



# Peer Mentor Training Program

Helping Peers Plan for a Vascular Access

# Welcome!



# IPRO End State Renal Disease (ESRD) Network



## Mission

- To promote healthcare for all ESRD patients that is safe, effective, efficient, patient-centered, timely and equitable.

## Role and Responsibilities

- Improve quality of care for individuals with ESRD.
- Promote patient engagement and patient experience of care.
- Process grievances from patients, or their representatives by conducting confidential investigations.
- Support emergency preparedness and disaster response.
- Provide education and resources to individuals with ESRD, dialysis facilities and transplant centers.

# What is Peer Mentoring and what is your role?



- Peer mentoring is a relationship between a person who has had experience dealing with a topic, such as Vascular Access Planning, and a person who is new to that experience. The peer mentor relationship is used to help the less experienced person (mentee) achieve his or her goals by receiving assistance and guidance from the more experienced person.
- As a peer mentor you will:
  - Share your personal experiences as a kidney patient.
  - Offer educational resources and tools.
  - Encourage your mentee to be engaged and active in his or her care decisions.
  - Help your mentee identify and access additional support and resources.

# Consider these Qualities that can help you become an Effective Mentor



## Ability and willingness to communicate to mentee what you know

- As a mentor you are seen as someone who is knowledgeable about kidney care choices. Stay alert for new topics that may impact you or your role as a peer mentor

## Being prepared

- Being a mentor means making an important commitment to your mentee; be prepared for each mentoring session to provide useful, guidance while ensuring that your mentee takes the lead and makes his or her own healthcare decisions .

## Being approachable and having the ability to listen

- Your mentee must feel comfortable approaching you. As the mentor you should be ready to listen and provide guidance to mentee. Keep mentee goals in mind by being trustworthy, modeling positive behavior and offering support.

**All of these qualities should be the compass that guides all your actions as a mentor.**

# What will you gain from being a Peer Mentor?



- Improve communication and personal skills
- Develop leadership and management qualities
- Strengthen your own skills and knowledge
- Benefit from a sense of fulfilment and personal growth
- Gain recognition for your skills and experience
- Support your facility in meeting their quality improvement goals
- Partnership with the ESRD Network
- Opportunity to share you feedback at a national level

**The chance to make a POSITIVE impact on someone's life  
is a priceless experience.**

# What will be covered in this Module?



Part 1: The Types of Vascular Access

Part 2: Making a Vascular Access Plan

Part 3: Introduction to the Vascular Access Planning Resource Toolkit

Part 4: Tips for Success

# This module will help you guide your mentee to get the answer to the following questions:



- What are the different types of home dialysis options?
- Will I need a care partner for home dialysis?
- Is there any health benefits to Peritoneal Dialysis (PD) or Home Hemodialysis (HHD)?
- How long is the training for PD or HHD?
- Do you need to see where I live in order for me to do home dialysis?
- Can I travel on PD or HHD?











**It only takes a minute  
to save your lifeline.**



**Look**



**Listen**



**Feel**



# **Part 1:**

# **The Basics of**

# **Vascular**

# **Access**



# What is a vascular access?

**A vascular access is used more than 150 times per year**

# What is a vascular access?



**Hemodialysis** is a process that requires moving the blood in and out of the body to filter and remove waste products and extra fluids from the body.

A **vascular access** is created or placed to provide a way for blood to flow in and out of the dialysis machine which cleans the blood.

Choosing a vascular access is important, it is a Lifeline for a Lifetime

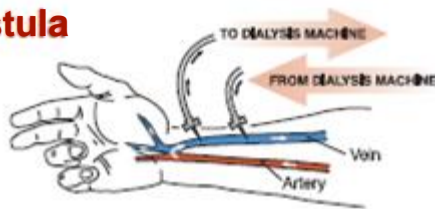
# Three types of vascular access

**#1**

## **Fistula**

**Your own blood vessels connects an artery to a vein.**

**Fistula**

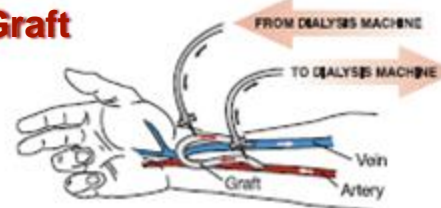


**#2**

## **Graft**

**A piece of plastic-like material that connects an artery to a vein.**

**Graft**

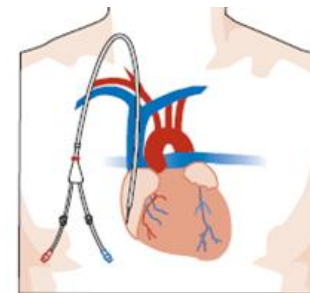


**#3**

## **Dialysis Catheter**

**A plastic tube is inserted through the skin into a large vein and ends in the heart.**

**Catheter**



# Fistula

## Advantages and Disadvantages



### Advantage

- Permanent
- Beneath the skin
- Last longest, up to 20 years
- Provides greater blood flow for better treatment
- Fewer Infections and other complications
- Fewer hospitalizations
- Better survival (lower risk of dying than patients with catheters)

