



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

Saskatchewan
Update 2014

Program Description

	2013	2014
Number of Patients	106	108
Prevalence Rate	24.1%	24.1%
% CAPD vs % CCPD	42% CAPD vs 58% CCPD	37% CAPD vs 63%CCPD
Staffing Design		
# Nephrologists Dedicated to PD	7	7
# Nursing Staff	5	5
# Allied Health	4 Office Assistant Pharmacy Social Work Dietitian	4 Office Assistant Pharmacist Social Worker Dietitian

Clinical Update

	2013	2014
Peritonitis rates:	Not disclosed in 2013	1 in 23
Dominate method of catheter placement:	Surgical	Surgical
Availability of LTC facilities/unique settings to accommodate PD	Availability of LTC facilities/unique settings to accommodate PD: A challenge. Education and networking underway. PD Assist in home setting: Currently not practiced	Limited availability of LTC trained to assist with PD. 2 facilities trained with a total of 3 patients.

Areas of Focus:

Identified in 2013	Outcomes/Update
<ul style="list-style-type: none">• Standardization of Home Therapies across Saskatchewan• Quality Work• Review of Patient education• Update Policy & Procedures	<ul style="list-style-type: none">• Provincial meeting with Home Based Therapies RN's held in the fall. Standardized work continues.• Quality work: switch to titanium adapters is complete. Since the conversion we have had no holes or tears in catheters at the adapter site. Previously this had been a common occurrence.• Review of patient education materials completed. All staff teach with the same materials and all patients receive the same resources.• Work continues on Policy & Procedures for Home Based Therapies

Areas of Focus: 2014-2015

- Program Growth. Continued goal for 30% of all dialysis patients to be on a home based therapy.
 - Education for staff and patients
 - Creation of assessment tool
- Training Schedule
 - Pull instead of push
 - Possible group trains

Challenges and Frustrations:

Identified in 2013	Outcomes/Updates
<ul style="list-style-type: none">• LTC for patients needing PD• Provision of care for patients living in remote areas• Increasing demands on program with limited resources	<ul style="list-style-type: none">• In rural settings there is more opportunity for PD patients requiring LTC. Urban settings continue to be an issue.• PD staff continue to work with staff in nurse stations and health centres across Saskatchewan with great success. Pre-printed peritonitis orders for home care are shared and prove helpful.• Cross training of home based therapies staff. This will allow us to put staff where the patients are not where their program is.

Current Challenges and Frustrations 2014-2015

- Catheter viability. >20% of catheters placed in the last year have required manipulation, replacement, or performed poorly on first use.
 - Efforts to improve this rate include: education for staff, physicians, and surgeons; increased patient education before surgery; development of pre-printed orders for all catheter insertions