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Pre-dialysis Education – Creating an Even Playing Field

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Context: Knowledge and opinions amongst health professionals about Home Dialysis is varied. This can translate to those receiving pre-dialysis education receiving mixed messages depending on the health professionals experience and views. Kidney Health Australia have received a Commonwealth funded grant under the Chronic Diseases Prevention and Service Improvement fund to develop standardised pre-dialysis education that promotes home and patient choice. Objectives: To provide online learning for health professionals about home dialysis, conservative care, self-management and CKD. To develop tools that support comprehensive patient education and promote patient choice, including a national website and a patient decision aid. To distribute tools via workshops and on-site education To collaborate with other working groups and health networks with similar aims. Key Messages: Home Dialysis is the best option for many individuals with chronic kidney disease. Educating health professionals and providing them with tools to educate and support patients will contribute to an increase in the choice of these self-management modalities of dialysis. Conclusion: Collaboration across Australia can create high quality education for both health professionals and patients. The introduction of health professional packages and patient tools will help to promote an even playing field for patients

Using Pictures to Communicate

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Background: Understanding how end stage kidney disease and associated dialysis regimens affect each individual person can assist in providing person-centred nursing care and education. Aim: To explore the use of images as a visual communication technique for nurses and patients in the haemodialysis context. Methods: Fifty two cards containing specific pictures, photos, illustrations and words were used in semi-structured interviews between nine people on dialysis and two nurse interviewers. Interviews were audio-recorded, transcribed and thematically analysed. Results: Using pictures revealed the struggles of living on dialysis conceptually captured in three sub-themes: the increased importance of relationships; the struggle with money; and quality over quantity of life. The pictures assisted in uncovering covert aspects of the lives of people requiring dialysis. Conclusions: This study has confirmed the potential for images to change the flow and direction of the normal nurse-patient discussion opening up a different dialogue between patients and nurses. Novel ways of learning and understanding can be applied not only in educating staff but in understanding and educating people receiving our clinical care.

Home Dialysis Therapies E-Learning

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Context: A key barrier to commencing and continuing home dialysis is a lack of information and knowledge. High quality educational resources designed to inform and educate healthcare professionals, students and other stakeholders can address this gap and improve the uptake of these therapies Objectives: To develop a suite of high quality web-based educational home dialysis therapies resource packages and evaluate the impact of these resources on knowledge and attitude change. Key Messages: Interactive high quality e-learning resources can increase knowledge and inform attitudes towards home dialysis therapies. Targeting health care professionals and health care professional students requires e-learning that is generational appropriate. Conclusion: This presentation will demonstrate the home peritoneal and home haemodialysis learning packages and present the results of the effect on home dialysis therapies knowledge.

A Descriptive Study of a Pilot Home Therapies Patient Education Train-the Trainer Program

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Introduction: Effective dialysis therapy at home requires an educated and involved patient. Successful preparation of the patient requires the nurse to be able to deliver the necessary training utilising appropriate strategies to ensure patient competency. **Purpose:** The goal of this study was to evaluate the effectiveness of a Train the Trainer program for home dialysis nurses to ensure standardisation of patient training for staff development. **Method:** The program consists of three parts; a generic patient education workshop; a practical-based program of 1 hour/week for 8 weeks; and development of a standardised patient education competency. Two groups of 4 participants were recruited equally from Home Training Haemodialysis Unit (HTHU) and Peritoneal Dialysis Unit (PDU) to undertake training program and surveyed at weeks 4 and 8 for content review. **Discussion:** Results of the pilot and competency attainment will be presented upon program completion. Currently, preliminary results would suggest that the Train-the Trainer Program is effective in increasing the confidence and competence of nurses. **Implications for Practice:** Refinement of the program will allow further research to validate the program's effectiveness. The development of a home therapy specific education program would be beneficial for all units trying to increase patient training skill.

“Bug Off” Improving infection control practices in a haemodialysis unit

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Context: Hospital-acquired infection; particularly multi-resistant organisms have been identified as a major cause of morbidity and mortality worldwide. It is recognised the primary route of transmission of micro-organisms (MRO) in healthcare settings is via unwashed hands. Haemodialysis units present a unique context through the patient cohort who attends them as well as architectural and procedural factors. A need was identified within the haemodialysis unit for improvement of hand hygiene. Audits performed in early 2012 exposed haemodialysis as having the poorest hand hygiene compliance rate in the district. Standardised staff survey identified an educational deficit. Other factors involved challenges around entrenched practices, cultural tolerance, misconception, variation of practice, workload and resources limitations. **Objectives:** Development of a multi-modal intervention focused on: universal surveillance for MRO's, isolation and application of contact precautions for patients colonised with MRO's, hand hygiene and changes in the institutional culture. **Key messages:** Despite cultural, workload and resource challenges, a highly coordinated multi-modal approach can achieve good hand hygiene compliance in health care workers. **Conclusion:** In a relatively short time, this multi-modal approach was able to develop educational tools, disseminate information, alter perceptions and change accepted practice without generating a resource burden.

Promoting the Competent use of Medical Devices – TRIPoD

Karen Bennett – Fresenius Medical Care

Context: The rapid pace at which technology is developed, combined with the expectation to provide exceptional patient outcome, results in the need for nurses to continually reflect and update clinical practice. This is not a new phenomenon; keeping up with the swift pace of technological change is a challenge when professional development resources are limited. **Objectives:** TRIPoD – Training to Improve the Practice of Dialysis is an education framework designed by Fresenius Medical Care to assist in the training of individuals in both the Peritoneal Dialysis and Haemodialysis technology environment. The primary objective is to support renal nurses, in their quest to attain competence through the provision of relevant and flexible learning opportunities that culminate with a chance to prove competence. These nurses then return to their home units as 'Clinical Champions' to support ongoing discussion, learning and use of the technology. **Key messages:** TRIPoD addresses some of the current difficulties being faced by renal education through the provision of expert local training facilitators using a modulated training programme adapted specifically to meet local unit need. **Conclusion:** The TRIPoD program has been shown to encourage participation of clinicians in ongoing education with potential beneficial outcomes for the renal unit and patients.

Professional Portfolios: Maintaining Competence To Practice

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Context: Australian and New Zealand nurses are required to make several statutory disclosures as part of their nursing registration renewal. One area of self-disclosure relates to maintaining competence to practice. Nurses are required to develop and maintain a portfolio that demonstrates their assessment of practice, continuing professional development and recency of practice in order to meet their registering bodies required standards. One of the obstacles for nurses is a clear understanding of what constitutes a professional portfolio as well as what is required of them to demonstrate continuing competence. **Key message:** This paper discusses, from both the Australian and New Zealand regulatory authorities' perspectives, the maintenance of competency, the requirements for demonstrating continuing professional development, and how a professional portfolio assists in providing this evidence.
