Evaluation of a peritoneal dialysis assessment tool: One unit’s experience

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Introduction

A Peritoneal Dialysis Unit (PDU) delivering peritoneal dialysis (PD) services throughout South Eastern metropolitan region and extending into Gippsland across three locations.

In 2019 195 patients in total were treated in the PD Unit.

All pre dialysis patients are invited to attend a two day education session where current renal replacement options are discussed.

Following on from the two day education sessions anyone who expresses an interest in PD as a preferred therapy is then invited to come into the PDU for further education.

The selection criteria for commencing onto the PD program has shown to be effective in highlighting medical and social concerns prior to the patient commencing onto the program.

PD Assessment

The PDU initiated a checklist, as a tool to assist with potential patients and their families.

All potential patients are invited to attend the PD unit for a one on one assessment with a PD nurse who spends approximately one hour with each client to assess his/her suitability for PD.

The assessment tool discusses any medical barriers that may prevent a successful candidate.

This includes previous abdominal surgeries, diverticulitis, or manual dexterity issues preventing independent connections. The tool also covers living arrangements, family and social support, cognitive concerns, transport needs, mobility and vision issues.

In the process of performing the assessment the PD nurse assesses the patient’s self-care ability which includes medication management and compliance to attending regular medical appointments.

In this assessment phase any cause for concern is identified and can be discussed with the MDT and the option for further evaluation if required and additional screening can be organised.

Conclusion

The purpose of the review is to investigate the current practice of the individualised chat in isolating potential problems prior to commencing a home therapy program.

While the PD assessments are timely and nursing time dependent, the assessment tool has shown the efficacy of performing this pre dialysis discussion in identifying any problems early.

The benefit to the patients and the healthcare provider may be invaluable.

The implementation of the PD pathway has allowed for streamlining education and care, including the involvement of the MDT if required.

The assessment tool has highlighted value to the patient to identify and be discussed with the MDT and the option for further evaluation if required and additional screening can be organised.

Cognitive

Neuropsychological syndrome in CKD patients of cognitive slowing and attention defects (Herrmann & Kribben 2014) have been reported.

If family are in attendance, have they noticed any decline in memory function?

Can they use a mobile phone, which is necessary for current practice of online stock ordering from home care team?

Would patient benefit from further cognitive assessment?

Communication

Is the patient English speaking or was an interpreter used?

Currently our unit offers language other than English spoken from home team nurses that are fluent in Malay, Cantonese, and Mandarin. This can eliminate the use for interpreters for theses patients needs.

Are there any hearing deficits, which may impair ability for patient to communicate over the phone?

Physical

Manual dexterity is assessed with the use of the dummy tummy and PD connections.

The patient is assessed to use the Tenckhoff catheter connections and clamps and noted if cannot make connections. If unable to make connections can adaptive clamps be used?

Mobility noted if walking into facility, if uses any walking aids. If so, how will this affect a home based therapy?

Any other concerns regarding physical ability?

Social

Transport

Can the patient drive themselves?

What is their ability to attend routine appointments independently?

If not what family supports are available or do they have access to public transport or have a concessional taxi card?

Housing

Describe housing situation such as permanent home or renting.

Who does the patient live with?

Are there any pets in the home?

Is the home safe area to carry out the program?

Is the home safe environment for home visits to take place?

Psycosocial

Discuss chronic illness and flag any referrals to the MDT if required.

Any support person?

Flag any concerns regarding a tenckhoff insertion? Any body image concerns?

Travel

Do they like travelling overseas or go on cruises?

Do they have a caravan and plan trips around Australia?

Do they have holiday homes and will require stock delivered to other areas?

Pre assessment knowledge

Attended education days, patient preference, short video, picture booklet, dummy tummy and connections.

Has patient been reviewed in renal failure clinic or do they have a private nephrologist?

Has patient read ‘living with kidney failure’ booklet, direct patient to look at Kidney Health Australia website.

Age Demographics 2019

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eGFR at time of PD chat 2019

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<tr>
<th>Age</th>
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PD Assessment outcome 2019

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<th>Number of Patients</th>
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