

Innovations in Dialysis Care: Staff Assisted Home Hemodialysis in the Skilled Nursing Facility

Chantal M. Dynes, BSN, RN

Regional Director-Texas

Dialyze Direct



Objectives

1. Identify the unique needs of long-term residents receiving dialysis treatment onsite
2. Describe Pathways to reduce hospital readmission rates for the patient population
3. Discuss the benefits for dialysis patients receiving treatment onsite in a long-term care facility
4. Discuss clinical care collaboration and coordination



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.

Improving the Care of End-Stage Renal Disease Patients Receiving Staff Assisted On-Site Dialysis in Skilled Nursing Facilities

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 dialysis facility

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

More Frequent Dialysis

Building the MFD Model of Care for the Nursing Home Dialysis Patient

5 times/week schedule (MFD5)
2 hrs 50 min/session



Staff assisted
on-site in a den setting



NxStage technology
repurposed and customized



Communication and Collaboration



Subacute rehab



Long Term Residents



Dialysis Den



6 Chairs



Staff includes onsite RN



Connected technology including telemedicine



Coordination of care with the SNF staff



Enhanced communication and collaboration involving Dialysis and Nursing Home Interdisciplinary Care Teams

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 ____

Thrill 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* _____

Labs 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 ____

Thrill Present NO ____ YES ____ N/A ____

Signs/Symptoms of Infection NO ____ YES ____

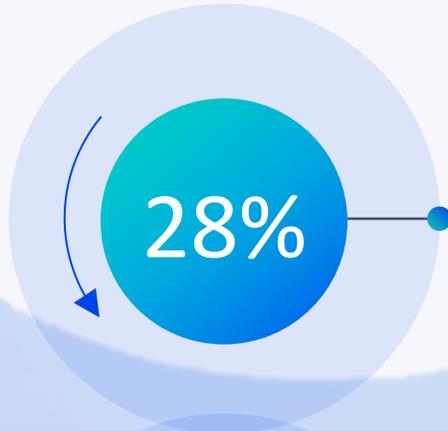
Additional Comments _____

Nurse's Signature _____ Date/Time _____

#DD-CS-0817

MFD5 delivers highly effective fluid management

USRDS HDx3



ESRD HD hospitalizations with a cardiovascular cause (USRDS)



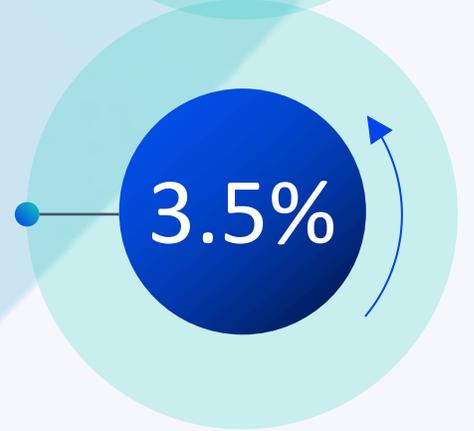
Readmitted to hospital in 30 days (USRDS) with the same Dx

Patients admitted with a hospital diagnosis of CHF

MFD5



Readmitted to the hospital with fluid-related problems



¹Weinhandl et al. Hospitalizations in Daily HHD and matched thrice-weekly in-center HD patients. Am J Kidney Dis 2014.

Blood pressure is well controlled with MFD5

MFD5 pre-HD systolic blood pressure

**128
mmHg**

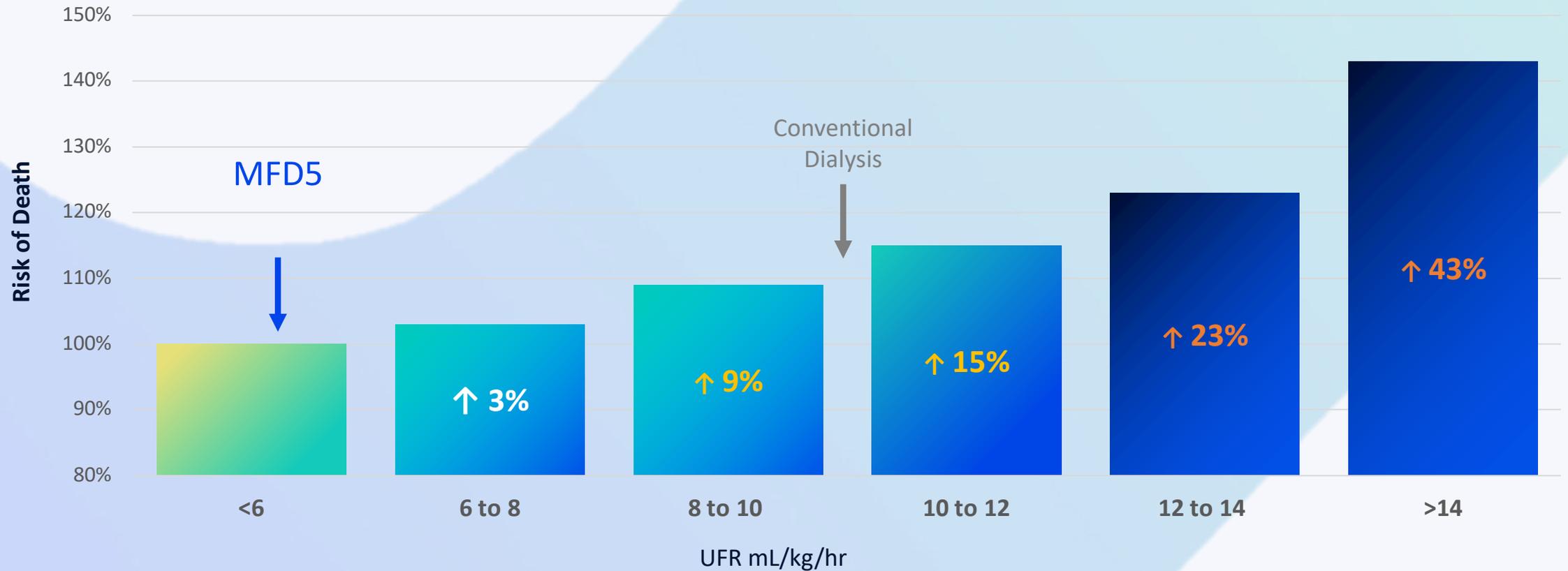
median

Conventional pre-HD systolic blood pressure

**140-159
mmHg**

median

The more gentle MFD5 ultrafiltration rate is associated with increased survival



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

Tomorrow is no place for yesterday's
health strategy



Let's Discuss