0pTHE ROLE OF THE NURSE IN THE CARE OF NEPHROLOGY PATIENTS AND THE IMPORTANCE OF TRAINING IN THIS FIELD

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ABSTRACT-The purpose of the study is to observe the role of nursing in the care of nephrology patients and the importance of their training in this field.This study is a retrospective descriptive type.In this study included a total of 160 licensed nurses with an average age of 41.5 ± 12.63 years.The study was conducted in a period of 2013-2015 in several regional hospitals in the country.The data were analyzed and certain conclusions drawn by SPSS version 15.00.The value p <0.05 was considered statistically significant.Tables and graphs are used for data visualization160 nurses obtained from the study showed that the average age was 41.5 ± 12.63 years.Noticed a predominance of women 102 (3.75%) compared with 58 men (36.25%).The study shows that 43 (26.88%) of individuals have continuing nursing care training versus 117 (73.13%) of individuals who do not have this training.The study shows that 117 individuals or 73.13% participate in workshops on continuing nursing management versus 43 individuals or 26.88% who do not participate in these continuing nursing care trainings.t = 0.206 indicating that there is no statistically significant difference between the two variables.P = 0.01. On the basis of the distribution of time nursing spends in treating patients with nephrologic problems we obtain the followingresults:Hemodialysis 19.3 or 20%.Peritoneal dialysis 12.57 or 13%, Management of chronic renal disease 19.03 or 20%, Continuous renal replacement therapy 7.1 or 8%, Acute care 22.55 or 21%.Overall nephrology 14 or 15%.The data collected showed that there are specific aspects of SRK in patient management that put out that nurses had an extremely heavy role in assessing, monitoring and health education and it needed improvement continuous training and their certification .

Key words--Nurse, nephrology patient,training,patient management.

I.   INTRODUCTION

This study sheds light on the role of the nurse in evaluating and monitoring the patient, how important his role is in educating and supporting the patient throughout the course of the disease and improving their care. Nursing management and care mainly need training of these staff to deepen their knowledge and knowledge in this field, creating an advanced practice through participation in trainings, workshops, conferences so that the focus of these nurses is only in the speciality of nephrology. Establishing common practices used by nurses in the management of various pathologies in nephrology patients and also identifying the training of nephrology nurses and their

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educational needs in order to improve patient care. As the field of medicine continues to evolve, the rapid and continuous evolution of various concepts related to the administration of nursing care and the constant modifications of the profession are increasingly needed to make the definition more accurate and accurate full of nursing activities and roles. The profession of nurse over the years has been increasingly evolving. Historically the sole task of the nurse was to provide comfort and care for the sick. Development of technology, knowledge, health support and prevention the disease has led to the expansion of nursing roles and functions.

With the development of the theoretical and practical knowledge of nursing health care personnel regarding the management and care that has been adequately brought about has brought about an improvement in the quality of life of the patient, a fulfillment of patient care needs.Advanced nurse education, extension of their roles, effective management planning and coordination with other health care staff have brought about a fulfillment of the objectives by providing quality patient care.

However the nursing sciences are still being refined because some models still remain in theory without the opportunity to be fully tested in practice.

It is my hope that this study will provide insights into the role of nursing in our country, the extension of nursing roles, to contribute to policy making so that the role of the nurse not only remains in patient care but extends and creates conditions. as appropriate for the development of their profession.

II.   MATERIAL AND METHOD

The study is of transversal type.

Time period

The study was conducted during the period 2013-2015

Inclusion criteria in the study

The study included a total of 160 licensed adult nurses> 18 years of age who practice the nurse profession at the above mentioned institutions.

Categorization of licensed nurses by:

• Gender

• Age

• Current training abroad in nephrology

• Continuous Nursing Care

- How much time they spend with the patient in the treatment and evaluation or implementation of nursing care.

- What are the basic interventions to treat patients with renal disease?

