



Highlights from 2018-2019



Although a portion of these funds is used to support cross-provincial initiatives of the BC renal network, the majority is allocated to health authority renal programs (HARPs) to meet diverse needs at the local level.

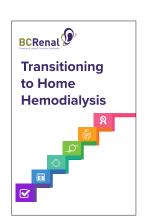
Value-Added Funds Support Provincial Initiatives

Patient Education Tools

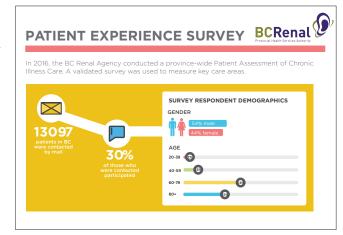
Value-added dollars continue to support the development and enhancement of a range of patient education materials that promote patient self-management and improved health outcomes. In 2018/19, these included patient handouts and tools on a range of topics, including vascular access care, preparing to stop dialysis and palliative care, diet and nutrition, infection control, glomerulonephritis medication protocols and hemodialysis and travel.

Patient 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. To better support patients, BC Renal developed a series of complementary care team and patient guides that provide step by step information on what happens during transitions and support the active role patients have in their health care decisions. The transition guides will be rolled out in the fall 2019.



Patient Experience Survey

Over the past ten years, BC Renal has conducted three province-wide patient experience surveys. Provincial and modality-specific reports from the last survey are available on the BC Renal <u>website</u>, and health authority reports have been distributed to the programs. Focus groups will be held into fall 2019 to better understand the results and focus efforts on improvement across all areas of care.

Initiatives such as the patient experience survey and other patient engagement strategies help inform strategic decision-making and long-term kidney care planning, evaluation of the overall system's performance and underpin research efforts.

Supporting Meaningful Patient Engagement

Increasing patient engagement and representation in health care improvement activities and planning is a key priority for BC Renal and the provincial renal network, as we work to enhance patient-centred









care. To support this goal, a working group launched in early 2019, with 15 members from across the province, including patients, health professionals, and BC Renal staff members. The working group's first objective was to develop a framework for patient engagement for use across provincial renal committees and key activities, which will be launched in the fall of 2019.

Modality Choices

Value added funds were used to update a comprehensive Modality Choices presentation, including versions in Chinese and Punjabi. The audio-visual presentation, which utilizes adult education best practice methods, is designed to inform patients about treatment options for when their kidneys fail and support them in making the right choice for themselves.

Transplant First Initiative

A successful kidney transplant from a living donor can as much as triple a patient's life expectancy; however, conversations to invite people to become kidney donors can often pose a challenge. The Transplant First initiative, a partnership between BC Renal, BC Transplant, the BC health authorities and the Kidney Foundation of Canada, promotes the benefits of pre-emptive transplants and provides tools to help patients find donors. Since its launch, conversations with prospective recipients about living donation have increased more than threefold, and the number of referrals initiated for transplant and the number of living donor referrals have also increased by 13 and 19 per cent respectively. A first in Canada, the initiative has received a BC Health Care Award and national attention, inspiring other provinces to adopt similar programs.

BC Renal Website

Value-added dollars continue to support ongoing development of the BC Renal website to ensure intuitive navigation and enhanced search functionality. New information and tools for patients and care teams are added to the website on a regular basis, as well as our <u>YouTube channel</u>. In fact, our most popular documents have been viewed between 50,000-75,000 times over the past two years.

Serious Illness Conversation Guide Training

End-of-life conversations are difficult to have with kidney patients. The Serious Illness Conversation Guide workshop provides training to renal care professionals on how to have those conversations in a thoughtful and structured way. This year BC Renal supported multiple renal care professionals across health authorities to attend the training, which will enhance local advance care planning efforts for their patients.

Tools to Support Advance Care Planning

The Integrated Palliative Care project focused on the development of tools to support patients and renal care professionals. "Stopping Dialysis Treatment: What You Need to Know Before Deciding" and "Frequently Asked Questions about Stopping Dialysis Treatment: A Guide for Patients and Families" support patients as they explore difficult end-of-life decisions with their health care professional and families.

"Recommendations to Support End-Stage Kidney Disease Patients in Their Last Days to Hours of Life" supports health care professionals to provide high quality palliative care to renal patients across the province. The recommendations have been made available to family physicians across BC through the Divisions of Family Practice website and in the BC Medical Journal.

