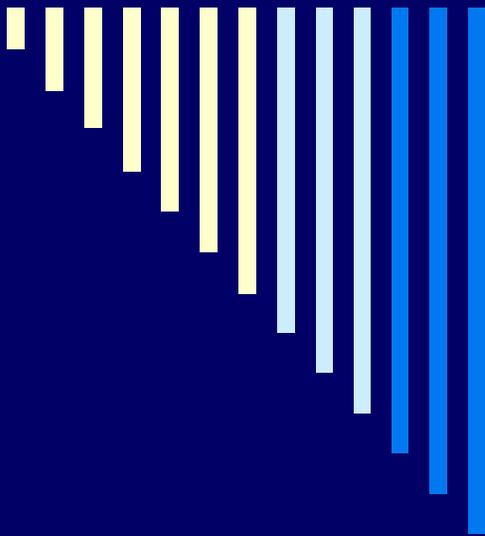


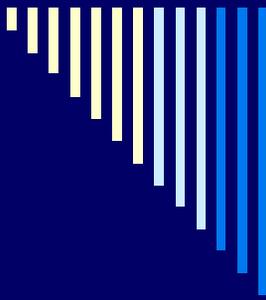
BC Nephrology Days 2006

**Learning to Live with
Chronic Kidney Disease:
Closing the Gap Between
Teachers and Learners**

Susan Close, Karen Mahoney
Bev Craig, Kerry Mahlman

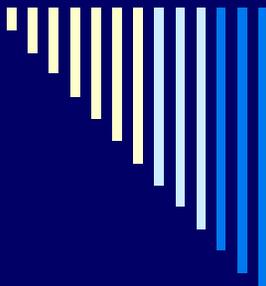


Tough Work...Tough Conditions



Last Year:

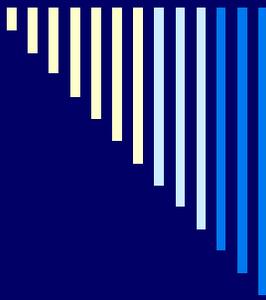
- ❑ Dispelling Myths about Behavior Change:
 - ❑ Health crises don't necessarily result in behavior change.
 - ❑ Information, alone, is unlikely to result in behavior change.
 - ❑ Scare tactics don't tend to work (and may even backfire and create fatalism).
-



Last Year

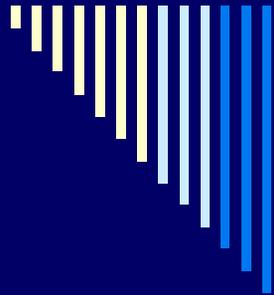
What *DOES* motivate change:

- ❑ Change is inspired more by emotional appeal than factual statements.
 - ❑ Compelling, positive visions of the future are a much stronger inspiration for change.
 - ❑ Belief in oneself, or confidence that change can be successful, is key.
 - ❑ Effective coaching and support, on the part of the health care team, can make a huge difference. We all need someone who believes in us.
-



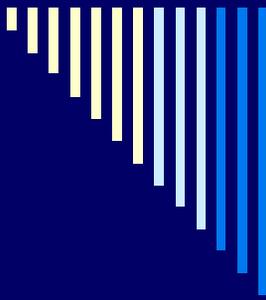
Motivation

- ❑ Readiness, attitudes and perceptions affect a person's ability to learn.
 - ❑ If a person is not ready to learn or does not see the value of learning, most of the information shared just won't sink in - even if one's very life depends on it.
 - ❑ Without positive attitudes and perceptions, people do not learn well.
-



Today





Session Overview

□ Plenary Session (Susan Close)

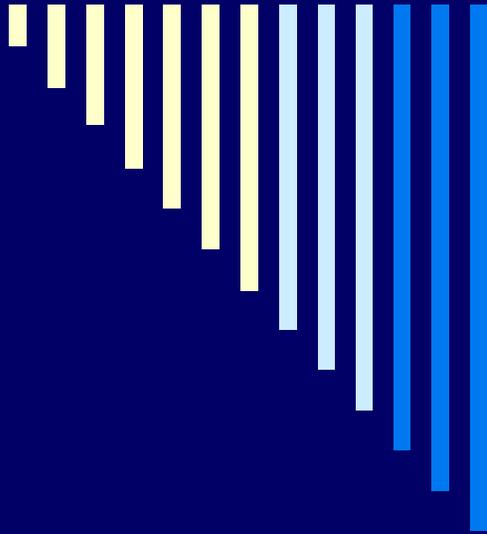
□ Break out Sessions:

