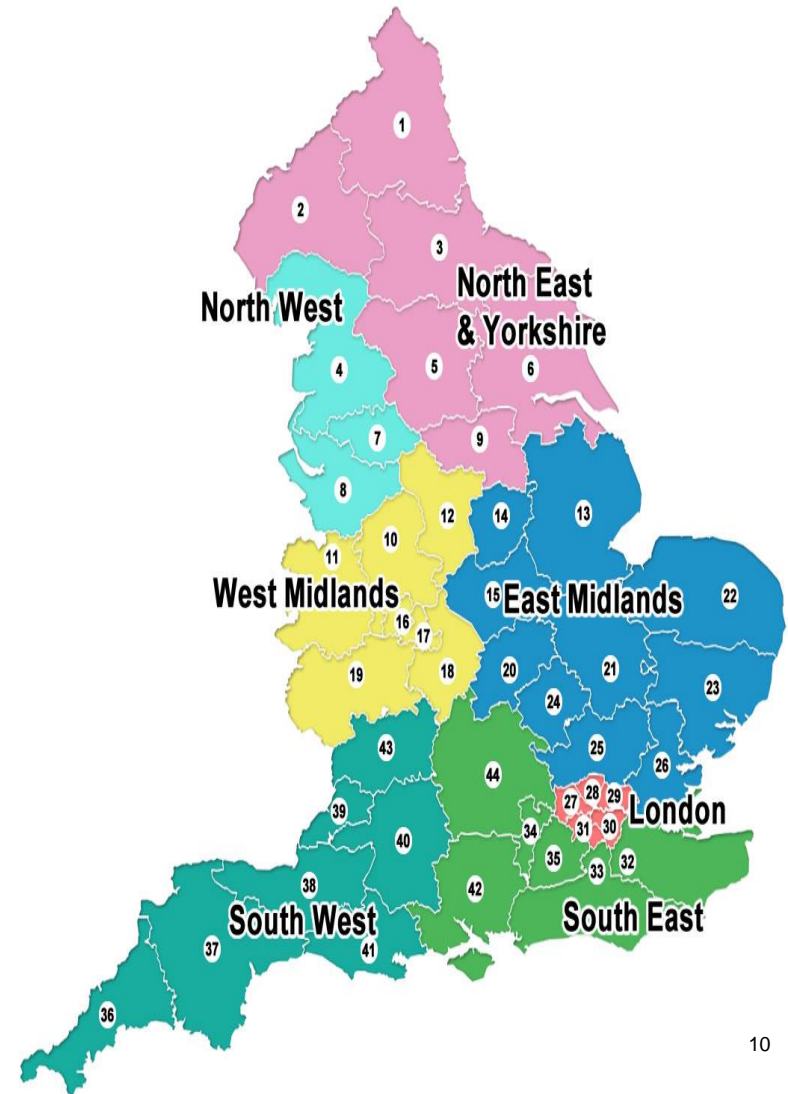
- Management of capacity
- Education programme

Challenges

- Communication systems
- Referral quality and consistency

GIRFT Regional Support

- 7 GIRFT Regional Hubs operating from Nov 2017.
- **implementation plans** reflecting:
 1. Variations highlighted in Trusts' data packs
 2. Improvement priorities from Clinical Lead visits
 3. Recommendations from each National Report
- GIRFT will also produce **good practice manuals** full of case studies and best practice guidance Hubs will also help to ensure that GIRFT findings and plans are cascaded widely within each trust.



KQuIP 'Transplant First' Regional Opportunities

- QI Expertise – Aintree and Salford
- Access to local/regional data – MFT and Liverpool transplanting centres
- Patient & staff education - Royal Preston and Liverpool
- Early referral – Salford (Talk @25)
- Cardiology Work up – Aintree

KQuIP Benefits

- Established MDT for Transplant First (and MAGIC) from each unit
- Support from KQuIP Regional Team with a QI programme manager
- QI training - data driven
- Opportunity to use data from GIRFT regionally
- Shared learning and support across NW – including staff peer support
- Adverse event learning, protocols etc

Acknowledgments

North West KQuIP MDT

Think Kidneys /KQuIP Programme Team

Google images search 'North West'

