

Title: Referral Revolution: Five Years of Increased Partner Engagement with the iReferral Portal for a Streamlined Referral Pathway

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Background: Traditionally, referring a decedent to an organ procurement organization or tissue bank involved time-consuming phone calls. This method diverted healthcare providers from other essential duties, including patient care, averaging 20 minutes per referral. As a result, frequent complaints were received regarding the cumbersome and lengthy nature of the referral process.

In 2019, our organization partnered with InVita Healthcare Technologies (formerly Transplant Connect) to adopt the iReferral Portal. This web-based referral system aims to streamline the initial referral process by replacing phone calls and is secured via the organization's IP address. Utilizing the iReferral Portal reduces the average referral time to a few minutes from initiation to completion of referral entry. The implementation of the iReferral Portal was expected to enhance referral efficiency, allow partners to focus more on patient needs and other responsibilities, and engage new and existing partners in the referral process.

Hypothesis: Over five years, the iReferral Portal will significantly reduce processing time, enhance partner engagement, and enable referring partners to prioritize other critical needs.

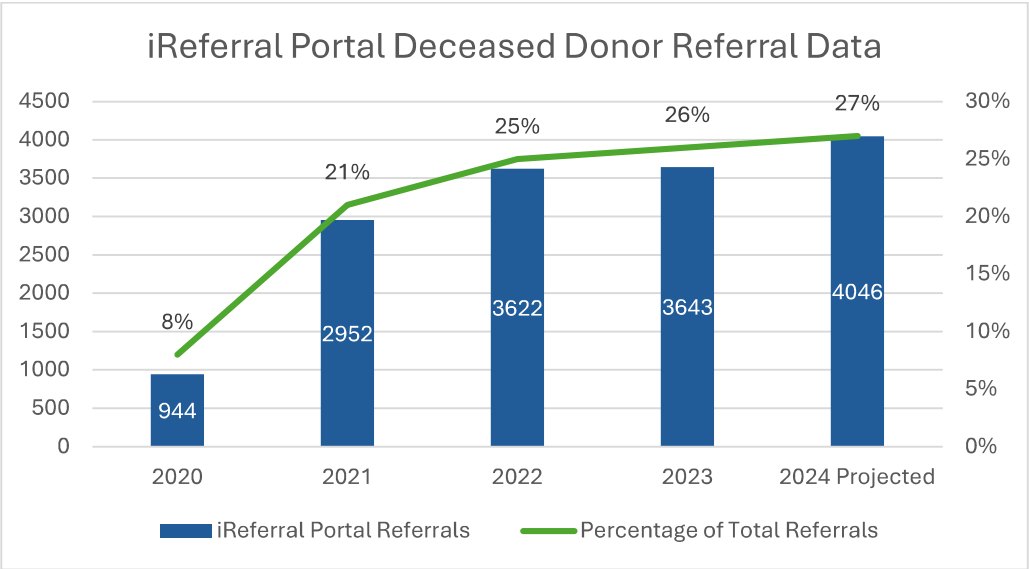
Methods: To enhance the efficiency and effectiveness of referral processes within our organization, we implemented the iReferral Portal through the following methods:

1. Developed training for internal departments.
2. Provided personalized training for partner organizations.
3. Engaged with administration and IT leadership for buy-in.
4. Redesigned educational materials with the portal's URL.
5. Strategically rolled out the portal across acute care hospitals, hospices, and more.
6. Evaluated referral data to measure portal utilization and impact.

Data: Over the course of five years, there has been a significant increase in partner engagement and utilization of the iReferral Portal. Key findings include:

- 1. **Increased Partner Adoption:** The number of partner organizations utilizing the iReferral Portal has grown steadily year-over-year, expanding from hospitals to public safety organizations, hospices, and coroner and medical examiner offices.
- 2. **Total Deceased Referrals:** The total number of deceased referrals processed through the iReferral Portal has significantly increased over the five-year period, from 944 referrals to a projected 4,046 referrals, representing a 328% increase.
- 3. **Percentage of Referrals:** There has been a notable increase in the percentage of deceased referrals facilitated through the iReferral Portal, indicating its growing acceptance and integration into partner workflows. Over the five-year span, the percentage of iReferral Portal referrals grew from 8% to 27%, marking a 237% increase.

Graph 1. iReferral Portal Deceased Donor Referral Data



Conclusions: The iReferral Portal enhanced partner engagement and referral efficiency, supporting seamless communication and reducing referral time. Future steps include implementing the portal for birth tissue referrals to streamline collaboration across donation service lines.

Referral Revolution: Five Years of Increased Partner Engagement with the iReferral Portal for a Streamlined Referral Pathway

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Background: Traditionally, the process for referring a decedent to an organ procurement organization or tissue bank involved making phone calls to convey all necessary patient details for donation evaluation, family approach, and tissue placement. This method is time-consuming and diverts healthcare providers from other essential duties, including patient care. Historically, the process of referring a patient through traditional means averaged 20 minutes per referral. As a result, frequent complaints were received regarding the cumbersome and lengthy nature of the referral process.