- Working with Groups: Kerry Mahlman and Bev Craig
 - Working One-to-One: Susan Close and Karen Mahoney
-



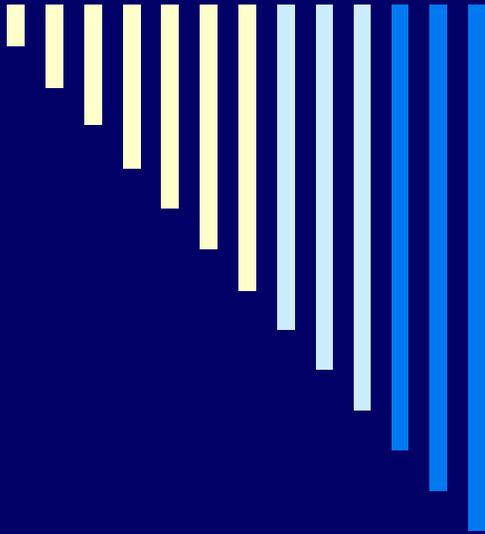
Susan Close





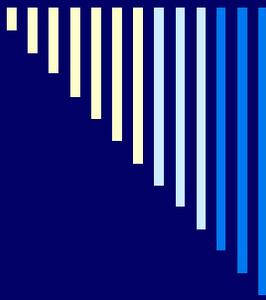
Learning in One-to-One Encounters

Susan Close and Karen Mahoney



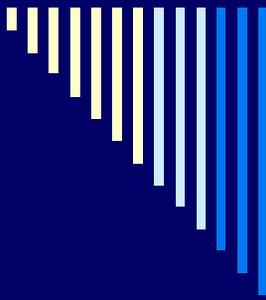
Emma Clip





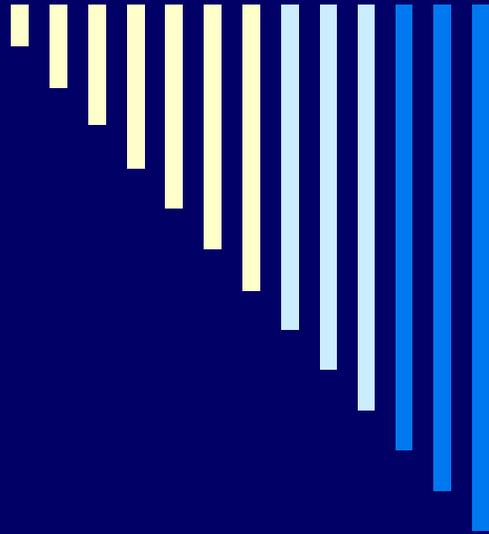
Emma

- What happened here?
 - Given what you now know about learning, what would you like to have seen? (2 minutes)
-



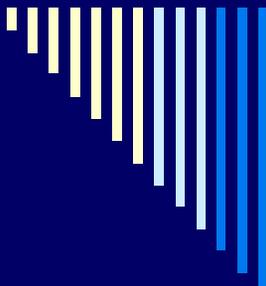
Goals for the Session:

1. How do we set up effective interactions so that learning happens?
 2. How will we know they are effective learning interactions?
-



What Do Patients Have to Say about Their Learning?

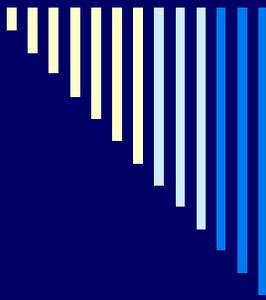




What can we learn from two people living with, learning from and managing their disease?

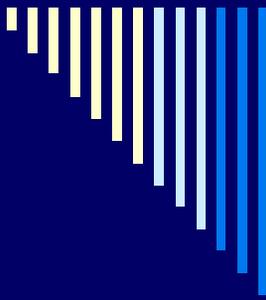
□ **Mining for Gold:**

- What's important and why? 3x
 - Nugget
 - What connections are you making?
-



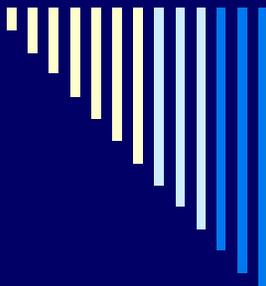
There were different learning needs within the family.