- How important are patient health education as a key factor in the progress of the disease process?
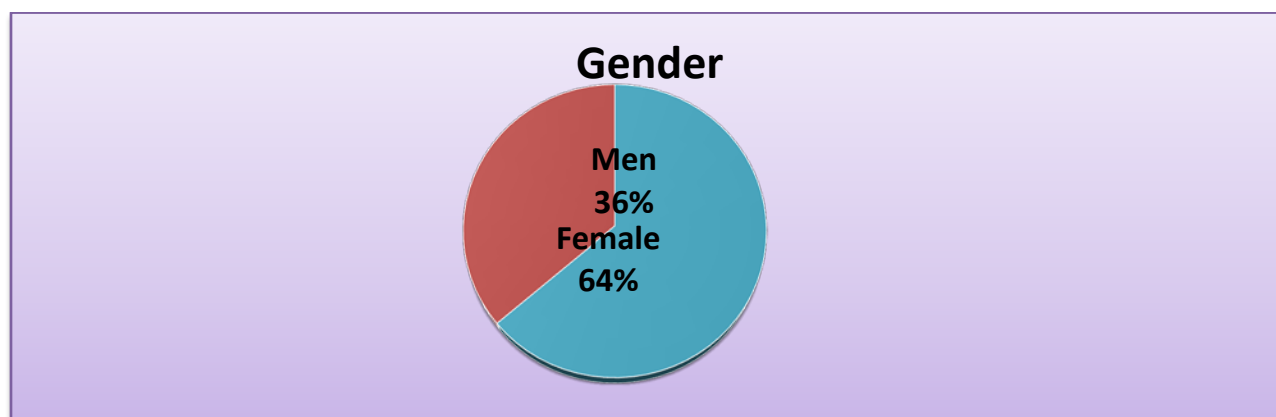
Sample size:

The sample size was calculated to 160 nurses in order to achieve an adequate assessment of the patient, including strategies that promote health, prevent disease and alleviate clinical signs.

The selection of nurses was carried out systematically at random.

III.   RESULT

Table 4.1: Characteristics of individuals included in the study

Gender	Men	Female	Total
	58	102	160

Figure 4.1: Distribution by sex of individuals

Of the 160 individuals included in the study, 102 were female (63.75%) and 58 were male (36.25%) with a mean age of 41.52 (± 12.63) and ranging from 21 to 60 years.

There is a predominance of females with 102 individuals compared to males with 58 individuals.

The mean age of males is 37.22 (± 18.5) years and of females 45.01 (± 14.09) years with no statistically significant difference between these variables, t = 1.524, p = 0.01.

Table.4.2: Official training in the field of Nephrology

Do you have any training or certification outside the Albanian territory?	No	%
Yes	45	28%
Jo	115	72%
Total	160	100%

The table data shows that 115 (72%) of individuals do not have training and certification outside the Albanian territory versus 45 (28%) have training and certification outside the Albanian territory.

	No.	Average	Variance

Yes	45	39	107.02
No	115	38	127.53

t = 0.089. indicating that there is no statistically significant difference between these two variables.

P=0.01

Figure.4.2: Official training in the field of Nephrology

Table 4.3: Distribution based on time spent in various nephrology interventions.

How many % of your time is spent working in such areas in treating patients?	Time	%
Hemodialysis	**19.3**	**20%**
Peritoneal dialysis	**12.57**	**13%**
transplant	**0**	**0%**
Management of chronic kidney disease	**19.03**	**20%**
Continuous renal replacement therapy	**7.1**	**8%**
Acute care	**22.55**	**24%**
General Nephrology	**14**	**15%**