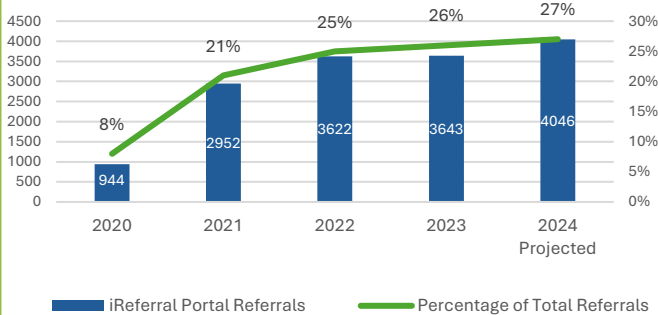
To address these challenges, Nevada Donor Network partnered with InVita Healthcare Technologies (formerly Transplant Connect) to adopt the iReferral Portal in 2019. This web-based referral system streamlines the initial referral process by replacing phone calls and is secured via the referring organization's public IP address. Utilizing the iReferral Portal reduces the average referral time to a few minutes from initiation to completion of referral entry. The expectation of the implementation of the iReferral Portal is to enhance referral efficiency, allow healthcare providers to focus more on patient needs and other responsibilities, and engage new and existing partners in the referral process to increase donation opportunities.

Hypothesis: Over a five-year period, implementing the iReferral Portal will significantly reduce referral processing time, enhancing partner engagement and enabling partners to dedicate more time to patient care and critical responsibilities.

Methods: To enhance the efficiency and effectiveness of referral processes within our organization, we implemented the iReferral Portal. The following methods were employed to facilitate its adoption and evaluate its impact over a five-year period:

1. **Internal Training Development:** Training sessions were developed and delivered to internal departments to ensure seamless integration and utilization of the iReferral Portal for receiving referrals.
2. **Partner Organization Training:** Personalized training programs were designed for partner organizations interested in using the iReferral Portal. These included hands-on sessions, formal classroom instruction, and online modules via our Learning Management System (LMS).
3. **Engagement with Administration and IT Leadership:** Meetings were conducted with the administration and IT leadership of partner organizations to explain the portal's benefits and secure buy-in for its implementation.
4. **Redesign of Educational Materials:** Educational materials were updated to incorporate the iReferral Portal's unique URL and were distributed widely through trigger cards, mouse pads, posters, and presentations.
5. **Strategic Implementation Rollout:** The iReferral Portal was strategically rolled out, initially targeting acute care hospitals, followed by hospices, public safety offices, and various healthcare facilities as referral options.
6. **Data Review and Evaluation:** Referral sourcing data was systematically reviewed to evaluate the growth in utilization of the iReferral Portal and assess its impact on referral rates over the study period.

Graph 1. iReferral Portal Deceased Donor Referral Data



Data: Over the course of five years, partner engagement and utilization of the iReferral Portal significantly increased. Key findings include:

1. **Increased Partner Adoption:** The number of partner organizations utilizing the iReferral Portal grew steadily year-over-year. The first partner organizations to adopt the iReferral Portal were acute care hospitals. Given the simplicity of implementation, the iReferral Portal has since been adopted by police and fire organizations, coroner and medical examiner offices, hospices, and emergency medical service organizations.
2. **Total Deceased Referrals:** The total number of deceased referrals processed through the iReferral Portal has significantly increased over the five-year period, rising from 944 referrals initially to a projected 4,046 referrals. This represents a substantial 328% increase in total iReferral Portal referrals and is represented in Graph 1.
3. **Percentage of Referrals:** There has been a notable increase in the percentage of deceased referrals facilitated through the iReferral Portal compared to the traditional phone method, indicating its growing acceptance and integration into partner workflows. Over the five-year span, the percentage of deceased referrals made through the iReferral Portal grew from 8% to 27%, marking a substantial 237% increase. This data is represented in Graph 1.

These results highlight the successful adoption and increasing utilization of the iReferral Portal, underscoring its role in enhancing partner engagement and streamlining referral processes within our organization.

Conclusions: The implementation of the iReferral Portal has resulted in substantial improvements in partner engagement and efficiency in referral processes over a five-year period. The significant increase in both the total number of deceased referrals processed through the portal and the percentage of referrals submitted via the iReferral Portal underscores its effectiveness in the continuous growth of use and adoption. These findings highlight the iReferral Portal's role in enhancing organizational workflows, facilitating seamless communication among donation partners, and ultimately reducing the amount of time spent on the referral process.

Moving forward, the next phase of our iReferral Portal initiative involves extending the use of the portal to include birth tissue referrals. By implementing the portal for clinics, Women's Services hospital departments, and providers alike, we aim to streamline the direct birth tissue referral process. Additionally, Nevada Donor Network intends to implement InVita's referral solution that is integrated directly with hospital electronic medical record systems where applicable, which will further enhance collaboration and efficiency across donation service lines.