



Home Dialysis Project

The choice of home modality enhances a patient’s quality of life and is more convenient than traveling to an in-center clinic three times per week. Patients have also experienced better blood pressure control and fewer hospitalizations. Dialysis patients need education and support to determine the appropriate dialysis modality that fits their lifestyle, including but not limited to, how each modality will affect travel, diet & fluid consumption, school, work, social interaction, and well-being.

May 2022 – April 2023 Goals

- **Achieve a 10% increase in the number of incident ESRD patients starting dialysis using a home modality from the baseline year (end April 2022), for a total increase of 20% from the base period (June 2020 – April 2021) through April 2023.**
- **Achieve a 4% increase in the number of prevalent ESRD patients moving to a home modality for a total increase of 6% from the base period (June 2020 – April 2021) through April 2023.**
- **Achieve a 3% increase in the number of rural ESRD patients using telemedicine to access a home modality for a 5% total increase from the base period (June 2020 – April 2021) through April 2023.**

Barriers	Interventions	Tools & Resources
Physician knowledge of the latest home dialysis options for patients.	<ol style="list-style-type: none"> 1. Home Dialysis University information shared with nephrologists and administrators. 2. Assess what nephrologists need and want to learn and their preferred format (i.e., SurveyMonkey to Medical Directors). 	Topics available from PD University agenda: <ul style="list-style-type: none"> • How Hemodialysis Works: Standard HD and Short Daily Differences • Adequacy of HD and How to Write a Short Daily HD Prescription • Vascular Access in HHD • Home Hemodialysis Management - Dialysates and Complications • How Peritoneal Dialysis Works and “Adequacy” Concepts • Fitting the PD Prescription to the Patient Not the Patient to PD • PD Access Issues: Placement, Complications, Infections

		<ul style="list-style-type: none"> • Prevention and Treatment of PD Peritonitis • Noninfectious, Non-catheter Complications of PD • Blood Pressure and Volume Issues in Dialysis • The Long-Term Home Dialysis Patient: How to keep patients on the therapy of their choice • Prescription Writing for HHD and PD • Finances of Home Dialysis <p>Survey Monkey to evaluate what nephrologists need/want to know. Select from above topics.</p>
Need for patient educational materials when first starting dialysis.	<ol style="list-style-type: none"> 1. Use of MEI educational materials online on modality choice depending on the patient’s goals in life. 	<p>My Life, My Dialysis Choice https://www.mydialysischoice.org/ Choosing Dialysis from Patients https://choosingdialysis.org/</p>
Need to connect with patients in the nephrologist’s office for modality education.	<ol style="list-style-type: none"> 1. Engage nephrologists and nurse practitioners in predialysis education to avoid the patient “crashing” into dialysis and going right on in-center hemodialysis with a CVC. 	<p>MEI Kidney School https://kidneyschool.org/mods/ MEI: Help! I need dialysis https://course.wcea.education/app/mei/elearning/nurse/medical-education-institute/192763/help-i-need-dialysis-how-to-have-a-good-life-with-kidney-disease#/</p>
In-center hemodialysis staff knowledge of home dialysis modalities.	<ol style="list-style-type: none"> 1. Education for in-center staff provided to become knowledgeable about home dialysis modalities. 	
Lack of patient firsthand experience in seeing home machines for PD and HHD.	<ol style="list-style-type: none"> 1. Lobby days at in-center units with a machine available to see or offer 	



	"trial" home hemodialysis to experience the difference.	
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