### Disadvantage

- May not mature or develop
- Not possible for all patients
- Usually cannot be used for at least 6 to 8 weeks





# Graft

## Advantages and Disadvantages

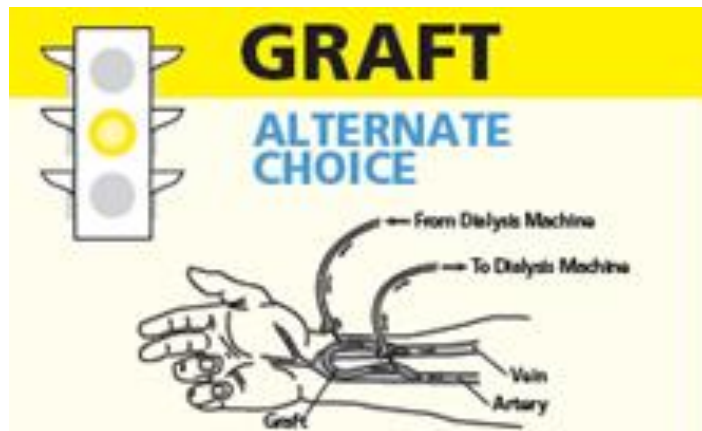


### Advantage

- Permanent
- Beneath the skin
- May be used as early as 2 weeks after placement
- May work in patients with poor veins

### Disadvantage

- Increased hospitalizations
- Increased risk for clotting
- Increased risk for serious infections
- Increased risk for other complications and repair procedures
- Does not last as long as a fistula



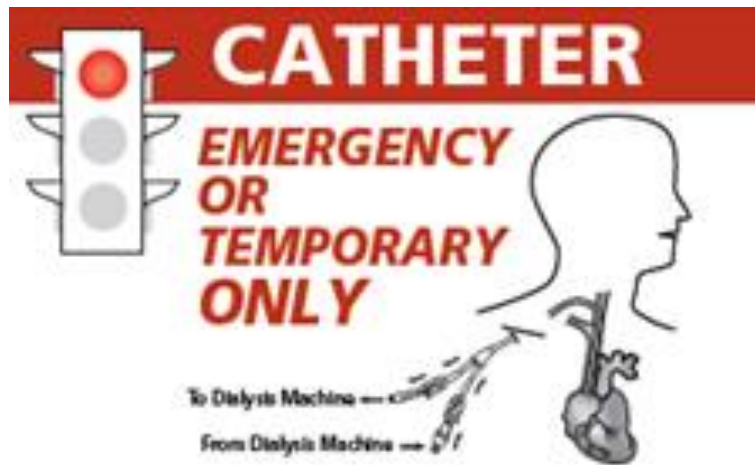
# Catheter

## Advantages and Disadvantages



### Advantage

- Can be used immediately after placement



### Disadvantage

- Higher infections rates, which can be very serious or fatal
- Increased hospitalization
- Does not last long, usually less than on year
- May require longer treatment times
- Prolonged use may lead to inadequate dialysis
- Cannot show without special appliance
- High rate of clogging requiring frequent procedures
- Risk of destroying important vein

# Importance of mentoring to support access planning



**80% of patients who start dialysis, start with a dialysis catheter.**

- People who start dialysis with a catheter have a much greater risk of life threatening complications in their first year on hemodialysis.

**A vascular access will be used more than 150 time per year for treatment**

- Getting a vascular access that is right takes time and planning.

# Benefits of Catheter Freedom



## Still Using a Catheter for Your Dialysis Access?



## It's time to consider a fistula or graft!

A dialysis catheter should be used only as a temporary access until you get a permanent fistula or graft.

Experience the benefits of catheter freedom:

- Increased energy and better dialysis treatments
- No more worries about your catheter being pulled/coming out
- Lower risk of clots and infections
- No more plastic tube in your chest
- Showers without an expensive, special cover
- Freedom to go swimming

Develop your vascular access plan: talk to your care team today.

