



Leading Improvements:  
Academic and data-driven outcomes



## Cornerstone of Cultivating the Relationship

- Identify, develop and refine a common agenda between the OPOs two busiest donor hospitals to increase heart procurement rates.
- Implement the donor management goal of repeat echocardiograms, post brain death declaration, through utilization of Organ Donation Steering Committees to provide an academic and data-driven approach to build and cultivate relationships
- Develop Ad Hoc Organ Donation Steering Committee to help support and advance set goal

## Ad Hoc Donation Steering Committee Development

Comprised of a small group of representatives that included: Hospital Liaisons, Physician Champions (MICU / NSICU Medical Directors, Critical Care Attending Physicians), Pharmacy, Transplant Center Administration and Transplant Surgeons

---

Commitment made to assist with endorsing donation policies, procedures and several important donation best practices; including the implementation of serial echocardiograms to improve cardiac donor outcomes.

---

## Academic and data-driven approach to build and cultivate relationships:

Commitment made to engage physicians:

- Extend invitations to physicians to attend regional and national donor management education offerings, resulted in an increased awareness and provided indispensable motivation to support the efforts to implement repeat echo.
- Established clear communication with Cardiologist regarding donor management goals after authorization is obtained.
- Rapid after action reviews and case reviews with Cardiologist and Echo Techs, provided an opportunity for engaged dialogue to focus on real time evidence based education on serial echos and transplanted results.

# Now for the test...implementing the donor management goal of obtaining serial echocardiograms

- ❖ Initially, many of the orders were met with Cardiologist refusing to repeat an echo 6-12 hours after initial echo was performed
- ❖ Unyts Hospital Development Team and Clinical Coordinators provided real time education to help Cardiologist understand the measures they were being ask to meet
- ❖ When needed, available Ad Hoc Donation Steering Committee Members were contacted to assist with providing support for donor management goal
- ❖ No order was refused after communication and education was provided
- ❖ Pockets of success were identified through the 24 month cycle with certain committee members and Cardiologists

