## NHS BLOOD AND TRANSPLANT ORGAN DONATION AND TRANSPLANTATION DIRECTORATE

#### KIDNEY ADVISORY GROUP

REVISED KIDNEY FAST TRACK SCHEME - 12 MONTH REVIEW

#### INTRODUCTION

- 1. There have been 2 reviews of the fast track (FT) trigger points over the past 2 years following agreement at KAG. In July 2022, the number of centre declines due to organ or donor quality required to trigger fast track offering was changed from 5 for DBD and 3 for DCD, to 7 declines for both DBD and DCD. The change was implemented on October 25 2022. A review at KAG in July 2023 showed that while the proportion of kidneys offered by fast track were down overall, there had been an increase in incidents related to the length of the offering process. Following this, the number of declines to trigger fast track was reduced from 7 to 5 for kidney only donors, as of August 16 2023.
- 2. The changes were subject to a review, with several a priori metrics agreed as being essential for monitoring outcomes following the changes. The primary outcomes for the original changes were for a decrease in the proportion of kidneys transplanted via FT by 30% with commensurate increase in proportion of transplants via named patient offering. A number of secondary outcomes to be reviewed included expected and unintended consequences of the changes including CIT, offer time, hub work-load and ODMT on call authorisations for FT.
- 3. This paper summarises changes in offering activity, and use of the FT scheme in the period since the change was implemented in comparison with a reference period before the recent changes. Proposals are made for KAG to consider and vote on in the light of review findings.

#### **DATA AND METHODS**

- 4. Data on deceased donor offers and transplants were extracted from the UK transplant registry. Reasons for triggering the FT offering are identified by search of the text recorded by Hub Operations staff. Data were extracted from 3 periods:
  - -Period 1, kidneys offered between 25 October 2021 and 15 August 2022. Trigger: 5 quality declines for DBD, 3 for DCD (reference period, prior to recent changes).
  - -Period 2, kidneys offered between 25 October 2022 and 15 August 2023. Trigger: 7 declines DBD and DCD (first set of changes to triggers)
  - -Period 3, kidneys offered between 25 October 2023 to 15 August 2024. Trigger: 5 declines for kidney only donors (DBD and DCD), 7 declines for donors of kidneys and other organs (latest review period).

#### **RESULTS**

- 5. Table 1 looks at all cases where kidneys were offered, and the proportion where at least 1 kidney was fast tracked. This includes both donors where a kidney was donated and cases where offering resulted in no kidneys being donated. Overall, the proportion of kidneys transplanted via FT reduced from 16% in period 1 to 13% in period 2, with a further decrease to 12% in period 3. This is a proportional reduction of 25% from period 1 to period 3. Overall, the proportion of donor offers that where at least one kidney was FT reduced from 40% in period 1 to 37% in periods 2 and 3.
- 6. In Table 2 the trigger points for FT offering, by the donor type are summarised. In the review period, there has been a decrease in FT due to the number of centre declines for both DBD and DCD. However, this has coincided with an increase in other reasons for fast track. For DCD donors there has been an increase in the trigger point for cold ischaemia time from 23% in the reference period to 39% in period 2. Following the changes in period 3, fast track offering due to cold ischaemia time remained similar at 38%.

**Table 1** – Total number of donors where kidneys offered and proportion where at least one kidney fast tracked

	Period 1		Period 2		Period 3	
Donors with >=1 kidney offered	1373		1453		1421	
Number where >=1 kidney fast tracked	551	(40%)	542	(37%)	530	(37%)
Donors with >=1 kidney donated	1079		1149		1107	
Kidneys transplanted via named offering	1582	(84%)	1699	(87%)	1700	(88%)
Kidneys transplanted via fast track offering	298	(16%)	265	(13%)	235	(12%)

**Table 2** – Breakdown of proportion of kidneys fast tracked by time period, donor type and reason for fast track

#### **DBD Donors**

Donors with >=1 kidney offered	<b>Period 1</b> 647		<b>Period 2</b> 635		Period 3 633	
Number where >=1 kidney fast tracked	204	(32%)	201	(32%)	206	(33%)
Reason for Fast Track						
Centre Declines	95	(47%)	57	(29%)	65	(31%)
Cold Ischaemia Time	69	(34%)	68	(34%)	70	(34%)
Deemed unusable	14	(7%)	26	(13%)	9	(4%)
Declined after treatment withdrawal	1	(0%)	1	(1%)	0	(0%)
Other	8	(4%)	13	(7%)	5	(2%)
ODMT/Hub Authorised	2	(1%)	3	(2%)	2	(1%)
Positive Virology	3	(1%)	4	(2%)	11	(5%)
Not available	12	(6%)	28	(14%)	45	(22%)

