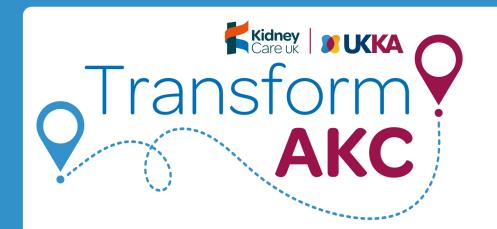


# Professionals Insight Report

November 2024



## Overview of the 3-year programme

### Transform Advanced Kidney Care Core Team

Executive sponsor – Graham Lipkin Medical lead – Rosie Donne Project manager – Ranjit Klare Admin support – Sarah Law

Apr 2024 – Mar 2025

Understand the problem & what good care is

Recruit 5 pilot renal units

Grow multidisciplinary "community of practice"

Patients' insights webinar 12/09/24

Professionals' insights webinar 26/11/24

Apr 2025 – Mar 2026

Develop & test the

AKC change package

and toolkit

QI training & support for pilot renal units

MDT CoP contribute ideas to change package



Apr 2026 – Mar 2027

Staff training to embed change package, becomes new standard of care

Staff training to embed change package

MDT CoP attend training events & webinars



Focus groups
Webinars
Face-to-face events
Comms to share learning





**Introduction to the Transform AKC Programme - Rosie Donne** 





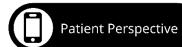


<u>Professionals Insight Webinar</u> Slides - Rosie Donne



**Patient Perspective: Linda** 





#### Professionals Insight Event - 26th November 2024

144 Professionals and patients with recent experience of AKC Attended

Time	Session						
14.00	Welcome & plan for toda	ay					
5 mins	Rosie Donne, KQIP Clinical Co-Lead						
14.05	Transform AKC presentation						
10 mins	Rosie Donne, KQIP Clinic						
14.15 10 min	Patient presentation – what was good during AKC and what could have been improved						
14.25	Summary of learning fro	m patient insight web	inar				
10 min	Ranjit Klare, KQIP Programme Manager						
14.35	Presentation of pre-web	inar questionnaire the	mes				
15 mins	Rosie Donne, KQIP Clinic	Rosie Donne, KQIP Clinical Co-Lead					
	Each attendee goes to 3 a) what is ideal b) what is often missir	ng / suboptimal	cuss:				
14.50	Breakout room 1a	Breakout room 1b		Breakout room 1c Patient		akout room 1d Service design & delivery	
30 mins	Symptom management		ng/	education Laurie Cuthbert,	Dr I	Rosie Donne	
	Dr Sabine van der Veer	communication		KCUK			
	& Prof. Derek Kyte	Dr Anna Winterbotto	m		_		
	Breakout room 1e	Breakout room 1f		Breakout room 1g Multi-		akout room 1h Live donor transplant Dr	
	Psychosocial support	Peer support		professionals input	Ric	hard Powell	
	Emma Coyne	Eleri Wood		(dietician/OT/PT) Lisa Ancliffe			
			15.2	20 Comfort break (10 mins)			
45.20	Decide to the second	D	٦,				
15.30	Breakout room 2	Breakout room 2	Bre	eakout room 2		Breakout room 2	
30 mins	Same as in 1a-h	Dun alvantus and 2	<del> </del>	a la contra a consta		Duration to a sur 2	
16.00	Breakout room 3	Breakout room 3	Bre	eakout room 3		Breakout room 3	
30 mins	Same as in 1a-h	una mana /2 A maima fua ma					
16.30 25 mins	Feedback from breakout	. rooms (3-4 mins trom	eacn	roomj			
16.50	Evaluation & next steps						
5 mins	Rosie Donne, KQIP Clinical Co-Lead						



### Key themes

Service delivery models

Patient education

Shared decision making (SDM)

Symptoms detection

Allied health professional (AHP) support

Live donor transplant

Psychosocial care

Peer support



# Key themes – Examples of ideal care

Theme	Examples of ideal care
Service delivery models	Full MDT model of AKC – core dedicated staff Continuity of care Equity across wide geographical area Full choice of treatment modalities Target resources towards those at most need Blood tests close to home, access results
Patient education	AKC nurse home visits Group patient education days / roadshows Peer supporters at education days Family included Variety of resources (paper / digital)
Shared decision making (SDM)	Staff get to know the patient holistically Discuss social/family/work issues Dedicated appointment(s) for SDM Find out what matters most to the patient Communication tailored to the patient Decision aids / videos / leaflets Honest communication about dialysis
Symptoms detection	Ask patient about common symptoms, give time to explain and give support iPOS / ePROMs before / during appointment Patients report worsening symptoms between appointments, advice given Signpost to resources (videos/leaflets)



# (Cont'd) Key themes – Examples of ideal care

Theme	Examples of ideal care
Allied health professional (AHP) support	All skills available within AKC team Proactive not reactive approach AHPs attend patient education days Geriatrician / frailty service Signposting to available local support
Live donor transplant	Early education about future transplant Culturally relevant education Events to raise awareness on living donation Home visits to discuss living donation One-stop workup pathways
Psychosocial care	MDT trained to identify needs Psychosocial conversations toolkit Routine psychosocial needs screening Ask about mental health symptoms proactively Refer to renal psychologist / counsellor Signpost to charity support Young adults service Cultural liaison officer
Peer Support	Large pool of peer supporters Good matching - patient and supporter Peer support training programme Informal gatherings / drop-ins Individual and group support options Support for carers