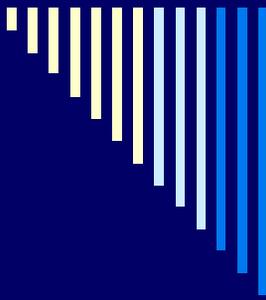
Mining for Gold

- What is important?
 - Why is that important? (3x)
 - Nugget
 - Connections
-



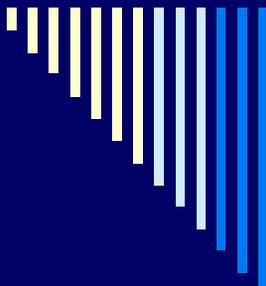
Deciding What to Focus On





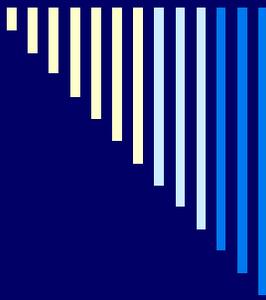
Mining for Gold

- What is important?
 - Why is that important? (3x)
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 - Connections
-



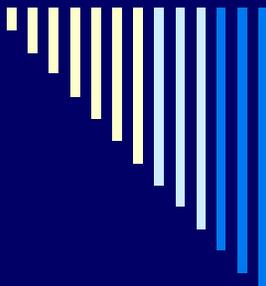
Learning: General to Specific





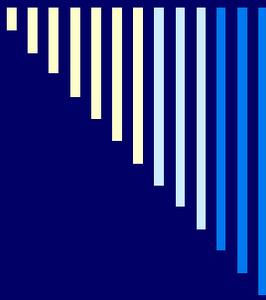
Mining for Gold

- What is important?
 - Why is that important? (3x)
 - Nugget
 - Connections
-



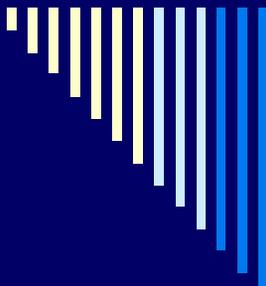
What did you need to know about dialysis?





Mining for Gold

- What is important?
 - Why is that important? (3x)
 - Nugget
 - Connections
-

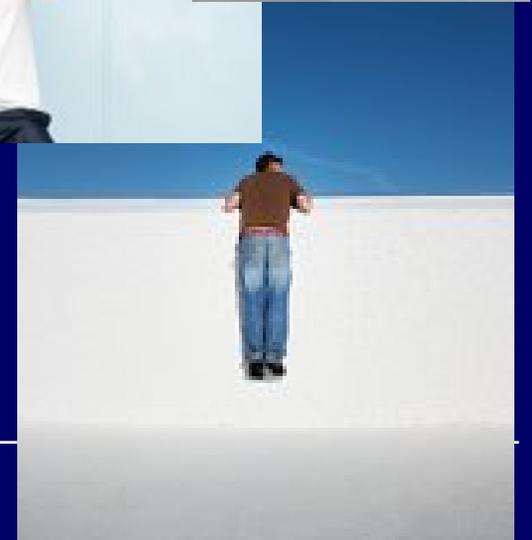


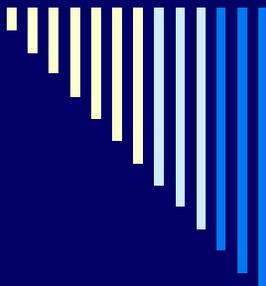
Collaborative Summary

- What are the 3-5 most important things that you learned from Lorraine and Allen?
 - 2's...
 - then 4's
 - What advice would you give another health care provider?
-

Barriers to Learning

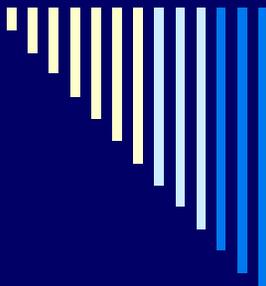
- What barriers do patients and families with renal disease encounter?





