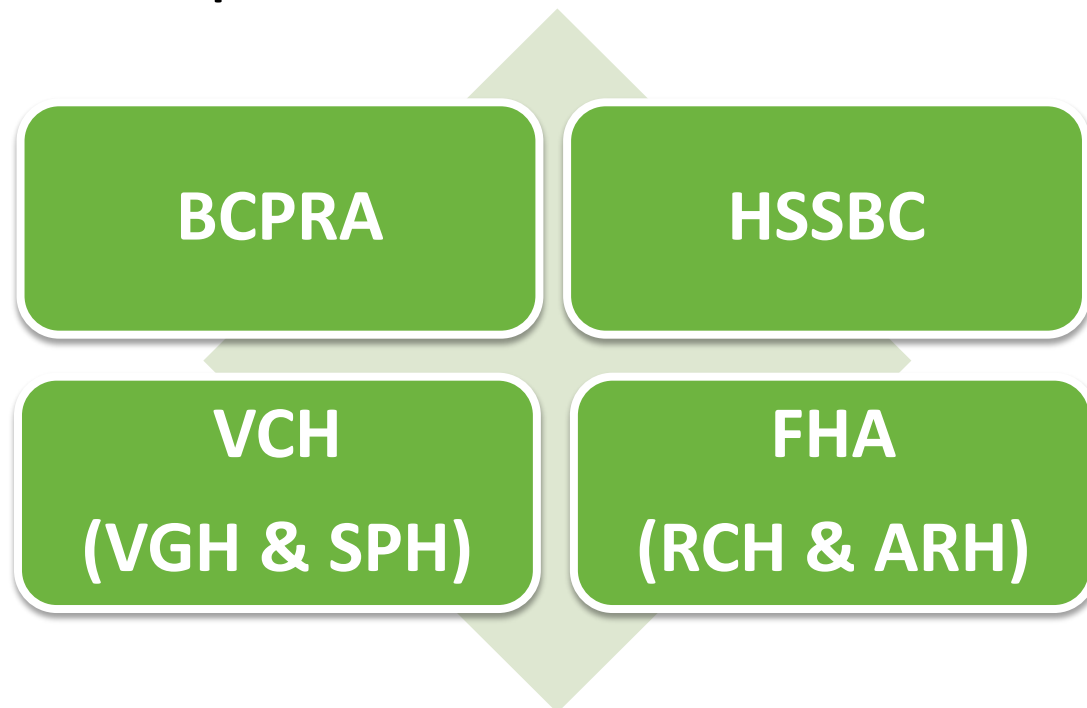




PD Assist Pilot Project

# Overview of the PD Cyclor Assist Pilot Project

- 12 month pilot
- Estimate of 40 – 60 PD clients
- Partnership:



# Definitions

## Cycler Assist

- Provision of assigned PD cycler tasks in the home setting utilizing trained Caregivers

## Caregiver

- Non medical individual who has a care aide certificate or equivalent. The Caregiver is an employee of a private organization.

## Assigned PD Tasks

- The PD tasks associated with setting up the cycler and dismantling the cycler

# Project Process

**Steering Committee**



**Client Selection Criteria**



# Patient Selection Criteria

## **PD client or support person must:**

- complete PD training
- be able to manage all non-cycler aspects of their PD care
- be able to contact the PD program to communicate any identified health and/or PD therapy concerns

## **Client or support are unable to perform the cycler set up and dismantling procedure due to:**

- Physical reasons
- Cognitive reasons
- Psychological reasons
- Social reasons

# Cycler assistance may be offered...

## Long Term

- CA required until the client leaves the PD program

## Short Term

- 2 weeks to 3 months for what is identified to be temporary reasons i.e. post hospitalization

## Respite

- minimum 2 week service

Frequency of visits may range from 1 day/week or up to 7 days/week

# Project Process

**Steering Committee**

```
graph TD; A[Steering Committee] --> B[Client Selection Criteria]; B --> C[Caregiver Assigned Tasks and Training];
```

**Client Selection Criteria**

**Caregiver Assigned Tasks  
and Training**

# Caregiver Assigned Tasks

## **Responsible for:**

---

- ☐ Cyclor machine dismantle
- ☐ Cyclor machine setup
- ☐ Disposing of waste
- ☐ Contacting PD unit with identified issues/concerns

## **CG will also assist with the following if client is unable to:**

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- ☐ Record cyclor therapy data
- ☐ Client BP and weight
- ☐ Reprogramming cyclor



