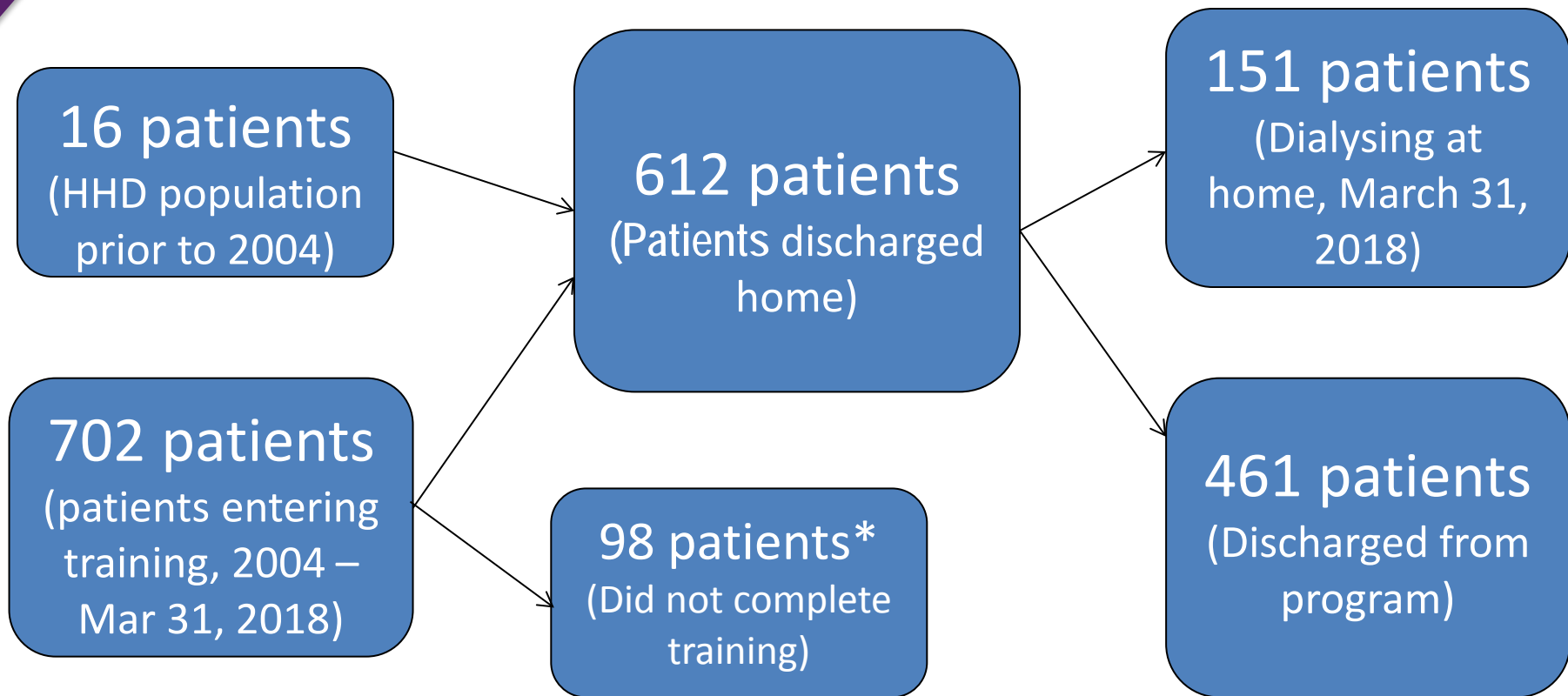




BCKD₁₈
BC KIDNEY DAYS

