



Thursday, April 3<sup>rd</sup> – Friday, April 4<sup>th</sup>, 2014

# Northern Health Authority Update 2014

# Program Description

	2013	2014
<b>Number of Patients</b>	<b>39</b>	<b>40</b>
<b>Prevalence Rate</b>	<b>25.4%</b>	<b>27.3%</b>
<b>% CAPD vs % CCPD</b>	<b>38% CAPD vs 62% CCPD</b>	<b>32%CAPD vs 68% CCPD</b>
<b>Staffing Design</b>		
<b># Nephrologists Dedicated to PD</b>	<b>3 rotating through clinics</b>	<b>3 rotating through clinics</b>
<b># Nursing Staff</b>	<b>Nursing: 1.7 FTE</b>	<b>Nursing: 1.7 FTE</b>
<b># Allied Health</b>	<b>Social Work: .1 FTE Dietician: .2 FTE Pharmacist: .1FTE</b>	<b>Social Work: .1 FTE Dietician: .2 FTE Pharmacist: .1FTE</b>

# Clinical Update

	2013	2014
<b>Peritonitis rates:</b>	<b>1/37.5 months</b>	<b>1/76 months on PD</b>
<b>Dominate method of catheter placement:</b>	<b>The only method of catheter placement is surgical.</b>	<b>Surgical</b>
<b>Availability of LTC facilities/unique settings to accommodate PD</b>	<b>No availability of LTC facilities/unique settings to accommodate PD.  No PD Assist in home setting.</b>	<b>Ongoing Pilot Project: 2 LTC beds attached to UHNBC site Will provide both respite and assisted PD</b>

# Areas of Focus:

Identified in 2013	Outcomes/Update
<ul style="list-style-type: none"><li>• Explore potential for PD in Care Facilities.</li><li>• Explore potential for respite for PD Caregivers.</li></ul>	<p><b>Assisted PD plus Respite ‘Pilot’ project:</b></p> <ul style="list-style-type: none"><li>• Start Spring 2014</li><li>• 2 LTC beds ‘Jubilee Lodge’ LTC facility attached to UHNBC site</li><li>• Training and care supervised by UHNBC PD nurses</li><li>• Exploring options at other sites</li></ul>

# Areas of Focus: 2014-2015

- Assisted PD
- Respite PD as a viable option
- Home visits to patients in small and remote communities.
- Building on the success of 1:1 Modality interviews with suitable CKD patients
- To encourage nurses in acute areas/ER/CTU learn PD skills
- Staff training and engagement at community kidney care sites (Terrace, FSJ)

# Challenges and Frustrations:

Identified in 2013	Outcomes/Updates
<ul style="list-style-type: none"><li>• Program was lacking a Medical PD Champion.</li></ul>	<ul style="list-style-type: none"><li>• New Medical Lead – as ‘default PD champion’</li></ul>

# Current Challenges 2014-2015

To develop a model for providing optimal care for individuals irrespective of their geographic location

