



Renal PFAC Goderich Satellite Visit Report

On January 31, 2018 representatives from the Renal PFAC visited the Goderich Satellite Hemodialysis Unit.

Goals

- Promote Renal PFAC
- Meet satellite patients
- Gather feedback and suggestions from the rural patient population
- Generate interest from satellite patients who might join the PFAC

Attendees

- Don Smith, Angela Andrews, Betty Clinton
- 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”.

- Transportation: 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.

- Parking: for patients who drive themselves and park at the hospital, there is free parking on the street. The patients are happy about this.
- WIFI: the patients have access to free WIFI, as well as free television.
- recently the dialysis unit was completely renovated, with new chairs, a new enclosed/private nursing station and the instillation of a track for overhead lifts that can be used for patient transferring to chairs. Patients are happy with the updated unit
- Patients were generally satisfied with talking to dietitian and social work on the phone if needed

Actions

- PFAC brochures 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