**Celebrate Catheter Freedom!**

- Increased energy and better dialysis treatments
- No more worries about your catheter being pulling or coming out
- Lower risk of clots and infections
- No more plastic tube in your chest
- Showers without an expensive cover
- FREEDOM to go swimming!



## Importance of mentoring to support access planning

- Many dialysis patients will need a permanent vascular access at some point in their life. Some people may need more than one.
- Your peer may feel a sense of a loss of control when they start dialysis.
- You are helping the peer to become active in planning for a permanent access so that they feel in control.

# **Part 2:**

## **Creating a Vascular Access Plan**



# Ways a vascular access plan can help



**All new and established dialysis patients should have an access plan specific to their access status.**

**Having a plan helps to promote:**

- Getting the best vascular access possible.
- Identification of future areas for an access.
- Maintenance of those areas for future use
- Proper maintenance and monitoring of the access





# Creating a Vascular Access Plan



**You will need a vascular access plan to guide you through all the steps toward a fistula or a graft.**



**Making this plan with your healthcare team will help you identify the best access type for you.**



# Eight Steps in your access plan



## The eight steps in your access plan are:

- 1 - Making my access plan
- 2 - Finding the best place for my access
- 3 - Going to see the surgeon
- 4 - Going for surgery
- 5 - Waiting for my access to mature or heal
- 6 - Using my access
- 7 - Getting my catheter out
- 8 - Taking care of my lifeline for a lifetime

# Vascular access planning is your lifeline for a lifetime



- A vascular access plan will help to ensure that the access is healthy and working correctly.
- A person on hemodialysis may need more than one access in his one access in his or her lifetime.



# Part 2: Introduction to the Vascular Access Resource Toolkit

# What materials are in our toolkit?



**“Lifeline  
for a Lifetime:  
Planning for  
Your Vascular Access”  
Manual**

**“Questions or Concerns about a  
Permanent Access” Booklet**

**“Hemodialysis Vascular Access” Flyer and  
Comparison Poster**

# Tool #1: “Hemodialysis Vascular Access” Flyer and Poster

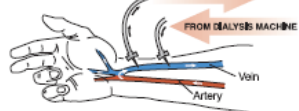


## Hemodialysis Vascular Access

Hemodialysis cleans your blood through a fistula, graft or catheter. If you have kidney failure, one of these will be your **LIFELINE!** Talk with your doctor to decide which type of vascular access is best for you.



### Fistula



A fistula directly connects an artery to a vein. The vein stretches over time, allowing needles to be put in it.

**Fistulas are the gold standard for hemodialysis.**

#### Advantages

- ✓ Permanent
- ✓ Beneath the skin
- ✓ Lasts longest, up to 20 years
- ✓ Provides greater blood flow for better treatment
- ✓ Fewer infections & other complications
- ✓ Fewer hospitalizations
- ✓ Better survival (lower risk of dying than patients with catheters)

#### Disadvantages

- ✗ May not mature/develop
- ✗ Not possible for all patients
- ✗ Usually cannot be used for at least 6–8 weeks

### Catheter

A catheter is a tube inserted into a vein in the neck or chest to provide vascular access for hemodialysis. The tip rests in your heart. It is usually a **temporary** access. It is the third choice for getting access to the bloodstream for hemodialysis. For some patients it is the only choice and it will need to be used as a permanent access.

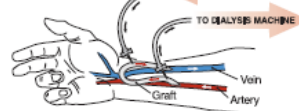
#### Advantages

- ✓ Can be used immediately after placement

#### Disadvantages

- ✗ Higher infection rates, which can be very serious or fatal
- ✗ Increased hospitalizations
- ✗ Does not last long, usually less than one year
- ✗ May require longer treatment times
- ✗ Prolonged use may lead to inadequate dialysis
- ✗ Cannot shower without special appliance
- ✗ High rate of clotting requiring frequent procedures
- ✗ Risk of destroying important vein

### Graft



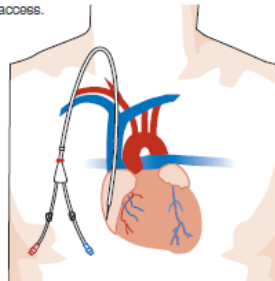
A graft is a tube, usually made of plastic, that connects an artery to a vein, allowing needles to be put in it. Grafts are the second best way to get access to the bloodstream for hemodialysis.

