Assessing Opportunities for Home Dialysis

It is recommended that all kidney care teams proactively reference this document when providing modality education and assessing patients for home dialysis. This document will help the kidney care team support patients to start home dialysis or reassess opportunities to transition to home dialysis, as appropriate, based on the patient's goals of care.

General Common Barriers to Home Dialysis and Corresponding Supports



Challenges with self-management or managing home environment due to patient condition

- Assisted-PD and/or assisted-HHD
- Community home care support
- Additional education or peer support system for patients and caregivers
- Backup plans for missed appointments
- Support from other providers
- Support from medical geriatric or elder clinics
- Medications to reduce agitation and slow progression of syndromes such as dementia
- Telehealth options or remote home monitoring with video capabilities

Patient's residence limitations

- Frequent delivery of home dialysis supplies
- Exploration of alternate storage opportunities
- Equipment or technologies that minimize need for supplies
- Encourage landlords to support building modifications
- Collaborations with First Nations, Inuit, Métis, and Urban Indigenous community leadership
- Support for patient in optimizing home space to create storage space
- Continuous Ambulatory PD (CAPD) or Ambulatory PD (APD) for unreliable electricity

Visual/hearing impairment

- Assisted-PD and/or assisted-HHD
- Extended training and practice time •
- Educational materials in black and white with enlarged font, and/or resources in Braille
- PD and HHD Equipment that offers voice commands, large fonts, noise activation, light flashes, alarms, and hearing assistance
- Audio recording of training while health care provider trains patients and their caregivers
- Audio recording of training describing the procedure for patient to take home
- Use of vibration machine to wake up patient
- Involvement of American Sign Language (ASL) translators where possible

Language barriers

- Translator services or other health care providers who may speak preferred language
- Use of virtual translation tools
- Encouraging presence of family members or caregivers
- Training and necessary supports for patients for machine troubleshooting if assistance is required outside of clinic hours
- Support for patient on identifying flags for when treatment should be stopped
- Translation of training manuals
- Video setups for training or reference
- Set of picture or cue cards
- Use of equipment or technology that offers language assistance

Inability to read and/or write, severe learning disability, and/or poor short-term memory

- Assisted-PD and/or assisted-HHD
- Providing extra one-on-one help and repeating information many times
- Use of dialysis machine with less complexity
- Set of picture or cue cards
- Shorter episodes of training with longer overall duration for information retention
- Chronologically organized checklists (e.g., 'step by step' processes)

Lack of family/caregiver support

- Assisted-PD and/or assisted-HHD
- Encouragement of family or caregiver involvement
- On-going support and conversations with the patient and care partner
- Opportunity for patient or caregiver to join a peer support system
- Respite or support opportunities for caregiver
- Telehealth options and/or remote home monitoring with video capabilities
- Advocacy from RRP for travel supports for patient and/or caregiver that are covered by Non-Insured Health Benefits (NIHB)











Home Hemodialysis Common Barriers and Potential Supports

Fear of self-cannulation or catastrophic event

- Introduction of cannulation early in training
- Extended training and increased practice time
- Ongoing home monitoring as needed
- Support from peer mentors
- CVC as an initial access with ongoing training and opportunities to practice
- Topical anaesthetics to increase comfort
- Psychological and/or psychiatric supports
- Support from BA Coordinators
- Starting patient with one needle
- Revise patient's training schedule and focus based on patient fear and readiness

Contraindication to anticoagulant use

- Intermittent saline flushes
- BioFlo or hemodiafiltration techniques

Patient's residence limitations (water, electricity)

- Systems to minimize need for running water (e.g., NxStage) for intermittent water supply
- Routine water quality testing
- Machines with option of premixed sterile dialysate bags, ultra-pure dialysate using reverse osmosis and deionization in small tanks, or sorbent regeneration of dialysate
- Support from RRP to fund in-home systems
- Collaborations with First Nations, Inuit, Métis, and Urban Indigenous community leadership
- Assessment of water pressure pump, water tank use, and alternate systems
- Assessment of water treatment systems
- ORN Home Hemodialysis Utility Grant

Remoteness and lack of phone/internet services

- Installation of 2 hemodialysis machines to ensure redundancy and ensure patient safety
- Emergency response plan development with community and local health services
- Telehealth or remote video monitoring
- Mobile clinics
- RRP funding support, prepaid mobile phones



得

Peritoneal Dialysis Common Barriers and Potential Supports

- Assessment on a case-by-case basis for consideration for PD; consider risk versus benefit for patient
- Use of PD functional assessments prior to access creation
- Assessment of patient's ability to manipulate clamps, connectors, and to lift bags
- Alter patient education according to skill level and/or ability
- Access to experienced laparoscopic surgery and percutaneous insertions
- Psychiatrist to support patient in overcoming mental health challenges
- Use of a night cycler or smaller exchange volumes for hernia risk or recurrence

Absolute Contraindications to Starting or Staying on Home Dialysis

- Homelessness
- Residence that does not permit home dialysis
- Uncontrolled or unmanaged active substance abuse or psychiatric issues

HHD-specific:

- Conditions that cause abrupt loss of consciousness and no help is available
- Patients' residence has unreliable electricity

PD-specific:

- Documented loss of peritoneal membrane function or extensive abdominal adhesions
- Frequent episodes of diverticulitis not surgically repairable
- Large inoperable abdominal hernia

For more information and details, please see the full *Home Dialysis Assessment Document*.

