

Renal PFAC Goderich Satellite Visit Report

On May 1, 2016 representatives from the Renal PFAC visited the Goderich Satellite Hemodialysis Unit.

<u>Goals</u>

- Promote Renal PFAC
- Meet satellite patients, and rural PD, Home Hemo and CKD patients from the area
- Gather feedback and suggestions from the rural patient population
- Generate interest from satellite patients who might join the PFAC

<u>Attendees</u>

- Fred McInnis, Angela Andrews, Betty Clinton
- Lori Merner, Dialysis Manager Goderich Hospital and Goderich Satellite RN's
- satellite unit patients

Findings

In general, the patients stated that they were very happy with the care from the satellite unit, and the renal program. They felt because the unit was small, they developed good relationships with the staff and described their fellow patients as "dialysis family".

• <u>Transportation</u>: The patients who require transport to dialysis use a Goderich based company. In general patients were happy with this service to get to Goderich, however did express some problems with the cost and availability of the service to get to London (around \$50 per trip) which can

take a toll on patients who are receiving a pension or ODSP, and who are on a limited income.

- <u>Parking</u>: for patients who drive themselves and park at the hospital, there is free parking on the street. The patients are happy about this.
- <u>Appointment Times</u>: some patients discussed getting to early appointments in London for dialysis catheter changes in radiology (at either VH or UH) could be a problem. Staff in the unit mentioned that lately they saw patients getting later morning appointments in radiology which was an improvement.
- <u>WIFI</u>: the patients have access to free WIFI, as well as free television.
- <u>Social Work and Dietitian</u>: some of the patients mentioned that they have been given the opportunity to converse with the dietitian or social worker via the I-Pad face to face. Some felt that this was not adequate for their needs. They felt it was not private, and not personal. They felt that the social worker and dietitian should attend clinic with the nephrologist and nurse practitioner at least every few months. Other patients mentioned that the social worker and dietitian are very good at following up with them by phone, and they are able to have their needs met that way.
- <u>Privacy</u>: some patients mentioned that there is very little opportunity for privacy in the dialysis unit if they required use of the washroom which hooked up to the dialysis machine. There are no curtains in the unit, and if they need a bedpan it is almost impossible. They mentioned that the staff will unhook them to go to a private washroom if absolutely necessary.
- <u>New Dialysis Chairs</u>: some of the patients mentioned that the current chairs for dialysis were old, and uncomfortable. The patients have heard that there has been money allocated for new chairs, but they have not been replaced, and were interested in finding out when this was going to be done.

<u>Actions</u>

• PFAC brochures, the letter to patients and staff, and PFAC business cards were left with the unit

Common Themes

- The overall impression of the visit was that it went well, and patients in Goderich are generally happy with their care
- The theme continues to emerge around patient transportation, in that it is either difficult to obtain, or the burden of cost is too high for patients who are on a limited income.
- some patients are satisfied with phone calls and iPAD communication with social workers and dietitians however others were did not feel comfortable using these methods and felt that more frequent face to face meetings would suit their needs