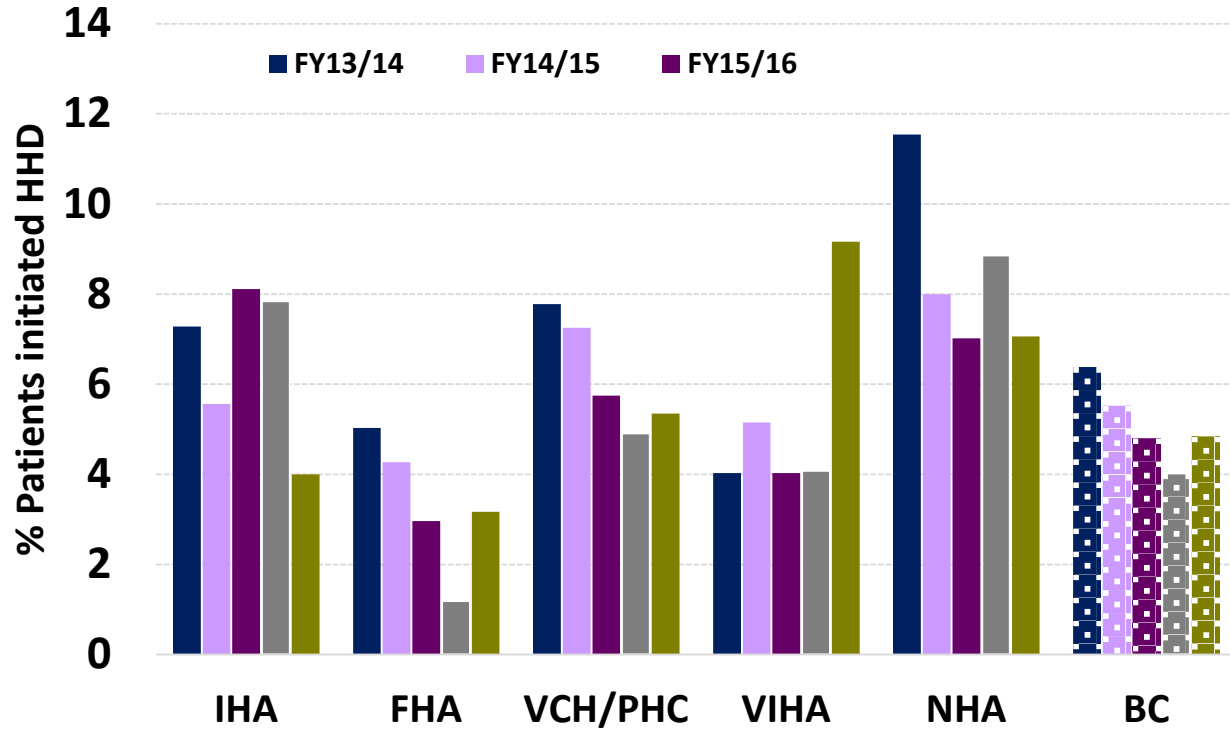
**Provincial Committee Update: Home
Hemodialysis**

