



TEL-AVIV SOURASKY
MEDICAL CENTER

MEDICAL EXCELLENCE AND COMPASSIONATE CARE

Improving Nursing Treatment of Hospitalized ESRD Patients

Romach Iris RN. MA, Tchetchylin Sofia RN. BA, Gutman Inesa RN. MA

Dialysis unit, Tel Aviv Souraski Medical Centre

irisromach@gmail.com

Background

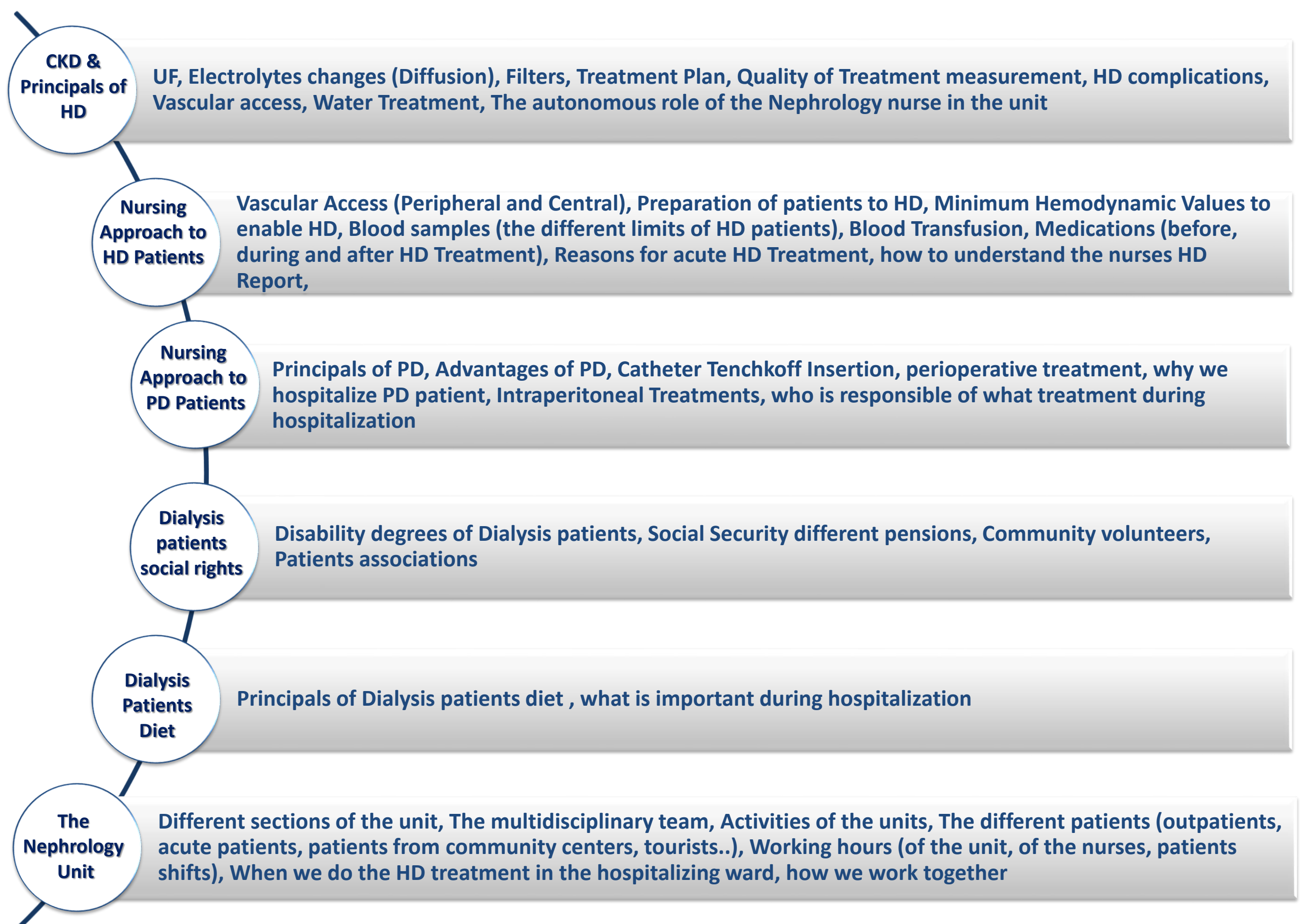
Patients with serious conditions and multi comorbidities like ESRD are more likely to suffer from adverse reactions. From our experience, we find that the nurses in the general wards are not familiar enough with the special treatment needs of ESRD patients. Talking with our patients enlightens this need. Nurses in the general wards lack knowledge about the treatment of either HD or PD. They sometimes use permacath for non Dialysis purposes, insert peripheral needles into the AVF, give patients the wrong diet, provide medications in the wrong time (including Phosphor binders), admit PD patients to a corridor beds, or too close to Patients with Contact Isolation, transfer patients to Haemodialysis without a special check-list that provides information about the patient present status, miss the opportunity to take blood samples or give blood transfusion during HD etc.

