

Quality Improvement for Access to Living Kidney Donation for Black Patients: Co-ordinating Three London Units

A Gift of Living Donation (GOLD) Phone Buddy Initiative



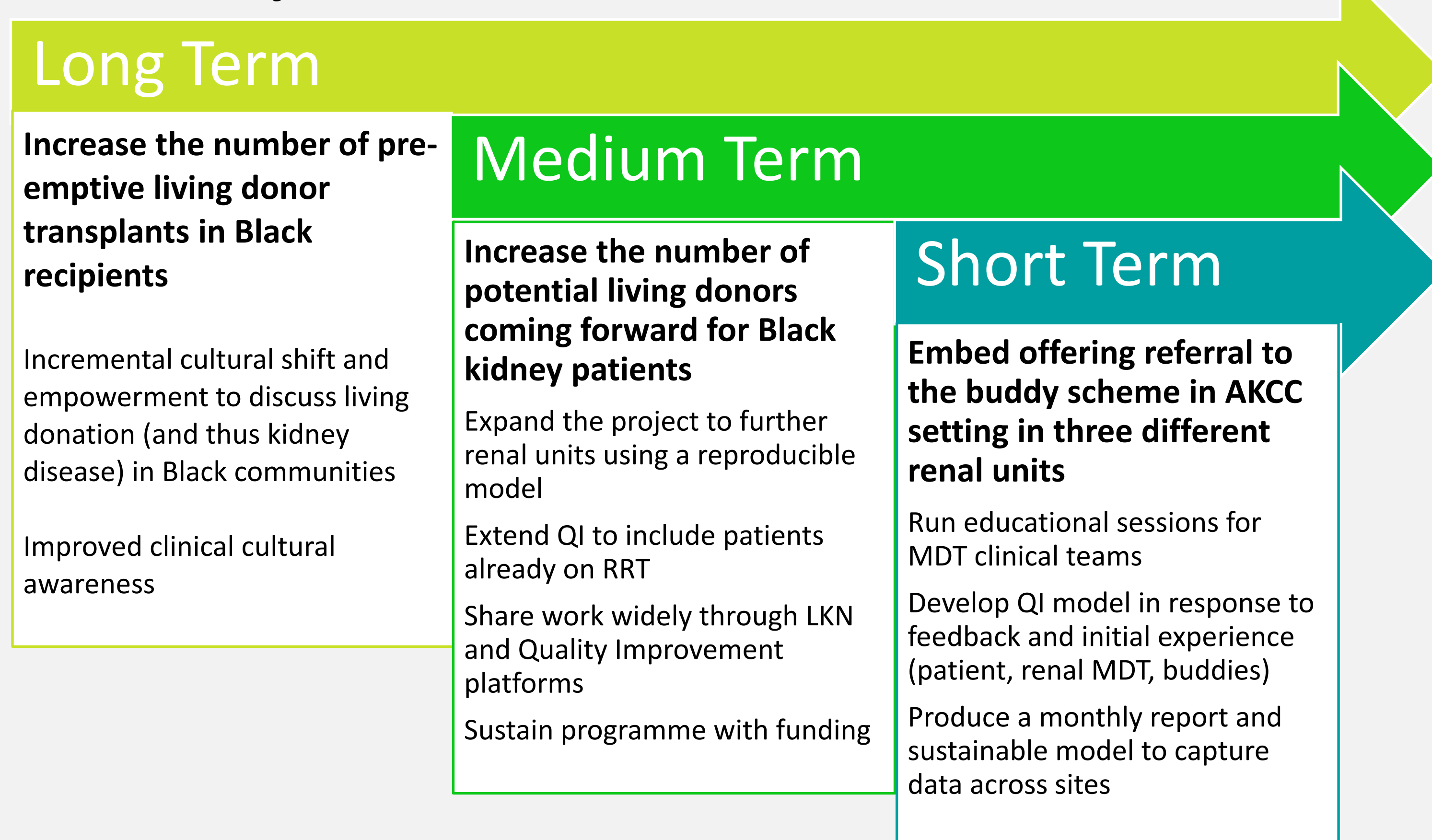
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Introduction

