

1. Introduction and Who Guideline applies to

Dialysis patients generally require dialysis three times per week for at least four hours each session. If a unit malfunctions this may result in a large number of patients requiring urgent reprovision of care.

UHL NHS Trust manages a large network of haemodialysis units. Three of these are based on Hospital sites at:-

- Lincoln County Hospital (14 dialysis stations)
- Peterborough City Hospital (17 dialysis stations)
- Loughborough Hospital (14 dialysis stations)

UHL also manages three free standing units at:-

- Leicester South (35 stations with room for expansion to 50)
- Northampton (27 stations with room to expand to 32 dialysis stations)
- Kettering (30 dialysis stations, with aim to expand to 32)
- Chandra Mistry Unit, Peterborough. (10 dialysis stations)

A number of the units also have a home training area plumbed for dialysis.

Additionally UHL patients are dialysed in four units which are run by private providers under contract to UHL, these are at:-

- Skegness (10 dialysis stations)
- Boston (15 dialysis stations)
- Grantham (9 dialysis stations)
- Hamilton, Leicester (35 dialysis stations)

UHL also has a free standing self care unit with a single dialysis station at Earl Shilton.

Inpatient dialysis is available at Glenfield Hospital renal wards and mobile dialysis rooms on Ward 10, LGH; Ward 32, LRI and ward 32 Glenfield Hospital.

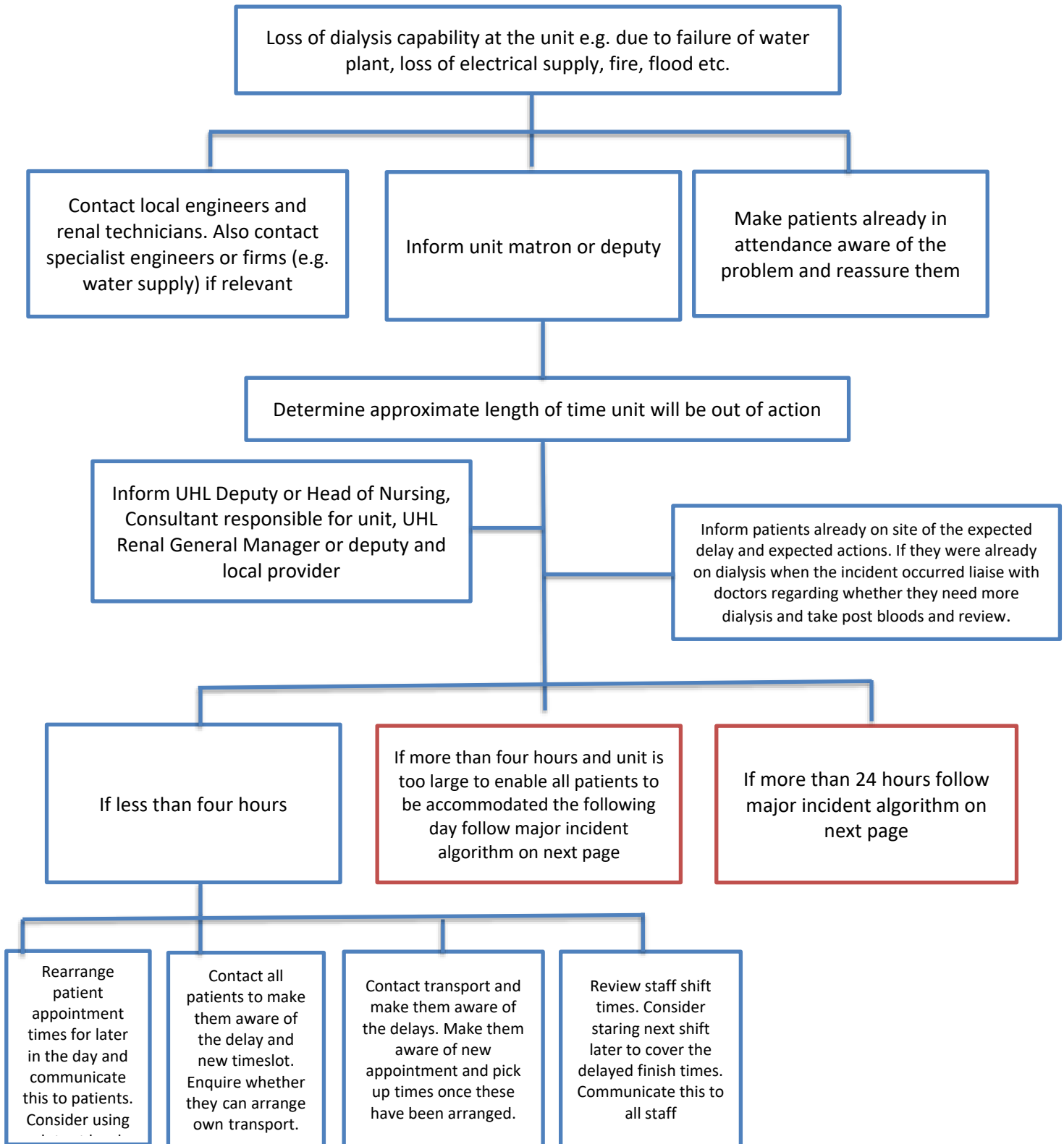
Finedon Ward in Northampton General, the Vulcan suite on Burton ward at Lincoln County Hospital and Ward A8 at Peterborough City also provide haemodialysis for in-patients but are not managed by UHL NHS Trust.

