Blood and Transplant

## Level 3 <br> Data and Meeting Booklet

9th February 2017

## Level 3 Meeting Programme

## Mary Ward House, 5-7 Tavistock Place, London

| Time | Topic | Speaker / Chair |
| :---: | :---: | :---: |
| 1000-1030 | Arrival and Coffee |  |
| 1030-1040 | Welcome <br> Making the most of our opportunities to save lives | Ms Sally Johnson |
| 1040-1100 | Objectives | Dr Dale Gardiner |
| 1100-1215 | Best Practice Sharing Session (selected hospitals sharing their best practice) | Dr Dale Gardiner |
| 3 Breakout sessions (rotation through all three groups) <br> - Applying PDSA methods to Referral \& SNOD Involvement (James Van Der Walt/Gordon Turpie) <br> - CLOD Review Recommendations (Dale Gardiner) <br> - Promoting Organ Donation (Caroline Rodaway) |  |  |
| 1215-1300 | Break Out Session 1 |  |
| 1300-1345 | Lunch |  |
| 1345-1410 | Improving Organ Utilisation - the role of the donation community | Dr Paul Murphy |
| 1410-1455 | Break Out Session 2 |  |
| 1455-1510 | Coffee |  |
| 1510-1555 | Break Out Session 3 |  |
| 1555-1600 | Summary and Close | Dr Dale Gardiner |

## Speakers

Ms Sally Johnson - Director of Organ Donation and Transplantation
Dr Paul Murphy - National Clinical Lead for Organ Donation
Dr Dale Gardiner - Deputy National Clinical Lead for Organ Donation
Mr James Van Der Walt - Professional Development Specialist, ODT
Mr Gordon Turpie - Professional Development Specialist, ODT
Ms Caroline Rodaway - Senior Marketing \& Campaigns Officer, NHSBT

ORGAN DONATION
Categorisation of Donation Activity by Level
Level 112 or more proceeding donors per year (averaged over two years) ..... 33
Level 2
5-12 (>5 to < 12) proceeding donors ..... 45 per year (averaged over two years)
Level $3 \quad 3-5(\geq 3$ to $\leq 5)$ proceeding donors per ..... 47 year (averaged over two years) ..... 46

< 3 proceeding donors per year

< 3 proceeding donors per year  (averaged over two years)  (averaged over two years)
Level 4

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\text { = Level } 1
$$

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\begin{array}{ll}
5 \text { donors } & =\text { Level } 3 \\
3 \text { donors } & =\text { Level } 3
\end{array}
$$

An additional descriptor is applied to each hospital, as appropriate.

## N = Adult Neuro ICU (29)

P = Paediatric ICU (25)

## T = Major Trauma Centre (21) <br> - currently only applies in England pending possible changes in Northern Ireland, Scotland and Wales

## Examples

Level 1 (NPT), is a hospital Trust / Board that has 12 or more proceeding donors per year and also has a Neuro ICU, is a Major Trauma Centre and has a Paediatric ICU.
Level $3(P)$, is a hospital Trust / Board that has $\geq 3$ to $\leq 5$ proceeding donors per year and has a Paediatric ICU.

## UK Donation by Level

Level 1 Level $2 \quad$ Level $3 \quad$ Level 4

## Potential DBD/Eligible DCD donors

$1^{\text {st }}$ October $2015-30^{\text {th }}$ September 2016


Potential donors after brainstem death (DBD) are defined as patients who have neurological death suspected by meeting all of the following criteria: apnoea, coma from known aetiology and unresponsive, ventilated, fixed pupils. Excluding those for whom cardiac arrest occurred despite resuscitation, brain stem reflexes returned.
Eligible donors after circulatory death (DCD) are defined as patients who had treatment withdrawn and death was anticipated within four hours, with no absolute medical contraindications to solid organ donation.