The rates of pre-emptive living donor kidney transplantation for Black kidney patients have not increased at the same rate as for those of white ethnicities in the UK.¹ Patient and public involvement work suggests that discussing living donor transplantation with a peer who understands both the experience as a kidney patient or living donor and as a member of the same community can help navigate the culturally specific difficulties of approaching the topic with family and friends. GOLD is a charity that works to raise awareness of pre-emptive living donation in the Black community; they developed a targeted phone buddy scheme for Black patients to discuss living kidney transplantation as a renal replacement therapy (RRT) option for suitable patients. We developed a Quality Improvement Programme (QIP) as a collaboration between GOLD, a multidisciplinary clinical team (MDT) across three kidney transplant centres and the London Kidney Network (LKN).

Aims and objectives over time



Methods

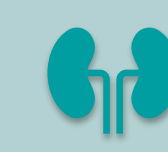
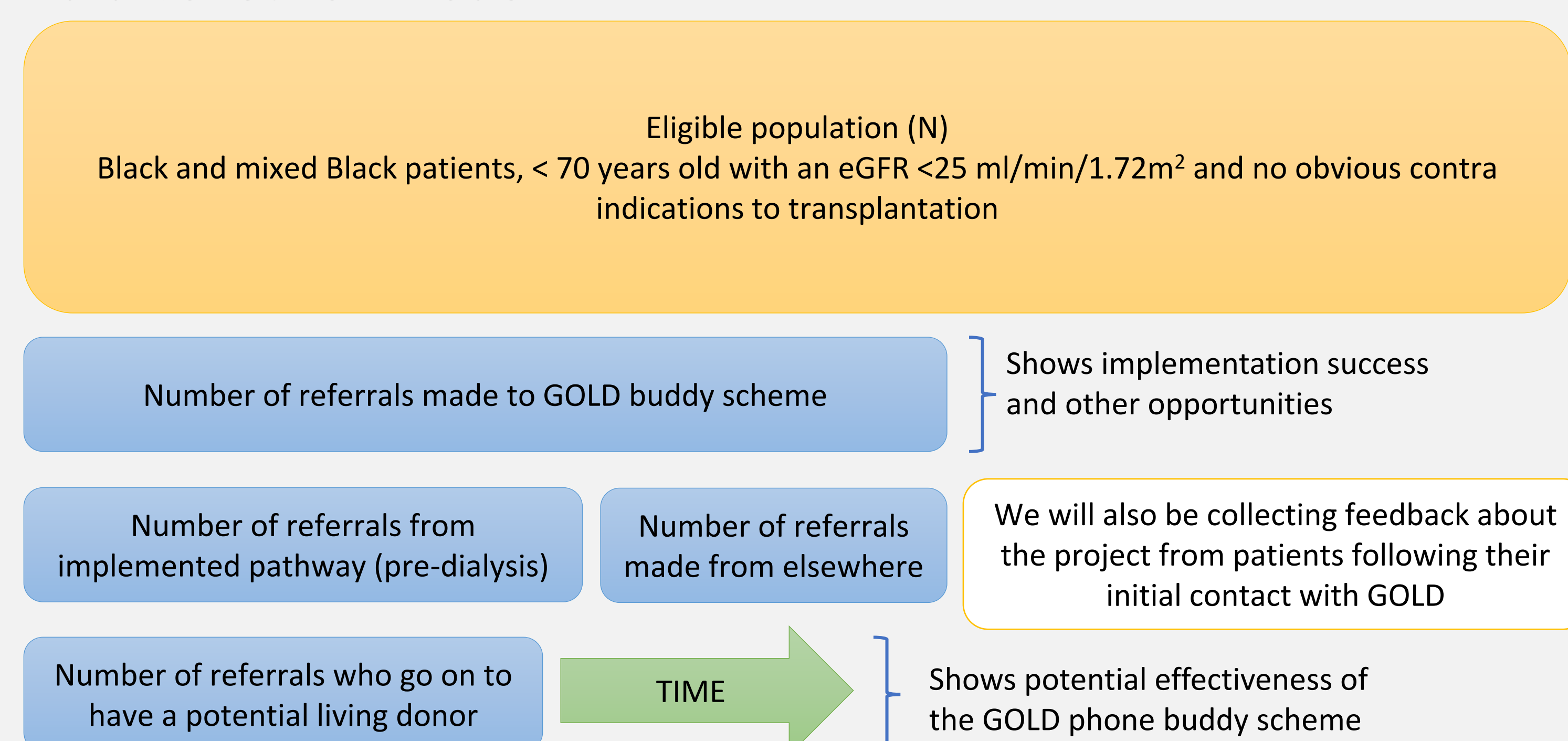
The QIP was designed to evaluate effective implementation of the phone buddy scheme in three kidney transplant centres. Three working groups were developed in each site (MDT advanced kidney care and transplant clinicians), a data team was established to retrieve and analyse the data (clinical research registrars) and an overall co-ordination team to ensure consistency (LKN, consultant transplant surgeon, GOLD).

