FOR YOUR EYES ONLY

Implementation of a pathway to improve rates of corneal donation within a hospice setting

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BACKGROUND

Within the UK there is a transplant shortage of approximately 500 corneas each year. Corneal transplant is a sight-saving procedure and corneal donation (CD) can be empowering for end of life patients who are otherwise unable to donate their organs. We set out to improve corneal donation rates within our organisation.

INTERVENTION

- Prior to our intervention there was no formal guidance on the process of CD or any records on organisation donation rates
- We arranged specialist local training in collaboration with NHS Blood & Transplant to train and educate Hospice staff on the process of CD
- Guidelines were implemented to facilitate conversations with patients, including a guide for both staff and patients on the process of CD
- Staff were afforded the opportunity to observe the corneal retrieval process to build confidence during discussions with patients and their relatives
- Further support was raised through information stands on the IPU and in the day care social unit (Pemberton Place), and discussions at our Learning Forum. We also held an emotive Schwartz Round with each panel member being directly involved with the CD process
- Consistent documentation was paramount using a traffic light system, visible on the IPU, where patients FOR CD (Green), CONSIDERING CD (Yellow) and NOT FOR CD (Red) helped to promote discussion and awareness
- Daily patient reports emailed to the wider Multi-Disciplinary Team helped to ensure all staff were kept updated and aware of our patient’s wishes

RESULTS

- Between November 2018 and November 2019 CD was discussed with 80% of patients admitted to the inpatient unit (IPU)
- This has resulted in 50 successful CDs, potentially restoring the sight of up to 500 people

FUTURE DIRECTIONS

- Despite these improvements, up to 30% of our potential donors have been missed
- One included a bariatric patient who was unable to be cooled within the six-hour time window, and a family who were unsure of the process in the community following the death of their loved one
- In view of this, the Hospice is in the process of (i) purchasing a cooling blanket and (ii) producing an information letter to give to patients explaining CD in the community

CONCLUSION

Our current donation rates suggest that our intervention has been successful. Data will continue to be collected and future aims include expanding the project into Hospice outpatient settings. To facilitate this, CD champions have been nominated to continue raising the awareness of CD across the organisation.

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