# Caregiver Training

- **Goal: train the trainer approach**
  - 2 day training for care givers in a class room environment
  - 1 day of shadowing in the client's home
- **Clear objectives for training established**
- **All caregivers must demonstrate competency:**
  - by completing the training session.
  - sign off on all tasks on the *Caregiver completion checklist*

# Project Process

Steering Committee

Client Selection Criteria

Caregiver Assigned Tasks  
and Training

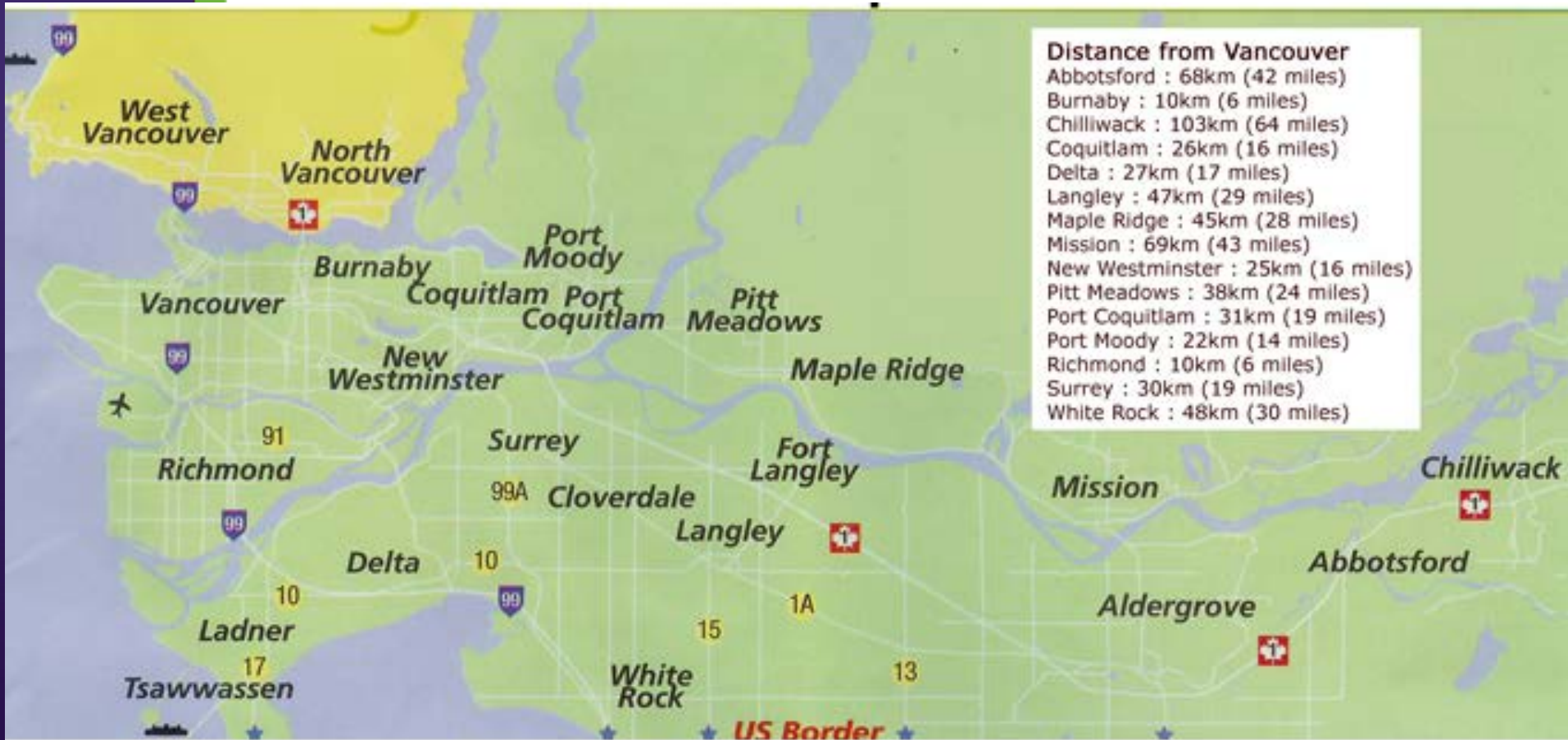
Request for Proposal

Planning Meetings

Project Roll Out



# Roll Out



# Referral Process

## Referral

- PDU identifies suitability of clients for CA
- PDU completes client referral form and assigned task care plan
- PDU faxes referral and assigned task care plan to NND

## NND

- NND acknowledges receipt of referral and forms
- NND scheduling staff identify appropriate route and appointment time
- NND contacts client and PDU to indicate start date and time for visit

