

Nurse Navigator: Boldly going where no nurse has gone before in CKD and modality education

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What is a nurse navigator?

What are the 10 steps to being a navigator?

Do you need a nurse navigator for your program?

What is a nurse navigator?

- * Provide modality education
- * Assess modality candidacy
- * Help patients make decisions
- * Support patients in the transition from CKD to dialysis



My Journey



Nephrology nurse




Home dialysis nurse



Ontario Renal Network

- ORN provides funding to the 26 programs in the province
- This funding model is more patient-focused, therefore nurse navigators can provide education with the intention to increase home dialysis numbers

What are the 10 steps to being a navigator?



1. Your program has to have a unified philosophy

“every new patient in our ESRD program is a potential home dialysis patient until proven otherwise by a nurse navigator”

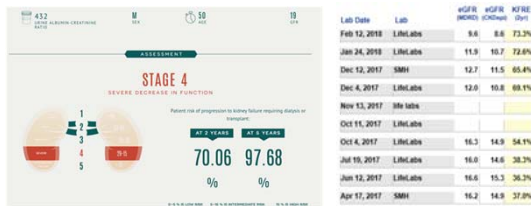
2. Find the patient to navigate

- * Patients in need of education
 - * In predialysis care
 - * How to predict who will need Renal replacement therapy and when?
 - * KFRE vs. GFR vs. ACR



KFRE: Kidney Failure Risk Equation
 eGFR: estimated Glomerular Filtration Rate
 ACR: Albumin Creatinine Ratio

KFRE: Kidney Failure Risk Equation



Find the patient to navigate: Because they won't find you!

Nephrology clinic

In-Centre HD

Transplant Clinic

In-patient new Starts

Cardiology

Education to 153 patients per year 17 per month

Find the patient to navigate: Because they won't find you!

- * Present at inpatient and consult rounds
- * Present at Multidisciplinary Transplant Failure Clinic
- * Present at Kidney Care clinics
- * Team approach to determine upcoming and appropriate patients for home dialysis
- * The Key word is "BE PRESENT"
- * Out of sight out of mind

Email example about candidacy

- * Dear Jeff and Mina,
- * I had a long discussion with him just now and he is still undecided re: modality.
- * I was surprised myself as I thought he would be a great PD candidate, but I think he is reluctant to bring PD "into his home" on a nightly basis and is attracted to the idea of 4 hrs 3x/week and then he is free the rest of the time.
- * I urged him to think carefully about it and weigh his options. He will be back in KCC on Sept 8. (Mina, can you give him a tour of our units on that day? He was quite interested in that.)
- * For now, I would put the referral to see the surgeon on hold.
- * If he opts for HD, I would refer him for AV mapping, etc. He likes going into his whirlpool and so a CVC would be undesirable for him.
- * Thanks to both of you for all your help.



- Every nurse navigator needs a Nephron for guidance and support
- The "GO TO" person



Dr. Jeffrey Perl

3. Build relationship and trust

- * Listening to patients and family members
- * Knowing patients' and care partners' life goals
 - * incorporating them into treatment options
- * Intuitive counsellor
- * Crippled by fear
- * Trauma of starting dialysis
- * Fear of making the wrong decision



Gentle, constant, reliable presence

- * Education and support during transition:
 - * Transitions therapy coordinator!
- * Consistent across clinics and different settings
- * Involvement of family members and caregivers
- * Home visits and team meetings
- * Peer to peer support



4. Assess readiness to learn

- * Readiness of the team vs. readiness of the patient
- * Motivation to learn
- * They need to accept the need for dialysis before considering a modality
 - * "I'm getting a kidney"
 - * "I feel fine"
 - * "I'll make the decision when its time"
- * Patients' decision is their own
 - * Empowerment is our responsibility



Not everyone is on the same page!

1. We do not think home dialysis is a good option but they want home dialysis
2. We think home dialysis is a good option but they do not want to do home dialysis
3. They are not ready to talk at all
4. They know what they want and have the correct information
5. They know what they want but based on erroneous information

5. Education, Education, Education

- * A dedicated person to provide standardized yet individualized education for patients and family members and to advocate on their behalf
- * One-on-one and group sessions
- * Multiple times, gradual introduction of information

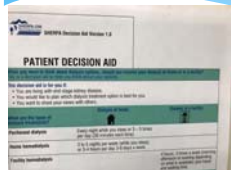


Educational materials

- * Conversation and materials hand in hand
- * Highlight important information
- * Personalize and add notes
- * Discuss what patient learned after the session
- * Use teach-back to check understanding
- * Next steps



Shared decision making tools




No decision about me, without me!

COMMON QUESTIONS AND ANSWERS	Common Question	Answer	Common Question	Answer
	Why should I choose home dialysis?	Home dialysis allows you to live at home, which is more comfortable and convenient for you. You can avoid the hassle of traveling to a dialysis center and waiting in line. Home dialysis also allows you to spend more time with your family and friends.	How do I know if I'm ready for home dialysis?	Your doctor will evaluate your health and determine if you are a good candidate for home dialysis. You will also need to have a home dialysis machine installed in your home.
	What are the risks of home dialysis?	Home dialysis carries the risk of infection, which can be serious. You will need to follow strict hygiene protocols to prevent infection. You will also need to have a clean, dedicated space for your dialysis machine.	How do I get a home dialysis machine?	Your doctor will refer you to a home dialysis center, which will provide you with a home dialysis machine and the necessary supplies. You will also receive training on how to use the machine.
	How much does home dialysis cost?	Home dialysis is covered by Medicare and most private insurance plans. You may need to pay a copayment or coinsurance for the machine and supplies. Your home dialysis center will help you understand your costs.	How do I get help with home dialysis?	Your home dialysis center will provide you with a nurse navigator, who will help you with the process of getting a home dialysis machine and training you on how to use it. You will also have access to a support group and other resources.
	How do I know if I'm a good candidate for home dialysis?	Your doctor will evaluate your health and determine if you are a good candidate for home dialysis. You will also need to have a home dialysis machine installed in your home.	How do I know if I'm a good candidate for home dialysis?	Your doctor will evaluate your health and determine if you are a good candidate for home dialysis. You will also need to have a home dialysis machine installed in your home.
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6. Peer support (formal and informal)