Over the past decade, BC has established itself as a global leader in renal palliative care. In October 2018, the chair of the BC Renal Palliative Care Committee (PCC) made a <u>poster presentation</u> at the International Congress on Palliative Care about "Mobilizing Culture Change for Quality Palliative Care in BC Patients with CKD."

PROMIS Enhancement

PROMIS is an integrated, provincial information system for renal and transplant care provided to over 24,400 patients in BC. It provides real-time, accurate data to over 1,500 users, supporting a broad range of clinical, administrative, QI and research activities, all of which are focused on two key outcomes: better health for kidney and transplant patients, and the best use of healthcare resources. The PROMIS team, working with a clinical design working group of 50+ stakeholders from all health authority renal programs, continues to work on a comprehensive rebuild of the PROMIS application to ensure it continues to meet the expectations and support the mandates of the renal and transplant communities.



BC Kidney Days Supports Knowledge Translation

Value-added funds support the annual <u>BC Kidney Days</u> (BCKD) conference, jointly hosted by BC Renal and BC Transplant. BCKD brings together up to 500 clinicians and administrators from across BC, other parts of Canada and the United States to discuss the latest research, trends, clinical treatments and surgicalbreakthroughs in kidney patient care. The conference provides education, networking and knowledge sharing opportunities that support the delivery of optimal care to patients with kidney disease.

Support for Provincial Committee Initiatives

Value-added funds support the ongoing work of a range of BC Renal provincial committees (Kidney Care, Hemodialysis, Home Hemodialysis, Peritoneal Dialysis, Palliative, Pharmacy, etc.). These committees provide a forum for province-wide, multidisciplinary collaboration and knowledge sharing related to kidney disease care and management. The committees are involved in a range of projects and produce a variety of evidence-based, provincial guidelines that help improve the care of kidney patients

in BC. Guidelines and patient education tools developed by these committees are available on the BC Renal website at <u>bcrenalagency.ca</u> in the <u>'Health Info'</u> and <u>'Health Professionals'</u> sections.

Kidney Month Campaign and World Kidney Day

Every March (Kidney Health Month) and on World Kidney Day (the second Thursday of March), BC Renal collaborates with the Kidney Foundation of Canada, BC and Yukon Branch, on a multifaceted kidney health public awareness campaign, with a focus on at-risk populations. This year the campaign included a new video ("Could you lose 80%?"), a new web page (kidneyhealthcheck.ca), both traditional and social media advertising, an online #kidneyhealthchallenge, a public event and significant partner involvement.

Key Outcomes:

- Online advertising and posts: > 900,000 impressions (Facebook, Twitter, WeChat).
- Print newspapers: run > 1.5 million.
- Video views: 133,785.
- Completed <u>kidney health assessments</u> (BC Renal tool available in English, Punjabi and Chinese): 5,391 (increase of 11% from 2018).

Emergency Preparedness

BC Renal and health authority renal programs jointly developed a Provincial Renal Emergency Management and Business Continuity Plan. This plan is designed to address all types of hazards – natural, manmade, or health emergency – that could occur anywhere in the province and impact care delivery to kidney patients. Each May – Emergency Preparedness Month – BC Renal helps raise awareness about emergency preparedness among kidney care teams and patients. This past year, BC Renal promoted emergency preparedness to renal teams and patients across BC throughout May, using weekly quizzes, social media posts and promotion of tools, including a poster and wallet card. With the increased frequency of BC wildfires in recent years, and the potential for other climate-related events, the Renal Emergency Management plan is more critical than ever.

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 number of clinical (advanced nephrology, home therapies, palliative care), administrative and research fellowships. Funding is also provided for short-term administrative course work. More information is available on the BC Renal website – go to bcrenalagency.ca and click on 'Careers'.

Value-Added Funding Supports Regional Programs and Local Innovation

The needs of kidney patients are diverse, and the use of value-added funds at the renal program level supports local initiatives in tune with

community needs, while staying aligned with provincial direction. Around the province, regional and local projects and activities funded in part with value-added dollars in 2018/19 included the following:

• Supportive Care Clinic, Phase II – Interior Health

In the previous fiscal year, Interior Health renal program established a supportive care clinic for kidney patients facing their end of life to ensure a more coordinated system of care. This year, the renal program continued to enhance the clinic based on an innovative service delivery model. The clinic has focused on improving health and wellness for kidney patients considered to have "higher needs," including frail elderly, those with multiple, hard-to-manage comorbidities, those with dementia, and those electing to decline renal replacement therapy. The program reported that patients and their loved ones have been vocally receptive to the approach focused on symptom management and quality of life. This project is meant to contribute to the provision of efficient, effective services to kidney patients that are linked across a coordinated system of care and help in the development and enhancement of external relationships to support patients nearing end of life.