Based on the distribution of time nurses spend in the treatment of patients with nephrologic problems, we obtain the following results:
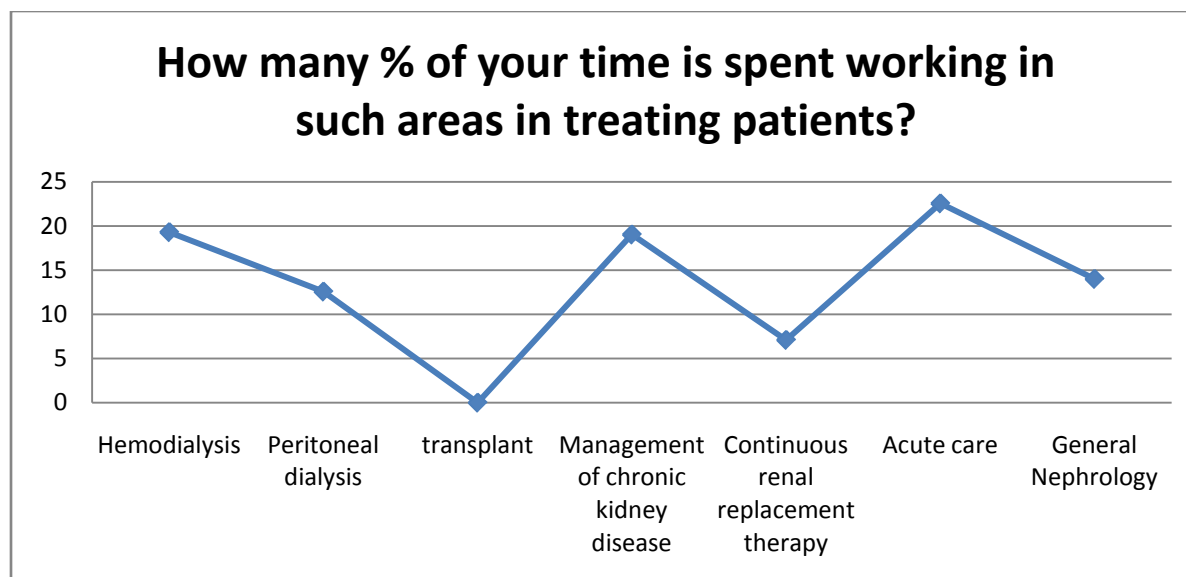
Hemodialysis 19.3 or 20%.

Peritoneal dialysis 12.57 or 13%

Management of chronic kidney disease 19.03 or 20%

7.1 or 8% continuous renal replacement therapy

Acute Care 22.55 or 21%.

Overall nephrology 14 or 15%.

Figure 4.3: Distribution based on time spent in various nephrology interventions.

Table 4.4: Distribution based on time spent as a nurse in the following areas

How many% of your time do you spend as a nurse in the following areas?	No.	%
Direct patient care	41.04	27%
Case management	17.15	11%
Quality management	21.05	14%
Education	26.8	18%
administration	7.43	5%
consultation	37.5	25%
Scientific research	0.1	0%

Based on the distribution of time that nurses spend in treating nephrology patients in such areas we have the following results:

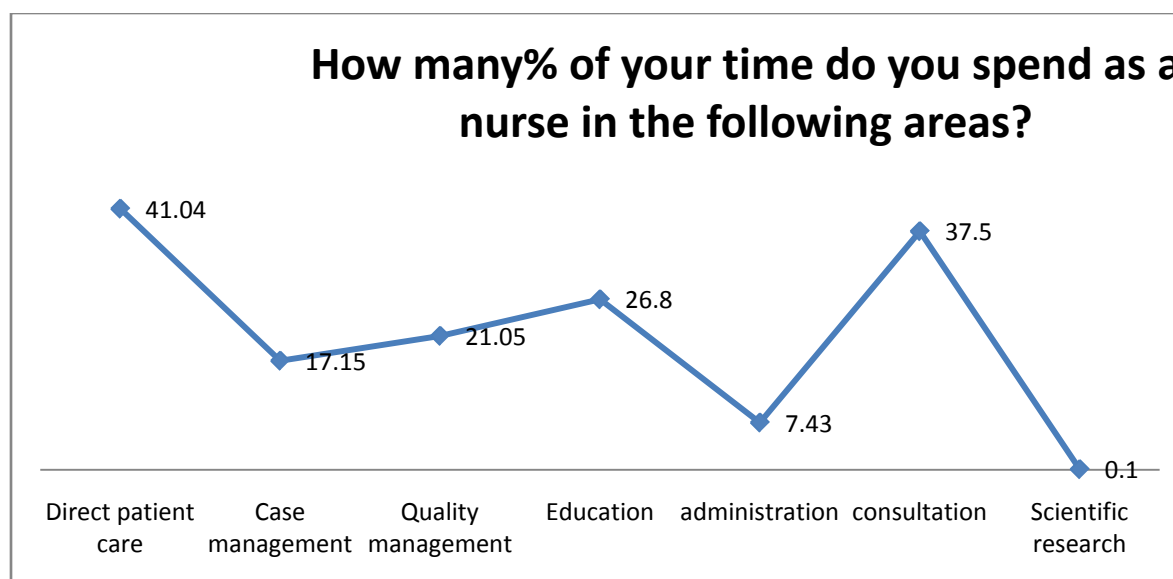Direct Patient Care 41.04 or 27% of the scheduled time

Case Management 17.15 or 11% of time spent

Quality Management 21.05 or 14% of time spent

Education 26.8 or 18% of time spent

Administration 7.43 or 5% of time spent

Consultation 37.5 or 25% of time spent.