## Actual donors

$1^{\text {st }}$ October $2015-30^{\text {th }}$ September 2016


## UK actual deceased donors

$1^{\text {st }}$ October 2006 - $30^{\text {th }}$ September 2016


## Level 3 Group actual deceased donors

$1^{\text {st }}$ October $2006-30^{\text {th }}$ September 2016


## Level 3 Group actual deceased donors

$1^{\text {st }}$ October 2014 - 30 th September 2016


## Level 3s neurological death testing rate

$1^{\text {st }}$ October 2014 - 30th September 2016


## Level 3s neurological death testing rate

 comparison$1^{\text {st }}$ October 2012 - 30th September 2016


## Level 3s DBD referral rate

$1^{\text {st }}$ October 2014 - 30th September 2016


Blood and Transplant

## Level 3s DBD SNOD involvement rate

$1^{\text {st }}$ October 2014 - 30th September 2016


## Level 3s DBD SNOD involvement rate comparison

$1^{\text {st }}$ October 2012 - 30th September 2016


- Significant increase at the 5\% level

Significant increase at the $10 \%$ level

- Significant decrease at the $5 \%$ level

Significant decrease at the $10 \%$ level

## Level 3s DBD consent/authorisation rate

$1^{\text {st }}$ October 2014 - 30th September 2016


## Level 3s DBD conversion rate

$1^{\text {st }}$ October 2014 - 30th September 2016


## Level 3s DBD conversion rate comparison

$1^{\text {st }}$ October 2012 - 30th September 2016
 at the $10 \%$ level at the $5 \%$ level

## Level 3s DCD referral rate

$1^{\text {st }}$ October 2014 - 30th September 2016


## Level 3s DCD referral rate comparison

$1^{\text {st }}$ October 2012 - 30th September 2016


- Significant increase at the $5 \%$ level

Significant increase at the $10 \%$ level

Significant decrease at the $5 \%$ level

Significant decrease at the $10 \%$ level

## Level 3s DCD SNOD involvement rate

$1^{\text {st }}$ October 2014 - 30th September 2016


## Level 3s DCD SNOD involvement rate comparison

$1^{\text {st }}$ October 2012 - 30th September 2016


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## Level 3s DCD consent/authorisation rate

