

A CLINICAL RESOURCE FOR
HEALTHCARE PROFESSIONALS

- Safety and quality procedures
 - Clinical governance
 - Protocols

kinship[™]
HEALTHCARE, MY WAY

Protect your most vulnerable patients

www.mykinship.com.au

KINSHIP OPERATED BY AN EXPERIENCED AND HIGHLY REGARDED COMPANY

Kinship is operated by Nuevo Health, a National Safety & Quality Health Service Standards (NSQHS) accredited health service, which has been delivering home nursing programs and services for nearly a decade.

We employ highly experienced and fully credentialed nurses to provide high quality, safe and patient-centric care in accordance with a robust clinical governance and quality management framework. Nuevo Health is part of IQVIA, the largest contract research organisation (CRO) in the world, having a strong history in clinical care.

Nuevo Health are the pioneers of patient support and engagement solutions in Australia and combine experience with innovation to deliver **quality you can trust.**



THE BENEFITS OF APPROPRIATE HOME TREATMENT TO THE PATIENT ARE WELL DOCUMENTED

- + Enhanced quality of life, independence and participation in daily life.^{1,3}
- + Choice, comfort and convenience^{1,4}
- + Reduced risk of community- and hospital-acquired infection⁴
- + Reduced rate of unplanned hospital admissions⁵
- + Reduced travel time and associated costs⁶

WE ONLY ADMINISTER TREATMENTS WHICH ARE CLINICALLY APPROPRIATE HOSPITAL SUBSTITUTIONS

Under the Kinship program, patients can generally be administered medicines which require IV infusion, including chemotherapy, immuno-oncology and chronic disease management. Some subcutaneous treatments are also available. Treatments must be considered a ‘hospital substitute treatment’ (HST), meaning that a patient would otherwise be admitted to hospital. Not all treatment types are covered by all health funds.

We’ve worked closely with our Protocol Review Committee comprising medical directors, experienced nurses and senior management to adopt treatments and protocols that are most suitable for home administration based on both severity and frequency of adverse events, as well as other medication management considerations.

The current list of adopted medicines/protocols is available by registering at www.mykinship.com.au

WE MANAGE THE RISK OF MEDICINE-RELATED ADVERSE EVENTS

Prior to admission into the Kinship program, we ensure that the patient has been administered a minimum number of treatment episodes in a hospital setting so that the treating doctor has a good understanding of the patient’s risk of hypersensitivity and allergic reactions during administration. The number of previous treatments is specific to each treatment/protocol and we ask for confirmation that the patient is stable and has not suffered any moderate to severe reactions during these prior treatments.

Permission to treat is required from the treating doctor (or their nominee) prior to each nurse visit, along with a copy of the most recent pathology results. An oncology-trained pharmacist reviews the pathology results and patient health record prior to dispensing any medicines.

As part of each treatment visit our nurses conduct a patient assessment including toxicity, immune-related adverse events (where appropriate) and general health. The nurse conducts a further review of pathology results and the treatment chart prior to administration of any medicines.

WE HAVE A ROBUST CLINICAL GOVERNANCE FRAMEWORK

As an NSQHS accredited health service, we adhere to a robust clinical governance and quality management framework which reaches across all areas of service provision, including:

- Safety and quality committee comprising medical directors, nurses, patient representatives, senior management and program staff who advise on policy review and formation, review and resolution of complaints, critical incidents, and adverse events;

- Nurse advisory board who advise on scope of practice and credentialing requirements;
- Patient admission assessments that are performed prior to the first patient visit to ensure suitability and safety of the treatment environment and to understand the patient's individual circumstances and needs.

If you have specific questions about our policies and procedures, please contact us.

WE HAVE WELL-DEFINED ELIGIBILITY CRITERIA FOR PATIENT ADMISSION

Clinical criteria

- Treatment is clinically appropriate.
- Patient is stable and has no significant comorbidities.
- Patient has undergone a minimum number of in-hospital treatment episodes.
- Patient has not experienced any significant side effects with treatment to date.

