



# Home Visits – More than just a cup of tea

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## Introduction:

The perceived benefits of a robust home visit program are: reduce PD related infections, improved PD therapy longevity, reduced PD related admissions and increased patient satisfaction. The international society of Peritoneal Dialysis (ISPD), state that home visits should be part of any PD service. Currently there are no clear recommendations around visit frequency and types of assessment.

## Method:

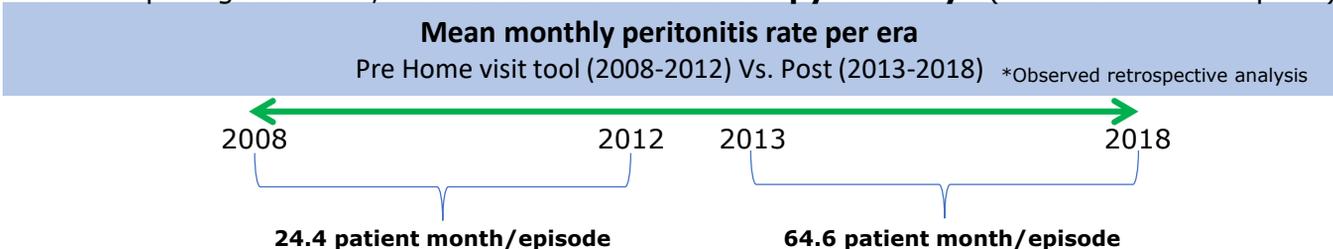
In 2013, the PD team at Alfred Health developed a home visit risk assessment tool to aid in prioritising patients and guide the frequency of visits i.e. low, moderate and high risk.

Risk Level	Home Visit Frequency
Low (0)	> 3 monthly
Moderate (1)	2 – 3 monthly
High (2)	1 – 2 monthly
Very High (3)	Fortnightly – 1 monthly

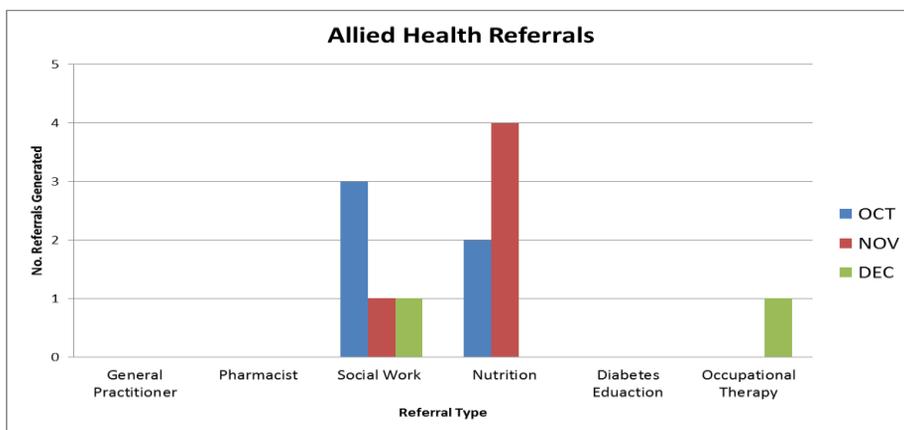
NAME	RISK SCO	REGION	SUBURB	JAN	FEB	MARCH	APRIL	MAY	JUNE	JULY	AUGUST	SEPT	OCT	NOV	DEC
1	2	SOUTH EASTERN	ROSEBURY												
2	2	SOUTH EASTERN	MT MARINA												
3	2	GREATER PENINSULA	HORNBOTON												
4	2	COUNTRY	BELOUNA												
5	2	HELBORNE OUTER	CARNEGIE												
6	2	FRANKSTON COASTAL	FRANKSTON												
7	2	HELBORNE OUTER	BERKICK												
8	2	GREATER PENINSULA	ORONANA												
9	2	FRANKSTON INNER	SOMERVILLE												
10	2	FRANKSTON INNER	HASTINGS												
11	2	GREATER PENINSULA	ROBSONIA												
12	2	EASTON	ROBSONIA												
13	2	COUNTRY	ROBSONIA												
14	2	GREATER PENINSULA	ROSEBUD												
15	1	HELBORNE INNER	HELBORNE												
16	1	HELBORNE	HOPPERS CROSSING												
17	1	HELBORNE OUTER	CHELTENHAM												
18	1	HELBORNE INNER	ST KILDA EAST												
19	1	EASTON	BARWOOD EAST												
20	1	HELBORNE INNER	ELWOOD												
21	1	COUNTRY	GOSBORNE												
22	1	SOUTH EASTERN	MEACONSFIELD												
23	1	COUNTRY	ROSE												
24	1	HELBORNE INNER	SOUTH YARRA												
25	2	FRANKSTON COASTAL	FRANKSTON												
26	2	SOUTH EASTERN	KEYSBOROUGH												
27	1	GREATER PENINSULA	ORONANA												
28	1	FRANKSTON COASTAL	FRANKSTON												
29	1	FRANKSTON COASTAL	FRANKSTON												
30	1	SOUTH EASTERN	ROSVILLE												
31	1	HELBORNE INNER	HELVILLE												
32	1	HELBORNE INNER	HELVILLE												
33	1	FRANKSTON COASTAL	FRANKSTON												

RISK FACTORS	
Age > 65 years	
Hospital admission ≤ last month	
Peritonitis/ESI ≤ last month	
Concerns re compliance	
Socially isolated/house bound	
Difficulties with fluid management	

Since the assessment tool was implemented positive outcomes observed – improved peritonitis rates comparing two era's, with **median time of therapy 686 days** (censored for transplant).



In conjunction with this risk assessment tool a 'home visit assessment form' was created to help guide and document the assessment. The outcomes from this form were audited prompting a **revised** 'home visit assessment form'. The audit demonstrated gaps in the referrals generated from home visits from an allied health / GP referral perspective. This prompted a change in the domains the new 'revised' assessment form will focus on. (Figure 1, shows the audit results. Figure 2, shows the domains / assessment areas of both the original and revised assessment forms ).



(Figure 1)

Original Domains	Revised Domains
Home visit goals – adequacy, re-training, line-change	Clinical assessment – vitals, fluid status, general health, exit site. (GP / Diabetes Ed / Other specialist referrals)
Exit site assessment	Dialysis – stock, storage, environment
Fluid assessment	Knowledge and skill – troubleshooting, protocols i.e. contamination
PD Set up technique	Medications – compare to records, education (pharmacy referral & GP)
Other PD techniques – dressings, troubleshooting Stock manage, environment	Family & Community – social screening (social work referral)

## Conclusion

(Figure 2)

The next phase is to audit the revised 'home visit assessment form' and compare the results with the original audit. The audit will ensure ongoing improvements in patient specific outcomes and increase PD patient support.