#### Advantages

- ✓ Permanent
- ✓ Beneath the skin
- ✓ May be used after 2 weeks, in some cases
- ✓ May work in patients with poor veins

#### Disadvantages

- ✗ Increased hospitalizations
- ✗ Increased risk for clotting
- ✗ Increased risk for serious infections
- ✗ Increased risk for other complications and repair procedures
- ✗ Does not last as long as a fistula



### FISTULA

**BEST CHOICE**

**PLACEMENT OPTIONS**

- Forearm
- Upper arm
- Thigh

**ADVANTAGES**

- + Lasts many years
- + Less chance of infection
- + Higher blood flow rates
- + Fewer complications

**DISADVANTAGES**

- Takes the longest to mature (develop)
- May fail to mature, due to other health issues

### GRAFT

**ALTERNATE CHOICE**

**PLACEMENT OPTIONS**

- Forearm
- Upper Arm
- Thigh
- Chest
- Straight or Loop

**ADVANTAGES**

- + Can be used in two weeks after placement
- + Can be used when a fistula does not work
- + Can be used for patients with special health issues

**DISADVANTAGES**

- Clotting
- Infection
- Swelling
- Frequent interventions required
- May affect blood flow to the hand (Steal Syndrome)

### CATHETER

**EMERGENCY OR TEMPORARY ONLY**

**PLACEMENT OPTIONS**

- Neck (jugular vein)
- Groin (femoral vein)
- Chest (subclavian vein) *should be avoided*

**ADVANTAGES**

- + Can be used in an emergency (must have chest x-ray for placement prior to initial use)
- + Can be used while other access types are maturing

**DISADVANTAGES**

- Clotting
- Infection
- Lower blood flow rates
- Vessel damage
- Designed for short-term use only

Adapted with modifications from a flyer produced by the Renal Vascular Access Center, 4/10. This material was prepared by the Mid-Atlantic Renal Coalition as part of the Fistula First Walkthrough Initiative Special Project, for updates prepared by the End Stage Renal Disease Network Coordinating Center, 4/11, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents presented do not necessarily reflect CMS policy. CMS Contract Number: HHSM-500-2010-MW0002.

# Tool #1: Assess your mentees needs



## Ask open ended questions:

- What do you know about planning for a vascular access?
- How much were you told about the different access types?
- What type of information did you receive?
- What other information do you need?

**Share information based on the mentee needs.**



# Tool #1: Support your mentee's needs



**Mentee:** Has not considered a permanent access

**You:** Share and review the “Hemodialysis Vascular Access” Flyer

**Mentee:** Received information, but is hesitant to change

**You:** Refer them to the Vascular Access Poster and ask them to consider the advantage and disadvantages of each access type.

**Mentee:** Received information, but has medical questions

**You:** Connect peer to healthcare team for medical questions

# Vascular access concerns



**You mentee may voice concerns about getting a permanent access such as:**

- Unsure of surgery
- Worried about having needles each treatment
- Concerned about how an access will look
- Nervous about complications

**You can provide your mentee with information to help!**



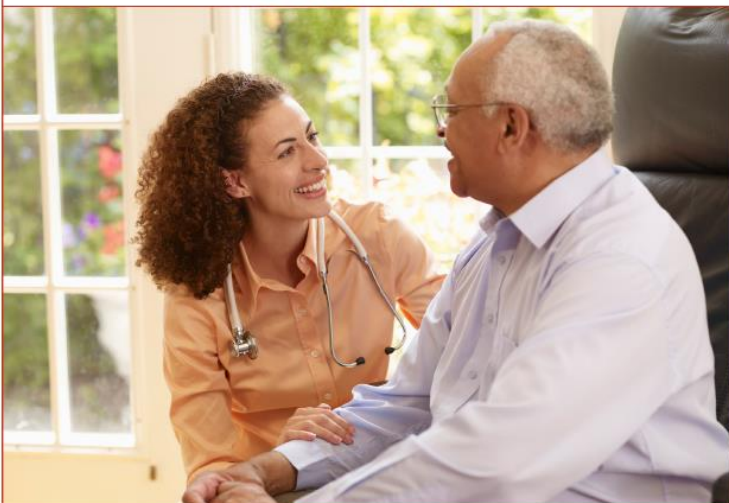


# Tool #2: “Questions or Concerns about a Permanent Access” Booklet



## Questions or Concerns about a Permanent Access?

Let's Talk!



[www.esrdncc.org](http://www.esrdncc.org)

## Detailed information to address questions or concerns about a permanent access

Start the conversation and navigate with the mentee on vascular access choices and what they should consider in creating a vascular access plan.



