



# **The RPSG**

**The Renal Patient Support Group**

**Renal & Nursing**



## Nursing Practice

- Practice aims to optimise patient care through improved communication, a systematic review of barriers to care, and developing strategies to address barriers (Neyhart et al. 2010).
- The nursing model has developed to encourage and support self-management among the patient population (Neyhart et al. 2010).



Neyhart, C.,D., McCoy, L., Rodegast, B., et al. (2010). A New Nursing Model for the Care of Patients with Chronic Kidney Disease: The UNC Kidney Care Nephrology Nursing Initiative, *Nephrology Nursing Journal*, 37(2), 121-130.



## Nursing Practice

- Different models of care allow to identify specific barriers to quality patient care and how those might be impacted (Neyhart et al. 2010).
- Structures set up the expectation and means of integration between all points of care for patients from the early stages of CKD through renal replacement therapy (Neyhart et al. 2010).
- Different models provide patients with greater support, education, and efficiency (Neyhart et al. 2010).



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## Nephrology

- The care of CKD patients is complex and requires continual assessment, planning, intervention, and patient education (Neyhart et al. 2010).
- Nephrology nurses have assumed more responsibility in the care of CKD patients (Neyhart et al. 2010).
- Nephrology nurses take part in recognition CKD at earlier stages and delaying ESRD. This includes labour-intensive monitoring, education and coordination of care (Neyhart et al. 2010).



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## Clinical Practice

- CKD Clinics
  - Anaemia Clinics
  - Vascular Access
  - RRT Initiation
  - Diagnoses and Evaluation
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- Nurses manage all clinics to ensure that the patient's needs are being met (Neyhart et al. 2010).



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## Promotion of Self-Management

- Promotion of disease self-management is an important underlying principle in the care of any patient with chronic illness (Neyhart et al. 2010).
- Patient education is crucial to patients' understanding of diagnosis and treatment options (Neyhart et al. 2010).
- Patients should develop a broad understanding of managing symptoms and treatment regimens (Neyhart et al. 2010).
- The earlier patient education occurs, the greater the opportunity for slowing disease progression and making informed decisions. (Neyhart et al. 2010).



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## The Goal of Patient Self-Management

- Maximum patient participation in self-assessment,
- Monitoring,
- Medication,
- Treatment administration,
- Evaluation of therapy,
- Physical and psychological health promotion,
- Prevention of complications,
- Improved adherence to the medical regimen,
- Treatment Options



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## Barriers to Patient Care

- Placement of Vascular Access
- Inadequate preparation for Dialysis
- Lack of integrated practice in Nephrology
- Delays in request for nephrology consultation
- Unnecessary admissions and inappropriate utilisation of the emergency room
- Inefficient discharge planning and poor communication with outside service providers



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## Removing Barriers to Care

- A nurse practitioner functions as a liaison between the admitting service, the inpatient dialysis unit, and the outpatient dialysis unit (Neyhart et al. 2010).
- A nurse practitioner is in communication with the inpatient and outpatient dialysis units as well as the admitting service for foster communication (Neyhart et al. 2010).
- Adult and paediatric transplant nurse visits in hospital to assist with continuity of care back to the outpatient setting (Neyhart et al. 2010).



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## Preparation for RRT

- Preparation for RRT includes patients having a functional access, patient education, obtaining required laboratory investigations with Pathology, clinical leads, and financial paperwork (Neyhart et al. 2010).
- Patients sometimes are not adequately prepared for RRT in the outpatient setting, and so Nursing involvement is pertinent (Neyhart et al. 2010).



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## Patient Education

- As patients become more autonomous, they become actively involved in decisions regarding care (Neyhart et al. 2010).
- Patients who become expert at managing medical conditions are more able to preserve social roles, self-esteem and relationship (Neyhart et al. 2010).
- CKD patients must have a very clear understanding of all elements of disease management and thus become independent (Neyhart et al. 2010).



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