$1^{\text {st }}$ October 2014 - 30th September 2016


## Level 3s DCD conversion rate

$1^{\text {st }}$ October 2014 - 30th September 2016

${ }^{\text {st }}$ October 2014 - $30^{\text {th }}$ September 2016


| Trust/Board | Neurological death testing rate \% (N) | DBD referral rate \% (N) | \% of approaches where SNOD involved \% (N) | DBD consent/authorisation rate \% (N) | $\begin{array}{\|l} \hline \text { DCD referral rate } \\ \%(N) \end{array}$ |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Aintree University Hospitals NHS Foundation Trust | 66.7 (9) | 100 (9) | 100 (5) | 80 (5) | 75.5 (98) |
| Ashford and St Peter's Hospitals NHS Foundation Trust | 75 (12) | 100 (12) | 100 (8) | 62.5 (8) | 76.3 (80) |
| Blackpool Teaching Hospitals NHS Foundation Trust | 88.9 (9) | 100 (9) | 100 (7) | 57.1 (7) | 87.5 (40) |
| Bradford Teaching Hospitals NHS Foundation Trust | 88.9 (18) | 100 (18) | 100 (13) | 46.2 (13) | 93 (43) |
| Buckinghamshire Healthcare NHS Trust | 90 (10) | 100 (10) | 83.3 (6) | 66.7 (6) | 93.5 (46) |
| Chesterfield Royal Hospital NHS Foundation Trust | 100 (5) | 100 (5) | 100 (5) | 80 (5) | 94.4 (18) |
| City Hospitals Sunderland NHS Foundation Trust | 92.9 (14) | 100 (14) | 100 (12) | 83.3 (12) | 94.9 (78) |
| Colchester Hospital University NHS Foundation Trust | 70 (10) | 90 (10) | 85.7 (7) | 85.7 (7) | 87.5 (64) |
| Countess Of Chester Hospital NHS Foundation Trust | 90.9 (11) | 100 (11) | 100 (9) | 88.9 (9) | 72.5 (40) |
| Doncaster and Bassetlaw Hospitals NHS Foundation Trust | 95 (20) | 100 (20) | 100 (15) | 66.7 (15) | 68.1 (47) |
| Dorset County Hospital NHS Foundation Trust | 100 (4) | 100 (4) | 50 (4) | 100 (4) | 73.3 (30) |
| Hampshire Hospitals NHS Foundation Trust | 81 (21) | 100 (21) | 100 (15) | 66.7 (15) | 81.4 (59) |
| Hywel Dda Health Board | 100 (8) | 100 (8) | 100 (8) | 87.5 (8) | 96.2 (79) |
| Ipswich Hospital NHS Trust | 66.7 (6) | 100 (6) | 100 (4) | 100 (4) | 81.6 (49) |
| Isle of Wight NHS Trust | 75 (4) | 100 (4) | 100 (3) | 66.7 (3) | 90.4 (52) |
| Lewisham and Greenwich Healthcare NHS Trust | 88.9 (18) | 100 (18) | 92.3 (13) | 38.5 (13) | 87.4 (143) |
| Luton and Dunstable University Hospital NHS Foundation Trust | 86.7 (15) | 100 (15) | 100 (12) | 58.3 (12) | 90.4 (52) |
| Maidstone and Tunbridge Wells NHS Trust | 93.3 (15) | 100 (15) | 75 (12) | 58.3 (12) | 72.7 (44) |
| Mid Yorkshire Hospitals NHS Trust | 82.6 (23) | 100 (23) | 85.7 (14) | 71.4 (14) | 92.5 (134) |
| Milton Keynes Hospital NHS Foundation Trust | 76.9 (13) | 100 (13) | 71.4 (7) | 42.9 (7) | 73.8 (65) |
| NHS Ayrshire and Arran | 90 (10) | 100 (10) | 100 (7) | 85.7 (7) | 70 (50) |
| NHS Dumfries and Galloway | 100 (10) | 100 (10) | 100 (9) | 88.9 (9) | 66.7 (3) |
| NHS Fife | 100 (13) | 100 (13) | 91.7 (12) | 83.3 (12) | 92.5 (40) |
| NHS Forth Valley | 92.3 (13) | 100 (13) | 54.5 (11) | 72.7 (11) | 88.2 (17) |
| NHS Highland | 75 (8) | 75 (8) | 60 (5) | 80 (5) | 53.6 (28) |
| North Middlesex University Hospital NHS Trust | 100 (13) | 100 (13) | 100 (9) | 44.4 (9) | 94.7 (38) |
| North Tees and Hartlepool NHS Foundation Trust | 75 (12) | 100 (12) | 100 (7) | 57.1 (7) | 92.7 (55) |
| Northampton General Hospital NHS Trust | 72.7 (11) | 100 (11) | 100 (6) | 83.3 (6) | 83.3 (66) |
| Northumbria Healthcare NHS Foundation Trust | 100 (10) | 100 (10) | 90 (10) | 100 (10) | 96.7 (122) |
| Papworth Hospital NHS Foundation Trust | 100 (1) | 100 (1) | 100 (1) | 100 (1) | 80.8 (73) |
| Pennine Acute Hospitals NHS Trust | 85.7 (21) | 100 (21) | 100 (16) | 56.3 (16) | 90 (140) |
| Poole Hospital NHS Foundation Trust | 100 (14) | 100 (14) | 33.3 (12) | 75 (12) | 60 (20) |
| Royal Berkshire NHS Foundation Trust | 85.7 (7) | 100 (7) | 100 (5) | 100 (5) | 91.1 (45) |
| Royal United Hospital Bath NHS Foundation Trust | 80 (5) | 100 (5) | 100 (4) | 75 (4) | 86.8 (38) |
| Sherwood Forest Hospitals NHS Foundation Trust | 66.7 (9) | 100 (9) | 66.7 (6) | 50 (6) | 79.5 (39) |
| South Devon Healthcare NHS Foundation Trust | 90 (10) | 100 (10) | 50 (8) | 50 (8) | 76.1 (46) |
| South Eastern Health and Social Care Trust | 86.7 (15) | 100 (15) | 100 (11) | 54.5 (11) | 87.9 (58) |
| South Warwickshire NHS Foundation Trust | 100 (4) | 100 (4) | 75 (4) | 100 (4) | 77.4 (31) |
| Southend University Hospital NHS Foundation Trust | 91.7 (12) | 100 (12) | 100 (11) | 90.9 (11) | 69.2 (13) |
| St Helens and Knowsley Hospitals NHS Trust | 75 (8) | 100 (8) | 100 (5) | 60 (5) | 94.9 (79) |
| Surrey and Sussex Healthcare NHS Trust | 90 (10) | 100 (10) | 100 (7) | 71.4 (7) | 72.1 (61) |
| Taunton and Somerset NHS Foundation Trust | 57.1 (7) | 100 (7) | 100 (3) | 100 (3) | 88 (25) |
| The Queen Elizabeth Hospital, King's Lynn NHS Foundation Trust | 50 (6) | 50 (6) | 100 (3) | 66.7 (3) | 76.7 (30) |
| Warrington and Halton Hospitals NHS Foundation Trust | 83.3 (12) | 100 (12) | 88.9 (9) | 66.7 (9) | 81.3 (32) |
| West Suffolk NHS Foundation Trust | 66.7 (6) | 100 (6) | 100 (4) | 100 (4) | 94.7 (38) |
| Wrightington, Wigan and Leigh NHS Foundation Trust | 100 (5) | 100 (5) | 100 (5) | 100 (5) | 72.4 (76) |
| Wye Valley NHS Trust | 66.7 (6) | 100 (6) | 100 (3) | 100 (3) | 91.7 (12) |

