Patient education make easy: Enhanced care provision for renal patients after Peritoneal Dialysis (PD) catheter insertion
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Introduction
Provision of healthcare related education to patients is an integral and essential role of clinical nurses. In order to ensure quality care being delivered to our patients, continuous quality improvement (CQI) on current practice of patient education with contemporary modification is important and necessary in modern day care delivery.

Objectives
To enhance the care of peritoneal dialysis catheter insertion in end stage renal patients, current practice on post-insertion education was revisited, a new teaching process and an enhanced set of assessment tool were developed in renal unit of Princess Margaret Hospital.

Methodology
A continuous quality improvement (CQI) nursing team in renal unit was formed to review the current practice of care education provided to patients who had undergone peritoneal dialysis (PD) catheter insertion. The current practice with the use of information leaflet and direct demonstration by nurse was identified as tedious and nurse-intensive. The team developed a new education video illustrating the whole process of PD catheter exit site care and dressing method. Patients can use hand-held mobile device (i-Pad) to learn the entire process with important points highlighted. It can facilitate patient learning through frequent revision irrespective to time, place and nurses' availability. In addition, a new assessment tool using prefect scoring system was developed to assess patient’s progress and competency.

Result
To support Continuous Quality Improvement initiatives for enhancing patient care. Injection of innovative ideas and with modern educational media as high-tech elements into the patient education provision process would be another milestone forward in clinical impact by nursing educational tool. Patients’ and nurses’ satisfaction levels and feedback were collected for evaluation. Time durations for teaching sessions were also recorded for comparison and manpower evaluation. After implementing the new video for patient education on 1 December 2017, total 10
patients had received the new education package. Their overall satisfaction rate ranged from 4 to 5 in a 5-point Likert scale, with average at 4.2. Nurses involved in the patient education process also verbalized satisfaction and expedience as patients already had a basic concept about the procedure before nurse's encounter. The time for education was also shortened by 10-20 mins per session equivalence to ~22-33% decrease in nursing time.