Eligible patients were defined as Black and mixed Black patients with an eGFR of less than 25ml/min/1.73² below the age of 70 with no explicit contraindications to transplantation. Patients not yet on RRT were prioritised.

Each site developed a process map by which to implement routine offers to the phone buddy scheme to eligible patients. The data team collected the same effectiveness and implementation outcomes for each site on a combined database.

Parallel to this an education drive took place in both clinical and community settings.

Data Collection model



Core team – Dela Idowu (GOLD founder), Wendy Brown (LKN), Frank Dor (Transplant Surgeon)



Clinical teams at each site – MDT expert in advanced kidney care clinics and/or transplant who engage and refer eligible patients

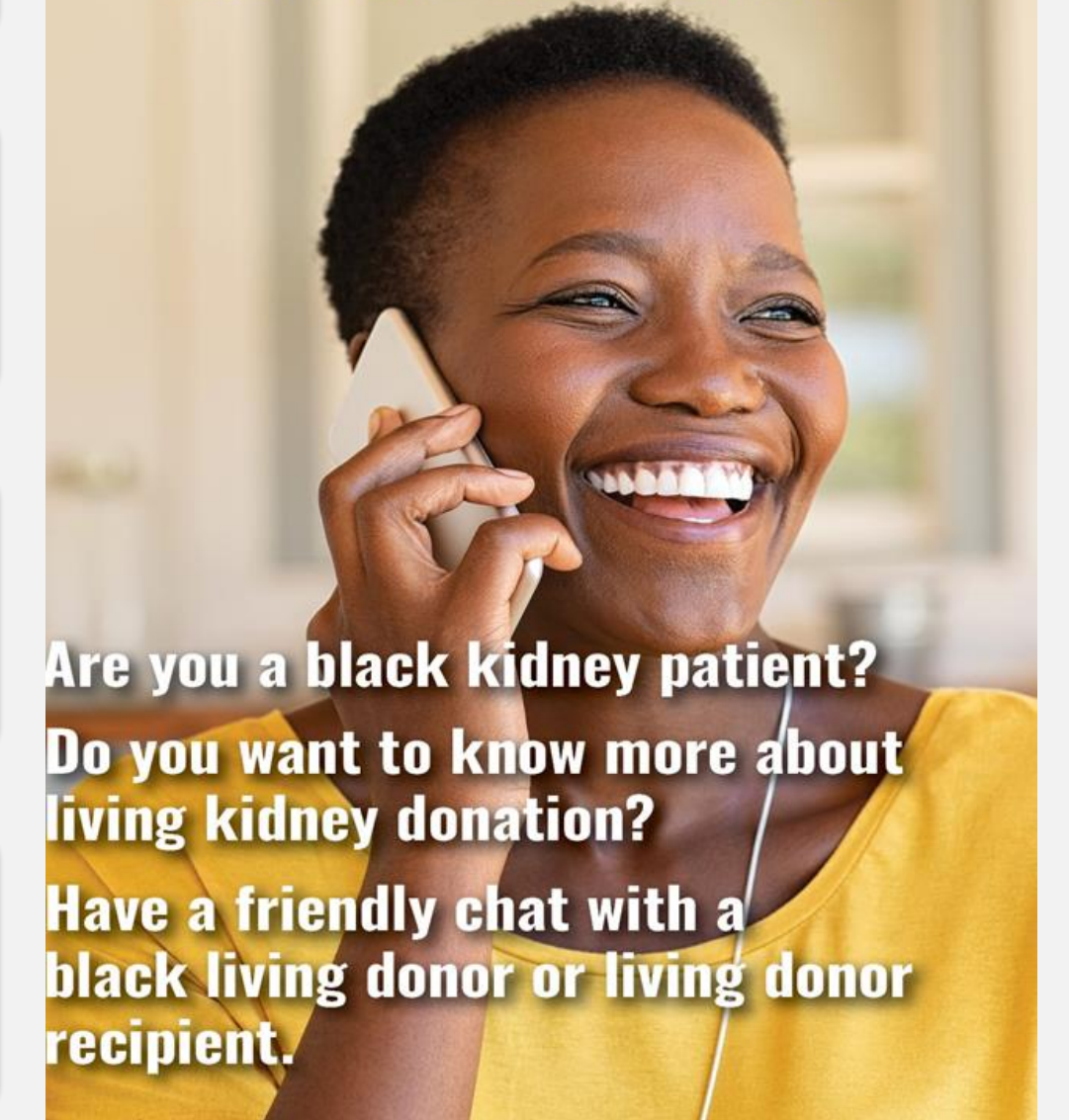


Data team – renal registrars with data analysis experience who collate data, aiming to minimise workload for clinical teams.



GOLD team – buddies with lived experience of living kidney donation who empower, share and engage with potential Black recipients

BLACK LIVING DONOR PEER PHONE BUDDY SCHEME



Are you a black kidney patient? Do you want to know more about living kidney donation? Have a friendly chat with a black living donor or living donor recipient.



Accurx facilitated secure batch SMS messages signposting the GOLD phone buddy to all eligible patients at Guy's and those actively listed at King's. The SMS content was approved by local governance teams, a behavioural psychologist and the GOLD peer buddies. This offers repeated opportunities to reach patients and aims to empower them to self refer.

Results

	Eligible population pre RRT*	Eligible population on RRT*	Referrals made to GOLD**	GOLD referrals who go on to have potential donors
Imperial College NHS Trust	391***		18	2
Guy's and St Thomas' NHS Trust	99	78	14	0
King's College NHS Trust	115	170	16	1

