

**10 years of education for children in renal replacement therapy. The cornerstone is team working.**

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# The start of the dialysis program



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- Start of education for hospitalized children and adolescents at UZ Leuven
  - ◆ Stimulation of “being a child”
  - ◆ Acknowledgement of the threat of disease and hospitalization to (educational) development
  - ◆ Education adapted to intellectual capacities
  - ◆ Taking into account the limitations that come with being ill
  - ◆ Getting a diploma
  - ◆ Participate on all levels

⇒ **RIGHT TO EDUCATION** ⇐

# “Accurately taking care together”

- Multidisciplinary team work
- Short term interventions + long term planning
- Speaking the same professional language
- Sense of responsibility, respect, sincerity and communication
- Consultation about orientation (e.g. at the end of elementary school) → realistic and adapted project

# Three cornerstones

A good hospital school



Powerfull staff

Collaboration  
home school

Consultation  
medical team

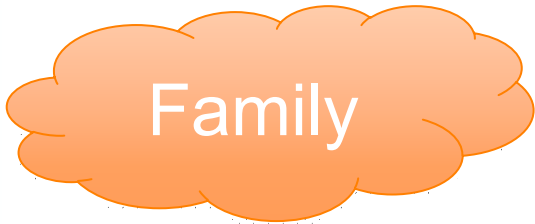
# 3 different worlds

Family

Home  
school

Hospital  
school=  
bridge

Hospital



# Teacher's task

- Tuition the first 2 hours of dialysis
- Adaptation to the child's level: outline of the subject matter by the home school, diary to exchange information
- Link between home school and dialysis team (telephonic contacts, home school visits...)
- Attending the dialysis team meeting
- A "future minded" approach of the schooling problem
- Involvement after transplantation



Elaboration of a very specific educational program

# Home school visits

- Information:
  - End stage Renal Failure
  - Renal Replacement Therapy
  - vascular access
  - diet restrictions
  - medication intake
  - transplantation



# Home school visits

- The social context
  - Contact home school/ parents
  - Social behaviour in the class
  - Position in the class group
    - Class visit in the hospital
    - Visits in the class

# Pedagogical approach

- Stimulation to function as normally as possible in school
- Assistance to support him/herself in a number of (difficult) situations
- Looking for suitable and efficient solutions for different problems: learning difficulties, risky behaviour...
- Keep on functioning as a communication line (after transplantation)
- Temporary education At Home: attribution of extra lessons for children who can't go to school regularly or for a long time (4 hours for 9 half days)  
= Good addition to the work of the hospital school

# Conclusion

- After 30 years of experience and 150 patients since 1980, we could conclude that:

## Conditions:

- Total period of haemodialysis not too long
- Level required by home school at the start of dialysis
- Efficient team structure: medical team - home school - hospital school
- Sufficient motivation of parents/child



**Keep up with home school and the required educational level**