Home Hemodialysis activity, 2004 – March 31 2018

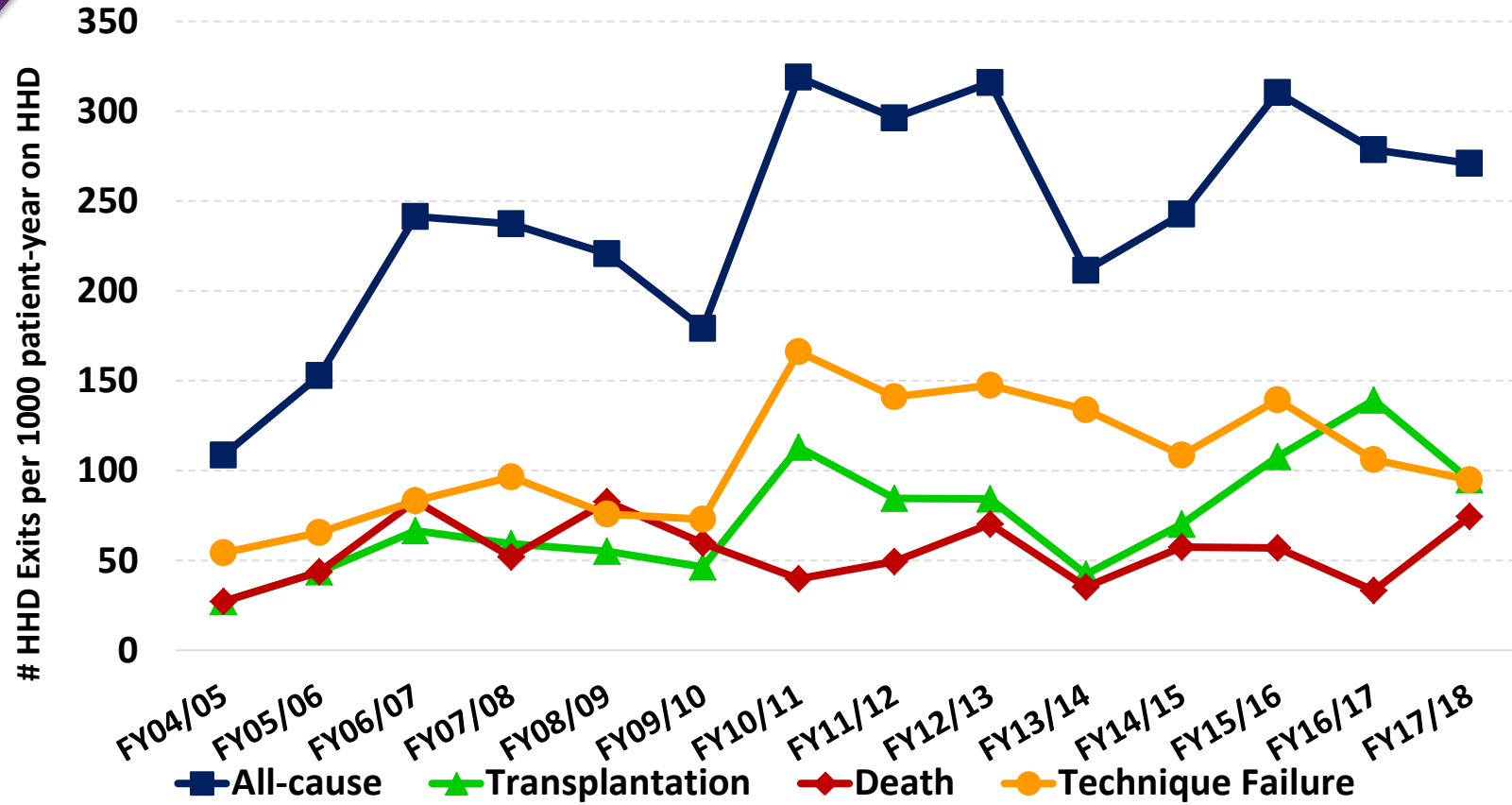




% Incident Home HD Over Time by HA



HHD Annual Attrition Rate



INS / OUTS

	O	N	D	J	F	M	A	M	J	J	A	S	NET
Total	163	164	165	162	163	160	160	162	163	164	162	164	163

INS / OUTS

	O	N	D	J	F	M	A	M	J	J	A	S	NET
Total	163	164	165	162	163	160	160	162	163	164	162	164	163
New	5	5	1	6	6	4	5	3	8	5	6	3	57
Exit	4	4	4	6	9	4	3	2	7	7	4	6	60

INS / OUTS

57 new
60 exits

	O	N	D	I	A	S	NET
Total	163	164	163	164	162	164	163
New	5	5	1	5	6	3	57
Exit	4	4	4	7	4	6	60

HHD Patients Active as of March 31 2018, by machine and by region

	Total Patients	Baxter	NxStage	Missing Rx
BC (Total)	159	99	49	11
IHA	30	11	16	3
FHA	28	23	3	2
VCH/PHC	56	34	19	3
VIHA	21	14	5	2
NHA	24	17	6	1

Training Time by Machine Type:

Based on HHD Training in FY17/18

	Overall	Baxter	NxStage	Missing
# Patients	55	23	20	12*
In Training	8 (14%)	3 (13%)	2 (10%)	3
Stopped Training	12 (22%)	1 (4%)	2 (10%)	9
Went Home	35 (64%)	19 (83%)	16 (80%)	0
Median Days in Training (Range)	38 (1, 169)	50 (18, 97)	37.5 (9, 169)	22 (1, 133)
In Training	30.5 (13, 41)	25 (18, 34)	25.5 (13, 38)	34 (27, 41)
Stopped Training	16 (1, 133)	59	15.5 (9, 22)	15 (1, 133)
Went Home	50 (18, 169)	51 (27, 97)	40.5 (18, 169)	--

