

## Events, Initiatives, Achievements

*The BC Renal Agency believes in innovation – in using the latest research and the collective knowledge, creativity and ingenuity of the BC renal community (caregivers and patients alike) to develop new and better solutions to the challenges of chronic kidney disease.*

Through a range of events and initiatives such as the examples highlighted below, BCPRA is improving early diagnosis and intervention, providing improved treatment options, and ensuring that the system of provincial renal care is financially sustainable. The result is that patients have access to the care they need, when and where they need it. For more information visit [www.bcrenalagency.ca](http://www.bcrenalagency.ca) or call us at 604.875.7340.

### **BC Nephrology Days**

Sponsored by BCPRA, this annual conference offers renal and other health professionals from across the province and throughout Canada an opportunity to network with their peers and keep up to date with the latest information about renal care with the goal of improving treatment for people with kidney disease.

### **Kidney Month and World Kidney Day**

March is Kidney Health Month in Canada. Sponsored by The Kidney Foundation of Canada, this annual fundraising initiative involves thousands of volunteer canvassers going door-to-door in neighbourhoods across the country to raise money for patients and their families living with

kidney disease. BCPRA is involved in media relations activities during Kidney Health Month to help raise awareness of kidney disease and promote good kidney health.

In 2006, the International Society of Nephrology and the International Federation of Kidney Foundations jointly launched World Kidney Day to increase awareness and draw attention to the urgent global need for early detection and prevention of this growing epidemic. World Kidney Day is held annually on the second Thursday of March. On this day, BCPRA joins colleagues around the world in efforts to raise awareness about one of the body's most vital organs.

### **Lab Strategy**

With early diagnosis, kidney disease can often be managed through diet and lifestyle adjustments that can delay and sometimes prevent the need for dialysis. With this in mind, an early diagnosis strategy was developed by BCPRA, the Ministry of Health Services, the BC Medical Association and laboratory physicians throughout the province. The goal is to identify people at highest risk for kidney disease at an earlier stage

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through the first collaborative approach of its kind in North America. Through this initiative, BC labs automatically report estimated glomerular filtration rates (eGFR) in addition to serum creatinine in the blood test results submitted to general practitioners and other doctors. Lab tests are a critical component of kidney care, as they trigger 75 per cent of medical decisions, and therefore inaccurate test results and interpretation lead to incorrect diagnoses and incorrect or lack of treatment. Thanks in part to the lab strategy, and the ongoing work on standardization across the province's labs, the average level of kidney function for British Columbians diagnosed with kidney disease today is 15 per cent higher than it was in 2003.

#### **Reduction in Dialysis Growth**

In the late '90s, the number of patients who required dialysis was growing by 16 per cent per year. Thanks to early identification and intervention – two areas in which the BCPRA leads the country – the growth in BC's dialysis population is now 3–5 per cent per year. A chronic kidney disease clinical practice guideline, physician education and the funding of pre-dialysis clinics across the province, in addition to the lab strategy described above, account for this dramatic reduction. The achievement is all the more significant since the number of people diagnosed with early stage kidney disease has grown 28 per cent per year since 2001.

#### **Standards and Guidelines**

##### **Clinical Practice Guideline for Physicians**

BCPRA was a partner in the development of a clinical practice guideline (Identification, Evaluation and Management of Patients with Chronic Kidney Disease) which is based on the best current scientific

evidence and which dispels the common belief that little can be done to slow or prevent the onset of end-stage renal disease. The clinical guideline also includes patient flow sheets and a guide for patients on managing their health and accessing community-based resources. The flow sheets are valuable tools for summarizing the care patients have received, identifying any gaps in care, and for planning future patient visits. Through the Ministry of Health Services Chronic Disease Management (CDM) Toolkit, physicians can easily access the guidelines, the patient flow sheets and a patient reminder and recall system. The CDM Toolkit also enables members of practice networks or care teams to securely share information regarding the care of their patients with chronic conditions, even if all members of the team are not co-located, or are using different charting systems.

##### **Renal Program Guidelines**

BCPRA has developed provincial renal program guidelines, which provide a methodology and set of principles for health authorities and institutions to follow in the management and ongoing development of care programs. Marking a national first, these guidelines have been formally endorsed by the BC Ministry of Health Services. The guidelines support equitable distribution of high quality renal care to patients across BC, and guide prioritization for new program development, which is critical in the context of increased requests for services in communities across BC and limited resources.

