

SYSTEMATIC IMPLEMENTATION OF A PROTOCOL TO IMPROVE SYMPTOM MANAGEMENT IN HEMODIALYSIS PATIENTS AT VANCOUVER GENERAL HOSPITAL

Kaillie Kangro¹, John Duncan², Helen H.L. Chiu³, Michael Copland², Jacek Jastrzebski², Kerri Berryman¹, Toni Trewern¹, Karen Shalansky¹, Jane Chu¹

¹Renal Program, Vancouver General Hospital, Vancouver Coastal Health, Vancouver, BC, Canada, ²Division of Nephrology, Faculty of Medicine, The University of British Columbia, BC, Canada, ³BC Provincial Renal Agency, Vancouver, BC, Canada

BACKGROUND: Dialysis patients experience a high symptom burden, which has historically been under-reported and not systematically assessed. Symptom assessment tools like the Edmonton Symptom Assessment Scale (ESAS) are increasingly being used in chronic patient care settings as a way to engage patients in the symptom assessment process, resulting in improved identification and management of symptoms.

OBJECTIVES: To systematically implement a protocol to improve symptom assessment and management in hemodialysis patients at Vancouver General Hospital using a patient centered approach.

METHODS: A rapid process improvement testing method was used to optimize the process for systematic symptom assessment using the modified ESAS (mESAS). Surveys were used to gather ongoing feedback from frontline staff and patients to inform this effort.

RESULTS: Initial Plan-Do-Study-Act (PDSA) cycles were carried out with promising progress on the uptake of the mESAS in the VGH HD unit. Outcome and process measures have also been established for monitoring the improvement process. To date, approximately 50% of patients on the hemodialysis units have completed the mESAS with a completion rate of 80%. Following brief explanation of the mESAS, most patients have been willing to complete the checklist. Patient and staff surveys have provided constructive and practical information to guide continuous improvement in symptom care.

CONCLUSION: Routine patient-centered symptom assessment can help to reduce overall symptom burden. Although not all problematic symptoms can be eliminated, increased discussion about symptoms may reduce symptom burden and generally improve patient's health related quality of life. Systematic introduction of mESAS into our unit has resulted in significant progress to date with high patient involvement and good staff

CSN Annual Meeting 2014
April 23-27th, 2014
Vancouver, British Columbia

engagement. We will continue to document the process as well as impact on both patients and staff as the initiative progresses.