Peer Mentoring

Course 4: Discussing Home Dialysis as an Option









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This course has six parts:

Part 1: Introduction	2
Part 2: Learning about Home Hemodialysis	4
Part 3: Learning about Peritoneal Dialysis	7
Part 4: Talking with Your Peer about the Home Dialysis Choice	11
Part 5: Using Resources to Support Choices	16
Part 6: Sharing Resources on Home Dialysis Choices	18





Course 4: Discussing Home Dialysis as an Option

Welcome to Course 4!

In this course, you will learn about home dialysis. The course will prepare you to talk with your peer about home dialysis as a treatment choice.

You are not expected to be an expert in home dialysis. That is the role of the healthcare staff at your facility. They will answer your peer's questions. They will also support you in your role as a peer mentor.

After taking this course, you will be able to:

- Describe what home hemodialysis is.
- Describe what peritoneal dialysis is.
- Explain how you can support your peer in making treatment choices.
- Share resources with your peer.
- Identify resources on home dialysis choices.

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- Part 1: Introduction
- Part 2: Learning about Home Hemodialysis
- Part 3: Learning about Peritoneal Dialysis
- Part 4: Talking with Your Peer about the Home Dialysis Choice
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- Part 6: Sharing Resources on Home Dialysis Choices

Please read all six parts. You can also go back and re-read parts as you wish.

After you have finished, take the quiz about what you learned.





Part 1: Introduction

Healthy kidneys remove waste and extra fluid from the blood. When kidneys can no longer do this, fluid and waste build up in the body. This condition is known as kidney failure. Another name for kidney failure is end stage renal disease.

Dialysis is one way to treat kidney failure. Dialysis can be done in a facility or in the home. This course talks about the two types of home dialysis—hemodialysis and peritoneal dialysis.

Benefits of Home Dialysis

An individual needs to decide whether to get dialysis at home or in a facility. He or she can look at these benefits to help with the choice. At home, he or she may have:

- More independence.
- More control of life choices.
- Less travel to a dialysis facility.
- More freedom to fit treatment into his or her own schedule.
- More freedom to choose day or night treatment.
- More energy after treatments.
- Better sleep.

He or she may also:

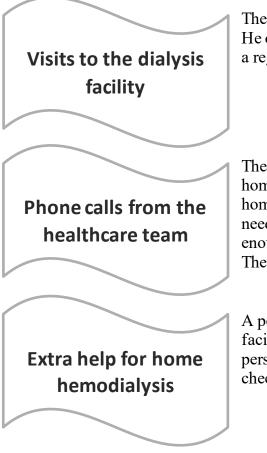
- Feel better during dialysis.
- Feel less "washed out" afterwards.
- Not need as much medicine to control blood pressure.
- Not need as much medicine to control phosphorus. (This helps prevent bone disease.)
- Have less tingling in the feet and legs.





Support for Home Treatment

A person choosing home treatment is not alone. He or she gets support from the home dialysis facility. The facility may be called a home program.



The person doing home dialysis visits the dialysis facility. He or she meets with the healthcare team. This happens on a regular schedule.

The healthcare team is in touch by phone. Staff from the home program may also visit the home. They look at the home to make sure the person has everything he or she needs. This would include checking to see if there is enough space. The staff also helps solve any problems. They are not there to judge, but to help!

A person doing home hemodialysis has extra help. The facility can link its equipment to the equipment in the person's home. The healthcare team uses the equipment to check on how treatments are going.





Part 2: Learning about Home Hemodialysis

In hemodialysis, blood is pumped out of the body to a machine that acts as a kidney. The machine cleans the blood. The cleaning is called filtering. The blood is returned to the body after it is cleaned.

Hemodialysis can happen in a facility. Or it can be done at home. It is done the same way wherever it takes place. When a person can get hemodialysis at home, family or a friend can help.

Home hemodialysis can take place during the day or at night. Hemodialysis performed at night is often called nocturnal dialysis.

The number of treatments each week can be from three to seven times. The person's doctor prescribes how often to do treatments. The number of hours for each treatment is based on the number of treatments per week and on medical needs.

A person choosing treatment at home needs to decide on the type of dialysis to do. The benefits may help him or her decide.