2016-2017 completed projects

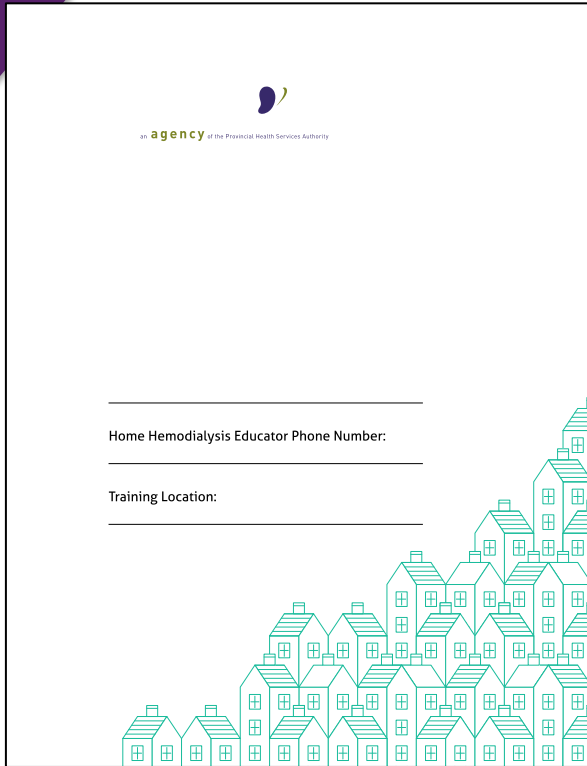


2016-2017 completed projects

- * *Patient workbook completed*
- * *Before you fly- patient support document*
- * *Functional assessment HHD tool*
- * *Home therapy patient assessment tool*
- * *HHD run log safety checklist*
- * *HHD audit tool - replacing recertification tool*
- * *Calcium and Citrate management guidelines revision/update*
- * *HHD waste disposal poster*
- * *Water boil advisory algorithm*
- * *patient transition guide to HHD*



Patient workbook completed



- Comprehensive revision of training tool designed specifically for patients
 - Physical assessment
 - Vascular access
 - Safety devices
 - Troubleshooting / emergencies
 - Disaster preparedness

Before you fly- patient support document

Before You Fly

For Home Hemodialysis Patients



- Planning document for patients on NxStage to facilitate air travel
- Includes links to Canadian and USA Air Transportation sites

f dialysis machines, as priority checked baggage.

<http://laws-lois.justice.gc.ca/eng/regulations/SOR-88-58/index.html>



Travel

Home Hemodialysis and Travelling



For Patients Living in BC Who Want to Travel (In or Outside BC)

If you are a home hemodialysis patient using the NxStage machine, it is possible to travel. This is a step-by-step guide to help you plan your dialysis care away from home.

Please plan your travel well in advance.

You are required to give at least 30 days' notice for travel within Canada and 60 days' notice for international, cruise, and island destinations. NxStage will ship to destinations outlined in their travel plan.

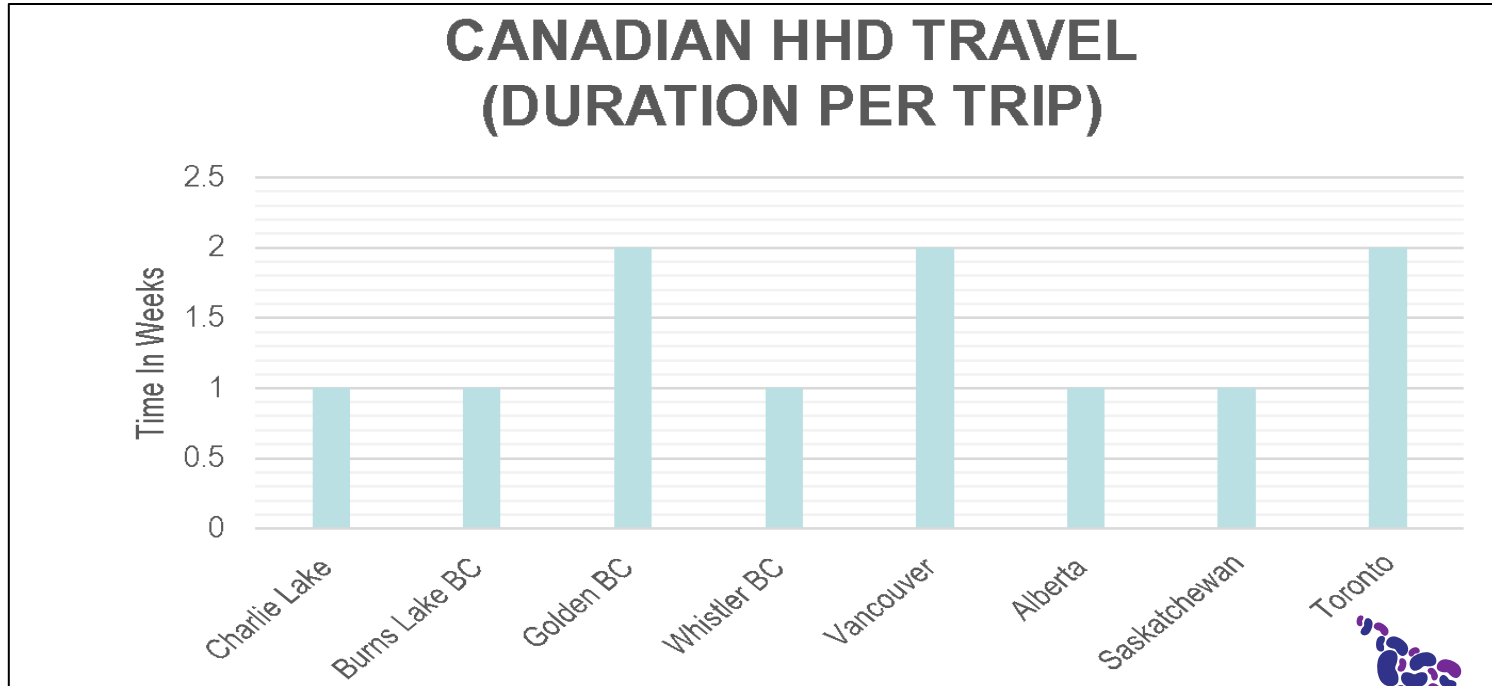
DO NOT BOOK YOUR TRAVEL UNTIL YOU HAVE COMMUNICATED WITH YOUR HOME HEMODIALYSIS EDUCATOR WELL IN ADVANCE OF THESE LEAD TIMES.

