

Variations in the Management of Chronic Kidney Disease across the UK: Results of a National Survey (CKMAPPS)

BACKGROUND

International care models for advanced CKD (stages 4-5) vary widely. The way CKD services are provided in the UK has evolved over the last two decades according to local circumstances and initiatives. There has been a strong emphasis on multi-professional working in the UK compared with other countries.

We analysed data from the Conservative Kidney Management Assessment of Practice Patterns Study (CKMAPPS) to look at variations in the organisation of care for advanced CKD patients across the UK.

METHODS

The CKMAPPS survey was developed based on existing literature and consultation with nephrologists and a renal nurse specialist. The questionnaire was sent out to the clinical directors of all 71 renal units across the UK.

Questions about the organisation of CKD services included:

- Number of consultants in each unit
- Presence of a multi-skilled renal team (MSRT) to manage CKD patients
- Provision of CKD clinics in neighbouring hospitals
- Provision of pre-dialysis clinics
- Provision of pre-dialysis education
- How consultants share responsibility for patients.

RESULTS

- There was a 94% response rate
- The average number of full time equivalent (FTE) consultants (including CKD, dialysis and transplant) is 7.1 (range 1-22)
- 98.5% have a MSRT; 88% meet regularly (48% weekly, 8% fortnightly, 21% monthly)
- In addition to providing clinics in larger hospitals, 88% of renal units run clinics in peripheral hospitals; the mean number of neighbouring hospitals is 2.7 (range 1-11)
- 84% of units have a dedicated pre-dialysis clinic, 10% don't and 6% don't but are planning to

- 73% of consultants say they use a dedicated pre-dialysis clinic
- Reasons given for not using the pre-dialysis clinic include maintaining long-term continuity of care (30%) and patients having to travel to the main hospital to attend the pre-dialysis clinic (29%)
- 81% of units hold a pre-dialysis education day covering a variety of topics including transplantation (79%), dialysis modality (78%), fluid balance (72%) and conservative management (69%)
- 27% of consultants share responsibility for all patients, 28% work on a named patient basis and 30% share responsibility but take a lead role for individual patients.

Figure 1. Staff members who are involved in/ attend MSRT meetings.

