

Royal Liverpool & Broadgreen University Hospitals NHS Trust





Our Vascular Access Experience

Outline

- Vascular access audit past and present
- Past process
- Current process
- Low clearance clinic
- 1st dialysis pathway



2015	2016	2017
24%	31%	44%

Audit Jan – Dec 2017 106 new starters

40 patients unpredictable	66 RRT choice (HD)	
17 AKI/CKD3-4/ crashlanders	45 working AVF/AVG	
15 unplanned conversion PD	14 AVF/AVG not ready to use	
4 change of RRT	7 no access plan	
	68%	

Prevalent Patients AVF/AVG

Jan 2015	June 2016	Jan 2018
????	69%	77%



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Current Population

Site	Patients	AVF/AVG	PNL
Royal	147	94	53
Broadgreen	78	65	13
Halton	35	31	4
Warrington	44	37	7
St Helens	50	41	9
HHD	43	37	6
	397	305	92
Total		77%	23%
			22 AVF maturing 53 unable to have AVF/AVG 17 in work up for AVF/AVG

In the past

- Unstructured
- Un coordinated
- Prone to congestion





Low clearance clinic NOV 2014

MDT

Consultant

Vascular access surgeon

Pre dialysis nurse

Dietician

ANP

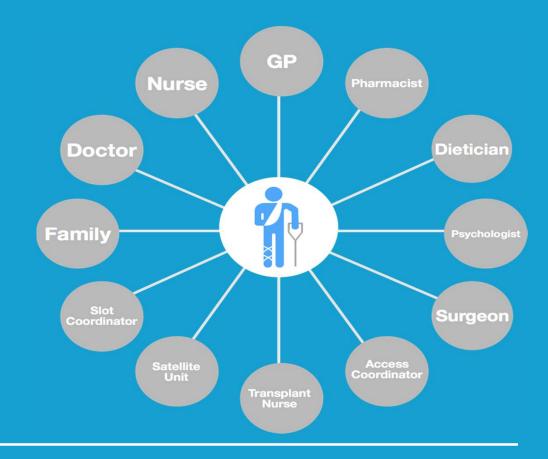


Focus on transplant first, RRT plan, Access, Education, Support



Complex Transition period

- Delivery of care is multidisciplinary and complex
- Multiple needs



Nursing intervention



Novel Nurse-Led Pathway

Mandatory Interventions

Personalised Interventions

First 6 Sessions

- Early review of dialysis prescription
- · Venous access plan
- · Early review of dry weight
- · Medication & dietary advice
- Monitoring of anaemia & blood biochemistry
- Distress scoring & early psychological review

- Patient experience questionnaire
- Prioritisation of home therapy if appropriate
- Transplantation plan
- Supportive approach for frailer patients
- Individualised educational support for patients & families
- Support for patients & families

> 6 weeks

Early Consultant Review

Summary letter for consultant, patient & GP

Monitoring the patient

- Bespoke dashboard
- Developed with Business Intelligence team



Patient Demographics

	Control group	New pathway
Patients (n)	78	94
Mean age (SD)	58.4 (15.6)	60.5 (14.1)
% male	62%	59%
% diabetic	45%	43%
Mean eGFR starting HD (SD) (ml/min)	8.6 (2.7)	7.7 (2.4)
% definitive vascular access at day 0	31%	44%

Improved Process

	Control Group	New pathway
% with documented transplant status at 90 days	61%	95%
% with definitive vascular access plan at 90 days	89%	93%
% with defined dry weight at 2 weeks	58%	98%
Time interval to first clinic review (days)	98 days	43 days

Improved Experience: PREM questionnaire and distress thermometer

Patient

I am really happy.

All staff are competent and efficient.

I am very grateful

Patient

When I first came on dialysis I was apprehensive. The staff put me at ease. I now feel much better

Nurse

Since the introduction of the new pathway, things are much more organised, giving us more time to concentrate on what we need to do

Renal Consultant

The pathway has benefitted patient care.

I get a comprehensive update of their care and I am seeing them much quicker in the renal clinic

3 -



Patient distress diminished from a score of 4.3 (week 2) to 2.4 (week 8)

Patient feedback has been strongly positive



Where we all make a difference

58% reduction in unadjusted mortality





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The new process



Vascular Access May 2015

Low Clearance Clinic Nov 2014 1st Dialysis Pathway June 2015



ANP/VAN overseeing patient pre and transitioning onto haemodialysis

Where we all make a difference

Next steps....

- Continue to improve performance
- Acknowledge the challenges around maintaining vascular access and strive for best practice
- Nurse patient education crucial
- Aim to provide the best for our patients





Thank you.

