Process Improvement in Living Donor Kidney Transplant Education

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BACKGROUND

- End-stage renal disease (ESRD) is a leading cause of death in the United States
- Organ availability is a major barrier to transplantation
- Living donor kidney transplant (LDKT) is the most optimal treatment and increases organ availability for transplantation
- Living donation is underutilized, and rates have plateaued over the last decade in many countries, including the United States

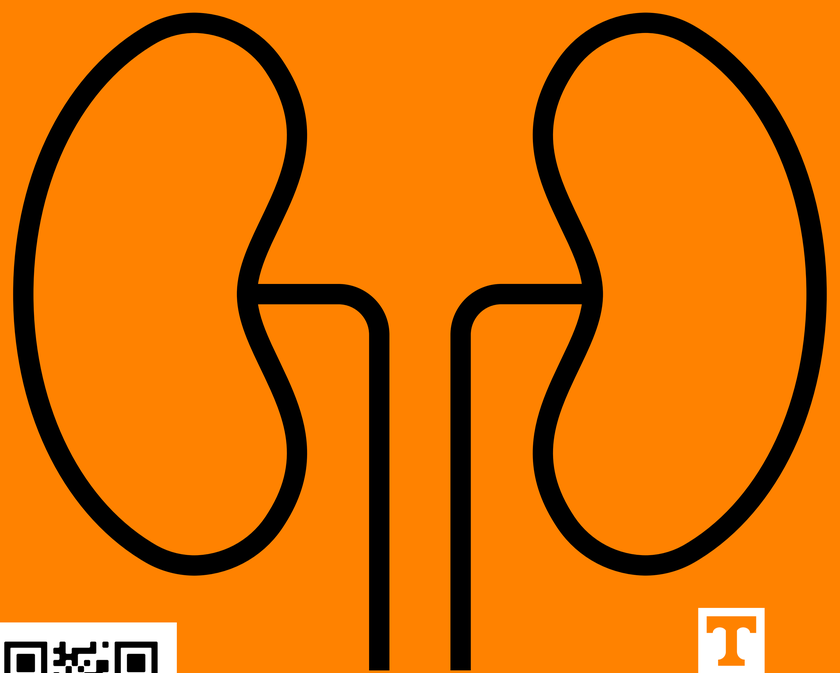
LOCAL PROBLEM

- ESRD is the tenth leading cause of death in the state of Tennessee
- Literature reveals that low level of education is a barrier to transplantation
- This project was completed at a single transplant center in Tennessee, that was found to have lower rates for LKDT than national benchmarks

METHODS

- This EBPQI project was guided by the Model for Improvement (MFI)
- Available literature was synthesized and determined to support a strong recommendation for a standardized LDKT-specific education process delivered in the home setting with inclusion of patients' support systems
- This evidence-based practice quality improvement (EBPQI) project was implemented to standardize patient education of living donor transplant through a patient education video and subsequent staff follow-up

An evidence-based education program on living donation improved patient readiness to pursue living kidney donor transplantation by 20%



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INTERVENTIONS

- A multilingual patient education video was provided in the home setting for patients to watch with their support systems
- Education was provided to the patients before their in-person transplant evaluation appointment
- Pre and post-intervention surveys were provided to patients to measure their level of readiness before and after the education intervention

RESULTS

- 20% improvement in patient readiness to pursue living donor transplant
- 100% of patients maintained or improved in readiness
- Staff adherence data were not captured due to staffing limitations

CONCLUSIONS

- A standardized, evidence-based education process positively impacted patient readiness to pursue LDKT
- Broader implementation could increase transplant rates, reduce wait times and achieve healthcare system cost savings, while moving the site closer to national benchmarks