Support your patients’ search for answers.

Supporting patients in the right way is important. Your patients may voice fears about dialyzing at home or hear other patients discuss it in a negative way. They may place a lot of importance on opinions of staff and fellow patients.

Don’t damage their confidence by:

- Agreeing that being “alone” or with a partner at home is “very scary.”
- Agreeing that they probably cannot learn the skills needed to deal with emergencies or the unexpected.
- Saying how much they will be “missed” by you or fellow patients if they go on home dialysis—even if it is true. Social support is a good thing, but so is making the best choice for one’s self.

If infections are a concern point out that they are more likely the result of not following the right procedures each and every time and that infections do not just happen to home patients. Mention that home patients receive one-to-one education, practice under supervision, do not dialyze at home until they are ready and can always access on-call staff for questions and concerns.

YOU ARE NOT SUPPOSED TO “GO IT ALONE!”

As a direct care giver you are on the front line of a team put in place to provide excellent care. Your participation and input are valuable to the care of patients and the functioning of the interdisciplinary team. If you doubt it, just ask your patients and your team.

Educate yourself on your role, do your best work every day and continuously look for opportunities to improve your knowledge and skills.
Home dialysis may be the better choice for your patients but they may also face barriers to informed decision making about their options. Such barriers may include:

- Lack of educational opportunities.
- Difficulty understanding and remembering information.
- Overwhelming physical, emotional and psychological factors.

According to the US Renal Data System (USRDS), 34.5% of the 124,675 patients who began dialysis in 2016 had little or no care by a kidney doctor who could have better prepared the patient to transition to dialysis care by providing essential education. Dialysis staff helps fill this gap by providing patients with education and support to make important decisions about their care.

As direct care givers, you are in a position of trust and you may find that many patients express their needs and concerns to you. Please use this resource as a guide to working with your facility team to help your patients gain a better understanding of home modalities and how home may be their better choice.

A Team approach is best. Always check with key staff or your manager before discussing home dialysis with patients.

- Familiarize yourself with your facility's process to educate, evaluate and refer patients for home dialysis.
- Seek educational opportunities and work with expert staff in your facility who can guide you on how you are expected to support patients in learning about home dialysis.

As a direct care giver, you also recognize your patients' need for education and support. Your patients may discuss home dialysis with you, share thoughts or raise questions that need clarification. Offer to help get answers. It is acceptable to say that you don't know the answer, but will put your patient in touch with someone who does. Then discuss with members of the Interdisciplinary Team (IDT) who can educate you about the care plan or goals for your patient. For example, by discussing that you think someone is an excellent home candidate with your IDT, you may find that:

- The IDT may have already determined that the patient is not a candidate.
- It may not be the best time to discuss home modalities with the patient for other reasons.

A teachable moment is “an unplanned experience that gives an educator an opportunity to convey new information or ideas to his or her students.” During your daily interactions with patients try to make the most of those opportunities. With the guidance of the IDT, you can use them to help appropriate patients recognize better ways to participate in their care as well as explore how home dialysis could be a way to meet some of your patient’s goals.

Some “teachable moments” commonly encountered by care staff.

Patients may complain to you about their dialysis schedule, transportation company, the cost or amount of medications they take and/or their diet or fluid restrictions. Recognize and share with the IDT that your patient may be open to a “home discussion.

If the patient has been identified as a home candidate, this can be the time to mention that home dialysis might:

- Eliminate the need for travel to and from a dialysis center three times weekly.
- Help reduce the need for medications to manage blood pressure and phosphorus.
- Decrease the need for strict fluid and diet restrictions (but not get rid of them completely).
- Make it easier to travel, return to work, care for or spend more time with a loved one and take part in social or community activities.