

Renal News



Shaping the future of kidney care

The work of provincial renal committees & working groups

Renal care providers from across the province work together on a variety of committees and groups with the goal of improving care for kidney patients in BC. This update is designed to keep you informed about plans being discussed and decisions being made that will make a difference to you and your patients.

March 2, 2006 Issue #10

Mark Your Calendars...

... for BC Nephrology Days, to be held at the Vancouver Convention and Exhibition Centre October 5 - 6, 2006. In addition, Western PD Days will be hosted in Vancouver this year, also at the Convention Centre on October 7th. Additional program and registration details will be included in future issues. For the latest on Nephrology Days, visit the BCPRA website at:

<http://www.bcrenalagency.ca/News/NephrologyDay/>

Did you know?

March 9th marks the first-ever World Kidney Day, aimed at raising international awareness about one of the body's most vital organs, risk factors for kidney disease and treatment options. March also marks Kidney Month in Canada.

... and Nominate a Colleague for the Wilma Crockett Memorial Award

This prestigious award is granted yearly at BC Nephrology Days to a member of the BC renal community in honour of an outstanding lifetime contribution to the goal of excellence in the care of people with chronic kidney disease. Details and the nomination form are available on the website at:

<http://www.bcrenalagency.ca/News/NephrologyDay/Wilma+Crockett+Memorial+Award.htm>

Life Support Budget Submitted

In February, BCPRA submitted a 2006-2010 Life Support Budget for Renal Programs to the Provincial Health Services Authority. The budget includes a request for increased funding based on a projected 17 percent growth in CKD and a six percent growth in dialysis.

The total budget for renal services is currently \$119 million. Of these dollars, \$70 million is allocated to BCPRA to pay for vendor contracts, medical and surgical supplies for community units, medications/renal formulary drugs, health authority patient growth,

information system and management costs, and CQI change initiatives. Health Authority Renal Programs are allocated \$49 million for direct patient care. More details on the final budget for 06/07 will be included in the next issue of *Renal News*.

For more information: Jay Makwana (jmakwana@providencehealth.bc.ca)

Contract Awarded for Distribution of EHRT and IV Iron

Macdonald's Prescriptions & Medical Supplies in Vancouver has been awarded the provincial contract for distribution of drugs related to anemia management therapy (EHRT and IV Iron). The new contract will be in place as of April 1, 2006, and will specify key performance indicators and service levels to ensure the needs of patients and programs are met. Among other improvements, a plan is being developed to eliminate the manual/paper process for EHRT initiation. More details to follow.

For more information: Jay Makwana (jmakwana@providencehealth.bc.ca)

Revised MDRD Formula Implemented

BC is one of the first provinces to adopt a rigorous system of laboratory standardization for eGFR reporting using the MDRD formula. To correct a creatinine measurement bias inherent in the original formula, a revised formula was introduced into BC starting January 9, 2006. For more details, see the memo posted to the BCPRA website:

<http://www.bcrenalagency.ca/News/OtherPublications/>

BC Children's Develops New Pediatric eGFR Formula

BC Children's Provincial Renal Program has developed an optimized pediatric eGFR formula (modified from the Schwartz Formula). Their paper titled *Estimating Pediatric Glomerular Filtration Rates in the Era of Chronic Kidney Disease Staging* was published in the February edition of the *Journal of the American Society of Nephrology*. The new formula has been incorporated into PROMIS for use with the pediatric patient population.

For more information: Dr. Colin White (cwhite@cw.bc.ca)

Pharmacy Formulary Review Committee Expands Role

The Pharmacy Formulary Review Committee has expanded its terms of reference to include a facilitation role with respect to medication best practices, and has developed enhanced processes to support this role, as well as a list of priorities. These priorities include: an anemia management algorithm; hiring of a clinical pharmacist in each HA renal program (managed by the respective HARPs); a phosphate binder protocol; and review of heparin versus sodium citrate for locking catheters.

The committee's expanded role is significant as the implementation of best practices processes in the management of expensive medications could save an estimated 5-10% of the current \$29 million drug budget, which would then be applied to funding patient growth requirements for medications.

For more information: Dan Martinusen (Dan.Martinusen@viha.ca)

Accreditation a Success

As reported in the last issue, BCPRA successfully completed its first CCHSA accreditation in early November. We recently received the official report and are pleased

to announce we were granted full accreditation. Of note, the accreditors recognized PROMIS as a good practice, being the first of its kind in Canada. The report is posted on our website at <http://www.bcrenalagency.ca/News/OtherPublications/>

New PD Lifestyles Video Completed

The PD Clinician's Group and BCPRA have just completed production of a new video featuring individuals from across BC talking about their experiences on peritoneal dialysis. The video, which is available in English, Punjabi, Cantonese and Mandarin, is designed as an information tool for patients, especially those considering their dialysis options. Copies will be distributed to PD programs, CKD clinics, and the BC Branch of the Kidney Foundation, and are also available from the BCPRA admin office.

For copies of the video: Jasna Karalic (jkaralic@bcpra.ubc.ca)

Assessment of HD Patient Population Acuity Level Planned this Spring

In 2005 data was gathered to determine the overall distribution of hemodialysis patient acuity levels across the province. To assess if the severity of kidney disease among HD patients is shifting over time, revised data will be gathered this spring. Resources will be provided by BCPRA to conduct an evaluation of patients in randomly selected units, based on charting information and interviews with local nurses.