## DCD Donors

Donors with >=1 kidney offered	Period 1 726		<b>Period 2</b> 818		<b>Period 3</b> 788	
Number where >=1 kidney fast tracked	347	(48%)	341	(42%)	324	(41%)
Reason for Fast Track						
Centre Declines	151	(44%)	69	(20%)	87	(27%)
Cold Ischaemia Time	81	(23%)	134	(39%)	125	(38%)
Deemed unusable	31	(9%)	31	(9%)	17	(5%)
Declined after treatment withdrawal	10	(3%)	23	(7%)	13	(4%)
Other	37	(11%)	44	(13%)	33	(10%)
Positive Virology	8	(2%)	7	(2%)	13	(4%)
ODMT/Hub Authorised	6	(2%)	8	(2%)	9	(3%)
Not available	22	(6%)	25	(7%)	29	(9%)

7. Table 3 gives the time from first (named) offer, to first FT offer, where the trigger point for fast track was due to centre declines. Across both, DBD and DCD offering there was increase in the time between the first offer and the fast track offering from period 1 to period 2, and a small decrease from period 2 to period 3.

**Table 3** – Time between first offer and fast track offer, where centre declines trigger point met

	Perio	od 1		Perio	od 2		Per	Period 3			
	N	Median (Minutes)	(Q1-Q3)	N	Median (Minutes)	(Q1-Q3)	N	Median (Minutes)	(Q1-Q3)		
DBD	95	287	(212-434)	57	438	(289- 591)	65	424	(297- 884)		
DCD	151	213	(151-414)	69	387	(299- 546)	87	355	(266- 507)		

- 8. Across all deceased donor kidney offers to named recipients, the mean offers per donor was 4.15 in period 1 (maximum of 13). This increased to 4.70 in period 2 (maximum of 16) and increased further to 5.11 in period 3 (maximum of 24). Comparing period 3 to period 2, median cold Ischaemia time for all deceased donor kidney transplants has decreased by 0.4 hours for DBD and increased by 0.2 hours for DCD (Appendix Table 3A).
- 9. Table 4 shows the number of centre declines for quality, before acceptance for a named offer (ie. not including kidneys that were fast tracked). The number of accepted offers for named patients after 4 declines for DBD kidneys in period 3 is 10 (1%). The number of accepted offers after 4 declines for DCD kidneys in period 3 is 6 (1%).

**Table 4** - Number of quality declines before a kidney was accepted for a named patient offer

	Declines prior to acceptance								
	0	1	2	3	4	5	6	7	Total
DBD Period 1	742	120	39	14	11	2	1		929
Period 2	728	109	24	29	13	5	7		915
Period 3	697	151	45	20	5	7	2	1	928
<b>DCD</b> Period 1	469	126	46	8	1				650
Period 2	568	127	34	25	16	5	5	1	781
Period 3	565	113	50	21	20	4	2		775

10. Table 5 shows the time in hours between the donor referral and knife to skin, split by DBD and DCD. The median time in period 3 was 54 hours for DBD and 50 hours for DCD.

**Table 5** – Time from donor referral to knife to skin in hours

	Period	N	Median	Q1-Q3
DBD	1 2	579 577	51 54	(39 - 69) (43 - 70)
	3	491	54 54	(43 – 70) (44 – 69)
DCD	1 2	490 559	45 48	(31 - 69) (33 - 69)
	3	482	50	(35 – 69) (35 – 75)

#### **CLINICAL GOVERNANCE INCIDENTS**

In the previous review of the changes made in period 2, the increase in time taken to confirm placement due to process elongation resulted in potential delays at donor centres and/or delay in mustering retrieval teams. This was captured in at least 3 Clinical Governance incidents during period 2. The number of Clinical Governance reported incidents were thought to be an under-estimate of the concerns from SNOD teams and the Hub and many more have been raised informally, specifically in the setting of kidney only donors. Since the changes made to the trigger points in period 3, there have been no incidents related to the elongation of the offering process.

#### **SUMMARY**

This review identifies:

Comparing period 3 to period 1:

- (1) a 25% proportional (from 16% down to 12%) reduction in proportion of kidneys transplanted via FT route
- (2) Reduction in centre declines as reason trigger for FT
- (3) increase in other reasons for triggering FT, including CIT for DCD
- (4) The take-up of named offers after 5 declines for quality reasons is limited

Comparing period 3 to period 2

- (5) Small reduction in proportion of kidneys transplanted via FT route
- (6) Similar time between donor referral to knife-to-skin for DBD and an increase of 2 hours in DCD
- (7) Reduction of incidents due to the prolonged named offering process
- (8) Proportion of offers accepted by named offering after 4 declines remains small (1%)

#### **ACTION**

In light of the review findings, KAG members are asked to consider the following options:

- (1) To remain with the current FT trigger points
- (2) To revise the number of declines for quality to 5 for all donors (ie. not just for kidney only donors).

