Outcome Evaluation of the Inflammatory Eye Disease (IED) Nursing Service at Hong Kong Eye Hospital (HKEH)

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Keywords:
Inflammatory Eye Disease
IED

Introduction
Non-infectious inflammatory eye diseases (IED) are autoimmune disorders, which are potentially blinding if not treated promptly. IEDs are usually treated with corticosteroids, and increasingly second-line immunosuppressants and biologic agents. The use of such medications requires specific baseline screening and regular monitoring. IED nursing service at HKEH was established in August, 2015 with the aim to ensure safe administration of long-term oral steroid, second-line immunosuppressants and biologic agents, and to provide explanation and support to IED patients to improve their understanding of their disease, treatment and treatment compliance.

Objectives
This study was undertaken to
a) To evaluate the disease knowledge and medication compliance of IED out-patients.
b) To identify the patients’ perception about the performance of IED nurses.
c) To identify the areas for IED nursing service quality improvement

Methodology
A patient satisfaction survey was conducted from 21-30/9/2016. Convenience sample with 50 patients was adopted. Self-administrated Likert-type questionnaires with 22 items were delivered on site of follow up or by phone. Patients’ perspectives were assessed on: 1) knowledge about IED, 2) perceptions about the nurses’ performance in managing IED and 3) drug compliance.
Parametric tests including the independent t-test and Pearson’s correlation analysis were used to examine how the demographic and clinical characteristics of the patients are related to the key study variables. All the analysis was conducted by using Statistical Package for the Social Sciences (SPSS) software (version 22.0). The level of significance was set at 5%.

Result
A total of 50 patients have successfully completed the survey. The main study outcomes scores on disease knowledge, nurse performance and drug compliance
were generally favorable. Disease knowledge was moderately and positively correlated with nurse performance (Pearson’s r = 0.440, p = 0.001) and drug compliance (Spearman’s r = 0.442, p = 0.001). On the other hand, there was a strong, positive correlation between drug compliance and nurse performance (Spearman’s r = 0.809, p < 0.0001).

The majorities of the sampled IED patients had good knowledge on their illness, good drug compliance and were satisfied with the IED nurses’ performance. In view of the strong positive correlations between patients’ perception of nursing performance, disease knowledge and drug compliance, maintaining the core competence of nurses in managing IED is not only important to ensure the quality of care, but can also enable patients to demonstrate better illness behaviors.