



Thursday, April 3rd – Friday, April 4th, 2014

Southern Alberta Renal Program (SARP) UPDATE 2014

Program Description

	2013	2014
Number of Patients	Total: 221 (Calgary 193, Medicine Hat 10, Lethbridge 18)	Total:233 YTD Calgary 209, Med Hat 5, Leth 19
Prevalence Rate	21% PD, 28% home therapies	22% PD, Home Therapies 29%
% CAPD vs % CCPD	25% CAPD vs 75% CCPD	17% CAPD vs 74% CCPD
Staffing Design		
# Nephrologists Dedicated to PD	There are 21 nephrologists in Calgary, 1 Lethbridge, 1 Med Hat and none of them are dedicated PD. They all have PD pt's and they follow all of their own pt's.	Nephrologists Calgary 22, Leth 1 Med Hat 1 All follow their pts through all modalities. None are dedicated
# Nursing Staff	Calgary 1.0 FTE RN Clinician 7.8 FTE RN's 1.0 FTE RN Clinician/Mod Ed Leth/Med Hat 4.89 FTE combined CKD/PD	Calgary 1.0 FTE RN Clinician 7.8 FTE RN's 1.0 FTE RN Clinician/Mod Ed Leth 2.63 FTE CKD/PD/Transplant Med Hat 2.26 FTE CKD/PD
# Allied Health	Dietitian 0.4 FTE Social Worker 0.5 FTE Pharmacist 0.5 FTE	Dietician 0.4 FTE PD, SW 0.5 FTE PD Pharmacist 2.3 FTE CKD/PD Leth/Med Hat-Dietician, Pharmacist and Social Workers follow all PD, Hemo, CKD as well as Transplant pts

Clinical Update

	2013	2014
Peritonitis rates:	1/65 pt months	1/40 pt months
Dominate method of catheter placement:	PD catheters are Laparoscopic surgical placements done by the transplant/access surgeons.	Majority continue to be laparoscopic insertions Surgeons are now also inserting buried catheters
Availability of LTC facilities/unique settings to accommodate PD	<ul style="list-style-type: none"> • 1 LTC facility in Calgary where we have 5 beds available for PD pt's and the staff are fully trained to care for them. Along with 1 respite bed which was available. • 1 LTC facility in rural Southern Alberta that have trained staff who are willing to take PD pts – currently had no one admitted • Have cyclor assist available through a partnership with home care. LPN's have been trained to set-up and strip cyclor machines. The pt/family must still attend the training and participate by putting themselves on the machine and managing the alarms. 	<ul style="list-style-type: none"> • Calgary still has 1 LTC facility with 5 beds for PD. • Calgary has 1 respite bed • Rural Southern AB has had 1 PD pt admitted to LTC facility. • Calgary continues to offer cyclor assist through the partnership with Home Care. This remains a valuable service to our pts, and we are continuing to train more Home Care LPN's to keep up with the demand.

Areas of Focus:

Identified in 2013	Outcomes/Update
<ul style="list-style-type: none">• Working on trying to track how many pt's have to start on hemo, but have chosen PD as a modality. We are hoping with the introduction of buried catheters that this could decrease the number of pts who have to start on hemo on an urgent basis.• Presently we are capped at 6 pt's who can be on the cyclor assist program with home care and we hope to increase this number to at least 12.	<ul style="list-style-type: none">• In June of 2013 the surgeons initiated the buried catheter placement. To date 18 buried catheters have been placed, and 4 pt's have started successfully on PD upon exteriorization. Will continue to follow and evaluate.• We have been able to increase our capacity to 12 pt's on cyclor assist this year.

Areas of Focus: 2014-2015

- We are continuing to collaborate with NARP (Northern Alberta Renal Program) on standardizing as many policy's and procedures and educational material as possible within AHS.
- We are in the process of developing questionnaires to assess our teaching material to ensure that we are meeting the learning needs and learning styles of our pts.
- Lethbridge CKD/PD clinic has begun having group modality education classes for which the feedback has been very positive.

Current Challenges and Opportunities 2014-2015

- Although we have had a respite bed available to our pt's, we have found that it has been a challenge to get anyone to take advantage of the service.
- We are finding it challenging to start pt's urgently in our outpatient clinic despite having a process to do so. For one, we are at capacity for training pts on a weekly basis and lack space. We also found that we were experiencing exit site leaks.
- The cycler assist program is once again nearing capacity, so we will work with Home Care to increase the number to 18 over the next year.