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October 2024

## Appendix Table 1 - Reasons for decline of named kidney offers by time period

Reason		21 – 15 Aug 122		22 – 15 Aug 123	25 Oct 2023 202	
	No. of declined offers	% of all declined offers	No. of declined offers	% of all declined offers	No. of declined offers	% of all declined offers
Clinical	3	0				
Donor unsuitable - cause of death	5	0	11	0	5	0
Donor unsuitable - age	106	5	148	6	173	6
Donor unsuitable - past history	693	34	846	33	883	30
Donor unsuitable - size	19	1	20	1	14	0
Donor unsuitable - virology	2	0	11	0	9	0
Donor unsuitable – medical reasons	1		2	0		
Poor function	231	11	398	16	320	11
Medication			1			<u> </u>
Infection	27	1	29	1	24	1
Tumour	3				2	0
Other disease			<u> </u>			
All donor reasons	1090	53	1465	57	1430	49
Recipient died	1	0				
Recipient unfit	90	4	140	5	118	4
No suitable recipient	1	0	1		2	0
Recipient unavailable	40	2	55	2	51	2
Recipient refused	73	4	94	4	136	5
Recipient did not need transplant	211	10	287	11	401	14
Better match required	62	3	79	3	36	1
X match positive	11	1	18	1	17	1
HLA/ABO type	3	0	4	0	19	1
Other recipient reason				0	103	4
All recipient reasons	492	24	678	26	883	30
					40	
Anatomical	41	2	62	2	48	2
Poor perfusion	11	1	16	1	17	1
Contamination			8	0	2	0
Ischaemia time too long - cold	20	1	19	1	19	1
Organ damaged	8	0	17	1	8	0
Organ unsuitable					18	1
All organ reasons	82	4	122	5	112	4
Centre criteria not achieved		0	1	0	1	0
Centre already	66	3	79	3	57	2
retrieving/transplanting					<u> </u>	_
No beds	33	2	24	1	12	0
No time	1	0	1	0		
No staff	3	0	3	0	•	<u> </u>
No theatre	1		1	0	 1	0
Distance	1	•	1	0		
	7	. 0	4	0	44	2
Other centre reason  All centre reasons	112	5	113	4	115	4
Other	266	13	181	7	359	12
TOTAL	2042		2559		2899	

Appendix Table 2 – Donors in each period by 2019 Kidney Offering Scheme risk group

Risk Group	Peri	od 1	Peri	od 2	Period 3		
•	N	%	N	%	N	%	
D1	286	27	295	26	275	25	
D2	228	21	262	23	281	25	
D3	255	24	275	24	245	22	
D4	310	29	317	28	313	28	

### Appendix Tables 3 -

A- Cold Ischaemia time by period and donor type

Donor Type	Period 1				Period	12	Period 3		
. , , , ,	N	Median (Hours)	(Q1-Q3)	N	Median (Hours)	(Q1-Q3)	N	Median (Hours)	(Q1-Q3)
DBD	940	12.7	(9.9-17.0)	927	13.5	(10.4-18.4)	836	13.1	(10.0– 17.6)
DCD	776	12.7	(10.3- 17.0)	872	13.1	(10.3-17.7)	781	13.3	(10.3- 17.8)

# **B** - Cold Ischaemia time by period and donor type – donors with no centre quality declines (0 declines in Table 4), kidney only transplants

Donor Type					Period	1 2		Period 3		
Туре	N	Median (Hours)	(Q1-Q3)	N	Median (Hours)	(Q1-Q3)	N	Median (Hours)	(Q1- Q3)	
DBD	613	12.0	(9.6- 15.0)	596	12.9	(10.2-16.5)	533	12.6	(9.9 – 16.4)	
DCD	399	11.8	(10.0- 14.7)	470	11.8	(9.7-14.6)	442	12.0	(9.9 – 15.5)	

### C - Cold Ischaemia time by period and donor type - Fast tracked kidneys

Donor Type		Period	1		Period	2		Period 3			
,,,,,	N	Median (Hours)	(Q1-Q3)	N	Median (Hours)	(Q1-Q3)	N	Median (Hours)	(Q1-Q3)		
DBD	112	17.4	(12.9- 22.2)	101	19.6	(14.9- 23.7)	83	18.8	(14.2 – 22.1)		
DCD	179	17.8	(14.0- 21.7)	158	18.7	(15.0- 22.1)	118	18.2	(14.6 – 21.5)		