

Value-Added Dollars from PD Contract Support Innovation, Improve Peritoneal Dialysis Care

Value-added funds from a provincial contract negotiated by BC Renal and the Provincial Health Services Authority Supply Chain improve care for peritoneal dialysis (PD) patients and quality of work-life for clinicians across BC.



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While a portion of these funds is used at the provincial level to support PD initiatives of the BC renal network, the majority is allocated to health authority PD programs to meet diverse needs at the local level. Collectively the objective is to optimize the prevalence of PD throughout BC, and to ensure quality PD patient care and enhanced staff knowledge and expertise.

Value-Added Funds Support Provincial PD Initiatives

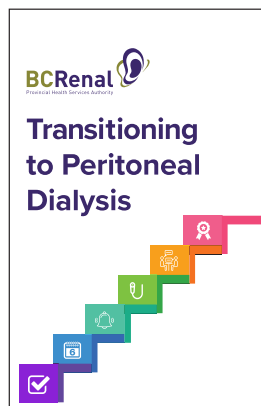
BC Renal is dedicated to ensuring all end-stage renal patients are considered for home therapies. In 2018/19, value-added funds were used to support initiatives aimed at increasing PD uptake across health authority programs, as well as to ensure high quality care.

Standardized PD Guidelines, Procedures and Patient Materials

PD value-added funds support the ongoing development and implementation of a wide range of standardized, provincial tools for PD care providers and patients, including guidelines and procedures. In 2018/19, this included documentation to support PD patients who travel, multiple PD procedures (ranging from the addition of medication to dialysate solutions to transfer set changes) and the development of transitions guides for PD patients and care teams.

Patient and Care Team Transition Guides

Every kidney patient's health journey includes major transition points during their disease progression, and each change requires navigating a complex health care system and interactions with various care teams. This can lead to additional stress, extended timeframes and even an inability to successfully transition to a new modality of care, such as PD. To better



support patients, BC Renal developed a series of complementary care team and patient guides for these major transition points, including to PD.

The PD transition guides, which outline the steps required to successfully transition to this independent dialysis modality, were developed with significant input from patients who had recently trained for and started PD treatment. The transition guides will be rolled out in the fall 2019.

Guidelines, procedures and various patient and provider tools can be found on the BC Renal website (bcrenalagency.ca) in the PD sections under 'Health Professionals' and 'Health Info'.

Provincial Committee Participation

Sharing outcomes with provincial renal partners through the BC Renal network of committees can guide and consolidate practice. It also provides opportunities for engagement and networking, as well as incentives for quality improvement initiatives, and a chance to discuss current and emerging practices. Access to PD value added funds for these opportunities has been invaluable for sustainable staff training and education.

New Technology for Treatment and Education

In 2018/19, BC Renal conducted a comprehensive assessment and evaluation of a new PD cyclor with remote monitoring capabilities. The funds were used to complete the evaluation from one site in BC and also

meet provincial privacy requirements. This cyclor has been approved by the BC Renal PD committee for provincial implementation starting in the fall of 2019.

To support patients in accessing BC Renal's PD e-learning modules during their training, as well as to gather their input to improve care on an ongoing basis, BC Renal purchased iPads for use across PD clinics in BC.

Nephrology Fellows

A key component of the BC Renal mandate is to support knowledge development through research and teaching, as well as succession planning within the broader renal network. One strategy to achieve this goal is the funding of a home therapies fellowship. More information is available on the BC Renal website – go to bcrenalagency.ca and click on 'Careers'.

Value-Added Funds Supporting Regional PD Initiatives

At the health authority level, projects and activities supported by value-added funding in 2018/19 included the following:

Staff Education and Training



Access to ongoing staff education and knowledge exchange is a significant contributor to job satisfaction and quality of work-life, as well as the ongoing delivery of best practice PD care. By participating in education programs, team-building activities, attending conferences, workshops and provincial meetings, as well as having access to journal subscriptions, PD professionals learn about emerging practices and innovative initiatives, and are able to share this information with their renal programs.