## Neurological death testing by level

$1^{\text {st }}$ October 2015 - 30th September 2016


## DBD referral

$1^{\text {st }}$ October 2015 - 30th September 2016


## DBD SNOD involvement

$1^{\text {st }}$ October 2015 - 30th September 2016


## DBD consent rate

$1^{\text {st }}$ October 2015 - 30th September 2016


## DCD referral

$1^{\text {st }}$ October 2015 - 30th September 2016


## DCD SNOD involvement

$1^{\text {st }}$ October 2015 - 30th September 2016


## DCD consent rate

$1^{\text {st }}$ October 2015 - 30th September 2016


## Applying PDSA methods

Guide to completing your PDSA cycle template


## Hints \& tips to help you complete your PDSA cycle

To Start: Identify issue to be addressed and drill down using 3 whys to create your primary goal.

## Each primary goal should have at least 1 PDSA cycle. Each cycle has 4 sections which are listed below:

1. Plan: Be clear about the primary goal you aim to change, the questions that need to be answered and what is expected to happen. Plan how the PDSA cycle will be carried out, specifying who will be responsible for implementing the plan, where and when it will be tested, what will be done and what the expected outcomes might be.

> 2. Do: Carry out the plan and record the agreed measures and outcomes carefully. Ensure that any problems or other unexpected events are also documented.
3. Study: Compare what the outcomes were to what you thought would happen. Ask those who were involved and study what actually happened, noting problems and other unexpected events. Summarise the outcome of the pilot.
4. Act: As a team decide what should happen next? Should the same primary goal be kept but the cycle repeated, should the primary goal be adapted and the cycle run again or should the cycle be stopped. Make the decision based on what was learnt from the PDSA cycle. It is possible that a single PDSA cycle will show a primary goal that can be achieved and be applied more widely or even adopted into routine practice. However, remember that several cycles might have to be run before a primary goal of a PDSA cycle is successfully adopted into normal practice.

Notes: when running PDSA cycles
-Don't think too big. Implement a small simple change as this is more likely to be successful.
-Don't be too vague or too detailed - some detail is needed but to a practical, not obsessive, level.
-Make sure the results are acted on.
-In practice more than one PDSA cycle can be run at a time as long as they are small and simple.