## NND/PDU

- NND care givers contact PDU as required
- NND team lead contacts PDU weekly for updates

# Project Process

Steering Committee

```
graph TD; A[Steering Committee] --> B[Client Selection Criteria]; B --> C[Caregiver Assigned Tasks and Training]; C --> D[Request for Proposal]; D --> E[Planning Meetings]; E --> F[Project Roll Out]; F --> G[Learnings];
```

Client Selection Criteria

Caregiver Assigned Tasks  
and Training

Request for Proposal

Planning Meetings

Project Roll Out

Learnings

# Early Learnings

Learning	Action
Anticipate the need to revise forms, training manuals and training approaches to meet needs	Referral form and assigned task care plan revised based on user feedback
Open communication is a key component to project success	Teleconferences established: <ul style="list-style-type: none"><li>• Weekly: NND team lead and PD program liason</li><li>• Weekly: BC Renal Agency and NND</li><li>• Biweekly: BC Renal Agency and PD programs</li></ul>

# Early Learnings

Learning	Action
<p>Anticipate ongoing training needs i.e. Physioneal</p>	<ul style="list-style-type: none"><li>• Training manual modified to meet needs. Creation of “PD Points to Ponder” newsletter as a method to share new and ongoing PD information between care givers and PD programs</li></ul>
<p>Success of program is dependent on teaching/ learning process to develop competencies.</p>	<ul style="list-style-type: none"><li>• Multiple approaches incorporated in the training process inclusive of scenario role playing. One day of shadowing/buddy in the client home implemented as part of training process</li></ul>

# Early Learnings

Learning	Action
Anticipate that clients may request additional services from NND	Develop process to address requests. Incorporate scenarios and role playing in training.



# Who is the PD Cyclor Assist Client?

## Scenario 1

- Client A has been on PD for 2 years.
- No family support available
- Increased physical and cognitive challenges became apparent for the client over the past 6 months making placement in LTC a potential.
- CA services provided. Client able to remain in his home

# Who is the PD Cyclor Assist Client?

## Scenario 2

- Client B has been on PD on 4 years.
- Recently hospitalized for 3 weeks.
- Client weak at time of discharge.
- CA offered on D/C until full recovery achieved.
- Client returned to full independent care after 3 weeks of cyclor assist

# Who is the PD Cyclor Assist Client?

## Scenario 3

- Client C has been on PD for 2 years.
- Dependent on family to set up cyclor
- Family wishing to take a vacation
- CA provided for 2 weeks

# Project Process

Steering Committee

Client Selection Criteria

Caregiver Assigned Tasks  
and Training

Request for Proposal

Planning Meetings

Project Roll Out

Learnings

Outcomes and  
Evaluations



# July – October Stats

10

Initial  
number of  
clients

26

Current  
number of  
clients

4

Number of  
respite  
clients

15

Number of  
caregivers  
trained

# Outcomes and Evaluation:

- What is the current need for CA province wide?
- How does cyclor assist affect client quality of life?
- Does cyclor assist increase the availability of PD as a therapy option to clients who would otherwise have to go on HD?
- What affect does cyclor assist have on reasons to discontinue PD?

# Future Plans

- Evaluate pilot outcomes
- Share results of pilot project
- Build a business case to expand cycler assist province wide

*Regardless of outcome of pilot, clients currently enrolled in PD Assist will continue to receive this service until no longer required*

*"Sounds so good –  
I can't believe it!"*

*PD Client on the cyclor assist program*



*"I'm loving what I'm  
doing and totally happy  
to do more!"*

*Nurse Next Door Caregiver*



# Feedback

*"I am getting overwhelmingly positive feedback regarding the services provided by caregivers from Nurse Next Door in our PD Assist pilot project. It is making a big difference for the patients in receipt of services and each of the patients' I have spoken with speak very highly of the caregivers they have been assigned: their kindness, attention, professionalism and caring. Keep up the good work!"*

*PD Unit Social Worker*



*"The cyclor assist program has taken a lot of stress  
and worry off my shoulders and my families"*

*PD Client on the cyclor assist program*





*"It feels so good to be able to make life a little easier for the clients on PD"*

*Nurse Next Door Caregiver*



*"The service was wonderful – in fact I was only going to use cyclor assist to give my daughter a break but the service was so convenient and wonderful that I am now using it full time!"*

*PD Client on the cyclor assist program*



# Acknowledgements

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- Dr Penny Hill
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- Royal Columbian Hospital
- St. Paul's Hospital
- Vancouver General Hospital