- * Formal: Connecting with a peer support volunteer
- * Informal: tour of the dialysis unit talking to a patient and family members during home dialysis training
- * Group education sessions




7. Identify and overcome barriers

- * They have to have a home to do home dialysis
- * Nurse navigator conducts home visits with the social worker as needed
- * Collaboration with home care to improve support to Home Dialysis patients & their families



Elephant in the room! "bias"



'Whenever home PD is deemed "safe" (a very relative term) I always let the patient choose but in this case, I think an 87 year old living alone with no immediate supports close at hand would make me lose sleep'

8. Establish a reliable PD access pathway

Before:

PD access and Nurse Navigation: A Match made in Heaven

After:



- * Coordinates consult appointment & accompanies patient to appointment, exit site location
- * Provides pre-admission facility information
- * Provides pre and post operative support
- * Assist other programs with PD catheter insertion

Dialysis access team

- * We wanted to have laparoscopic PD catheter insertion to maximize options for our patients
- * What did we need:
 - * Surgeon who is interested in inserting PD catheters
 - * Dedicated PD Catheter insertion OR time
 - * PD Access nurse to coordinate
 - * Nephrologist to provide PD access support

PD access team



PD Access Coordinator Surgeon 2012-2017 Surgeon As of 2018

9. Thinking outside the box

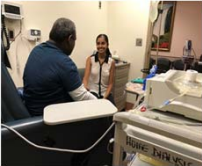
- * 50 year old male living in a group home followed in KCC
- * PAST MEDICAL HISTORY:
 - * 1. Developmental delay
 - * 2. Autism
 - * 3. Schizophrenia -- of note this gentleman cannot give consent and has been given a public guardian to give consent on his behalf
 - * 4. Hypertension
 - * 5. End-stage renal disease -- secondary to cystic disease NYD on a background of ischemic nephropathy

Family meeting to talk about options


Conservative Care	Hemodialysis	Peritoneal Dialysis
<ul style="list-style-type: none">• Was not an option by the care provider and his brother	<ul style="list-style-type: none">• Transportation• Sitting for 4 hours of treatment• Needing someone to be with him• Infection risk of hemo line• Pulling the line out	<ul style="list-style-type: none">• PD catheter infection risk• Pulling on the catheter and some mechanical damage

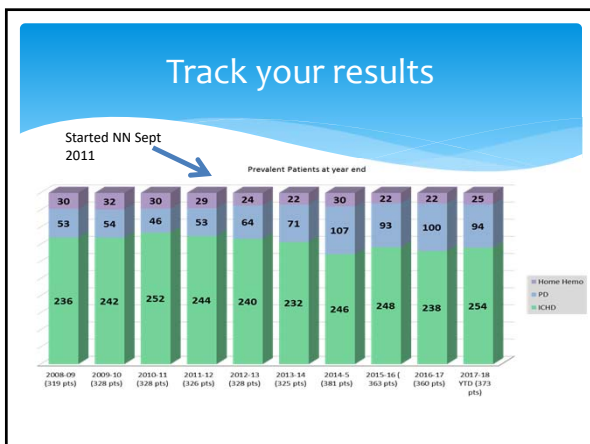
Let's do PD!

- * Laparoscopic insertion of peritoneal dialysis catheter with omentopexy
- * CAPD with home care support
- * Successful story



10. Team work is key





10 Steps for navigation

1. Unified Philosophy
2. Find the patient to navigate
3. Build relationship and trust
4. Assess readiness to learn
5. Education, Education, Education
6. Peer support (formal and informal)
7. Identify and overcoming barriers
8. Establish a reliable PD access pathway
9. Think outside the box
10. Team Work is Key

Do you need a navigator? Yes

Education class



Doctors office



PD catheter insertion



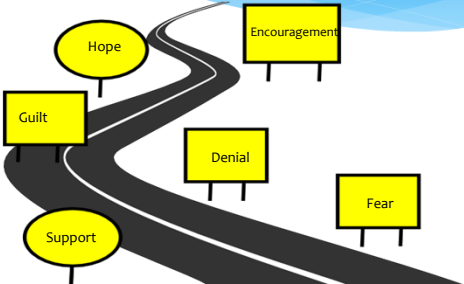
Nobody Communicates With Each Other



Dialysis clinic



The transition from CKD to dialysis is a journey



Hope

Encouragement

Guilt

Denial

Support

Fear

Cross talk!

The diagram illustrates a transition from a siloed structure to a collaborative one. On the left, silos are represented by vertical lines with people icons at the top. In the center, a gap is bridged by a rainbow arch with two people holding hands. On the right, a target is shown with arrows from various people icons pointing towards it. Text between the silos and the target reads: 'From Silos, Lack of Communication, Multiple Handoffs To Cross Functional Roles, High Collaboration, Results Oriented'.

Do you need a navigator? Yes

A photograph of a screen displaying handwritten text in purple ink: 'navigating through life is easier with a navigator. #findAmine'.

Questions

A collage of four images: a question mark icon with a person, a quote 'Much of the beauty of life is found in people who care.', a 'KEEP CALM AND BOLDLY GO' sign, and a 'thank you!' sign with a red apple.