Objectives

- Improve hospitalized ESRD patients' safety by increasing the knowledge of general wards nurses on these special needs
- Improve the professional communication among the nurses in the general wards and in the dialysis unit
- Implement Accreditation standards between the dialysis unit and the general wards

Methods

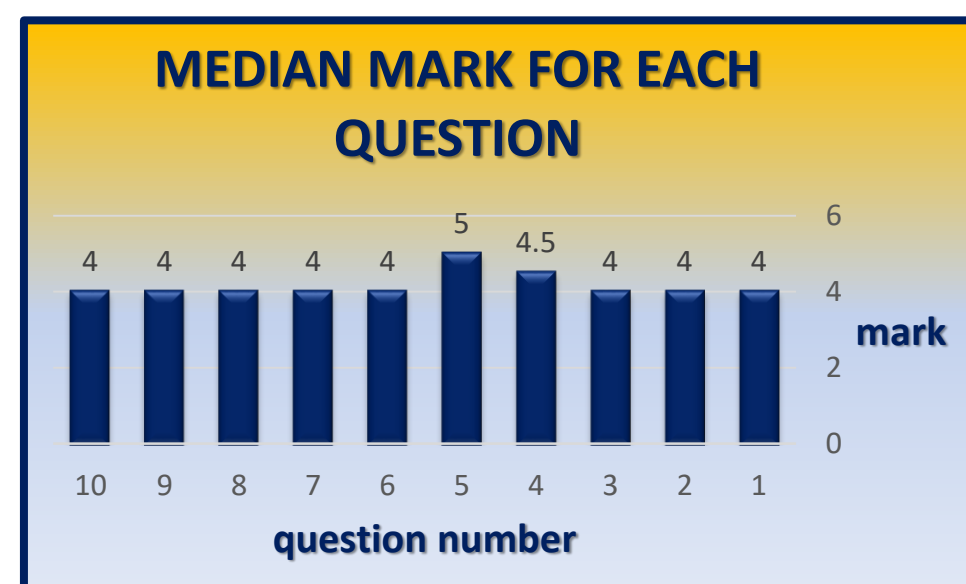
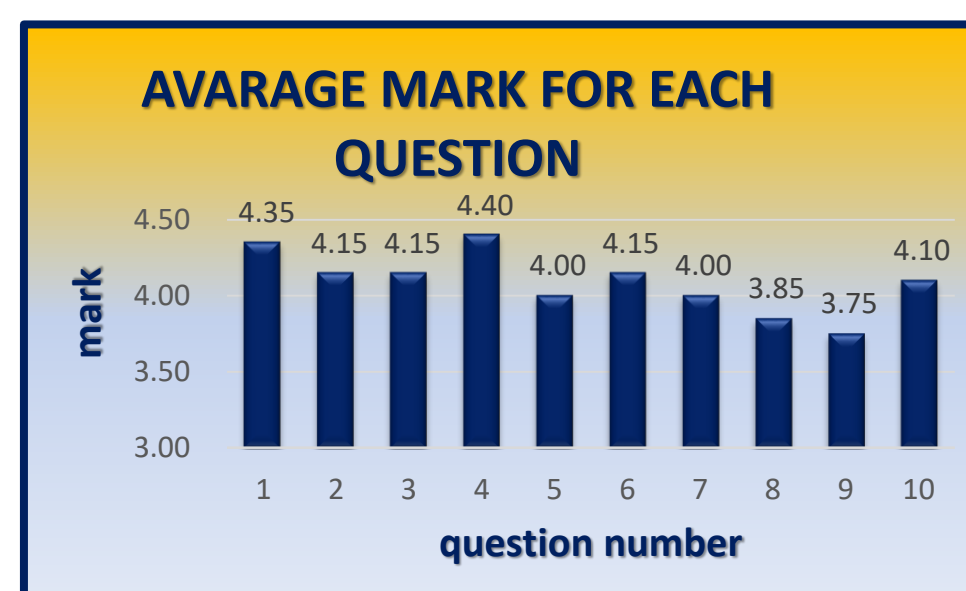
We initiated a study-day targeting hospital nurses from general wards and special units. The topics where general basics of CKD and Haemodialysis, Vascular access, Peritoneal dialysis, Peritoneal access, ESRD patients diet needs and patients social rights. We introduced the new computer reports and the importance of each component in it. Each Topic was delivered by a specialist



Feedback questionnaire

21 answers out of 45 participants

1. Was the study-day well organized?
2. Did the study-day answer the needs?
3. Were your expectations fulfilled?
4. Did the atmosphere in the group helped the learning process?
5. was the meeting with colleagues helpful?
6. I learnd new essential topics
7. The topics are essential to my work
8. The topics organized my knowledge
9. I use the new skills in my daily work
10. I intend to implement the new skills in my work



Verbal feedback:

1. What are the new skills you learnd?
 - Fluids and electrolytes management, Chronic dialysis treatments (an ICU nurse), the study-day was focused and let us understand the work of the Dialysis nurses
2. Are there skills you are interested in learning more about?
 - AVF treatment, ATN, Hypotension and the kidney, Potassium, PD, Nephrology in general, the importance of checking the patient before sending him to Dialysis, Dialysis and Psychological reactions of patients, who is responsible for the patients – the Dialysis treatment in general wards

Results

- Communication is much better since the study-day
- The participants updated their colleagues about the new information
- According to the feedback questionnaire the participants were very happy with the study-day, since they felt that they did not know enough about Nephrology and Dialysis patients

Conclusions

Improving Quality of Care by sharing knowledge among professionals on study-days within the hospital facilities is simple. Management support and Nurses accessibility during working hours is a win-win option. The participants were satisfied with the day. It was to the point, easy to understand and easy to implement in their working place.

From our point of view, we enjoyed the day very much. We had the opportunity to meet colleagues, present our work with which they were not familiar, share opinions and answer questions.

Nowadays the feedback from our patients, the information shared between wards and the general questions about ESRD patients' needs, are being discussed on daily bases and made the study-day a success

