



Growing Home Modalities Through A Group Training Approach

July 24, 2024

Continuing Education



- To complete the course, the learner must:
 - Watch this 60-minute webinar
 - Complete post-test questions & evaluation
- 1.0 contact hours approved for Nursing
 - Quality Insights is accredited as a provider of nursing continuing professional development by the American Nurses Credentialing Center's Commission on Accreditation
- Quality Insights and other planners for this educational activity have NO relevant financial relationships with ineligible companies to disclose.
- The expiration for this enduring material is 07/23/27



Learning Outcomes

- After attending this activity, 80% of participants who complete the evaluation will self-report an increase in knowledge regarding the topic covered.



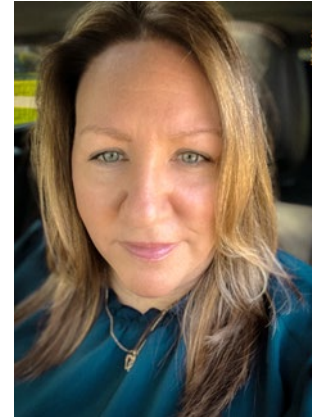
Bringing Patients Home: Leading The Way For Innovation

Mishawaka Home Dialysis



Tammy Carmean
MBA-HM, BSN, RN, CMSRN

Home Therapies Program Manager
Fresenius Kidney Care
Mishawaka, Indiana



Donna Ferguson
BSN, RN

Home Therapies Charge Nurse
Fresenius Kidney Care
Mishawaka, Indiana

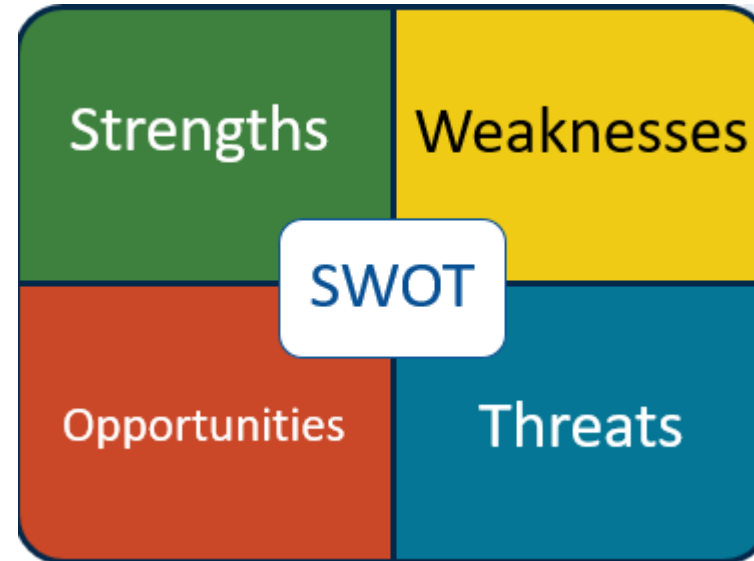
Mishawaka Home

■ History

- Stagnant Stand-Alone Home Program
- Limited Physician Buy-In
- Limited Team Buy-In
- Antiquated Practices
- Micromanaged Staff
- Limited Training Capacity
- Preconceived Ideas Regarding Home Therapy
 - ▲ Patient Selection Bias
 - ▲ Modality Bias

Assessment

- Current State
 - SWOT Analysis
 - Gap Analysis
 - Team Members
 - Current Processes
 - Barriers and Concerns
 - Inefficient Practices
 - Clinic Culture
 - Current Facility Layout
 - ▲ Aesthetics of the Clinic



Planning

- Developed Roadmap for Strategic Growth
 - Dedicated Meeting Room: “War Room”
 - Roadmap Displayed on Wall
 - Initiatives Broken Down Quarterly
 - Monthly Milestones
 - Stretch Goals for Staff
 - Initiatives Aligned with Quality Goals
 - Bonus Structure for Staff