Look



Listen



Feel



## Tool #2: Support your mentee's needs



**You:** Share and review the “Questions or Concerns about a Permanent Access” Booklet

**Mentee:** Has questions about surgery

**You:** Refer the mentee to page 2 and assist them with creating a list of questions to discuss with their surgeon

- Will I get something for pain?
- Will my access make my arm or leg look different?
- Will I be able to use my arm or leg?

**Mentee:** Has concerns about how the fistula or graft will look after surgery

**You:** Refer the mentee to page 3 and discuss coping strategies and refer them to the healthcare team you can answer their questions.

## Tool #2: Support your mentee's needs



**Mentee:** Has needle fear or concerns about the needles hurting

**You:** Refer the mentee to page 4 and help them create a list of questions

- Will I have problems with needles during my treatment?
- If the needles hurt, is there something that can be done for the pain?
- Can I learn how to put in my own needles?

**Mentee:** Has concerns about future complications

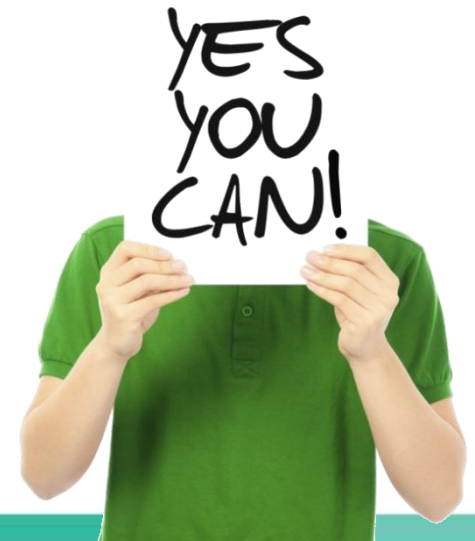
**You:** Refer the mentee to page 5 and encourage them to talk with their healthcare team. You can also discuss the one minute access check they can use to ensure their access keeps working well.

# What is my mentee is still having trouble overcoming concerns?

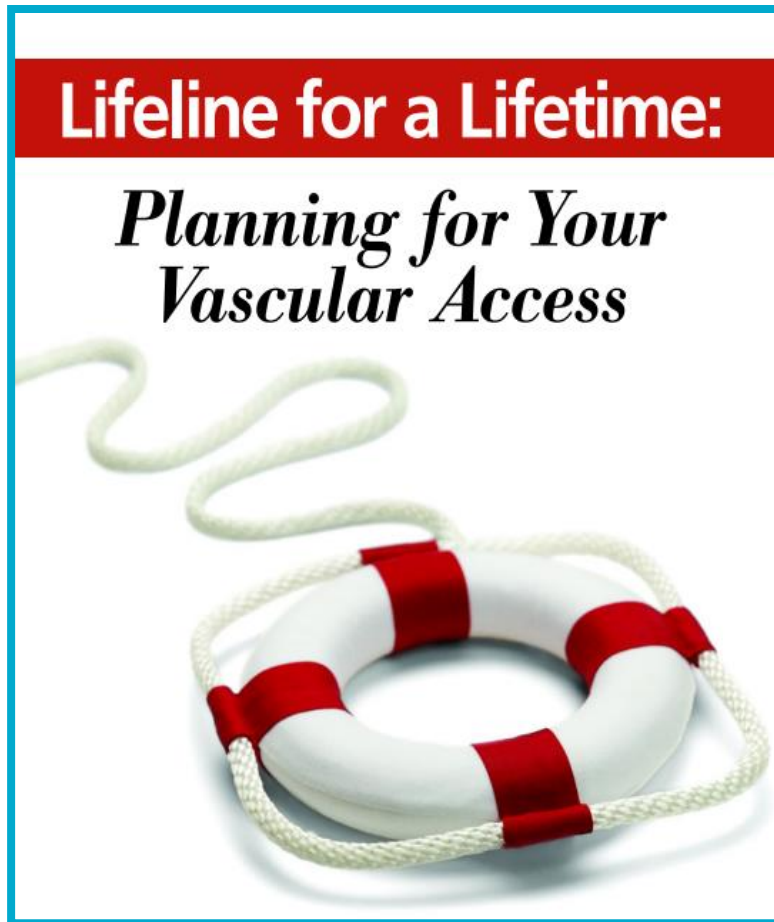


## Talking through concerns is a known way to overcome them.

- Your experience with vascular access planning is a valuable tool.
- Remain supportive even if your mentee is not ready to consider a permanent access.
- Remember a permanent access may not be the best option for everyone!
- Once your mentee is ready to take the next steps, help them create a vascular access plan



## Tool #3: “Planning for your Vascular Access” Manual



### Detailed information on creating a vascular access plan

Once your mentee is ready, review the Planning for Your Vascular Access manual and assist them with creating an access plan with their healthcare team and following the steps to catheter freedom!

