

Information and Communication

- 1) Could you describe your role in educating patients about their treatment options?
- 2) What do you find most difficult in relation to patient education?
- 3) What do you think patients currently find most difficult in learning about the illness and options?
- 4) In your view does the service currently provide effective education to its renal patients?
- 5) In your view does the service currently provide appropriate information to its renal patients?
- 6) What materials or other resources are available in this unit/hospital to support you in providing patient education?
- 7) How do you determine whether or not a patient is understanding your communication with them?
- 8) What options do you have if you are concerned that the patient is not understanding.
- 9) Have you ever worked with an interpreter with a patient?
- 10) In your view, are all patients here well informed about their illness and treatment options?
- 11) Do patients ask questions about their situation/treatments? Examples?
- 12) How –if at all – do you think education and information processes at this site might constitute a barrier to Aboriginal/Torres Strait Islander patients accessing Tx? Given a chance, what would you change?
- 13) How – if at all – does ethnicity or cultural difference influence the way you manage patients

PART A: LEARNER ASSESSMENT

1) Is there a standard process of assessing patient learning capabilities?			Y/N
2) Are patients' language/s recorded on file?	YES	all languages	first language only
	NO		
3) Is there a documented assessment of spoken English capability?	YES	method:	
	NO		
4) Is there a documented assessment of literacy/numeracy level	YES	method:	
	NO		
5) Are patient learning style preferences recorded (e.g. prefers action, face/face etc)	YES	method:	
	NO		

Part B: PROGRAM STRUCTURE

- 6) Who has overall responsibility for patient education programs at this site?
- 7) How are the contributions/roles of different professionals co-ordinated?
- 8) What are the discrete identifiable education programs on site?

9) Do program/s have explicit written objectives?	Y/N
10) Do programs have quality review cycles?	Y/N

Part C: PROGRAM PROCESSES

C1: Personnel

- 11) What categories of patient educator does the site employ?

	F/T	P/T

12) Are there Aboriginal/TI employees working in the educational programs?	Y/N
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C2: Documentation

13) Are records kept of patient education program/s?	Y/N
14) Is individual patient educational progress documented?	Y/N

C3: interpreter use

15) Are interpreters used here?	YES	regularly	occasionally	hardly ever
	NO			

16) Who is employed to interpret?				
accredited professionals	family members	staff	other patients	all of these

17) When non-accredited interpreters are employed, are they paid?	Y/N
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18) How accessible/available are interpreters locally?				
easily accessed	available	difficult to access	unavailable	not sure

19) Could you describe your most recent use of interpreter:		
Date:	Qualification:	Language:

PART D: PROGRAM SETTING

20) Is there a space dedicated specifically to educational activities?

YES **Comment:**

NO **Comment:**

21) If yes, is there sufficient room for group work (e.g. family members)?

YES **Comment:**

NO **Comment:**

22) Is the educational setting differentiated or separated from the clinical surroundings?

YES **Comment:**

NO **Comment:**

23) If no specific educational space is available, where does education usually take place?

24) Are there readily accessible opportunities for self-guided education (e.g. internet, books, fact sheets etc)

YES **Comment:**

NO **Comment:**