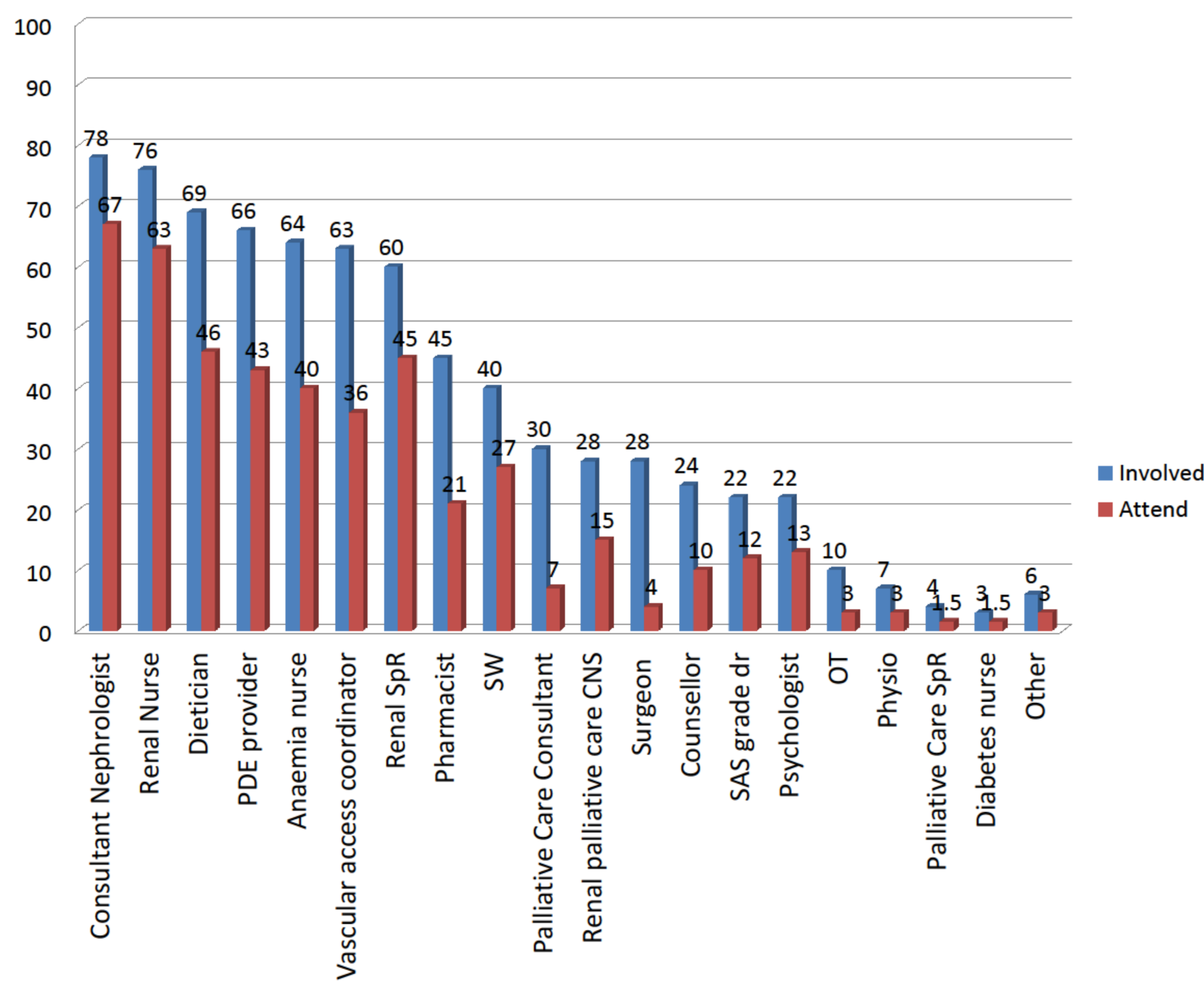