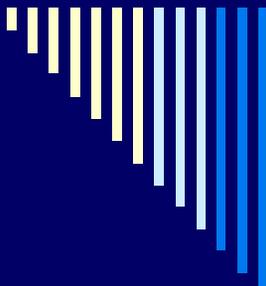
Barriers to Learning:

- Anxiety
 - Grief
 - Loss
 - Effects of illness on cognition
 - Cultural
 - Foreign health care culture
 - Intimidation
 - Politeness and power dynamics
-



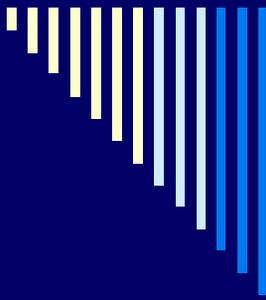
Overcoming barriers

- Support, in-time coaching.
 - Understanding from someone who believes in you.
 - Reassurance that you can.
 - Engagement, learning from and with the disease.
-



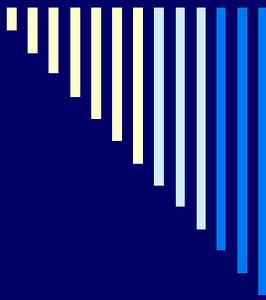
Assessing Readiness for Learning





Assessing Readiness for Learning

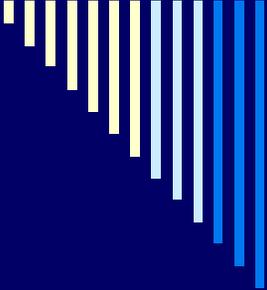
- How do you currently assess for readiness?



Readiness Assessment Tools:

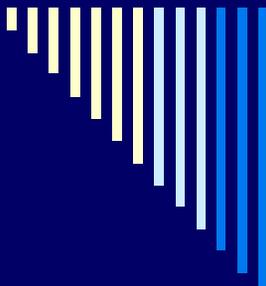
Provide 3 Vital Functions:

1. Describe the key learning for the individual and family.
 2. Provide some behavioral indicators of readiness.
 3. Provide some direction for next steps.
-



Readiness for Learning:

- Teaching delivery methods can then be developed, once there is agreement on content and processes.
-

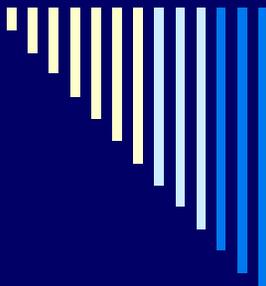


Scenario A: Learning Readiness Assessment

Eric: a 33 year old male, who has been on hemodialysis for 9 months. He has been actively involved in his treatment, regularly researches the internet, is able to process information readily, and is VERY strict with his diet, measures his fluid and only drinks the recommended volumes.

His blood work in the last few months has been normal except for an elevated phosphorous, which, despite his efforts, has been rising. He is on calcium carbonate 3 tabs 3x/day. Today, Eric's phosphorous is 2.9. He is symptomatic and exasperated, because he can't figure out which foods might be causing this.

- Where is Eric on the learning tool?
 - What would you do to support his learning, and why?
-



Scenario B: Learning Readiness Assessment

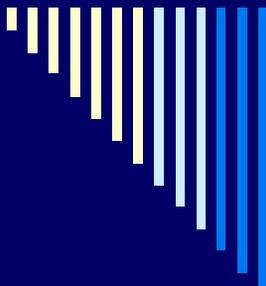
Edith: a 50 year old woman with longstanding, difficult to control diabetes.

Her GFR has rapidly decreased over the last year, and is currently at 15.

Her family is marginally involved in her health care. A cousin died on hemodialysis many years ago in the Philippines, but all Edith will tell you is that it was awful.

Today at the Kidney clinic, Edith arrives with a friend, appearing uremic, very tired, with slow speech. She is unwilling to discuss treatment options, and tells you that she is only interested in discussing diet options, as she wants to try managing her blood sugars in order to preserve her kidney function.

- ❑ Where is Edith on the learning tool?
 - ❑ How would you support Edith's learning, and why?
-



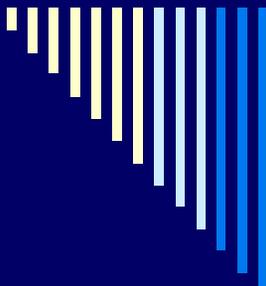
Scenario C: Learning Readiness Assessment

Stan: a 58 year old male with a GFR of 34. Stan has a previous medical history of stroke, hypertension and peripheral vascular disease.