These guidelines are to aid HD nursing, technical, medical and management teams to manage the loss of one or more HD facilities. The aim is to ensure that the risk to patient safety is minimised and that all the relevant agencies involved are contacted.

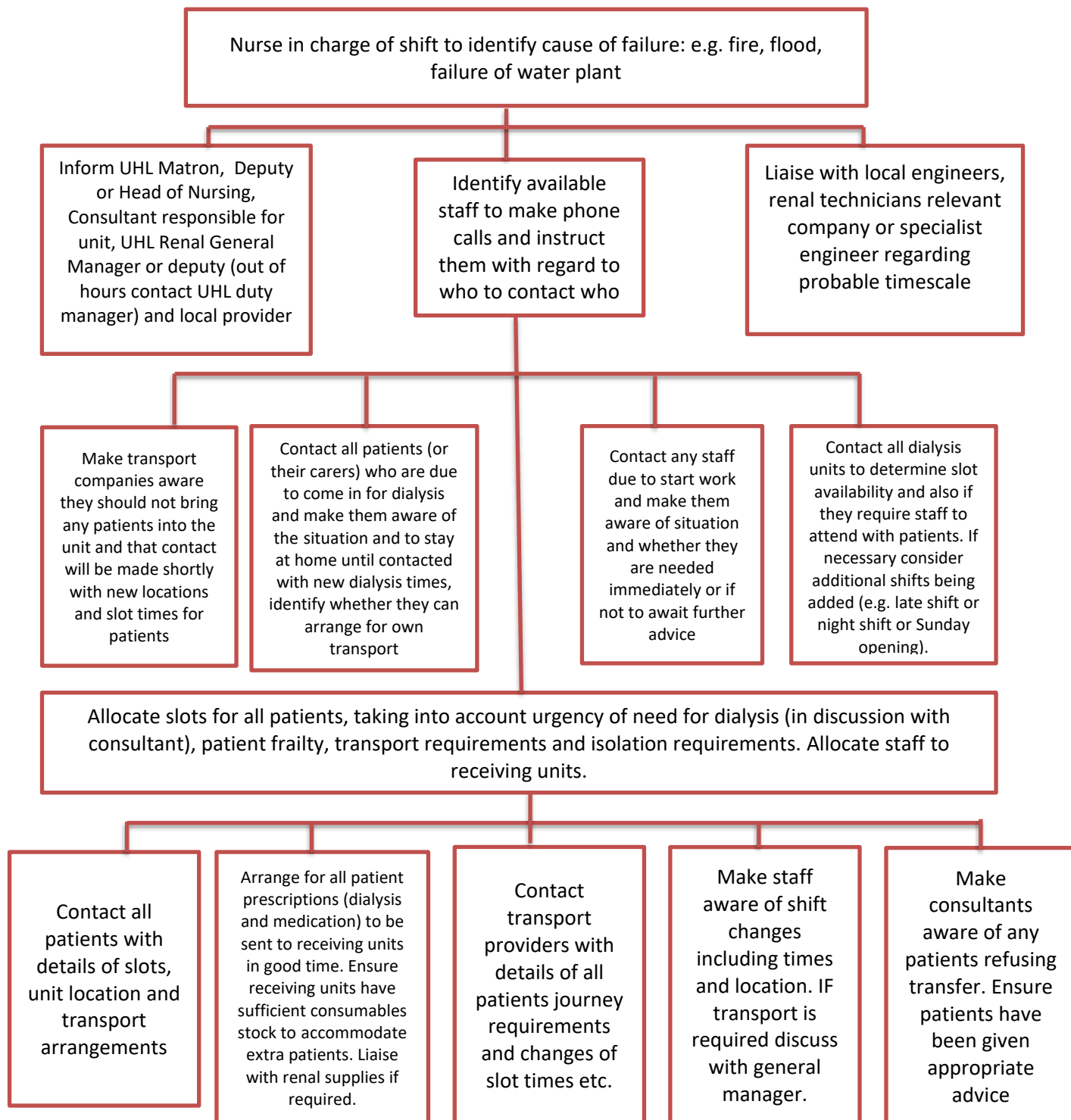
The guidelines are primarily for the nurse in charge of the unit at the time of the loss or malfunction