· Speed of Trust Workshop – Interior Heath

Interior Health renal program has done several Speed of Trust workshops, helping staff – including nurses, managers, nephrologists, allied health, etc. – acquire skills to build better relationships with all levels of colleagues and partners. The workshops, based on the 4 Speed of Trust principles (Integrity, Intent, Capability and Results), have been very popular among staff and filled up fast. The skills acquired through the workshops help build a more cohesive staff and foster a positive work environment. Interior Health plans to continue supporting its staff to attend the workshops as they become available.

Intra-Dialytic Exercise (IDE) Program – Island Health

Island Health renal program channelled part of their value-added dollars to support the development of the IDE program at the Nanaimo Regional General Hospital and Duncan Community Dialysis Unit. The program goal was to promote the integrated concepts of wellness and independence and simultaneously improve dialysis outcomes, anthropometrics and quality of life. The program has been very successful and met with great enthusiasm and engagement by patients and physicians. To date, the IDE program has enjoyed a broader uptake in the CDU environment, compared to the in-centre unit. Island Health plans to roll out similar exercise programs across all community and in-centre dialysis units.

Ultrasound Training for Nephrologists – Interior Health

With the support of value-added funds, IH nephrologists learned to scan lungs, kidneys, IVC, and bladders to look for the most common, renal-related complications using available ultrasound technology. The nephrologists also learned a new line insertion technique that makes HD catheter insertion safer. While the complications reviewed

are relatively rare, and the course focused on one model type only, the physicians acquired skills to deal with challenging cases, which should lead to improved patient care and outcomes (e.g., line insertions at the bedside).

Renal Program Modality Transition Nurse – Northern Health
In 2017-2018, Northern Health renal program introduced a pilot
transition/navigator nurse role to support patients through CKD and
orient them to the different dialysis modalities, including helping
"parachute" patients (those who have to start dialysis abruptly). This
approach helped ensure all eligible patients received information
about the benefits of home modalities and the transplant process.
Due to staffing challenges, this position was consistently filled for
only part of the fiscal year. However, having demonstrated the need
for an ongoing transition/navigator role, the program is currently in
the second year of the transition nurse pilot project. The NH renal
program has secured a stable transition nurse, and is expecting
reliable service to patients and significant improvement in outcomes
throughout the year.

- Education Project for South and Centre Island Island Health
 In 2018-2019, Island Health renal program undertook several locallytargeted education initiatives with the help of value-added dollars.
 The range of topics included:
 - A Serious Illness Conversation Guide presentation to enhance staff knowledge on the recommended components and approaches.
 - Project leadership to facilitate program development for both community and in-centre dialysis units.
 - Emergency management planning to develop a comprehensive plan for staff and patients to decrease risks and maintain care during a disaster, including identifying and engaging community partners.
 - "For the Next Seven Generations for the Children" course aimed at creating awareness of the unique history of Aboriginal people and the importance of cultural competency and humility to improve health outcomes for present and future generations.
 - Core LINX training to enhance staff knowledge and skills of leadership.

Collectively, these initiatives are expected to enhance care and treatment of kidney patients, improve efficiencies in care delivery, including in emergency situations, and provide care in a more culturally sensitive manner.

Bloodstream Infection (BSI) Complicating Renal Disease Study, Phase II – Interior Health

In its second year, this IH renal program project is exploring the population-based distribution of BSI with various stages of CKD. Key learnings include: BSI is associated with higher mortality; higher number of comorbidities and low albumin increase the risk of BSI; and iron IV is not associated with BSI. The results of the study

have been shared in a poster presentation and a peer-reviewed publication.

Potassium and Phosphorus Content of Common Foods – Fraser Health

People living with kidney disease need to pay special attention to and control the amount of potassium and phosphorus they consume. However, food labels do not currently have to include potassium and phosphorus in their Nutrition Facts tables. Fraser Health renal program researched and compiled these nutrient values for some commonly eaten foods in a document and shared with all Fraser Health dietitians as well as the provincial Renal Dietitians Group. The document has being used to supplement educational handouts such as the provincial grocery shopping quides and the potassium and phosphorus handouts.

