

A case study from KCH as part of the LKN KQuIP MAGIC Project

Developing and Implementing Nursing self-assessment as part of MAGIC

Describe the 'before' situation

People on dialysis were not experiencing best practice care with many of them with no definitive access and those with definitive access experiencing problems with their access because of poor needling techniques

Describe the impact of this on those with lived experience and the process

The experience of the patient was poor with pain on needling. The fistula's were failing because of poor needling technique and the nurses were not being developed or advancing needling techniques

What did you do – what change

- Assessed patients using a traffic light approach
- Nurses were asked to self assess their needling skills using a GOLD, SILVER, BRONZE approach
- Nurses who self assess as Gold are then competent to needle the red and challenging fistula's
- At the same time baseline MAGIC data was collected from Feb – June (where, how, whom, how many)
- Visits to units participating by needling champion
- Supported by nephrologist and senior HD matron

What were the challenges to making the change happen?

Nurses were reluctant to self-assess as they felt it was a judgement – a lot of engagement needed to explain that this was about their development and they can access e-learning

What is the current situation (the success?)

Can you give details of what has been achieved – is this something that has now been embedded as a way of working and what are the next steps if it isn't yet?

How many have been given out and is it being used as intended. Is it brought to clinic appointments and is it used across the MDT?

Any data or anecdotes will be useful