* numbers accurate as of May 2023 from rapidly changing databases

** since launch of GOLD QIP in February 2023

*** approximate number due to difficulties coordinating ethnicity data extraction from multiple sites within the Trust

The feedback from participating patients has been overwhelmingly positive. We are currently devising a formal framework to collect and present this data. We also regularly consider unintended consequences (such as inappropriate referrals) and will devise metrics for capturing this.

Discussion

This project embodies a unique QIP unifying three kidney transplant centres working towards more equal access to pre-emptive living donor transplantation in the Black community using a public and patient informed intervention. The development of different implementation methods, as well as operationalising routine data analysis, evolved over time and provided invaluable learning to the QI team. We continue to make these processes more robust at each centre through ongoing feedback and adaptation. The association between being referred to GOLD, discussing with a phone buddy and having a potential donor come forward are not necessarily causal; however, over time, the increase in discussions and absolute numbers of presenting potential donors for Black recipients as well as the reported patient experience will capture tangible benefit to transplant centres and Black kidney patients.

Next Steps

We hope to share this experience disseminating a tool kit to enable other centres to implement the GOLD QIP with bespoke options dependent on staff or service organisation but to be unified in collecting the same data points.

The QIP is intended to run over several years to embed referral to the phone buddy scheme into routine practice, ensuring all eligible Black patients are offered referral and thereby improving equity in access to living donor kidney transplantation.

References: 1. NHSBT Report of Kidney Activity, section 5, p50