- 1. Check with your kidney doctor to make sure you are fit to travel.** Generally this means that:
 - You are medically stable on home hemodialysis.
 - You have a functioning fistula, graft or permanent central line catheter with stable blood flows. Temporary accesses are not accepted.
- 2. Once you decide where you want to go, communicate with your home hemodialysis educator.** You will need to provide information about your travel destination and dates of travel. The NxStage travel document will be completed and faxed to NxStage customer service. NxStage will confirm with you if they provide shipping to your destination.
- 3. Arrange your travel plans using the following information in this document.**
- 4. For all travel:**
 - You will be required to take your Nxstage machine on your travels. BCPPRA will not cover the costs of renting a NxStage machine
 - PHSA has property insurance to cover Nxstage machines situated in or while in transit in Canada or the USA. In most cases PHSA will provide insurance coverage if the machine is damaged or lost, however, the following conditions (# 4, 5, and 6) at the very least must be met. *Patients must abide by all safety*

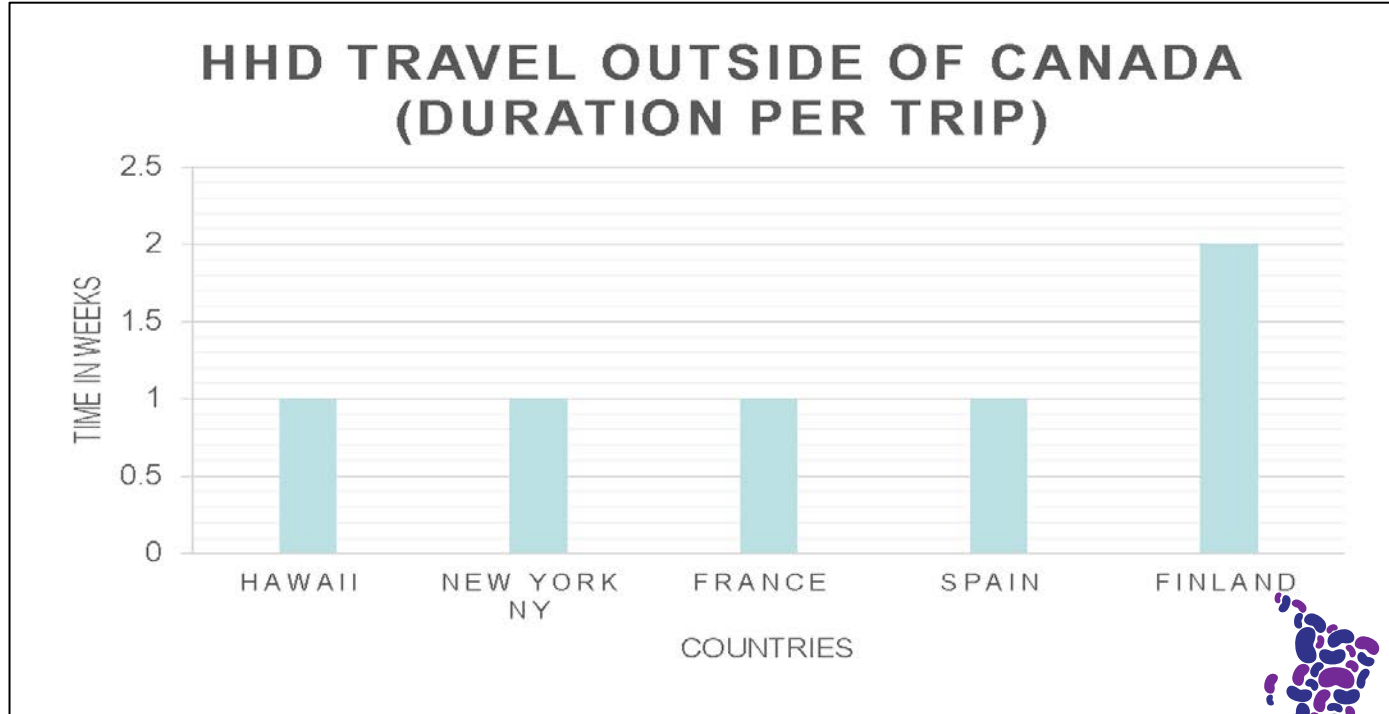
- Step by step guide to prepare for travelling
 - Medical stability
 - Transportation requirements (Air, Car, RV)
 - Clarification of medical services provided within as compared with outside of BC
 - Supplies needed