For more information: Ognjenka Djurdjev (odjurdjev@bcpra.ubc.ca)

Strategic Plan in the Works for IM/IS (PROMIS)

In the fall of 2005, BCPRA formed a new IM/IS Steering Committee, with senior renal and IM/IT representation from all health authorities. A key deliverable for the group is a strategic plan that will facilitate the ongoing development and implementation of the provincial Renal Information System, with a focus on seamless clinical care, as well as administrative and research activities.

To date, the group has conducted a broad environmental scan, as well as a specific needs assessment with the individual renal programs. The committee will hold a full-day planning session in April and expects to finalize their strategy document, including detailed project plans, resources and timelines, by early summer.

Concurrent to the development of the strategic plan, the BCPRA IT team plans to address several more immediate needs identified by the community, specifically to do with the user friendliness and reporting capabilities of PROMIS. The IT team will consult with end users this spring to better understand the changes required and to prioritize based on this input.

For more information: Ognjenka Djurdjev (odjurdjev@bcpra.ubc.ca)

New Governance Structure for the Independent Hemodialysis Program

As reported in the last issue, a new governance structure is now in place for BC's independent hemodialysis program (IAMHD). Terms of reference for the provincial steering committee, operations group, clinical educators group and business group are

now available online:

<http://www.bcrenalagency.ca/Innovations/IndependentDialysis/Org+Structure.htm>

Initial meetings of the steering committee and operations group were conducted in January, and as per the direction of the steering committee, three working teams have been struck. These three groups, made up of members from the operations committee, will tackle key issues that have confined the expansion of independent hemodialysis.

Areas of focus in 2006 will be:

- PROMIS module development (lead: Linda Pennell, FHA)
- System redesign (lead: Angela Robinson, NHA)
- Clinical coverage (lead: Bev Sondrup, VCH/PHC)

For more information: Donna Murphy-Burke (dmurphy-burke@providencehealth.bc.ca)

Kidney Summit Projects Update

The Chronic Kidney Disease Summit, held last June, initiated a change process to improve care for patients with the co-morbidities of kidney disease, heart disease, and diabetes. Two hundred and fifty-four people – representing a range of health professions as well as administrators and patients from across Canada and internationally – kick-started a plan to work towards educational, health system and research reforms.

Since June, that plan has been further developed by teams of Summit participants and other stakeholders under the umbrella of four separate projects – covering what are considered among the most critical issues for people with any of the three conditions. For updates on these projects, go to: <http://www.bckidneysummit.com/>

For more information: Bev Holmes (bevkev@telus.net)

Online Survey Feedback Provides Direction for Website Redesign

Thanks to those of you who filled out our online website survey assessing the effectiveness of the BCPRAs website. We were pleased with the response rate (53 respondents representing the full range of renal care professionals) as well as the feedback itself.

Highlights include:

- Most respondents indicated overall satisfaction with the site. A strong majority of respondents (78%) agreed the site has information they need.
- 82% of respondents said they found the information they needed.
- Among the most frequent reasons for visiting the website is to get information on events such as Nephrology Days or the Kidney Summit.
- A significant majority of respondents indicated they find the website content useful across a wide range of content areas.

We also received valuable feedback on areas for improvement. The most frequent suggestion was for more frequent and consistent updates of information. Other suggestions were:

- make site more user-friendly and visually appealing
- provide more nursing/clinical information

- provide aggregate quality improvement data to demonstrate commitment to quality improvement

Finally, there was strong support for the establishment of communities of practice (CoPs), which enable committees or group members to collaborate through such web-based resources as online forums, confidential document storage, discussion boards, instant messaging and calendars.

Based on this feedback, in the coming months we will redesign our website and explore web-based resources to support groups and committees.

For more information: Gloria Freeborn (gfreeborn@phsa.ca)

Renal Nurse Receives CRNBC Award

Congratulations to Debbie Eggers who is the recipient of a 2005/06 Award of Excellence in Nursing Practice from the College of Registered Nurses of BC. Recipients are nominated by colleagues for their outstanding contributions to the profession and for demonstrating excellence in relation to the CRNBC Professional Standards for Registered Nurses and Nurse Practitioners. Debbie will receive the award at the CRNBC Awards Ceremony on April 24th and will be featured in the June 2006 issue of *Nursing BC*. For more information about the College and the awards program, see their website: www.crnbc.ca.

In Memory of Dolly Thorn

The renal care community has lost an exceptional colleague, Dolly Thorn, following her courageous battle with cancer at the age of 58. Dolly, renal services head nurse at Prince George Regional Hospital, was the first nurse to perform hemodialysis there.

As stated by colleague Joanne Cozac, “Dolly was someone we were immensely proud of. She was a positive influence in the way renal services and nephrology nursing has been shaped in Northern Health. She left many friends in the renal community. We are determined to honor her life and her work by striving always to meet the standards of excellence and compassion that she set.”

Please direct questions or comments about topics covered in *Renal News* to Gloria Freeborn (gfreeborn@phsa.ca).