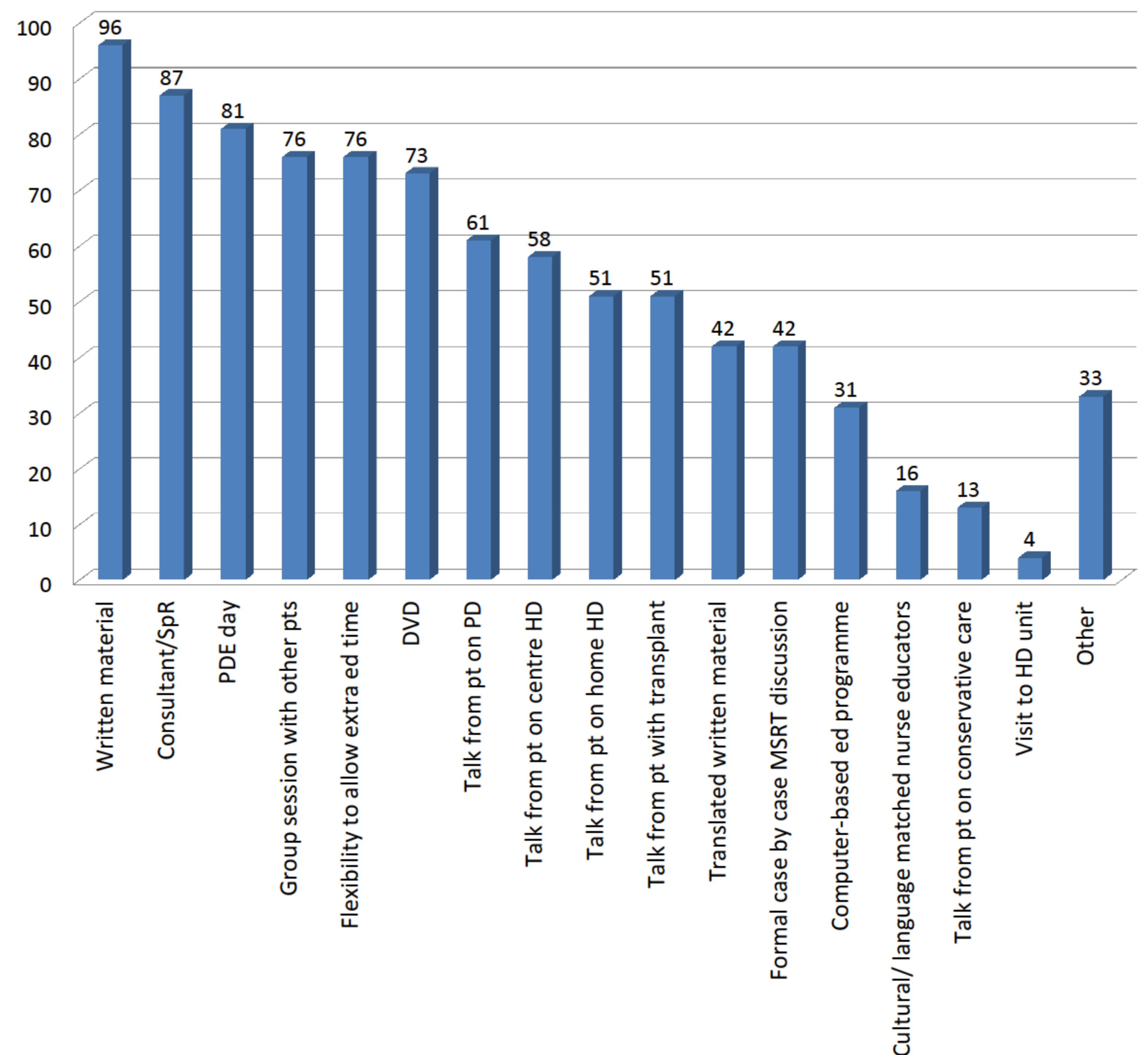