· Releasing Time to Care - Fraser Health

Originally developed by the NHS in the UK, this program "supports frontline staff to identify challenges and implement solutions at the unit level in order to increase time available for direct patient care." The program is being trialed at some clinical sites in BC, including initially a dialysis unit and then a transition dialysis unit in Fraser Health. Staff have identified multiple opportunities for improvement in workflow and communication. The pilot project is assessing the opportunity to include more patient participation, as well as collaborate with other quality improvement projects in Fraser Health.

Renal Unit Team Care Development – Island Health

Island Health renal program dedicated a portion of the available value-added dollars to a project aimed at increasing quality of care in an in-centre dialysis unit through the development of a team model with a focus on clarity of roles, responsibilities and handover of care. The program had nurses visit other renal units to better understand their operational models. The program is currently reviewing the processes at the in-centre site and integrating findings from other centres. The project is still ongoing due to the complexity and interconnectedness of its objectives, with a number of benefits anticipated down the road, such as reduction in medication errors, improved clinical documentation, improved handover of care between nursing staff for continuity of care and patient safety, improved workflow, improved patient experience and improved morale and staff satisfaction.

LEAN Initiatives Coordinator Project – Interior Health

Building upon the LEAN groundwork Interior Health renal program has laid over the previous years, the program directed part of its value-added dollars to sustain a part-time LEAN coordinator position to support the development and implementation of best practices across the program. This initiative has provided the initial foundation for the development of a standardized communication structure

and processes between all renal services across the region. Work will continue over the next year, including sharing a final proof-of-concept with other renal programs in the province.

GN Clinic, Phase II – Interior Health

Using the successful proof-of-concept GN clinic from the previous fiscal year as the foundation, Interior Health renal program worked to build the infrastructure within IH kidney care clinics to provide more comprehensive and standardized support to patients with GN. The renal program found that practice and knowledge at various sites was varied, and continued work was required to support staff learning needs and patient management tools.

Kidney Care Clinic Development – Island Health

Approximately one third of the Nanaimo kidney care clinic patients reside in North Island communities. To ensure services closer to home, better access to CKD services and better use of resources, this project aims to develop a new kidney care clinic in a North Island community by early 2020. North Island community engagement has been crucial for site selection and clinic development, including respect for local culture and staff training. North Island stakeholders have responded positively to the plan of a new clinic in the region. The renal program is currently working with the community to finalize the clinic location and develop a plan for the clinic opening.

• Equipment Purchases – BC Children's Hospital

BC Children's Hospital renal program is unique among the provincial programs due to the specifics of its patient population and needs. The program has relied on value-added dollars to ensure children living with kidney disease have access to therapies and up-to-date equipment not otherwise covered by life support budgets, while allowing pediatric nephrologists to conduct scientific research. As part of this initiative, among other things, value-add funds continue to support an ambulatory blood pressure monitoring (ABPM) program for children with chronic kidney disease and dialysis. This program identified patterns that could not be found with clinic blood pressure measurements, such as nocturnal hypertension, masked hypertension, and nocturnal non-dipping.

Renal Program Patient Engagement Framework – Island Health

With the help of value-added dollars, Island Health renal program has begun the development of a patient/family engagement framework (PEF) to help guide practice at all levels of engagement. The program completed an environmental scan to identify patient experience themes and help establish desired outcomes. As part of this step of the project, gaps and opportunities for improvement in the current patient engagement process involving patient experience cards (a project previously done with value-added funds) have been identified. Based on this improved understanding of the current patient experience, the program set the focus for future quality improvement from a patient experience perspective. This

work can later be leveraged to support the development of the provincial patient experience metrics.

Patient Education – BC Children's Hospital

With the help of value-added dollars, BC Children's Hospital renal program has been able to steadily provide the nephrotic syndrome nephrologist handbooks and workbooks, which are an important teaching tool for the large population of children with this disease from across the province. Due to a growing patient population, reprints of the booklets have been needed.

