

SOCIAL CARE FOR DIALYSIS PATIENTS IN SLOVAKIA

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BACKGROUND

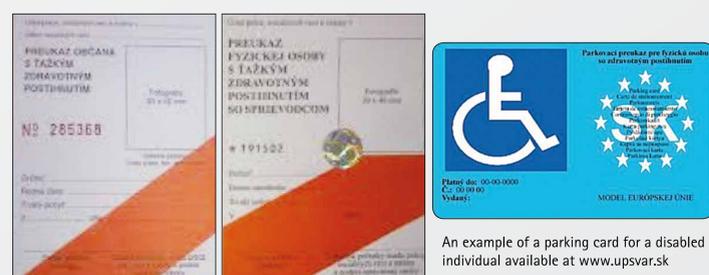
Dialysis patients belong to a specific group of chronically ill patients. They are forced to cope with a new situation, which brings along many changes in different aspects of daily life. They include changes concerning not only the health, but also psychological and socio-economic aspects of life. The need for regular dialysis, as well as the associated symptoms and difficulties affect not only the patient's life, but also the lives of their families. Their social perception and social and occupational status change. Fatigue associated with the condition often prevents patients from providing for their own needs, and does not allow contact with the authorities. Regular dialysis treatments that take several hours, affects the lives of dialyzed patients and their relatives in all life spheres. Social problems emerge following a job loss, family income reduction and the inability to perform activities that the patient normally performed when he/she was healthy. Dialysis patients often have a general knowledge of social security benefits, which can be claimed when the health status changes. To assist them, the B. Braun Avitum Dialysis Centers in Slovakia employ a nurse specialist working in the social care field - the so-called coordinator for the social sector.

OBJECTIVE

To introduce the role of social care and social services as an essential part of a comprehensive multidisciplinary care of dialyzed patients, which may have a significant impact on the perception of quality of life.

INTRODUCTION

Social care and social services are an important part of the care of dialysis patients. A nurse coordinator for the social sector actively contributes to changes in the social environment, so as to develop the patient's self-respect, autonomy and social interaction. She identifies, corrects and addresses social problems; she strengthens the patient's ability to make decisions about his/her own life. The aim is to provide the patients with enough information so as they can make their own choice for the form of social assistance they want to receive. The Office of Labour, Social Affairs and Family decides on whether an individual has a severe disability or not. The National Social Security Fund (NSSF) decides on the disability pension. If, according to the expert opinion of the NSSF physician, the individual is disabled and, moreover, if the individual is recognized as severely disabled based on the comprehensive report of the Labour Office report, then the individual can apply at the Labour Office for some of the cash compensations. However, he/she must hold the ID of a person with a severe disability. A precondition for the individual to be recognized as a severely disabled person is that the disability has a functional disorder degree of at least 50%. Functional disorder is the lack of physical, sensory or mental capabilities of an individual, which in terms of expected development of disability will last longer than one year. The dialysis patients fulfill this criteria.



An example of a disability identification card and an identification card of a personal guide available at www.upsvar.sk.

- For purchase of lifting equipment
- For purchase and repair of a passenger car
- For adaptation of a flat, house and garage

Cash contributions to compensate severe disability are intended for reduction or overcoming the social consequences of the disease or disability.

METHODS

The nurse uses various methods to familiarize herself with the case. Obtaining the social history, contacting the client, and getting to know the needs of the patient and his/her family are the primary methods. Based on the obtained information the nurse can develop a social diagnosis, focusing on finding the causes leading to the social problem. She handles the whole process for the case including scheduling social therapy. The nurse specialist in the social sector will get in touch with the patient during the dialysis treatment. If needed, the nurse involves the family and close relatives in the social care. Her primary task is to obtain all the necessary information about the legal norms and to have a deep knowledge of the legislation of the Slovak Republic in the social sector; to know the state and public administration. She must also have a knowledge about non-governmental bodies that provide social services. The nurse coordinator facilitates contacts with relevant authorities and the social care facilities providing home nursing care. She recommends options for cash compensation. She educates nurses in the dialysis centers in social care for patients in nephrology centres.

RESULTS

The nurse coordinator for the social sector, in cooperation with the primary nurses, provides individual advice on social care for patients in the nephrology centers. The most common activities, on enrollment of the patient into a dialysis program, include obtaining the disability identification card, getting the disability or retirement pension, handling compensatory contributions, providing personal care services or personal assistance, communication with the Office of Labour, Office of Social Affairs and family as well as the National Social Security Fund, and writing applications and appeals together with the dialysis patient.

CONCLUSION

Nurse coordinators for the social sector play a vital role in providing quality care in patients in nephrology centers.

Based on the above-mentioned findings the following recommendations were derived for nursing practice:

- to lead the patients to accept responsibility for themselves, to promote independence and self-sufficiency of the patients, according to their capacity;
- in case the patient is not self-sufficient, to involve the family, close relatives or individuals creating social support for the patient;
- to obtain information about the situation in the family, the distribution of the social roles and support capacity of the family;
- to provide the patients with as much information as possible about how to use the disabled identification card;
- to explain all the available information to patients in a clear and understandable way, to provide them with written documents;
- to be a trustworthy person and authority for the patient and his/her family;
- to listen to the patients, not to impose personal ideas about problem solutions and to respect the patient's decision;
- to help dialysis patients with orientation regarding the possibilities of social benefits provision;
- to inform the patients about holiday dialysis options;
- to support the establishment of the position of a social worker at all dialysis centers through trainings, seminars, conferences, publications, etc.

Through our work we will strive to increase the quality of life of dialysis patients.

Compensatory contributions that the state provides to the handicapped patients:

- For personal assistance
- For transport
- For compensation of the increased spending
- For care services provision
- For purchase of equipment, training aids and for their adjustment and repair