WHY PEER-TO-PEER?

Patients with kidney disease can face barriers when completing necessary steps required to be on the transplant waitlist. Studies show that peer support is effective and can increase the success rate of completing steps in the transplant process.¹

Quality Insights Renal Network 4 has worked with patient subject matter experts (SMEs) to develop strategies for a Patient Advocate Peer-to-Peer Program. The program focuses on improving patient transplant waitlist status and home dialysis utilization.

Network 4 has patient advocates available to share experiences with other patients. The goal for patient sharing is to encourage and guide patients as they move through transplant evaluation and home dialysis processes.



¹Sullivan C, Leon JB, Sayre SS, Marbury M, Ivers M, Pencak JA, Bodziak KA, Hricik DE, Morrison EJ, Albert JM, Navaneethan SD, Reyes CM, Sehgal AR. Impact of navigators on completion of steps in the kidney transplant process: a randomized, controlled trial. http://www.ncbi.nlm.nih.gov/pmc/articlesPMC3463214/?report=printable. Accessed October 19, 2017





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For more information about transplant, peritoneal dialysis (PD), and other treatment options, or to file a grievance, please contact Quality Insights Renal Network 4.

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Patient Advocate Peer-to-Peer Program

Building a Pipeline of Patients Helping Patients





MEET THE PATIENT ADVOCATES



HOW TO GET STARTED

- Providers identify patients who could benefit from one-on-one conversations with former home dialysis and/or transplanted patients.
- Patients must agree to one-on-one interaction with a Network Patient Advocate.
- Contact Network 4 at (610) 265-2418, ext. 2820 to schedule a time for your patients to meet the Network 4 Patient Advocates through a phone call or facility visit.

WHAT TO EXPECT

- Advocates do not provide medical advice.
- Advocates share their experiences.
- Advocates follow up and collaborate with providers on patient needs identified during one-on-one conversations.
- Advocates help providers understand patient wishes for home dialysis and/ or the kidney transplant waiting list.
- Providers conduct periodic "touch point" calls with advocates and the Network representative to discuss barriers and share lessons learned.

Why I Chose Transplant Diana Headlee-Bell

I was diagnosed with End Stage Renal Disease (ESRD) 46 years ago. I had a living donor transplant - my father. Six weeks later, the transplanted kidney had to be removed. I was devastated.

Three months prior to my high school graduation in 1981, the transplant center called to tell me they had a kidney for me. The kidney lasted 18 years. I never knew what normal was until that second transplant. Eventually, I did return to dialysis. Eighteen years is considered good with a deceased donor transplant.

I opted for in-center nocturnal hemodialysis, which I did for twelve years. I felt comfortable in the beginning with this treatment option, so I decided against transplant. I'd already had two. Would I be selfish?

I finally decided it was in my best interest to try for another transplant. On June 22, 2011, I was called for my transplant. Fortunately, it was another success. For me, transplant became an educated choice.

Transplant today is not something to fear. Call your local transplant center and talk to them. Let them help you to determine whether transplant is for you. Be informed.

My Journey to Better Kidney Health

Timmy Nelson

After many years of recurring back pain, I decided to undergo surgery to resolve the issue in 2013. My back was mended, but after many examinations, I was informed that my kidneys were not operating properly and I needed to see a renal doctor.

My job required extensive travel, many times via airplane. During a visit with my renal doctor, he explained dialysis options and said I would be a good candidate for peritoneal dialysis (PD). At home, I had great flexibility because I was able to place my cycler at the most advantageous location allowing me the most access to my home. I was able to complete my dialysis and still follow my daily routine. When traveling, I would complete dialysis in the evening and overnight in my hotel room.

In 2017, I was blessed to receive a kidney transplant. Since then, I have become physically stronger each day.

Educating patients, loved ones and caregivers about dialysis modalities provides an opportunity for them to make an informed choice. I can also give back by helping others realize that dialysis does not inhibit life. In fact, it allows the continuation of living life.