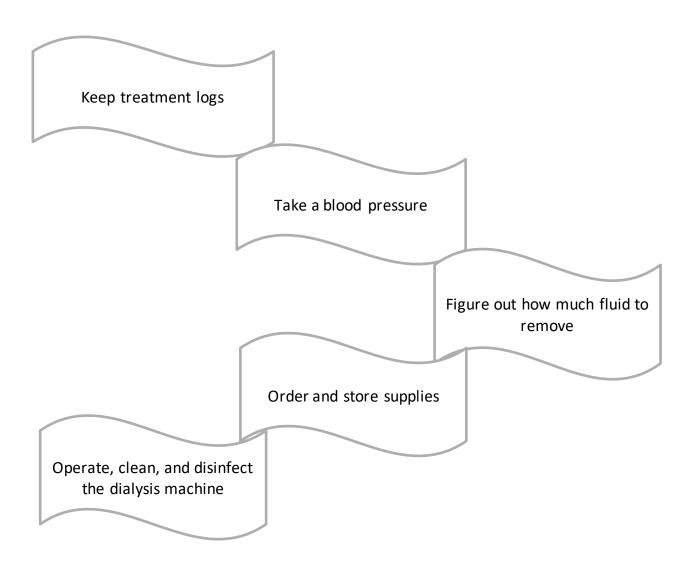




Training

A person wishing to do hemodialysis at home needs training. The training comes from staff at the home dialysis facility.

Training includes how to:







If a person has a care partner, he or she also goes through training. This is so the care partner is able to help with the treatments. The care partner can be a family member or a friend. Some people hire a nurse or technician to be their care partner. Medicare does not pay for these helpers.

Training usually takes four to six weeks. But it can take longer. Training is finished when the person getting dialysis and the care partner feel confident doing the treatment at home.

Besides training, home hemodialysis also requires enough clean space in the home. The space must be big enough for a chair, the machine, water treatment equipment, and supplies.





Part 3: Learning about Peritoneal Dialysis

Peritoneal dialysis uses the lining of the belly, or abdomen, to clean the blood. The lining of the abdomen is called the peritoneum.

A solution flows through a tube into the abdomen. The lining of the abdomen acts as a filter. The lining removes waste products and water. Then the solution flows back out. The solution carries with it waste products and extra fluid. Peritoneum = lining of the abdomen

Persons with kidney disease can do peritoneal dialysis on their

own. This type of dialysis must be done every day. But each person can control when the dialysis happens. It can be done during the day as the person works and goes about daily activities. Or it can be done at night during sleep.

Choosing Peritoneal Dialysis

Here are reasons a person may choose peritoneal dialysis. He or she will have:

- Fewer limits on what to eat.
- A treatment with no needles.

Requirements

These are the necessary parts of peritoneal dialysis.

- A tube has to be placed in the abdomen. The tube is called a catheter. The tube allows the fluids to pass in and out of the space in the abdomen.
- The person will need training. The training will come from staff at the home dialysis facility.
- The person will have to go to the dialysis facility every month. The person will meet with the healthcare team. The treatment plan will be reviewed. Blood tests will be drawn if needed.
- The home must have enough storage space for supplies.

Types of Peritoneal Dialysis

CAPD

There are two ways a person can do peritoneal dialysis. The way that is best for each person depends on his or her choice. It also depends on the person's medical condition. A nephrologist can help decide which choice is best for each person.

Nephrologist = kidney doctor

The first type is called continuous ambulatory peritoneal dialysis. Another name for this is CAPD.

The second type is called automated peritoneal dialysis or APD.

Both dialysis treatments remove waste and excess fluid from the blood. Both can be done at home. They also require a catheter to be put in the abdomen. This happens through surgery. Most people go home the same day.

A solution called dialysate is put in the abdomen. The solution flows through a tube. The peritoneum works like

a filter as the dialysate pulls waste products and fluid from the blood. When the abdomen is filled and emptied with the solution, this is called

Dialysate = solution used for peritoneal dialysis

an exchange. Each exchange takes about 30 to 40 minutes. The exchanges must be done every four to six hours. These

exchanges can be done at home, work, or any clean place. The person is free to go about normal activities. This is true even during the exchanges.











APD differs from CAPD. In APD, a machine called a cycler delivers the dialysate into the abdomen. The cycler then drains it. The treatment is usually done at night during sleep. But more exchanges may be needed during the day as well.

This picture shows a cycler beside someone's bed. Bags of dialysate are also shown.







The Peritoneal Dialysis Choice

A person thinking about peritoneal dialysis needs to consider risks. The biggest risk is infection of the lining of the belly. This is called peritonitis. The infection can be treated with antibiotics. But the infection may cause stomach cramping. The person may have to stop peritoneal dialysis for a short time. This is to let the belly rest. Peritonitis = Infection of the lining of the belly

A person thinking about this type of treatment also needs to know that not everyone can do peritoneal dialysis. Surgeons may find it difficult to put in a catheter due to other surgeries the person had. Or the surgeon may not be able to put in a catheter because of fat around the belly.