##### **Vascular Access Standards**

BC is the only province in Canada with provincial standards for vascular access creation, maintenance and repair. Vascular

access refers to the surgical insertion of a fistula or graft to provide access to the bloodstream for dialysis. Many patients have repeated problems with their vascular access, placing additional demands on the already-stretched health system.

#### **Other Guidelines**

Other standards and guidelines developed by BCPRA include a protocol for anemia management, recommendations for medical coverage for home dialysis and community dialysis unit patients, intradialytic parenteral guidelines (IDPN) and guidelines for prescription quantities and refills.

#### **Integrated Clinics**

Given the strong linkages among kidney disease, heart disease and diabetes, an increased focus on integrated care is required. A number of initiatives in different health authorities involve specialists and primary care physicians to varying degrees. BCPRA is providing support with our PROMIS database, as well as through evaluative expertise, for a variety of projects, including an early kidney care initiative on Vancouver Island and two integrated clinics (in Penticton and at St. Paul's Hospital/ Providence Health Care). The two specialty integrated clinics will provide important data on the value of shared care and patient self-management in the prevention and treatment of the "vascular" cluster of diseases.

#### **PROMIS Database**

BCPRA has been praised by national reviewers for operating the only province-wide integrated registry for kidney disease patients (PROMIS), and for covering all medications patients require. PROMIS leads Canada with respect to developing

benchmarks and supports all aspects of renal care delivery and planning.

#### **Independent Dialysis**

Research has shown that patients who manage their own dialysis care experience positive health and lifestyle benefits. BC leads the country with respect to rates of peritoneal dialysis – a home-based dialysis modality. A provincial PD Clinicians' Group, with leadership from BCPRA, is dedicated to developing standards of care specific to PD patients and achieving even higher rates of PD uptake.

BC is also the only province in Canada with a provincially-coordinated independent hemodialysis program with local implementation. This groundbreaking program promotes optimal patient care and system sustainability, allowing patients with end-stage kidney disease to manage their hemodialysis in their own home (and in some cases in facility settings).

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*"I'm impressed with the way BCPRA has taken a provincial approach; it pulls together experts from across BC for planning and strategy, data collection and evaluation through PROMIS, and development of standards and best practices."*

*— Hospital Director*

*"The stakeholders are the caregivers and because of that, the patients' needs are put in the forefront."*

*— Renal Manager*

The BC Renal Agency's electronic newsletter, *Renal News*, provides a forum for knowledge sharing and promotion of innovative projects and practices across the BC renal network, and keeps members of the renal community up to date on plans and decisions leading to new developments in kidney care.

To subscribe go to [www.bcrenalagency.ca](http://www.bcrenalagency.ca) and click on News/Newsletters/ Renal News



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### **Medication Reconciliation/ Medication Safety**

BCPRA and the health authority renal programs are breaking new ground in Canada by initiating medication reconciliation for renal patients on dialysis across the province. Although “med rec” is now a requirement for hospital accreditation and is expected to become standard practice for acute care patients across Canada, it has not been extended to chronic care outpatients anywhere else in the country. Renal patients, with their needs for multiple medications and frequent prescription changes, are at a higher risk than most patients for medication errors. In addition to improving patient safety, med rec supports easier hospital admission and discharge, providing patients with up-to-date medication lists, and better drug-use evaluation at patient, prescriber and agency levels.

### **Funding Model**

BCPRA has developed a patient-focused funding/resource management model that is unique in Canada. This model provides a more accurate assessment of costs and enables flexible, patient-focused, multidisciplinary care based on patient needs.

### **Provincial Surveys**

BC is the only province in Canada to gather data on patient experience specific to renal care delivery and patient interest in independent dialysis modalities.

### **Tailored Indicator Reports**

BCPRA has expanded its “balanced score-card” reporting process to include health authority-specific reports for all renal programs on a biannual basis. Drilling down to the regional level will support analysis and development of regional action plans, as well as cross-program comparison, learning and collaboration.

### **Patient and Health Provider Resources**

The agency website ([www.bcrenalagency.ca](http://www.bcrenalagency.ca)) offers a broad range of information and resources, including medication sheets and a series of online videos. Print materials and videos are also available for order (see the For Patients page at [www.bcrenalagency.ca](http://www.bcrenalagency.ca)). Most of these materials are available in a range of languages; they are free to BC residents and renal programs.