

COMFRT at end of life in ICU - Saving Other Lives and Giving Hope



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INTRODUCTION & AIMS

Sadly 15-20% of all Intensive Care Unit admissions pass away prior to hospital discharge. (1) The Faculty of Intensive Care Medicine recognises the importance of the end of life stage in a patient's journey and clinicians should be aware of the importance of a good death. The legal framework regarding organ donation in Scotland changed in March 2021 to an "opt out" system. We aim to share our experience of embedding organ donation into the end of life pathway, using the "COMFRT" tool, and assessing prescribing trends at the end of life in an intensive care following this change.

METHODS

Retrospective analysis of all patients admitted to, and passed away in, the Intensive Care Unit in Royal Alexandra Hospital, Paisley using Carevue™ and Wardwatcher software, over 2 year period (31st March 2021 – 31st March 2023). The use of the COMFRT tool in accordance with organ donation discussions, cornea and tissue donation consideration, palliative care input, and end of life prescribing was collected for this period. Prescribing practice was largely based on Guidance At End of Life (GAEL) guidance produced by NHS Greater Glasgow & Clyde.

RESULTS

168 patients were identified to have died during this period (7 passed away in different clinical setting following decision to change focus of care). There were 63.2% (n=103) males with mean age of 59.38 year. The COMFRT tool was utilised in 69% (n=116) of cases and completed fully in 91.3% (n=106) of those that used it. For cases where the tool was used, there was clear documentation of consideration of organ donation in 99.1% (n=115) of cases compared to 77% (n=40) in cases where the tool was not used. Regarding independent consideration of cornea and other tissue donation, there was clear documentation of this in 65.2% (n=75) in COMFRT tool patients compared to 46.2% (n=24) in cases that did not use the tool. A formal palliative care referral was completed for 7.7% (n=13) of all patients. Anticipatory Care Prescribing bundle was completed for 57.1% (n=96) of patients. Propofol infusion continued to be prescribed in 50.5% of all patients.

The COMFRT Tool

- Change of focus decision
- Organ donation considered?
- Medical documentation (DNACPR & EoL pathway)
- Do we need to wait for Family?
- Do we have room for Family?
- Religious and spiritual consideration
- Tasks to complete following death

DISCUSSION & CONCLUSIONS

The COMFRT tool was utilised in 69% of patients that passed away whilst admitted to the unit. Where the tool was used, there was a higher rate of organ donation consideration and documentation. It acts as a prompt for prescription of appropriate end of life medications for symptom control.

FUTURE WORK

- Ongoing monitoring use of COMFRT tool in the department and consider a temporal assessment with the introduction of the tool
- Departmental teaching on end of life care and offer simulation sessions for staff

REFERENCES

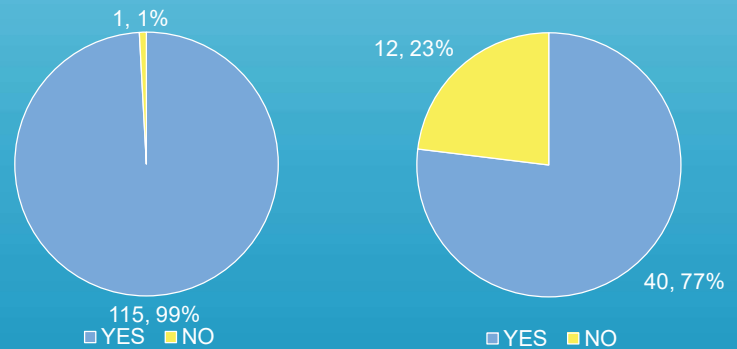
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FIGURE 1: DOCUMENTATION OF ORGAN DONATION IN CONJUNCTION WITH THE COMFRT TOOL.



Left chart demonstrates cases where the COMFRT tool was used. The right chart demonstrates cases where the tool was not used

FIGURE 2: PERCENTAGE OF CASES WHERE ANTICIPATORY CARE BUNDLE WAS FULLY PRESCRIBED

