

Expert Teams – Dialysis Care in Nursing Homes

Case-Based Learning & Mentorship

Friday, November 5, 2021

Facilitator: Kelly M. Mayo, ESRD National Coordinating Center



Meeting Logistics

- Call is being recorded and will be posted to www.esrdncc.org
- Lines will be open for all high performing organizations
 - Please stay on mute unless you are speaking
 - Do not place the call on “hold”
- Everyone is encouraged to use the video and chat features



Meeting Guidelines



INTRODUCE YOURSELF
BEFORE SPEAKING



KEEP PATIENT-SPECIFIC
INFORMATION
CONFIDENTIAL



BE WILLING TO SHARE
SUCSESSES AND
DIFFICULTIES



BE OPEN TO FEEDBACK



ASK THE DIFFICULT
QUESTIONS



RESPECT OTHERS



USE "...AND" STATEMENTS



KEEP TO TIME LIMITS

Introductions

- Meeting Focus – Dialysis Care in Nursing Homes
- Guest Experts –
 - Alice Hellebrand, MSN, RN, CNN, Dialyze Direct (NJ)
 - Zabelle Crosson, MBA, Desert Cities Dialysis (CA)
- High Performing Organizations
- ESRD Networks
- Centers for Medicare & Medicaid Services (CMS)



What are Expert Teams?

- A group made up of individuals from different high performing organizations, each with their own deep experience and knowledge
- Help others learn faster by sharing what worked (and what didn't work) in their organization
- Bring the best possible solutions to the table
- Continually learn and improve

Dialysis Care in Nursing Homes

- Decrease the hemodialysis catheter infection rate in dialysis patients receiving home dialysis at nursing homes
- Decrease the national incidence of peritonitis in dialysis patients receiving home dialysis at nursing homes
- Decrease in the rate of blood transfusions in dialysis patients at nursing homes

Questions to Run On

How Might We ...

- Improve the care and lives of dialysis patients that reside in nursing homes?
- Overcome barriers to dialysis care in the nursing home?
- Address other special needs for this vulnerable population?

Presentation by Guest Expert #1

Alice Hellebrand, MSN, RN, CNN

Chief Nursing Officer

Dialyze Direct



Dialysis Care in the Skilled Nursing Home

Alice Hellebrand MSN, RN, CNN

Chief Nursing Officer

Dialyze Direct



Nursing Home Dialysis Patients are Unique

Nursing home dialysis patients are at a pivotal and sensitive period in their health. Often having advanced age, frailty, and multiple comorbidities. There is high potential for rehospitalization.

15% of all dialysis patients pass through a SNF at some point during the year.
On any given day **40,000** dialysis patients nationwide reside in a SNF.

Case Study

Ms. R an 87-year-old End Stage Kidney Disease patient is admitted to an acute care hospital for hip fracture, disequilibrium and change of mental status. Ms. R. had an uneventful hospital stay and required skilled nursing services upon hospital discharge. The family and patient were given the following options:

1. Admit to a Skilled Nursing Facility with the option of receiving onsite dialysis
2. Admit to a Skilled Nursing Facility and receive dialysis in an offsite

These dialysis treatments are administered and supervised by personnel who meet the criteria for qualifications, training, and competency verification and are provided under the auspices of a written agreement between the nursing home and the ESRD facility

Skilled Nursing Facility with Dialysis On Site

- Patients avoid the stress and risks associated with being transported to a community dialysis center and the inclement weather encountered during transport.
- Treatments are scheduled around rehab sessions, thus enhancing participation and optimizing performance.
- Enhanced coordination and collaboration between SNF and Dialysis clinical staff

Ms. R and her family make the choice to admit to a skilled nursing facility which offers onsite hemodialysis

Dialysis Den



6 Chairs



Staff includes onsite RN



Connected technology including telemedicine



Coordination of care with the SNF staff



Post-Dialysis Recovery Time is shortened by MFD5, despite age and frailty of Nursing Home patients



Hellebrand et al. Benefit of more frequent dialysis on dialysis recovery time in nursing home patients with ESRD. ASN 2021
FREEDOM study 2010 subset requiring assistance with activities of daily living