2. Guideline Standards and Procedures

The following pages give guidance in the form of algorithms for the loss of units. These are guidelines only and clinical staff will need to use their own judgment and liaise with technical and management teams. Staff also need to refer to their local unit business continuity plans which will give more detail about relevant contacts.



Major incident – failure of ability to provide dialysis for patients within 24 hours of expected slot time.



In order to determine number of available slots phone

- Leicester South 01165 046880
- Glenfield Ward 30 01162 584129
- Glenfield Ward 37 01162 584126
- Glenfield Ward 27 01162 588082
- Hamilton 01162 464176
- Lincoln 01522 573561
- Boston 01205 316401
- Skegness 01754 762220
- Grantham 01476 850025
- Loughborough 01509 564270
- Peterborough 01733 677888/ 01733 673709
- Northampton 01604 628976
- Kettering 01536 512535
- Chandra Mistry Unit 01733 673728
- Ward A8, PCH 01733 677749
- Finedon Ward, NGH 01604 523530

Additional helpful numbers will be within the local unit business continuity plan. This should be available on the unit or on the M Drive; RENAL; Business continuity plans for dialysis units.

3. Education and Training

Staff in charge of a hemodialysis unit should be made aware that this guideline exists and how to access it if needed

4. Monitoring Compliance

| What will be measured to monitor compliance | How will compliance be monitored | Monitoring Lead | Frequency | Reporting arrangements |
|---|----------------------------------|-----------------|-----------|------------------------|
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5. Supporting References (maximum of 3)

None

6. Key Words

Haemodialysis, loss of unit

| CONTACT AND REVIEW DETAILS | | | |
|---|--------------|---|--|
| Guideline Lead (Name and Title) Suzi Glover Deputy Head of Nursing | | Executive Lead Richard Baines | |
| REVIEW RECORD | | | |
| DATE | ISSUE NUMBER | REVIEWED BY | DESCRIPTION OF CHANGES (IF ANY) |
| 31.07.06 | 2 | S Pearce H Chamberlain S Maguire | Included Belgrave unit and changed numbers appropriately |
| 18.06.07 | 3 | S Pearce H Chamberlain | Included numbers due to expansion on main unit |
| 31.05.10 | 4 | H Chamberlain Renal matrons | Removed bgr combined with policy 13896 title changed |
| 23.11.11 | 5 | M Quashie- Howard H Chamberlain N Brunskill M Gerrish J Bayes | Updated capacity on Ward 15N, Peterborough, and Skegness, Corby. Updated contact details for Kettering, Peterborough and Finedon Ward |
| 14.01.13 | 6 | M Quashie-Howard | Updated capacity in Harborough Lodge and added Grantham satellite unit. |
| 26.06.17 | 7 | Emma Evans | Reviewed and updated to new template |
| 22.08.18 | 8 | S Glover G Warwick | Algorithms changed to reflect business continuity plan arrangements. Updated contact details for Northampton. Appendix added to aid recording of patient movements |
| 16.08.24 | 9 | S Glover | Updated for move of Leicester Unit |

Appendix 1

Relocating staff and patients can result in a lot of phone calls taking place and it becoming difficult to identify where everyone is going and whether this has been communicated. The tables below are designed to ensure through communication takes place and a record of all changes is kept.

Example tables to assist in recording of patient and staff movement.

| Patient Name | Tick when actioned | | | | | | |
|--------------|---------------------|------------------------|--------------------------|---------------------------|------------------------------------|------------------|---|
| | Isolation required? | Patient aware of delay | Transport aware of delay | Where and when to dialyse | Patient aware of new dialysis slot | Transport booked | Unit has prescription (dialysis and medication) |
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| Name of staff member | Staff aware of delay | Unit staff member to work on | Time of new shift | Staff member made aware of change | Transport required | Transport booked |
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