HHD Travel July 2017 – May 2018



HHD Travel July 2017 – May 2018



Home therapy patient assessment tool

Home Therapies Patient Assessment



The following assessment questions may be useful as a guide to develop an effective plan of care for the home therapy patient.

Patient responses will guide the plan of care to:

- Be individualized
- Specify the services necessary to address the patients needs identified in the assessment
- Include measurable and expected outcomes
- Include estimated timetables to achieve outcomes
- Contain outcomes consistent with current clinical practice standards.

ASSESSMENT	COMMENTS	CONSIDERATIONS
COGNITIVE ABILITY		
EMPLOYMENT <ul style="list-style-type: none"> • Full time • Part time • Retired • Unemployed <ul style="list-style-type: none"> * Occupation * Hobbies 		
LEVEL OF INDEPENDENCE <ul style="list-style-type: none"> • Independent • Needs assistance <ul style="list-style-type: none"> • In what? • Totally dependent 		<ul style="list-style-type: none"> • May require open discussion with pts family and/or support person to identify their commitment level to assist. • May consider PD Assist if patient meets eligibility criteria.
LEVEL OF EDUCATION <ul style="list-style-type: none"> • No education • Elementary • High school • College/university 		<ul style="list-style-type: none"> • May need to consider training material and methods to match education level. If illiterate, pictures and return demonstrations may be required for training.
LANGUAGE <ul style="list-style-type: none"> • English • Other <ul style="list-style-type: none"> • Spoken • Written • Read 		<ul style="list-style-type: none"> • May need to consider training material and methods to match education level. If illiterate, pictures and return demonstrations may be required for training.

- Standardized template building and expanding on MATCH-D tool
- Includes prompts for considerations/discussions



Functional assessment HHD tool

Home Hemodialysis Functional Assessment



The functional assessment provides examples of basic skills that are needed to be able to perform and manage Home Hemodialysis.

Instructions to perform the functional assessment:

1. Gather supplies and place them on a working surface.
2. Nurse to demonstrate and verbally describe each step as it is performed.
3. Have patient perform each step following
4. Document observations.

Supplies required

- Fistula needle
- Hand sanitizer pump
- Face mask
- Scissor clamp
- IV tubing
- Pencil / pen
- Yellow scissor clamp
- Plastic jug / acid concentrate
- One bag of IV solution
- 10ml syringe

Resources

VIHA: Functional assessment 22June2016 Reviewed by: Backx,T, VKCC, NKCC, CUSI Navigators

Argrell B, Dehun O. The clock-drawing test. Age and ageing 1998; 27: 399-403

- Building on MATCH-D tool to allow standardized assessment of dexterity needed for Home HD
- Includes both physical dexterity assessment (needling) and abbreviated cognitive assessment



Airline safety check



- Infectious complications are rare but still a challenge in home HD.
- Airline industry checklist is used even for routine tasks to minimize human error.

HHD Audit Tool

Central Venous Catheter



Patient Name: _____ Date: _____

Reason for Vascular Access Audit: _____

Assessment completed at: Home Clinic

Vascular Access Assessment

1. Catheter Connection

- Wash hands with soap and water
- Old lumen dressing removed appropriately
- Wash hands after dressing removal
- Catheter hub scrubbed briskly with antiseptic solution
- Catheter hub antiseptic dry time as per protocol
- Catheter tego connectors scrubbed using new antiseptic wipe per each catheter lumen
- Antiseptic dry time as per protocol
- Tego connectors change according to protocol
- New tego connectors placed appropriately and cleansed using antiseptic solution
- Antiseptic dry time as per protocol
- Catheter patency check as per protocol
- Patient connects using aseptic technique

