Exploration of Factors Influencing Nurses’ Performance in the Care of Hemodialysis Patients at Selected Nephrology Units in Rwanda

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Introduction: Chronic Kidney Disease (CKD) is becoming a main health problem worldwide, particularly in Sub-Saharan Africa. If left untreated; it progresses to End Stage Renal Disease, a deadly condition referring to the permanent decline of kidney function requiring transplantation or Hemodialysis or peritoneal dialysis to preserve patient’s lives. Hemodialysis (HD) is the commonest and successful treatment method of renal diseases at advanced stage that requires high technology, skills, and knowledge of providers. The procedure runs the risk of associated errors and issues of harm to patients. Nurses play major role in the delivery of this treatment by providing all pre, inter and post-hemodialysis nursing care. Therefore, nurses need to understand all aspects of such technology, have the hands-on skills, be highly knowledgeable and have enough expertise to be able to meet patients’ needs.

In Rwanda, hemodialysis and peritoneal dialysis are the only treatment methods carried out, hemodialysis being the commonest while peritoneal dialysis is infrequently done in our country. Even if Hemodialysis treatment is commonly used, its cost of around $155 per one session for three sessions weekly makes this form of treatment unaffordable in many Sub-Saharan African countries. For Example, in Nigeria, a total of 225 patients were treated with five years period, 63.3% of the only CKD patients had less than a total of 5 sessions of Hemodialysis, and the majority of patients in this study sought for alternate sources for treatment like spiritual homes and native traditional practitioners and this often resulted in poor health outcomes.

Description of the Problem: HD complications are associated with increased morbidity and mortality among HD patients, however; during clinical training; the researcher identified poor performance and differences between hemodialysis settings on nurses’ performance. Factors influencing such performance remain unexplored. Rationale: Facilitating factors and barriers to nurses’ performance were identified and recommendations were made to enhance and strengthen nurses’ performance.

The hemodialysis (HD) setting is extremely technical requiring nurses to master hemodialysis equipment and their handling so that they provide safe, efficient and effective care to Hemodialysis patients. In addition, HD treatment is associated with many complications some of which are life-threatening, others alter the quality of life of patients which implies the need for early recognition and treatment to save patient’s lives and these HD complications are associated with increased morbidity and mortality among HD patients. Studies done in clinical settings have reported different facilitating factors of the performance of nurses. However; during clinical training; the researcher identified poor performance and differences between the various hemodialysis settings on how nurses perform care to CKD patients on hemodialysis treatment. Factors associated with such differences and performance which could have influenced nurse’s performance remain largely unexplored. There are no known studies in Rwandan hemodialysis units on the exploration of factors that influence the performance of nurses as well as the barriers to performance of these nurses. Therefore; this requires being explored through a research study.
Purpose: The study was conducted to explore factors influencing nurse’s performance in the care of hemodialysis patients in selected nephrology units in Rwanda.

Specific Objectives were:

1. To elicit the facilitating factors of nurses’ performance in the care of hemodialysis patients in selected Rwandan Hemodialysis units.
2. To identify the barriers to performance of nurses in the care of hemodialysis patients in selected hemodialysis units in Rwanda.

Rationale: Facilitating factors and barriers to nurses’ performance were identified and recommendations were made to enhance and strengthen nurses’ performance.

Method: Method: A qualitative survey design was used involving twelve registered nurses from University Teaching Hospital of Kigali, University Teaching Hospital of Butare, King Faisal Hospital, and Kimihurura Dialysis Center. A purposive sampling strategy was used. Data were collected through face to face interview and were audio recorded. Six steps of thematic analysis approach namely familiarization with data, generating initial codes, searching for themes, reviewing themes, defining and naming themes and producing the report were followed to analyze collected data University Teaching Hospital of Kigali, University Teaching Hospital of Butare, King Faisal Hospital, and Kimihurura Dialysis Center. Data were collected through face to face interview, audio recorded and analyzed following six steps of thematic analysis approach.

Results: Two main themes emerged from the study. The first entitled “Facilitating factors of nurse’s performance” had six subthemes namely the continuous professional development that nurses received, good interpersonal relationship among staff, personal factors, good working environment, receiving feedbacks on nurse performance and effective leadership and management. The second theme was “barriers to the performance of nurses” made of six subthemes namely the personal related barriers, poor working conditions, organizational barriers, poor resources, poor collaboration within staff and patient-related barriers.

Conclusion: The study findings revealed a sufficient number of facilitating factors and barriers to the performance of nurses in hemodialysis settings in Rwanda. If these the identified facilitating factors are sustained in nursing practice, especially in hemodialysis units, this will mostly result in quality care delivered to patients on Hemodialysis. On the other, there is a need to put in place the strategies to address these barriers so as to enhance nurses’ performance, patient’s care, and patient’s health outcomes.

The implications of this study on patient: there will be reduced morbidity - mortality associated with hemodialysis treatment among HD patients, the improved quality of lives of CKD patients under HD treatment will be achieved as well, these patients will have accessibility to safe care provided by well-performing HD nurses. The implications of this study on nurses: Improved nurse’s performance caring for HD patients, a clear scope of practice for HD nurses will be elaborated collaboratively with different stakeholders. Finally, elaboration of guidelines relating to hemodialysis will be done which will enhance nursing practice.

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