Development

■ Program Changes

- Home First Culture
 - ▲ All Patients Can Come Home
 - ▲ Physician and Team Buy-In
- New Nursing Model
 - ▲ Relationship Based Care Nursing Theory
 - ▲ Patient Centered Care
- New Staffing Model
 - ▲ Case Management/Trainer Model
 - ▲ Support Staff
- Modified Clinic Layout
 - ▲ Reconfigured Existing Space
 - ▲ Improved Clinic Aesthetics
- Incorporated Lean Six Sigma Principles
 - ▲ Reduced Waste, Inefficiencies, and Redundancies
 - ▲ Process Improvements and Resource Optimization

Facility Modifications

- Group Training Area
 - Train up to 16 patients a day
 - ▲ Training PD and HHD Simultaneously
 - Utilizing 2 RNs and 1 PCT



Building Our Census

■ Building census

- Accepting all Patients
- Patient Centered
- Giving Patients a Choice
- Optimal and Urgent Starts
- PCT/RN Out-Patient Clinic Champion: Educate Patients About Home
- Kidney Care Advocate
- Developed Patient Pipeline
- Self-Cannulation Training in the Out-Patient Clinic
- Built Collegial Relationships with Area Hospitals to Promote “Home First”
- Focus on PD to HHD Transition
- Renal Care Coordinator Collaboration

Transition

■ Before

- 71 Patients
 - ▲ 2 HHD
 - ▲ 69 PD
- Stagnant Patient Population
 - ▲ 1:1 training
 - ▲ Staff Not Crossed Trained to Both Modalities
 - ▲ Patients Hand Selected for Home Therapy
 - ▲ No Home Growth Plan
 - ▲ No ICHD to Home Transition Plan

■ After

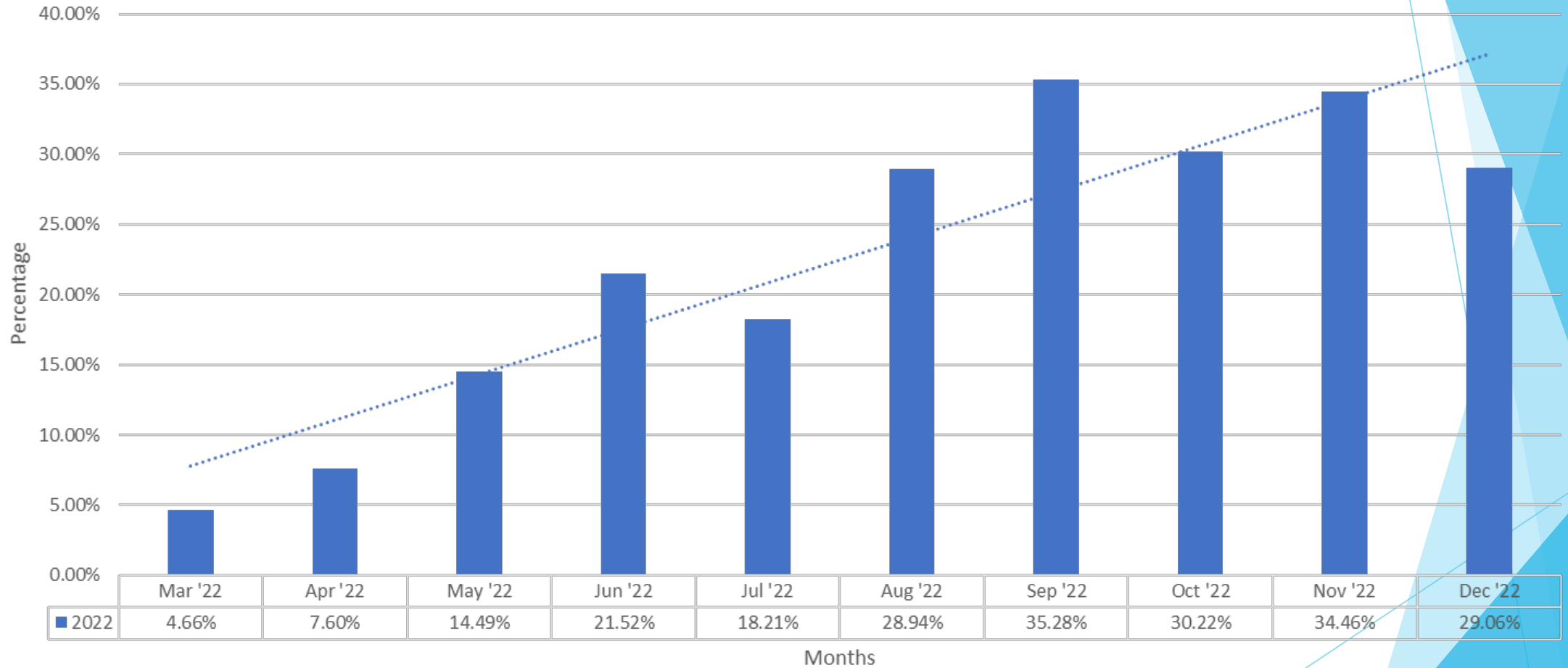
- 116 Patients
 - ▲ 23 HHD
 - ▲ 93 PD
- Thriving Patient Population
 - ▲ Group Trainings
 - ▲ Staff Cross-Trained to Both Modalities
 - ▲ All Patients Accepted
 - ▲ Strategic Growth Plan Initiated
 - ▲ ICHD to Home Transition Plan
 - ▲ Home Therapy Pipeline