# Tool #3: What's covered?

## Contents

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## Tool #3 Assess your mentee's needs

- Ask open ended questions
  - Does your peer have an access plan?
  - Where is your peer in the process?
  - What are steps in the plan that your peer has questions about?
  - How can you help your peer learn and move through the steps?





# Step 1: Making an access plan



**Getting a permanent access – the process to achieve catheter freedom.**

- **Making the plan with the dialysis care team will help your peer understand what to expect in the process.**
- **Your peer will be able to track each of the steps as he or she works through the plan made especially for them.**
- **If things slow down or don't go as planned, your peer can work with the dialysis care team to find solutions.**





## Step 2: Finding the best place for the access

- **Vessel mapping**
  - A procedure done before surgery to give the surgeon a clear map of the best place to put the access.
  - Often done in the surgeon's office.
  - Provides surgeons with a picture of the blood vessels to find where the blood vessels are big enough for a fistula or graft.



# Step 3: Going to see the surgeon



## What should your mentee know?

- The first appointment helps the surgeon to decide where the fistula or graft should go.
- The surgery will not be performed during the first appointment.
- The dialysis care team can help reschedule a dialysis treatment if it conflicts with a surgeon's appointment



# Step 3: Going to see the surgeon



## How can you help your mentee ?

- **Help prepare for the surgeon visit**
  - ✓ Review the list of questions provided to help your peer select ones that are important to him or her.
  - ✓ Help your mentee identify other questions.
- **Talk about the tips to stay healthy while going through this process.**
- **Help your mentee work out scheduling questions.**



# Step 4: Going for surgery



## How can you help your mentee get ready?

- Review the list of information your mentee may need to provide to the surgery team.
- Ensure that your mentee has considered transportation arrangements and knows location of the surgery facility.
- Direct your mentee to the healthcare team if he or she has medical questions or concerns about the schedule.



# Step 4: Going for surgery

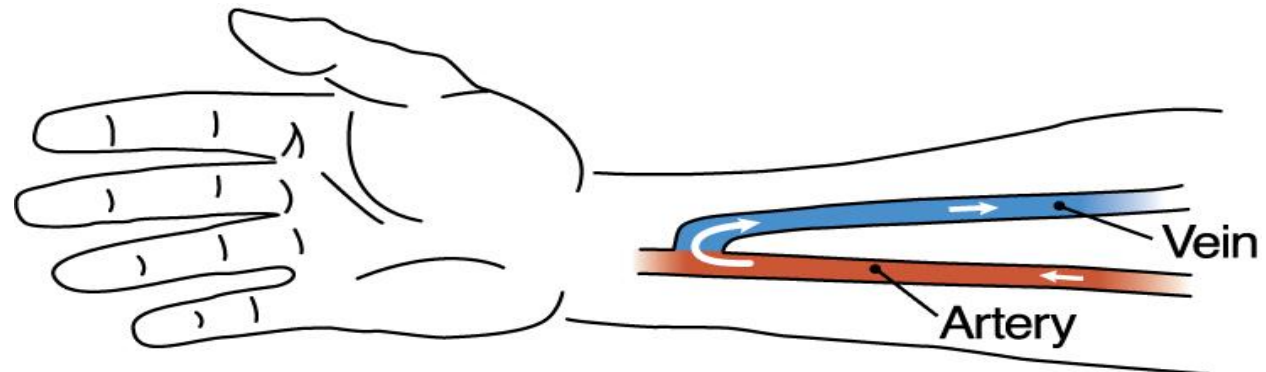


- What can you do to help your mentee move through the process smoothly?
- Areas you can review with your mentee:
  - Are there any other medical questions for the healthcare team?
  - Does your mentee have all needed information prepared to take to the surgery team?
  - Is transportation arranged and are directions known?
  - Can a significant other help the mentee remember?
    - Going home instructions
    - Instructions on what happens while waiting for the access to heal.

# Step 5: Waiting for the access to mature or heal

## Fistulas

- Take a few weeks to grow big enough to use.
- This is often called maturing.
- The surgeon should tell your peer how long he or she thinks it will take before the fistula can be used.
- ✓ If this information isn't provided, encourage your peer to ask the surgeon.