Cycle end date:
(St) Cycle start date:

- More education needed
- Use poster board in ED staff room to promote referral, and feedback results.
- Engage with ED to identify a local trigger
- To highlight with ED Consultants and Senior Nursing Team
- Run a $2^{\text {nd }}$ PDSA cycle on this goal
- Monitor through the Potential Donor Audit
- Review at Organ Donation Committee (ODC)
- Encourage ED attendance at ODC
$100 \%$ identification and referral of potential organ donors
- Ran PDSA cycle for 1 month
- 2 cases of potential donors not referred
- Both cases missed at the weekend
- To include Organ Donation trigger as part of End of Life paperwork
- Educate ED medical and nursing teams, cascade message.

Issue: | Why? |
| :--- |
|  |
|  |
| Cycle end date: |

## Level Three Hospitals (47)

| Key | Trust/Board |
| :--- | :--- |
| 1 | Aintree University Hospitals NHS Foundation Trust |
| 2 | Ashford and St Peter's Hospitals NHS Foundation Trust |
| 3 | Blackpool Teaching Hospitals NHS Foundation Trust |
| 4 | Bradford Teaching Hospitals NHS Foundation Trust |
| 5 | Buckinghamshire Healthcare NHS Trust |
| 6 | Chesterfield Royal Hospital NHS Foundation Trust |
| 7 | City Hospitals Sunderland NHS Foundation Trust |
| 8 | Colchester Hospital University NHS Foundation Trust |
| 9 | Countess Of Chester Hospital NHS Foundation Trust |
| 10 | Doncaster and Bassetlaw Hospitals NHS Foundation Trust |
| 11 | Dorset County Hospital NHS Foundation Trust |
| 12 | Hampshire Hospitals NHS Foundation Trust |
| 13 | Hywel Dda Health Board |
| 14 | Ipswich Hospital NHS Trust |
| 15 | Isle of Wight NHS Trust |
| 16 | Lewisham and Greenwich Healthcare NHS Trust |
| 17 | Luton and Dunstable University Hospital NHS Foundation Trust |
| 18 | Maidstone and Tunbridge Wells NHS Trust |
| 19 | Mid Yorkshire Hospitals NHS Trust |
| 20 | Milton Keynes Hospital NHS Foundation Trust |
| 21 | NHS Ayrshire and Arran |
| 22 | NHS Dumfries and Galloway |
| 23 | NHS Fife |
| 24 | NHS Forth Valley |
| 25 | NHS Highland |
| 26 | North Middlesex University Hospital NHS Trust |
| 27 | North Tees and Hartlepool NHS Foundation Trust |
| 28 | Northampton General Hospital NHS Trust |
| 29 | Northumbria Healthcare NHS Foundation Trust |
| 30 | Papworth Hospital NHS Foundation Trust |
| 31 | Pennine Acute Hospitals NHS Trust |
| 32 | Poole Hospital NHS Foundation Trust |
| 33 | Royal Berkshire NHS Foundation Trust |
| 34 | Royal United Hospital Bath NHS Foundation Trust |
| 35 | Sherwood Forest Hospitals NHS Foundation Trust |
| 36 | South Devon Healthcare NHS Foundation Trust |
| 37 | South Eastern Health and Social Care Trust |
| 38 | South Warwickshire NHS Foundation Trust |
| 39 | Southend University Hospital NHS Foundation Trust |
| 40 | St Helens and Knowsley Hospitals NHS Trust |
| 41 | Surrey and Sussex Healthcare NHS Trust |
| 42 | Taunton and Somerset NHS Foundation Trust |
| 43 | The Queen Elizabeth Hospital, King's Lynn NHS Foundation Trust |
| 44 | Warrington and Halton Hospitals NHS Foundation Trust |
| 45 | West Suffolk NHS Foundation Trust |
| 46 | Wrightington, Wigan and Leigh NHS Foundation Trust |
| 47 | Wye Valley NHS Trust |
|  |  |
| 1 |  |
| 1 |  |




[^0]:    - Significant increase at the 5\% level

    Significant increase at the 10\% level

    Significant decrease at the $5 \%$ level

    Significant decrease at the $10 \%$ level