2. Catheter Disconnection

- Performs hand hygiene using hand sanitizer
- Catheter lumens cleaned with antiseptic solution
- Antiseptic dry time as per protocol
- Patient disconnects using aseptic technique

3. Catheter Exit Site Care/Dressing

- Wash hands with soap and water
- Old dressing removed appropriately
- Visual inspection of catheter exit site performed by patient
- Hands cleansed using hand sanitizer
- Exit site cleaned with antiseptic solution
- Antiseptic dry time as per protocol
- Dressing applied using aseptic technique

Comments: _____

Document in PROMIS: Catheter Assessment Catheter Function Patency

HHD Audit Tool

Arteriovenous Fistula/Graft



Patient Name: _____ Date: _____

Reason for Vascular Access Audit: _____

Assessment completed at: Home Clinic

Vascular Access Assessment

1. Is a transonic required? Yes No
2. If yes, is it routine? Yes No
3. Last access flow: _____
4. Visual inspection of vascular access: _____

Cannulation Assessment

1. Hand Hygiene

- Wash hands and access with soap and water appropriately
- Skin cleansed with antiseptic solution
- Antiseptic dry time as per protocol

2. Cannulation- Buttonhole Technique

- Scab removed with sterile blunt tip needle
- A new sterile needle is used to remove second buttonhole scab
- No evidence of bleeding post scab removal
- Scab removed completely
- Skin and buttonhole sites cleansed a second time with antiseptic solution
- Antiseptic dry time as per protocol
- Cannulation as per protocol
- Aseptic technique followed

3. Cannulation - Rope Ladder Technique

- Appropriate sites located on fistula/graft
- Cannulate as per protocol
- Aseptic technique followed

4. De-Cannulation

- Performs hand hygiene using hand sanitizer
- Removes needles as per protocol
- Antiseptic ointment or gauzes applied to sites as per protocol

Comments: _____

Document in PROMIS: Vascular Access Assessment Transonic Reading

Guidelines updates / revisions

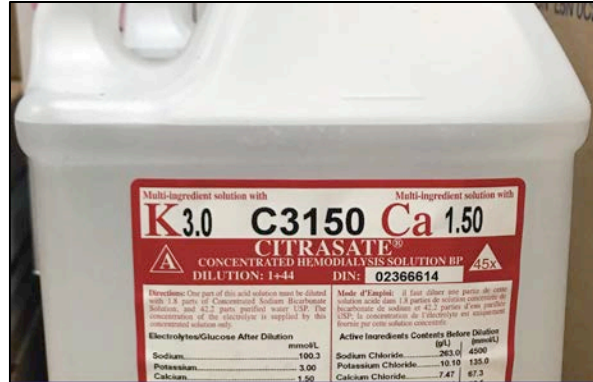


PROVINCIAL STANDARDS & GUIDELINES



Calcium Management for Patients Receiving Extended Duration Hemodialysis

Created November 2017; Updated March 2018
Approved by the BCPRA Home Hemodialysis Committee