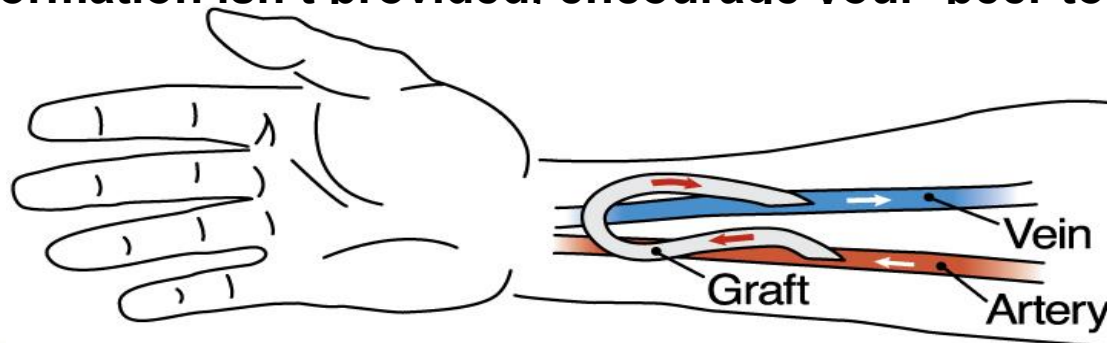


# Step 5: Waiting for the access to mature or heal

## Grafts



- Need to heal but doesn't need to grow over time.
- Most grafts can be used in three to four weeks.
- The surgeon should tell your peer how long he or she thinks it will take before the graft can be used.
- ✓ If this information isn't provided, encourage your peer to ask the surgeon.



# Step 5: Waiting for my access to mature or heal



Sometimes the access may not mature or heal as planned. **What should your mentee know?**

- Review the advice provided in the Planning Guide.
- Ensure that your mentee knows this can happen and does not mean the surgeon did a bad job.
- Support your mentee through this process.
- **Best Advice:**
  - The sooner your peer reacts to a problem
  - the better the chances for a solution.





# Step 6: Using my access



Getting your mentee ready for using the access:

- **Step #1 – Review the daily access check**
- **Step #2 – Is your mentee concerned about needles?**
  - ✓ Review the list of questions in the Planning Guide Appendix to help your peer work through those concerns.
- **Step #3 – Does your mentee know the plan for using the access?**
  - ✓ Connect your peer to the healthcare team to review the plan.

**Look**



**Listen**



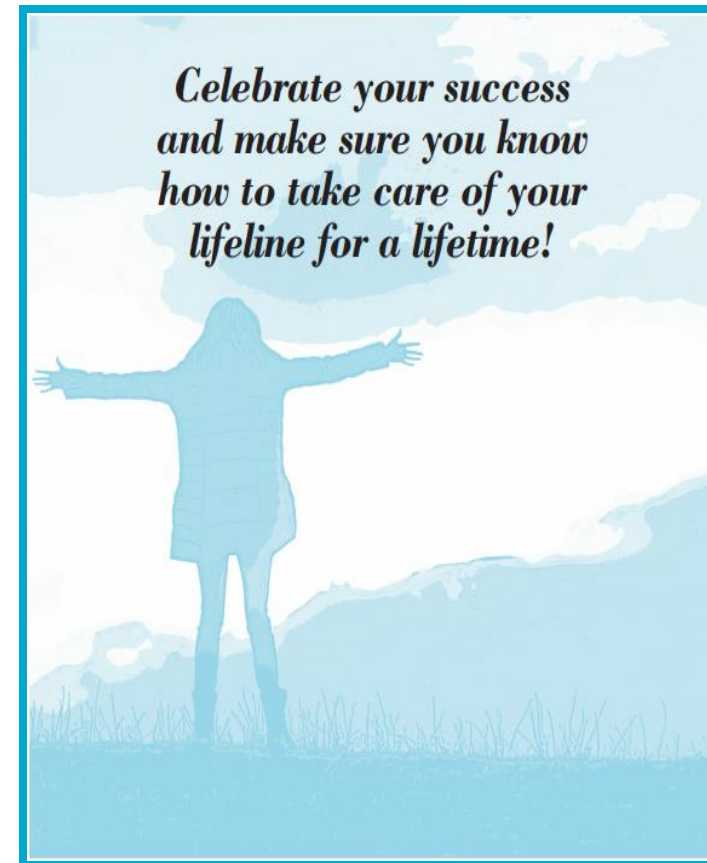
**Feel**



## Step 7: Getting my catheter out

Before taking the catheter out, most dialysis care teams will want to use the fistula or graft with two needles for several dialysis treatments.