More Frequent Dialysis

Fluid is removed with a very low UFR rate using MFD5

MFD5

4.9
ml/hr/kg

UFR

Conventional HD

9.5
ml/hr/kg

UFR

More Frequent Dialysis

Blood pressure is well controlled with MFD5

MFD5 pre-HD
systolic blood
pressure

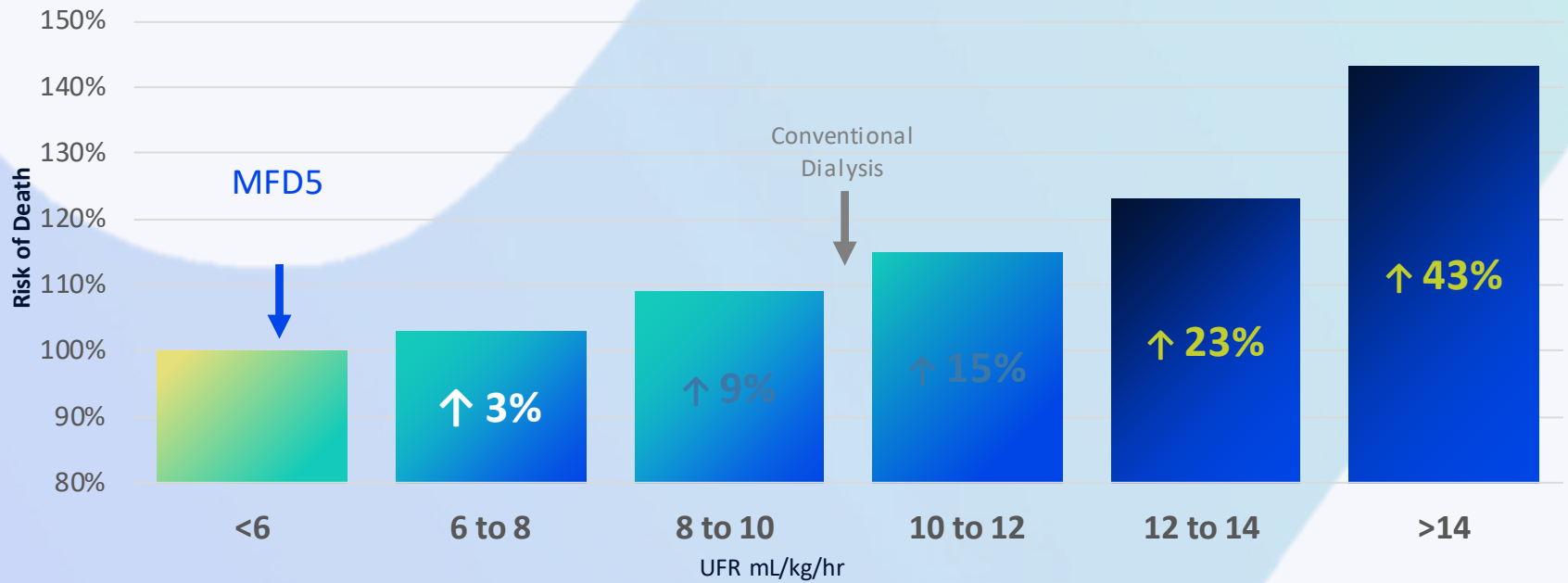
128
mmHg
median

Conventional pre-HD
systolic blood pressure

140-159
mmHg
median

More Frequent Dialysis

A higher ultrafiltration rate is associated with increased risk of death



Assimon et al. Ultrafiltration Rate and Mortality in Maintenance Hemodialysis Patients. Am J Kidney Dis. 2016

Total hospitalizations for fluid overload: 3.5%

**Enhanced collaboration and coordination of care involving Dialysis and Skilled
Nursing Home Interdisciplinary Care Team**

Enhanced Communication and Collaboration

DIALYSIS HANDOFF COMMUNICATION FORM

RESIDENT _____ DATE _____

Code Status _____

Mental Status _____ Allergies _____

Vital Signs T _____ P _____ R _____ BP _____

Current Diet/Fluid Restrictions _____

Resident Compliance with Diet/Fluids _____

New Medications Since Last Dialysis _____

Medical Problems Since Last Dialysis YES _____ NO _____

Skin Issues _____

Condition of Access Site Prior to Leaving for Dialysis
Location/Type of Access Site _____

Bruit Present NO _____ YES _____ N/A _____
Throb Present NO _____ YES _____ N/A _____
Signs/Symptoms of Infection NO _____ YES _____

Nurse's Signature _____

SECTION TO BE COMPLETED BY DIALYSIS UNIT AND RETURNED WITH RESIDENT

Pre-Dialysis Weight _____ Post-Dialysis Weight _____

Problems During Dialysis _____

Amount of Fluid Removed _____

Post-Tx Vitals: T _____ P _____ R _____ BP: Sitting _____ Standing _____

Lab's Drawn _____

**Please attach copies of the lab results*

Did Dietician Make Recommendations? _____

Did Social Worker Make Recommendations? _____

Food/Fluid Consumed During Dialysis _____ % Meal Consumed _____ Fluids Consumed _____

Medications Given During Dialysis _____

Additional Comments _____

Dialysis Nurse's Signature _____ Date _____

NURSING HOME USE ONLY -- UPON RETURN TO FACILITY FOLLOWING DIALYSIS

Bruit Present NO _____ YES _____ N/A _____
Throb Present NO _____ YES _____ N/A _____
Signs/Symptoms of Infection NO _____ YES _____

Additional Comments _____

Nurse's Signature _____ Date/Time _____

#CO-CI-0817



Let's Discuss

Q&As – 5 Minutes



Presentation by Guest Expert #2

Zabelle Crosson, MBA

Vice President Business Development and New Operations

Desert Cities Dialysis



SNF Supply Chain Surprises – Don't Get Caught Short

- Strategies and Planning to Succeed with:
 - Worldwide Supply Chain Issues and Delays
 - SNF Facility Space Constraints
 - Distributor Minimum Quantity and Delivery Charges
 - Supply Order Responsibilities & 3rd Party Tools

Q&As – 5 Minutes



Questions to Run On -- Revisited

How Might We ...

- Improve the care and lives of dialysis patients that reside in nursing homes?
- Overcome barriers to dialysis care in the nursing home?
- Address other special needs for this vulnerable population?

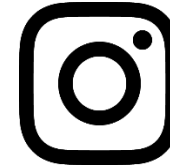
Recap & Next Steps

- Top take-aways
- I like, I wish, I will
- Additional pathways for learning
- Event evaluation

Social Media



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National Coordinating Center (NCC)



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Thank You

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