Getting dialysis at home lets a person keep working. He or she may receive job benefits. But the person may still have to pay some of the costs for peritoneal dialysis. He or she must think about the costs when deciding if this is what he or she wants to do. The person should check with his or her insurance or Medicare. The person can also meet with the social worker to talk about what is covered by insurance.





Part 4: Talking with Your Peer about the Home Dialysis Choice

Your peer will be making important decisions about his or her treatment. The choices your peer makes can affect his or her quality of life. The decisions can also affect his or her experience of care.

Let's look at how you can offer support.

Think back to when you were first told that your kidneys were failing. Were you overwhelmed? Did you feel alone with this problem?

Was it hard to remember and understand what you were being told?

Maybe you felt like you received too much information in too short a time. Or maybe you thought that important information was not given to you.

Your peer may be thinking or feeling some of those same things. Your peer may also have important questions. As a mentor, you can help your peer.

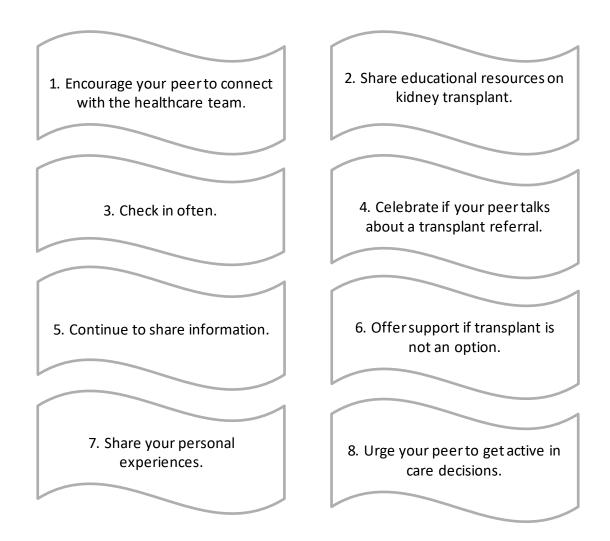




Peer Mentoring – Discussing Home Dialysis

Talk with your peer about home dialysis. Discuss home hemodialysis and peritoneal dialysis. Keep in mind that each of these is an option. Your role is to educate your peer about the home dialysis choices. Your role is also to support your peer as he or she makes a decision about home dialysis.

Your Role as Your Peer Makes a Decision







After meeting with your peer, he or she may not want to proceed at this point. That is okay!

Your peer may need more time to talk it over with family or friends.

Or home dialysis may not be a choice he or she wants to pursue. Everyone is different. What is right for one person is not always right for another. Your peer may choose a different treatment. The best choice is the one that is right for him or her! People with kidney disease may get different types of dialysis at different times in their lives.

Your role is to give your peer information about this

treatment choice. If you have done this, you will have succeeded as a mentor. Your peer can then decide if home dialysis is the right choice for him or her.





Let's Practice Mentoring!



Sally is a home dialysis peer mentor. Cindy is a dialysis patient who has heard about home dialysis. She would like to find out more about home dialysis. Sally is paired with Cindy.

Sally calls Cindy. They agree on a time and place to meet. Before the meeting, Sally makes sure she is familiar with the resources.

To start the conversation, Sally asks open-ended questions.

- What do you know about peritoneal dialysis?
- What information have you received?
- What do you know about home hemodialysis?
- What questions do you have?

Cindy says she doesn't know much about home dialysis. Sally goes over the home dialysis resources with Cindy. Cindy says this is a lot of information. "How about we meet next week to talk some more?"

Sally tells Cindy she can take her time to think about the treatment choices. Sally schedules a time to check back with Cindy. This allows Cindy time to prepare questions for

the healthcare team. At the next meeting, they can go over the resources. Sally listens to questions Cindy has.

Was this a successful peer mentoring meeting? YES!

This was a great example of peer mentoring! Sally used her active listening skills. She shared resources. She allowed time for Cindy to think about the information and to ask questions. She also gave Cindy her full attention.

Sally practiced active listening by:

- Paying attention
- Showing she was listening
- Providing feedback
- Not judging Cindy
- Responding appropriately





Tips for Success

- Remember, your peer can consider other treatment options.
- Support your peer no matter what he or she chooses.
- Practice active listening.







Part 5: Using Resources to Support Choices

As a peer mentor, you share resources with your peer. You may also share them with your peer's family or care partner. This is true when talking about home dialysis choices. Your peer may only be able to do dialysis at home if a care partner helps.

Resources on home dialysis can help your peer ask questions. The resources will also encourage your peer to talk with his or her family. Your peer may feel empowered to make an informed decision.

Make sure you are familiar with the resources before you meet with your peer. This will help you refer your peer to the appropriate pages. You will also be able to talk about questions your peer might have.