- Usually three treatments in a row.
- Celebrate Catheter Freedom!!!!



## Step 8: Taking care of my lifeline for a lifetime



It is important to emphasize with your peer that checking your access daily is an important step in taking care of his or her fistula or graft.

Doing this daily check will help you peer make sure he or she will have a lifeline that will last a lifetime.

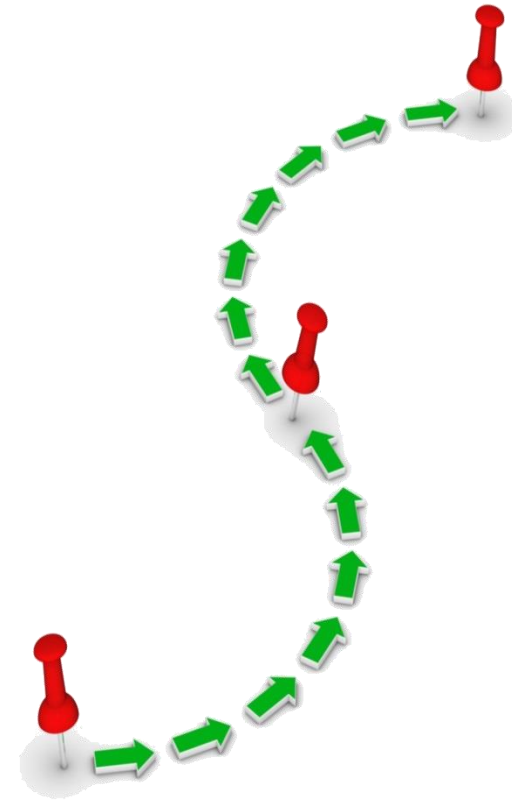


# Tell me more about how to make an access plan



## Not all peers will be on the same step:

- Those with a catheter only will start at Step 1.
- Those with a fistula or graft and a catheter will start at Step 1 and will proceed to Step 5.
- Those who are using a fistula or graft only will start at Step 1 and then proceed to Step 8.



# **Part 4:**

# **Tips For Success**



# Tips for supporting your mentee



**Once you have completed reviewing the Vascular Access Toolkit with your mentee, it is up to your peer to take the necessary actions toward beginning a plan. Remember:**

- Encourage your mentee to talk to a member of his or her care team about starting a vascular access plan.
- The mentee should ask the dialysis care team to help develop and work through the steps of the access plan. No patient can do this alone.
- Your mentee may not want to proceed at this point, and that is OK!
- You have succeeded in your role as a mentor by providing him or her with important information.

# Tips for supporting your mentee



Once you have completed reviewing the vascular access planning toolkit with your mentee, it is up to the mentee to take the necessary actions toward creating and managing their vascular access plan.

## Remember:

- Encourage your mentee to talk to a member of his or her care team about the type of access that is right for them.
- Your mentee may not want to proceed at this point, and that is OK! You have succeeded in your role as a mentor by providing him or her with important information.

# Tips for supporting your mentee



**Check in with your mentee as often as you can to provide encouragement.**

## **If your mentee:**

Runs into any obstacles...

- Help by connecting him or her with the healthcare team.

Have questions along the way...

- Reinforce information from the toolkit.

Learns that home dialysis is not an option...

- Provide support as he or she deals with this news.



# Tips for supporting your mentee



**Everyone is different. What is right for one person is not always right for another. A fistula or a graft is not an option for everyone.**

**Mentee's will need to be evaluated by their renal health care team to determine which lifeline is best for their unique healthcare needs.**

**The best choice is the one that is right for him or her.**



## Some important additional resources

- Your Dialysis Facility
- Your IPRO End Stage Renal Disease (ESRD) Network has several resources that can help you and your mentees [www.ipro.org](http://www.ipro.org)
- The End Stage Renal Disease National Coordinating Center (ESRD NCC) has resources

# Next Steps





## Congratulations on completing the Helping Peers Learn About Vascular Access Module

- Next, please complete the module “**Review Quiz**” to earn your completion certificate.
- Share your completion certificate with your facility point of contact.
- Request printed copies of the supporting resources.
- Work with your facility point of contact to identify mentees and begin sharing your experience and the resource information from this module.

**You have completed training to mentor  
your peers on the topic of: Helping  
Peers Plan for a Vascular Access**