Last year, funds were used to sponsor health authority staff participation

in the following conferences, workshops and events, among others:

- International Society of Peritoneal Dialysis
- BC Kidney Days
- Canadian Society of Nephrology (CSN)
- Canadian Association of Nephrology Nurses & Technologists (CANNT)
- Canadian Association of Nephrology Social Workers (CANSW)
- National Kidney Foundation Annual Scientific Meeting
- Northwest Dietitians Conference
- American Nurses Nephrology Association Conference
- Annual Dialysis Conference
- World Congress of Nephrology
- BC Renal PD committee meetings
- BC Renal PD nurses group meetings

PD Nurses Training

The BCIT PD advanced online course supports the learning needs of nurses working in PD units in BC. This course provides the theoretical knowledge required to work in a PD unit. The challenge of an aging workforce has impacted PD programs in BC. This has been a significant educational strategy to ensure programs are staffed with knowledgeable nurses who can quickly orientate in their respective PD unit. Last year, value-added funds were used to sponsor the participation of 11 PD nurses in the BCIT advanced online PD education course.

Patient Education and Training

Ensuring quality in all aspects of patient education helps encourage patient self-management, improves quality of life and supports positive health outcomes. A portion of PD value-added funds is consistently dedicated by health authority renal programs to advancing education and training in peritoneal dialysis for eligible patients.

PD Home Visits – Interior Health

Interior Health renal program dedicated part of the PD value-added funds to support nurse home visits to PD patients across the region. Observations by the nurse provided opportunities to increase patients' awareness of the possible contamination sources during PD treatment at home, and the renal program anticipates a reduction in peritonitis rates as a result of this pilot project. The experience and learning from the project will be shared and can be used by PD programs in the region and across the province to offer home visits as a peritonitis prevention strategy.

Patient Education and Training – Northern Health

In a similar fashion to Interior Health, Northern Health renal program places a significant emphasis on supporting PD patients in their homes to help them transition to and stay on this independent therapy. Providing visits to patients in their own homes allows the PD team to assess the challenges and opportunities in their individual care. Patients greatly benefit from this support and are able to remain independent in their care management. Educating other care partners in rural areas increases the capacity and reach of the Northern Health renal program, enhances



other care providers' knowledge of PD and enables them to provide basic support to patients in their home communities. The renal program organized one trip to the northwest region in 2018-2019, and is planning to do two trips in 2019-2020.

Diabetes Management in PD Patients – Interior Health

Interior Health renal program embarked on a pilot project to realign clinic structure at one of its sites to support regular nurse practitioner assessments of PD patients who have diabetes. The renal program anticipates that a more robust partnership with patients will result in better management of PD patients living with diabetes as well as serve as a model to inform other programs' efforts to provide similar services.

Independent Dialysis Improvement Project – Island Health

Island Health renal program used a portion of the dedicated PD funds for a project to identify and address gaps in the renal program's systems and processes that might prevent patients from transitioning to an independent dialysis modality. The project resulted in several key learnings, including identifying some modifiable causes that contribute

to attrition and a lower success rate in adopting the chosen independent modality. Going forward, the renal program anticipates implementing several strategic improvements, including more reliable data entry, clearer processes for modality selection, better knowledge and strategies for sharing opportunities among care providers, etc. Work on this initiative is expected to continue in the next fiscal year and should ultimately increase the uptake of home therapies across the region.

Rehab Nurse Training in PD – Vancouver Coastal Health / Providence Health Care

A collaboration between St. Paul's Hospital and Vancouver General Hospital renal programs, kidney care providers trained rehabilitation unit nurses to provide care to PD patients who require rehab services. As a result, all PD patients who are appropriate candidates can be transferred to the rehabilitation unit post amputation or stroke to continue their recovery. This will decrease length of stay in the acute care setting and potentially help patients return home earlier with concentrated rehabilitation services.