Table 4.4: Distribution based on time spent as a nurse in the following areas

IV.   DISCUSSION

Nursing management and care is an important process that engages health care providers, especially nurses, to focus on the patient and his / her family members during care delivery.

People with chronic kidney disease often require prior talk about planning for care due to their illness and reduced life expectancy from these diseases.

The literature review highlights the importance of incorporating patient and family opinion in the care process and the potential factors that influence the involvement of nephrology nurses in providing this care.

There are a number of guidelines and recommendations that relate to nursing care in these diseases and end-of-life quality for these patients and the importance of planning for care in order to assist Nephrology nurses.

A considerable number of publications have been published in the literature highlighting the role of the inferiority nurse in the care process. nurses in providing care to these patients and providing a high level of end-of-life care.

Care planning is an important process that is first and foremost related to the nurse's knowledge of the process, implementation of this knowledge, ongoing discussions, communication between healthcare providers to family patients to achieve value identification, treatment goal setting and care end of life.

Although nurses have the ability to engage in prior care in general, nurses have difficulty implementing end-of-life care because they are found between the patient's physician family and the environment in which they work.

Without proper support from leadership in providing end-of-life care, nurses experience stress, anxiety, and a lack of confidence.

Workplace problems and barriers also affect their ability to provide appropriate care to these patients, especially at the end of their lives. The role of the nurse is a very important aspect in the health service. Many countries such as Denmark, Poland, England, the Netherlands are massively using the nursing service alongside the medical one.

Nurses can care for patients with mild health problems such as in England and Sweden may prescribe limited use of certain medications.

Nurses are also involved in coordinating the route that patients with chronic diseases should follow such as in Belgium, England, Denmark, Sweden.

Inpatient clinics are being developed in some countries which are being used as a laternative method for patients who need a service after an acute phase of the disease.

V.   RECOMENDATIONS

Nurses play a very important role in the multidisciplinary patient treatment team and as such they face a number of different challenges.

• Nurses continue to be discriminated against, whether in the payroll or in the protection of their rights, so it is very important to compensate for their work to provide as high a motivation as possible and to ensure as much security as possible. good patient care.

• Another problem that nurses face are workplace problems such as injuries, threats from family members, coping with pathogenic agents. It is important to increase safety and ensure the best conditions in the workplace.

• As a result of the rising cost of health care there is a complete lack of staff to cope with patients and as such nurses face stress and work beyond the norm where in the world in fact one nurse cares for 4 individuals on average.

• Workplace problems such as lack of equipment, use of new technologies affect nursing care, especially in patient health education.

• Nurses are often forced to do the work of a psychologist, social worker, dietitian and this leads to a physical and mental overload of the nurse so it is important to implement health policies in order to reduce some responsibilities that do not actually belong to the nursing staff.

• Creating a special environment to discuss the problems of the patients by the nursing staff.

• Creating a database of patients since renal diseases are chronic and occasionally spread which would facilitate nursing work.

• Changes in the educational curriculum regarding the knowledge base of nurses and the importance of putting more emphasis on the process of nursing care and its links.

• Organizing various in-house and out-of-country trainings so that nurses are kept up-to-date and up-to-date with the latest discoveries or the most modern methods of nursing intervention.

• Medical universities need to make a change to the curriculum so that nurses receive a specialization in different fields rather than general master specialization so that the intervention is as efficient and as patient as possible.

• It is important to develop sound strategies and implement health policies to enhance the role of the nurse in eliminating new barriers that undermine health care delivery.

• Implement health policies that provide in-house and out-of-country training in order to increase their knowledge and adapt to the knowledge that their colleagues in western countries have.

• Promoting their dignity, valuing them as an important part of a multidisciplinary staff.

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