

Organ Donation and Palliative Care Partnership in the Inpatient Hospital Setting Assures Optimal End-of-Life Care

Background:

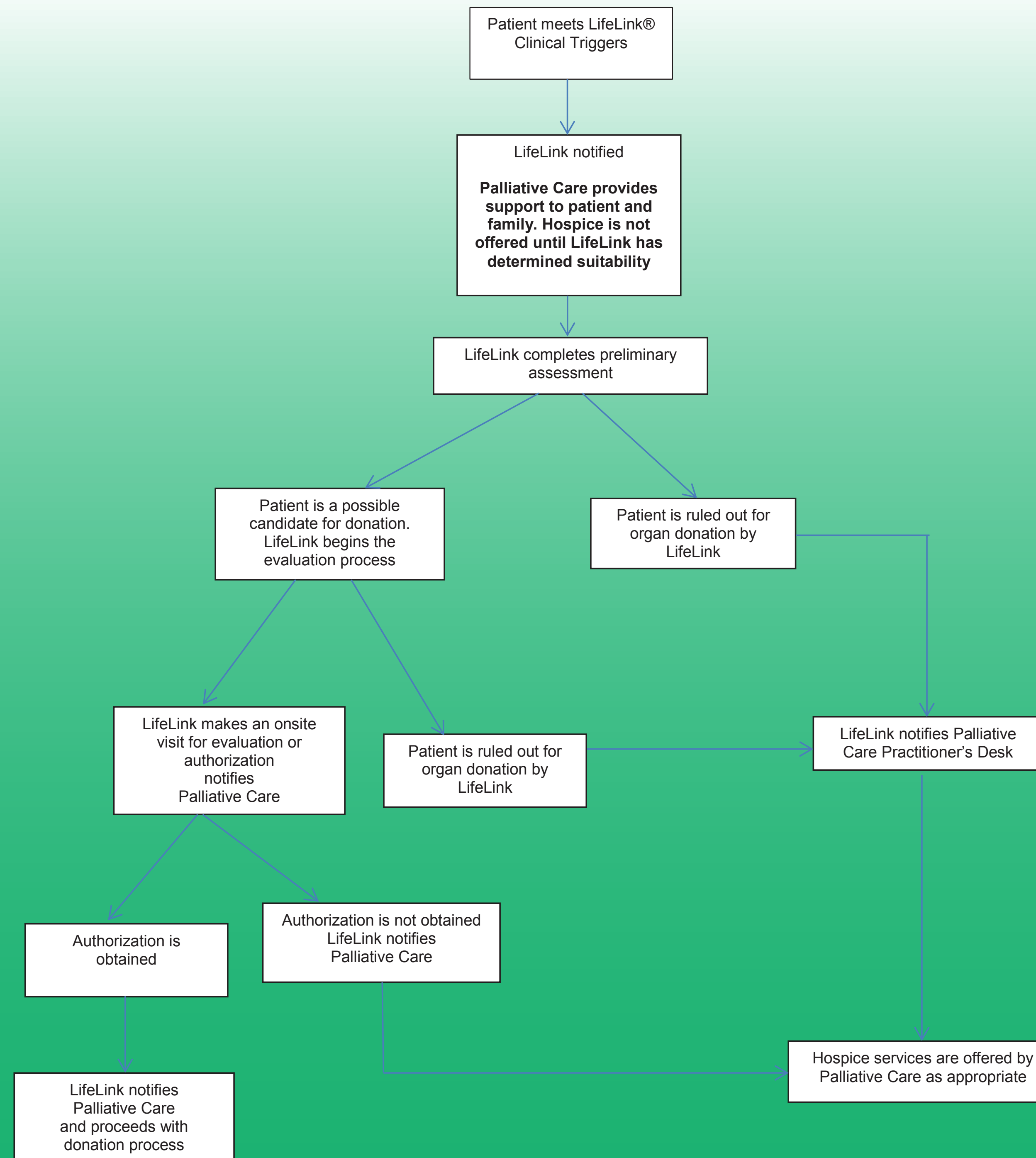
Hospital based inpatient hospice services offer an alternative approach to care for patients in critical condition whose goals support a transition to comfort. Without effective collaboration, patients may be removed from life-sustaining interventions prior to considering an opportunity of organ donation. Palliative Care (PC) provides an essential bridge between organ procurement organizations (OPO), primary medical teams, and the patient-family unit in assuring optimal end-of-life care.

Research Objectives:

To determine the influence of a PC and OPO collaboration on organ donation and inpatient hospice services.

Methods:

In April 2015, our institution began inpatient hospice services for physiologically unstable patients. In August 2015, our PC team established a collaboration with our OPO to ensure that goals for end-of-life care include the possibility of organ donation. The OPO notified the PC team of all new referrals and provided updates at key process points. The PC team screened new consults meeting OPO triggers to ensure referral. A flowchart was used to outline and assure bilateral communications.



Summary:

We demonstrate that this partnership created synergistic improvements in all services during a growth phase in the program development of PC and hospice at our institution. Through a cooperative protocol, we were able to assure that the values and needs of the patient and family were properly explored and honored.

Our results support an important leadership role for PC in establishing policies and practices that encourage collaboration with OPOs to assure optimal end-of-life care.

Results:

	November 2014 - April 2015 Prior to Study	May 2015 - October 2015 Transition Period	November 2015 - April 2016 Study Period
Organ Referrals	132	140	148
Organ Donors	10	10	16
PC Referrals	450	635	779
In-hospital Hospice Admissions	18	160	194