CLAHRC BITE

Brokering Innovation Through Evidence



A bite-sized summary of a piece of research supported by NIHR CLAHRC West Midlands

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Taking hospital treatments home: A mixed methods case study looking at the barriers and success factors for home dialysis treatment and the influence of a target on uptake rates

Barriers and Success Factors for Home Dialysis Treatment and Influence of a Target on Uptake Rates

Background

- Government policy around the world favours shifting services from hospital to community, with an emphasis on home-based care and self-care.
- There is considerable potential for a large-scale shift towards home-based self-care for patients on dialysis with end-stage renal failure.
- Uptake of home dialysis in England fell from 31% to 18% between 2002 and 2009.
- In April 2010, the service commissioner for the West Midlands introduced a five-year target to increase take-up of home dialysis to 35%.
- This study investigated the effect of the pay-perperformance target and examined the barriers and facilitators to increasing the uptake of home dialysis, as an exemplar of the challenges involved in shifting from hospital-based to home-based care for a group of patients with complex medical needs.

Findings:

- The study revealed a 5% increase in home dialysis uptake in study hospitals, compared with the rest of England.
- 93 patients and 96 staff were interviewed across four hospitals in the West Midlands.
- Factors that influenced the uptake of home dialysis included:

Facilitators

- The Commissioner's pay-for-performance scheme.
- Funding for specialist staff and dialysis machines.
- Support from renal clinical leads, individual champions for home dialysis, and enthusiastic home therapy nursing teams.
- Ongoing support through phone, home visits, and out-patient appointments.

Barriers

- · Lack of training for non-specialist staff.
- Pre-dialysis education was described as an "information overload" by patients, and didn't focus enough on the effect of home dialysis on their lives.
- Many patients experienced emotional distress when learning that they would need dialysis, but there was a lack of emotional support in place for patients.

Reference

Combes G, Allen K, Sein K, Girling A, Lilford R. Taking hospital treatments home: a mixed methods case study looking at the barriers and success factors for home dialysis treatment and the influence of a target on uptake rates. *Implement Sci.* 2015; **10**: 148. http://goo.gl/3p9muk









Recommendations for Practice

Four service elements need to be in place to encourage patients to opt for home-based self care: information, guidance and support for patients; high-quality training in the use of dialysis machines; ongoing technical assistance and support for patients once they are on home dialysis; emotional and psychological support to help patients adjust to end-stage renal failure.

What is NIHR CLAHRC West Midlands?

The Collaborations for Leadership in Applied Health Research and Care (CLAHRC) is a partnership between universities (Birmingham, Warwick and Keele) and a number of health and social care organisations in the West Midlands. We are funded by the National Institute for Health Research with a mission to undertake high-quality applied health research focused on the needs of patients to improve health services locally and beyond.

For further information, visit: www.clahrc-wm.nihr.ac.uk

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