Results

- ▲ Trained 88 Patients in 10 Months
- ▲ 65 Series 1 Trainings
- ▲ 90.12% Training Success Rate
- ▲ 42 Direct to Home Starts
- ▲ 17 ICHD to Home Therapy Transitions
- ▲ 3 PD to HHD Transitions

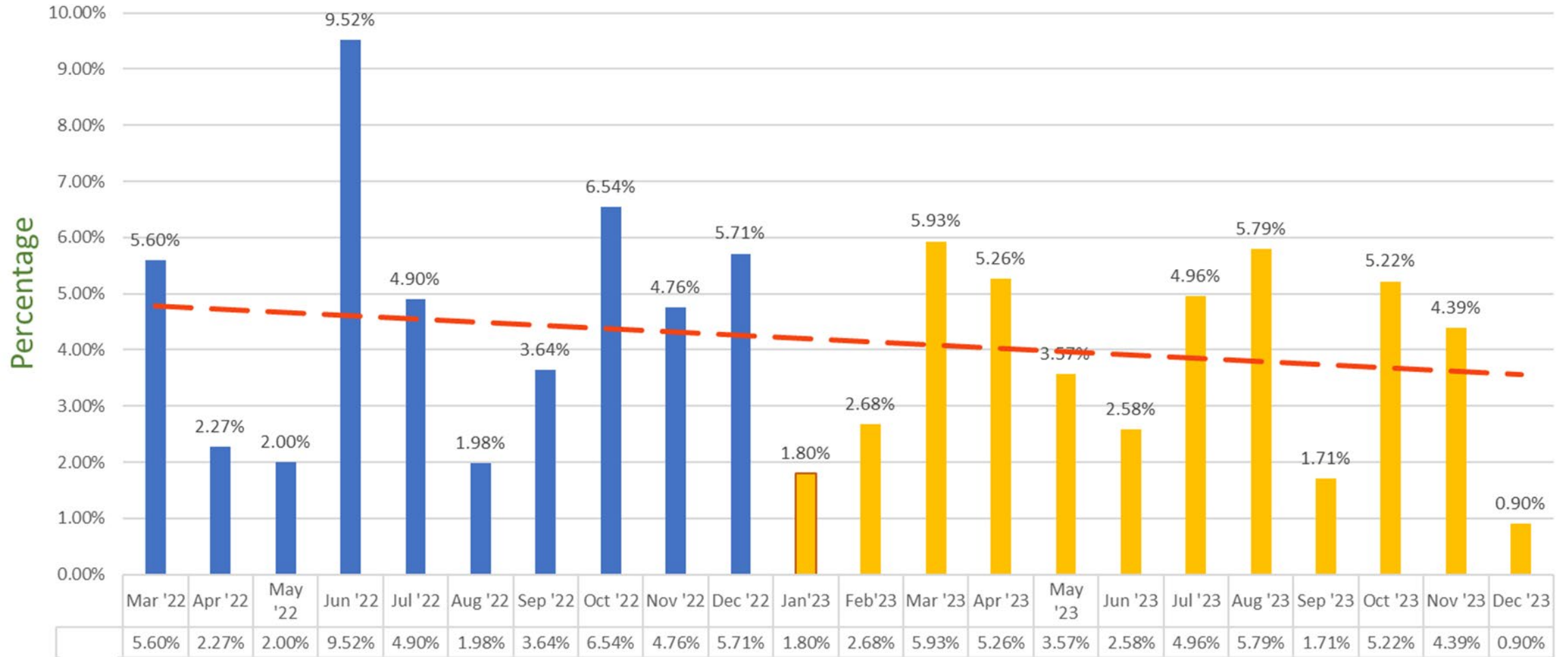
Trainings

Organic Growth



Take Away: Group training drives more patients to home therapy, assists with short staffing issues, creates support system network for patients, and shortens wait times for patient training.

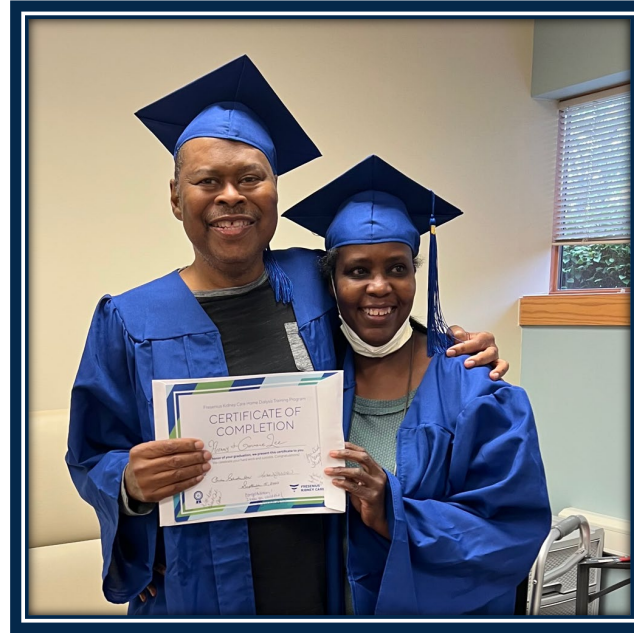
Drop Percentage For All Home Modalities



March 2022 to Year Ending 2023

Patient Graduation

- Cap and Gown Ceremony
- Graduation Certificate
- Staff Celebrate with Patient and Caregiver
- Upbeat Music and Balloons
- Many Smiles and a Lot of Clapping



Outcomes

- Increase in Local Patient Advocates: Patients Returning to Their ICHD Clinics to Promote Home Therapy
- Psychosocial Wins: Employment, Traveling, Motivation, Mental and Physical Well-Being
- Creation of Self Support Group for Patients and Caregivers: Patients Exchange Contact Information, Create Group Facebooks, Lean on One Another for Support and Encouragement
- Staff Fulfillment: Increased Self Confidence, Received National Recognition for Their Work, Mentors for Other Home Clinics, Patients and Their Families Express Their Appreciation. Staff State: “Watching the Patients Lean on One Another Makes Me Happy”. “Experiencing the Interactions of Care Partners Encouraging Each Other Touches Our Hearts”.
- Something Magical Happens: The Patient Spirit Comes to Life
- Patients State: “You Gave Me My Life Back”

The TEAM That Does It All!



Questions?
Comments?

Evaluation and Post-Knowledge Check

- Link or QR Code

- <https://www.surveymonkey.com/r/WPLCKTH>



QR Code

Activate the camera on your smartphone and scan this QR code to link to the **evaluation**



THANK YOU!



Quality
Insights
Renal Network 5

This material was prepared by Quality Insights Renal Network 5, an End Stage Renal Disease (ESRD) Network under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services (HHS). Views expressed in this material do not necessarily reflect the official views or policy of CMS or HHS, and any reference to a specific product or entity herein does not constitute endorsement of that product or entity by CMS or HHS. Publication No. ESRD5-071824