# Implementation of Serial Echo Results

# Hospital A Serial Echocardiogram Data

**2016**

7 Serial echocardiograms performed

5 Showed improved cardiac function

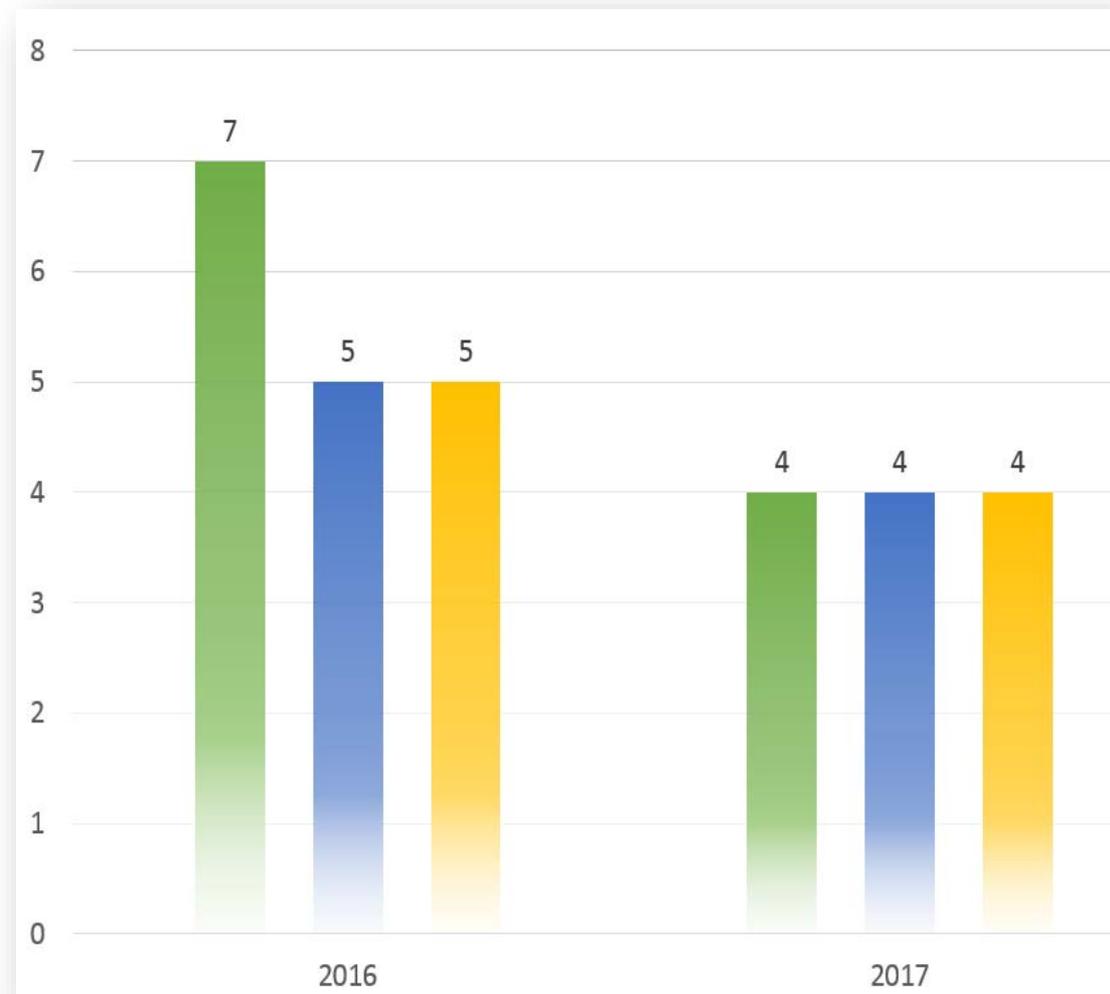
5 Hearts procured/transplanted

**2017**

4 Serial echocardiograms performed

4 Showed improved cardiac function

4 Hearts procured/transplanted



Donors w/ serial echos    Donors w/ Improved EF    Transplanted

# Hospital B Serial Echocardiogram Data

**2016**

2 Serial echocardiograms performed

2 Showed improved cardiac function

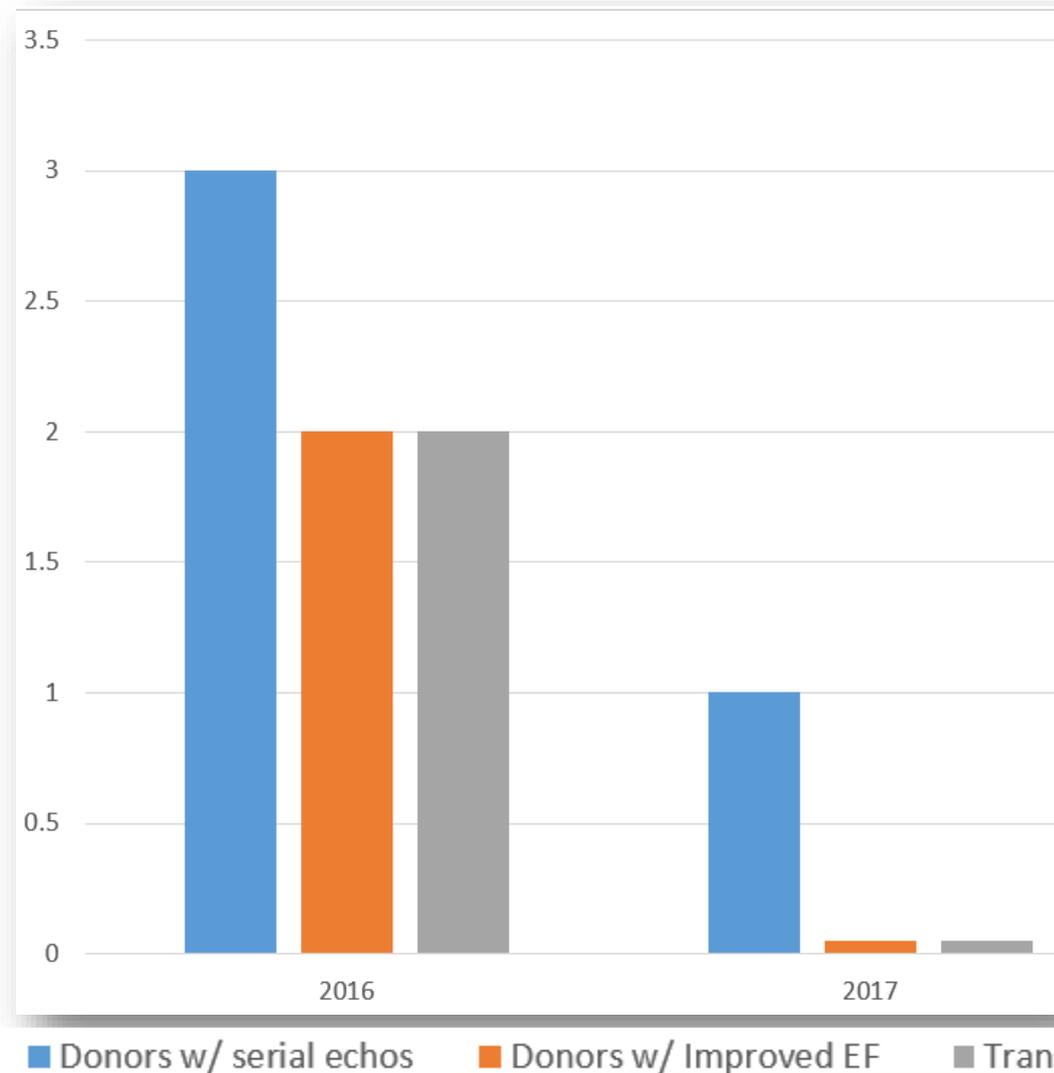
2 Hearts procured/transplanted

**2017**

1 Serial echocardiograms performed

0 Showed improved cardiac function

0 Hearts procured/transplanted



# Ad Hoc Donation Steering Committee Development Results

- The development of Ad Hoc Donation Steering Committees, at two of the OPO's busiest donor hospitals, was able to show improved cardiac donor outcomes.
- 11 hearts were procured and transplanted due to the utilization of serial echocardiograms.
- Committee Members are now "go to" Stakeholders that are available to assist with new donor management initiatives and new Ad Hoc Committees.
- Committee development proved that effective communications, coordination and collaboration between OPO & Hospitals, have been essential to the success of more hearts being placed with recipients.

Upcoming Hospital Quality Pilot Project:  
Opportunity for Action  
Missed Donor Opportunities

# Implementing Hospital Quality Review of Missed Donors

- Implement an OPO based PDSA to integrate variance reporting of missed potential organ donor deviations into the appropriate hospital quality program for documenting deviation or corrective actions.
- Unyts Medical Director *and/or* Hospital Development Manager will provide rapid early identification of missed potential organ donors and linkage to hospital quality.
- Missed potential organ donor findings will be presented to the hospital's Critical Care Quality Committee to address the measuring and improving of quality in organ referrals and potential organ donors.

# Implementing Hospital Quality Review of Missed Donors

- The objective of the quality committee will be to critically evaluate how a missed potential organ donor can be measured and how quality improvement projects can positively affect potential organ donors.
- Unyts will track progress of the hospital's follow up internally through deviation system.
- Unyts Hospital Development Manager will work with the hospital's quality team to assist with focus on change, improvement, and results.
- PDSA Cycle will begin in October 2018 / end in October 2019

thank you!