Figure 2. How pre-dialysis education is delivered in renal units across the UK.



CONCLUSIONS

Care for patients with advanced CKD in the UK is well developed.

A multi-professional approach is widely adopted and the majority of renal units provide a dedicated pre-dialysis clinic, patient education activities and continuity of consultant care.

Pre-dialysis care is multi-faceted and complex but face-to-face education remains the mainstay.

ACKNOWLEDGEMENTS

With thanks to clinical staff in UK renal units for sharing data.

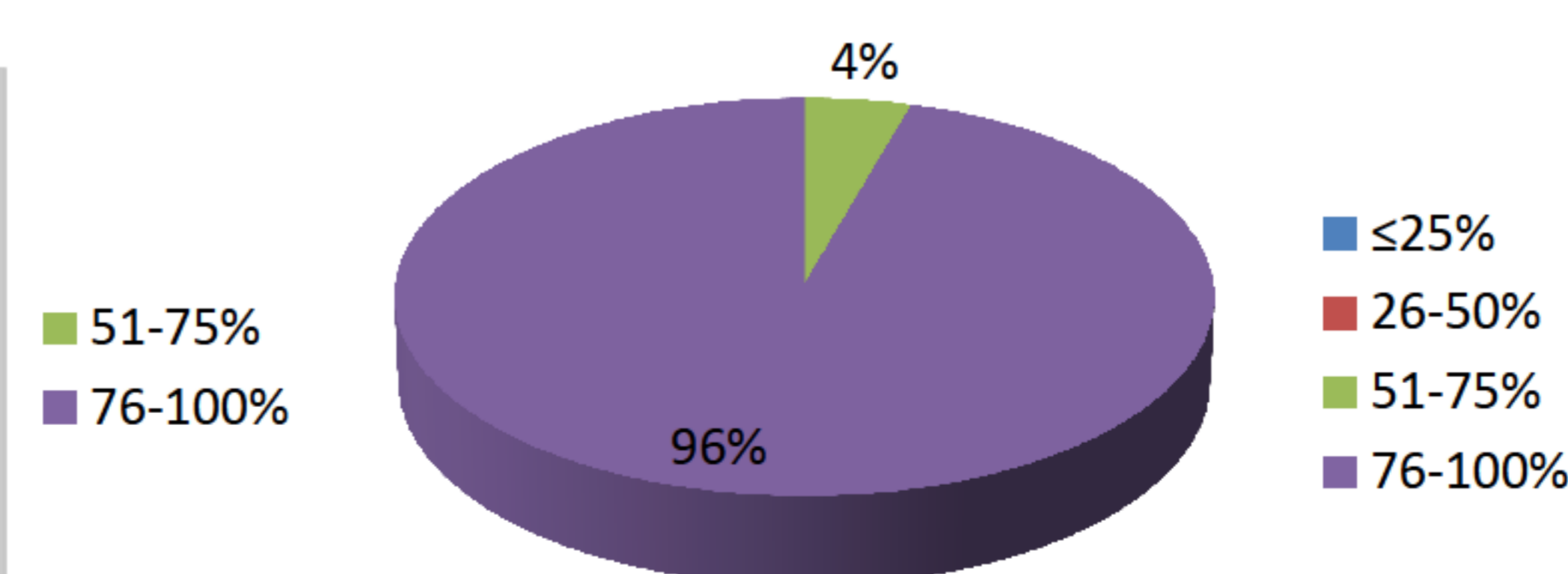


Figure 3a. Percentage of outpatients under clinic follow up who receive nurse-led education.

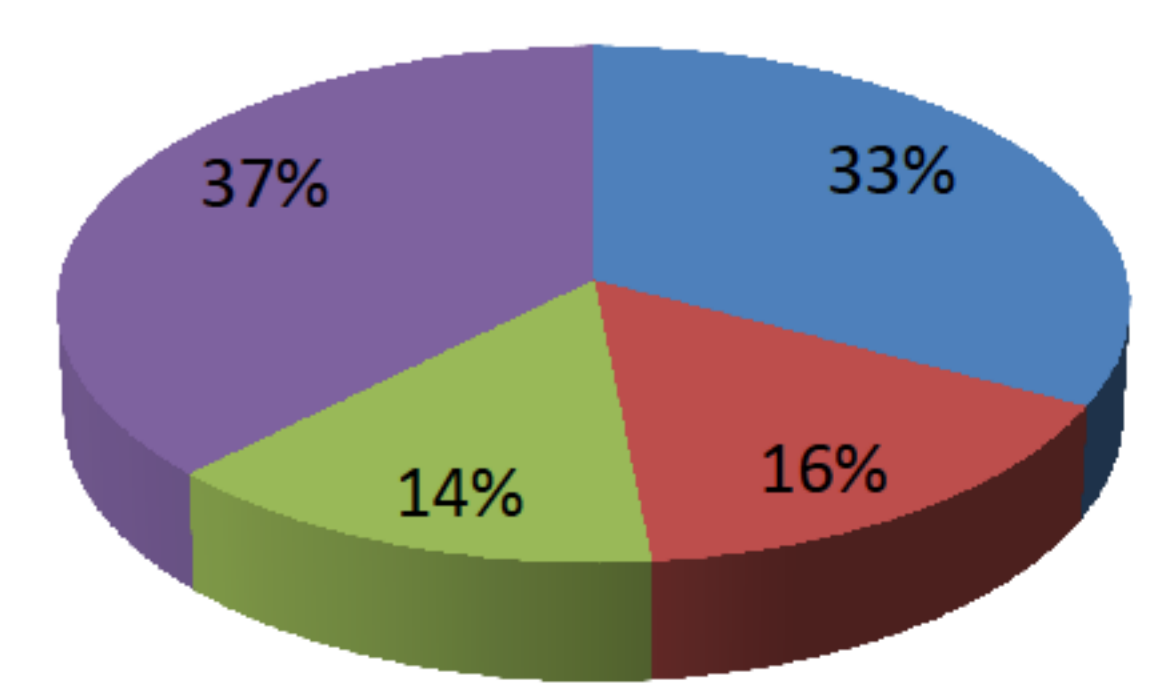


Figure 3b. Percentage of outpatients under clinic follow up who receive a home visit.