Service criteria

- Patient has an appropriate level of private health hospital cover with a contracted health fund.
- Patient holds a valid Medicare card.
- Prescribed medicine is funded by the Pharmaceutical Benefits Scheme (PBS) with authority (if required).
- Home environment meets work, health and safety requirements.
- Patient is located within proximity to emergency services.
- Patient consents to treatment.

ALL KINSHIP NURSES ARE TRAINED AND EQUIPPED TO MANAGE HYPERSENSITIVITY AND ANAPHYLAXIS

In the unlikely event that a patient experiences a reaction to their medication, our nurses are highly experienced and specifically trained to identify early signs and act accordingly. Kinship nurses carry a sealed kit of medications to be administered by the nurse where clinically appropriate including adrenaline and other medicines commonly used in treatment of hypersensitivity and allergic reactions. A standing order for these medicines is a requirement for all patients admitted to the Kinship program.

Our Hypersensitivity and Anaphylaxis Management Policy is available by registering at www.mykinship.com.au

OUR SERVICE INCLUDES ALL ASPECTS OF PATIENT CARE RELATING TO THE TREATMENT

- Liaison and scheduling with patient from referral through to appointment.
- Assessment and administration by fully credentialled, experienced nurses.
- Compounding and provision of medicines, including supportive/assistive medications, where prescribed, and emergency medicines (hypersensitivity and anaphylaxis).
- Provision of equipment and consumables including infusion pumps, PPE, giving sets and nursing kit.
- Lockable, cytotoxic waste bins delivered to a patient's home, and disposal of all clinical and cytotoxic waste.
- Comprehensive reporting of each visit to healthcare team members as required/appropriate.
- 1800 call centre for all stakeholder enquires and assistance.

WE ONLY EMPLOY HIGHLY EXPERIENCED, APPROPRIATELY CREDENTIALLED NURSES

Each experienced Kinship nurse is categorised based on the type of administration they are credentialled for, their skills and experience. Only suitably qualified and experienced nurses will attend a patient appointment.

All nurses are rigorously trained prior to their first patient visit on:

- Home nursing standards, policies and procedures.
- Each specific protocol for administration.
- Equipment and device use.
- Data management and privacy.

WE HAVE ENGAGED REPUTABLE SERVICE PARTNERS TO DELIVER OUR SERVICE

Our service partners have been specifically chosen for their experience, credentials and service orientation.

- Central pharmacy and compounding partner: all medicines are dispensed centrally by a team of experienced and qualified oncology pharmacists, in accordance with COSA and NSQHS medication management in cancer care guidelines.
- Cytotoxic waste management partner: ISO9001, ISO14001 and OHSAS 18001 accredited waste disposal service to health services across Australia.






WE ARE HAPPY FOR YOU TO ASK US MORE QUESTIONS

If you would like to speak to our program management staff, medical directors or nursing staff to discuss any queries or concerns regarding the Kinship program, please do not hesitate to contact us.

WE'D LOVE TO HEAR FROM YOU.

THE KINSHIP TEAM

 1800 570 820

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NUEVO HEALTH
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Level 8, 201 Pacific Highway, St Leonards, NSW 2065 Date of preparation: August 2020

References: 1. Schmidt B. *Patient Safety and Quality Healthcare* 2012. www.psqh.com/analysis/home-infusiontherapy-safety-efficacy-and-cost-savings/ [Accessed June 2020]. 2. IQVIA Solutions Australia. Data on file. February 2020. 3. Zuizewind C et al. *J Clin Immunology* 2018; 38:876-885. 4. Monalto M *Aust Prescr* 1997; 20:88-9. 5. Ellenbecker CH. Patient Safety and Quality in Home Health Care. In: Hughes R (ed). *Patient Safety and Quality: An Evidence-Based Handbook for Nurses*. Rockville: 2008; 301-40. 6. Monalto M et al. *MJA* 2020; 213(1):22-7.