General Guidelines for Sharing Resources

- Always begin with finding out your peer's understanding.
- Ask open-ended questions.
 - Are you interested in learning about home dialysis treatments?
 - What do you know about home hemodialysis?
 - What do you know about peritoneal dialysis?
 - What information have you received?
 - What questions do you have?
 - What other information do you need?





If your peer asks questions about home dialysis choices:

• Share and review the home dialysis resources. This allow your peer to prepare questions for the healthcare team.

Your peer may need time to think about the information. He or she may have questions later.

If your peer is asking for more clinical information:

• Ask him or her to contact the nurse on the healthcare team.

If your peer is asking for help with problems that are stopping him or her from doing home dialysis:

• Ask your peer to contact the social worker on the healthcare team.

If your peer says he or she needs more time to think it over:

- Give your peer the resources, if he or she is willing.
- Ask your peer when you should check back.



- Be open to where your peer is in his or her journey. Your peer may want to talk about treatment options at another time.
- Immediately direct health questions to the healthcare team.







Part 6: Sharing Resources on Home Dialysis Choices

You can share these four resources about home treatment choices. The resources will give your peers information. The resources will also answer some of their questions and help them to ask new ones.

You are not expected to know all of the information in the resources. Instead, you need to:

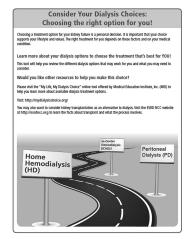
- Know what resources are available for your peer.
- Understand what your peer can learn from the resources.
- See how the resources can help you in your role as a peer mentor.

For any questions, you can encourage your peer to talk with the healthcare team.

1. Consider Your Dialysis Choices: Choosing the right option for you!

This resource talks about different dialysis choices. The choices include home hemodialysis and peritoneal dialysis.

Your peer can read this to decide if a treatment choice would work for him or her. Your peer can also learn things to consider for each treatment choice.



This resource will allow you to:

- Open discussions about home dialysis choices.
- Find out what your peer already knows about home dialysis.
- Learn if your peer needs more information.





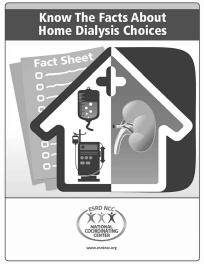
2. Know the Facts About Home Dialysis Choices

This booklet provides basic and important information about home dialysis choices. It also shows where to go to get more information.

Your peer can learn the benefits of home hemodialysis. Your peer can read about the different types of peritoneal dialysis. Your peer can also see what's involved in managing home dialysis and the training he or she will have to take.

This resource will allow you to:

- Help your peer identify concerns he or she may have about home hemodialysis.
- Share the benefits of peritoneal dialysis.
- Give information on important things to consider when choosing peritoneal dialysis.
- Encourage your peer to talk about concerns with the healthcare team.







3. Uncovering Myths About Home Dialysis

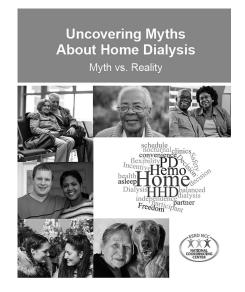
The third resource reviews general information about home dialysis.

Your peer can learn about:

- Myths and realities of types of home dialysis.
- Tips for patients thinking about choosing home dialysis.
- Examples of questions that peers can ask the healthcare team.
- A list of websites and resources on types of home dialysis.

This resource will allow you to:

- Share information. Then your peer can make informed decisions.
- Review common questions with your peer.







4. Options for Dialyzing at Home

This flyer briefly reviews the different types of home dialysis.

Your peer can learn about:

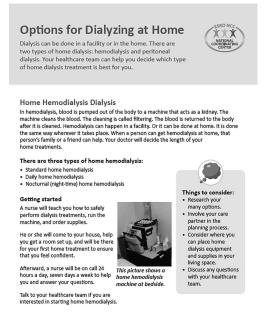
- The three types of home hemodialysis.
- The two types of peritoneal dialysis.
- Things to consider for both types of treatment.

This flyer will allow you to:

- Share information on home dialysis options.
- Help your peer to figure out what questions to ask the healthcare team.



• Share materials with your peer. Keep in mind that it is up to your peer to take the steps toward a home dialysis referral.



- Continue to support your peer through this important choice in kidney care.
- Help your peer connect with the healthcare team or the Network for support and more resources.

Where to Find Resources on Home Dialysis

You will find the resources listed in this course by going to the home page of this program. Click on the Resource button to find the links. Check to see if your dialysis facility can help print these for you.





Next Steps in the Training Program

Congratulations on completing Course 4, Discussing Home Dialysis as an Option!

Next, please complete the Course 4 Review Quiz.

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