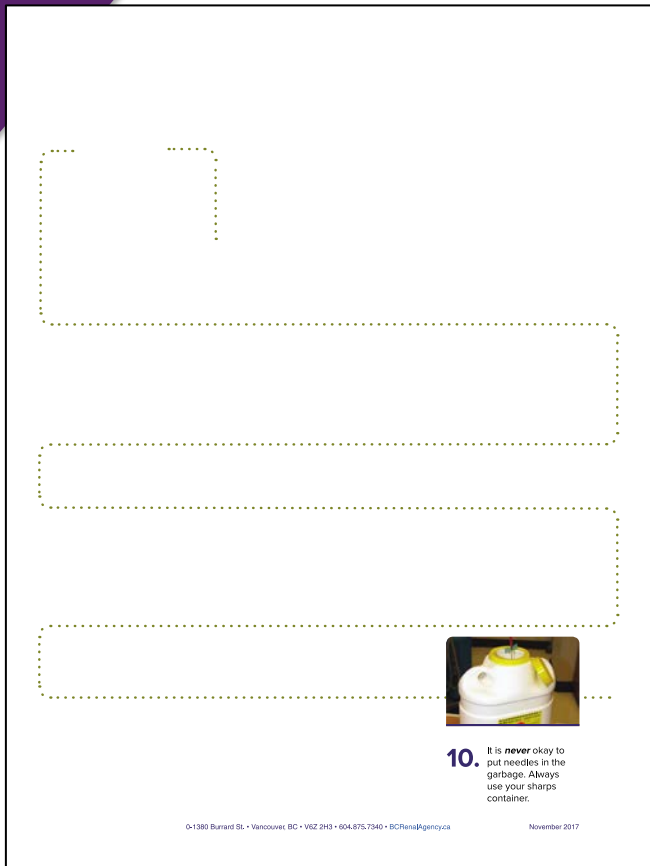
PROVINCIAL STANDARDS & GUIDELINES



Citrasate Management for Patients Receiving Extended Duration Hemodialysis

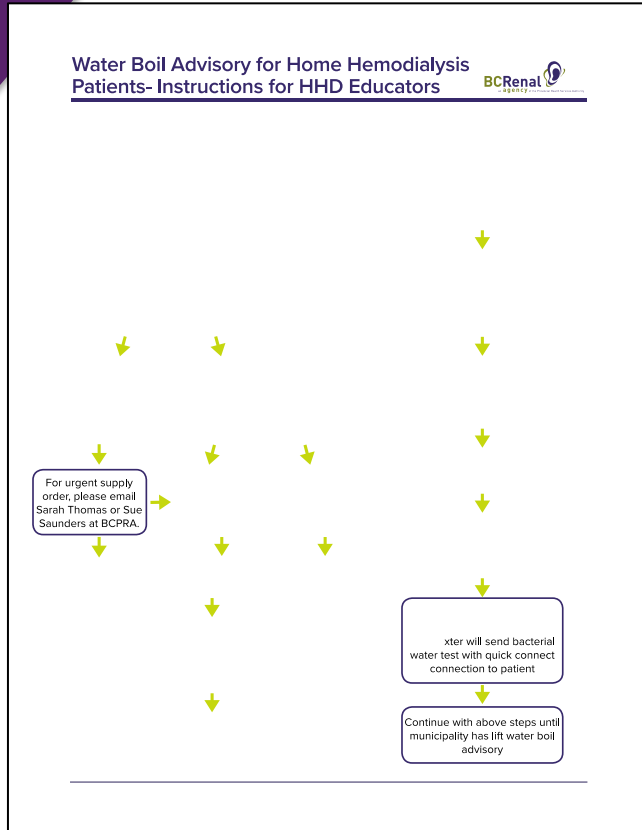
Created November 2017; Updated March 2018
Approved by the BCPRA Home Hemodialysis Committee

HHD Waste Management Poster



- Tool developed based on request from local municipalities.
- Minimizes risk of biohazardous waste making it into landfill

Water boil advisory algorithm



- NxStage uses a DI technology; can't be used when municipalities (or wells) under boil-water

Patient transition guide to HHD

- In test phase now – provincial roll out likely 1st/2nd quarter of 2019.



QUESTIONS TO ASK MY KIDNEY CARE TEAM

- Is there a lifting requirement and if so, how many pounds?
- What types of supports are available to me if I choose home hemodialysis?
- How will I be trained to perform home hemodialysis?
- Where does the training take place?
- What does my day look like on HHD?
- What will my daily responsibilities for myself and/or my partner look like?
- Who do I call if I have questions about my care?
- Is travelling possible on HHD?
- What is the best machine choice for travel?
- Is intimacy an issue with HHD?



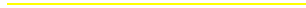
DECISIONS I NEED TO MAKE NOW

After receiving more information about HHD at your appointment, you should ask yourself:

- **Will HHD be the best treatment option for my lifestyle?**
- **How will HHD fit into my life?**



- **Who will help me with HHD when I need help?**



Provincial Home HD Committee

Nandita Agarwal (PROMIS)	Corinne Gable (IH)	Sanford Kong (PROMIS)	Kris Poinen (Fellow)
Erlyn Amano (BCPRA)	Warren Hart (PHC)	Mary Lewis (PHC)	Anne-Marie Rattray (FH)
Julie Aviani (IH)	Anna Hill (VIHA)	Mandy Levesque (NH)	Angela Robinson (NH)
Teresa Backx (VIHA)	Warren Hill (FH)	Adeera Levin (BCPRA)	Caroline Stigant (VIHA)
Mike Bevilacqua (FH)	Jay Hochman (IH)	Karen Mahoney (VCH)	Mary Van der Hoek (VCH)
Jenny Chen (Fellow)	Cam Melvin (PROMIS)	Martin Duffy (FH)	Lauren Kembel (IH)
Tes Parent (PHC)	Joanna Ko (BCPRA)	Tes Parent (PHC)	

Extra Kudos...

- Sarah Thomas
- Sushila (Sue) Saunders
- Bill Kane
- Sidone Buicliu
- Clair Hsieh