Pre-Transplant Weight Management Project – Interior Health

Weight management in kidney patients who are candidates for a kidney transplant is critical for successful transplantation. To help this patient population better achieve transplant goals, Interior Health renal program implemented a pilot project, whereby patients who are candidates for a kidney transplant and have a BMI (body mass index) greater than 35 were supported to reduce their BMI according to transplant criteria. Patients benefited from more frequent follow-ups with dietitians (every 4-6 weeks compared to the more usual 6 months) and from completing the Craving Change course, focused on cognitive behavioural theory and emotional eating tips. The renal program identified several opportunities for improvement based on this pilot, and will recommend the implementation of an adjusted program for KCC patients based on a multidisciplinary approach (i.e., involving dietitians, social workers, exercise specialists and mental health specialists).

Renal Vascular Access Link Quality Improvement Project – Fraser Health

In alignment with its focus on vascular access services improvement, Fraser Health renal program engaged several frontline RNs to receive training on access-related topics, including the use of ultrasound in VA issues management, and become a cort group of champions with enhanced VA and sonography use knowledge for their units. The project's outcomes centred on improved patient care through more timely identification and intervention of vascular access issues. Specifically, there was enhanced understanding of renal access care and management among project participants, with proactive utilization of sonography. In addition, the initiative promoted partnerships between patients and nurses in the preservation of the renal vasculature.

ICU SLED and CHD Training – Interior Health

Interior Health renal program used part of the value-added dollars to train ICU staff at one of its sites to provide SLED (slow low efficient dialysis) and CHD (conventional hemodialysis). ICU patients often require these specialized services, and the ability of the ICU staff to provide them improves access to these services while resulting in efficiencies due to reduced demand for hemodialysis on-call staff providing HD in the ICU. The renal program observed the ICU staff was eager to train on the provision of HD and partner with the renal

program. Support and education will continue to be provided at this site of the health authority, with other sites interested in a similar model.

Renal Unit Supplies Optimization – Island Health

Island Health renal program undertook a comprehensive review of supplies, related workflows and ordering processes in one of its in-centre units with the aim of identifying and eliminating waste and streamlining processes. The optimization project is still ongoing, but the renal program has already established a number of important learnings that will help to deliver the right supplies for the right patient based on best practice, decrease waste of outdated or inaccurate minimums and maximums, streamline ordering processes, store supplies in a fashion that creates economies of motion for the staff and ultimately increase staff satisfaction and maximize the amount of time staff spend with the patients vs time spent searching for supplies.

• Research Coordinator – BC Children's Hospital

Value-added dollars allow BC Children's Hospital renal program to provide dedicated research coordinator support to the pathway development team to ensure ongoing assistance and continuity in the project. The clinical pathways and booklets developed by BCCH are distributed to general practitioners and pediatricians across the province and have been shared with programs across Canada.

· Renal Strategic Planning Meetings – Interior Health

Interior Health renal program used some of the value-added funds to support regional face-to-face strategic planning meetings for the leaders from across this geographically large and decentralized region. The meetings enable renal leadership and service teams (PD, HD, KCC, Transplant) to collaborate, brainstorm, and generate work plans that align with BC Renal and Interior Health strategic directions, with a primary focus on improving patient care. This in turn generates a circle of knowledge and contributes to team unity and mutual understanding.

Enhanced Staff and Patient Education

Providing kidney care staff with ongoing access to training and education is a significant contributor to job satisfaction, quality of work-life, and helps ensure the highest standards in patient care.

Value-added funds continue to help team members to engage in ongoing professional development, discuss emerging trends and stay current on the latest evidence-based renal care practices and standards.

Using value-added funds, health authority renal programs are able to support a range of staff training, learning and development activities across disciplines, including attendance at conferences, workshops and provincial meetings:

American Nephrology Nurses Association (ANNA)

- BC Kidney Days
- Canadian Association of Social Workers (CANSW)
- Canadian Association of Nephrology Nurses & Technicians (CANNT)
- National Kidney Foundation Annual Scientific Meeting
- Northwest Dietitians Conference
- Annual Dialysis Conference
- International Transplant Nurses Society
- NATCO (transplant conference)
- World Congress of Nephrology
- BCR provincial committee meetings

Value-added funds also enabled BC Renal and HA programs to produce and distribute a variety of patient safety and education materials (such as DVDs, online videos and pamphlets).

Both the health authority renal programs and BC Renal are committed to using value-added funds to optimize patient care. To ensure continuity and consistency in the use of the funds, guidelines stipulate they cannot be used for ongoing operational expenses or for costs historically covered by health authority budgets.



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