He was recently admitted with ischemic toes and ischemic ulcers on both feet, and his kidney function deteriorated while he was in hospital. His blood work indicates elevated K⁺ (5.5), and a P₀₄ of 1.9. He is taking Kayexelate 4 days/week.

Stan comes into his first clinic visit today hobbling, wearing one sandal, with the other foot bandaged. He tells you he's more worried about his feet than his kidneys, as he is in considerable pain.

- Where is Stan on the learning tool?
 - How would you support Stan's learning?
-



Scenario D: Learning Readiness Assessment

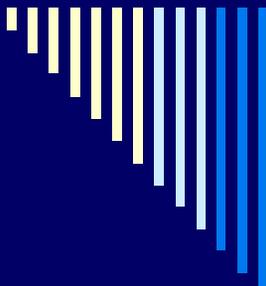
Surinder: A 66 year old man who abruptly ended up on dialysis after emergency abdominal surgery. He has been dialyzing for 6 weeks with a permcath. Today, you are visiting him at his hemodialysis session, and you are wanting to discuss a permanent vascular access.

Surinder tells you that he has no intention of having surgery, as he hates needles and another patient told him he should just stick with his permcath.

- Where is Surinder on the learning tool?
 - How would you support Surinder's learning and why?
-

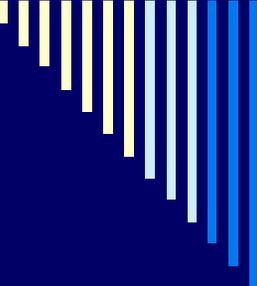
Assessing Body Language





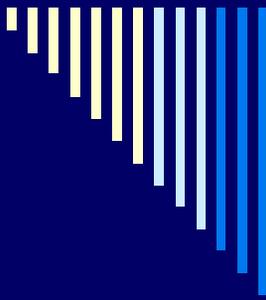
Body Language and Interviewing Skills

- What do we know about body language?
 - What do we know about body language in effective interactions?
-



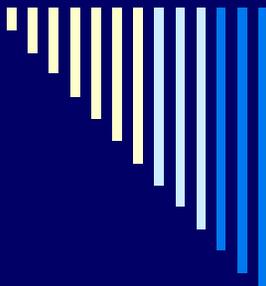
DVD Clips





Body Language

- What did you notice about the first interaction?
 - The second?
 - What did you notice about the patient?
 - What questions would you like to have asked this patient?
-

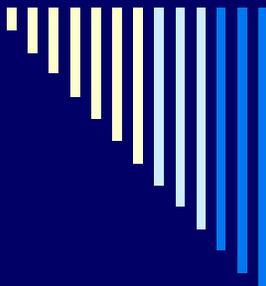


Assessing Body Language:

- Researchers are finding that first impressions are key, and assessments about a person are performed very quickly and quite accurately, even in as little as 6-30 seconds.

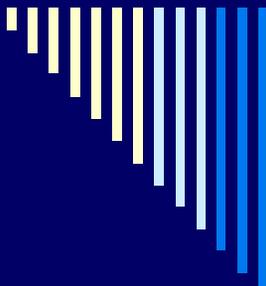
(And its not just based on what you say!)





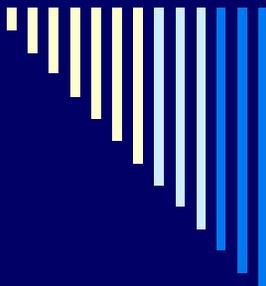
Body Language Associated with Negative Outcomes

- ❑ Hurried manner
 - ❑ Interruptions
 - ❑ Sitting or standing with backward lean
 - ❑ Looking at, or writing in, charts during dialogue
 - ❑ Frequent touch (context dependent)
-



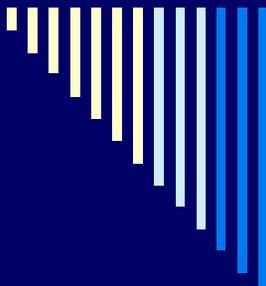
Body Language Associated with Positive Outcomes

- Head nodding
 - Forward lean
 - Offering choices
 - Uncrossed legs and arms
 - Direct body orientation
 - Appropriate gaze (not too intense)
 - LISTENING
-



Feeling Supported





What did you Learn about Learning Today?

- What did you notice?
- What new ideas, connections, questions do you have?
- What goals will you set for yourself?
- Who will you tell? (GOSSIP)

(Remember: 72 hours-7%)