# Key themes – what are the barriers to providing ideal care?

Theme	Barrier to providing ideal care?
Service delivery models	Geographical inequities in provision of MDT care Increasing demands, lack of expansion Increasingly complex / comorbid patients Lack of referral criteria High DNAs – socioeconomic problems, language Surgical bottlenecks
Patient education	Language, cultural, health literacy Access to technology for digital resources Access to paper resources Lack of staff time Delayed referral for education
Shared decision making (SDM)	Language, cultural and health literacy Lack of knowledge on signposting to information Lack of time for high quality SDM Inconsistent messages from different team members Negative experiences of family/friends cause bias Lack of patient confidence for home therapies
Symptoms detection	Patients don't know if symptoms are due to CKD Patients forget to tell symptoms during appointment Poor treatment evidence/efficacy Knowing what GP vs. hospital should manage Lack of signposting to support and information



# Key themes – what are the barriers to providing good care?

Theme	Barrier to providing ideal care?
Allied health professional (AHP) support	Lack of funding for all AHP members Having to collect data and write business case OT/PT struggle to arrange support no social worker No benchmarking of what is needed / best practice
Live donor transplant	Lack of patient education on potential donors Lack of priority for recipient / donor workup tests Multiple appointments – DNAs Lack of admin support to streamline pathway Lack of theatre capacity
Psychosocial care	Increasing burden of mental health problems Limited AKC appointment time Lack of staff confidence for conversations Long wait for psychology support Lack of psychosocial staff and funding Lack of clinical leadership on psychosocial support Lack of knowledge of available support Difficulty engaging with certain groups
Peer support	NHS trusts' peer support training requirements Lack of structure for peer support programme Resource and time to run support programme Lack of support for peer supporters Clinicians don't promote peer support service Lack of peer support role models



#### After-event feedback

Liked the opportunity to participate in 3 breakout rooms so this type of thing again would be great

Excellent to hear patients and their thoughts - more of this please!

More time to discuss
different elements,
maybe more prescribed
/ matched groups to
help share or deepen
knowledge

More focus on the ideal transplant pathway from AKC please

What additional insights of AKC would you like to share?

I think I may have contributed a bit more if I had been in a face-to-face session

Great session

Great afternoon, very interesting, thought provoking.

I enjoyed the patient/MDT involvement. It felt natural and useful rather than forced.

Excellent webinar. Good variety of topics covered with very knowledgeable leaders.
Thanks

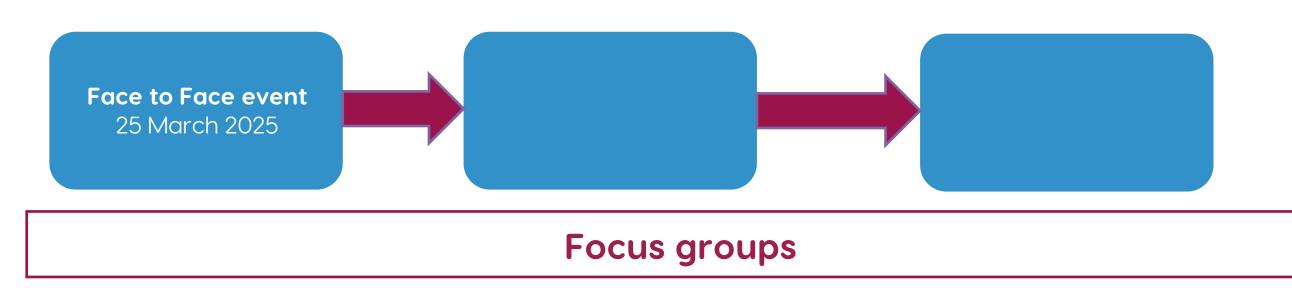
Excellent programme

# We asked those who attended to rate their experience out of 5 (1 = not very good and 5 = very good). These are the average score results:

The overall experience of the meeting	4.36
To what extent did this event enable you to collaborate and share ideas with others?	4.35
To what extent did this event promote patient involvement?	4.23
To what extent did this event promote a collective learning environment among the multi-professional team?	4.42



### Next steps



- Project team identify themes for further focus
- Focus groups to explore themes in more detail
- Attend F2F event 25 March 2025 Birmingham
  - volunteers needed to help lead a workshop on "What is important to patients"
- Help with future codesign of change package
- Attend workshops/webinars in years 2 & 3
- Email: ranjit.klare@ukkidney.org



#### **Additional Links**

Dela Idowu – GOLD Peer buddy scheme

<u>GOLD – Telephone Buddy Scheme (giftoflivingdonation.co.uk)</u>

Hilary Rose – Workshop For People with CKD, Chronic Illnesses & Disabilities <a href="kwll.co.uk">kwll.co.uk</a>

Keith Bucknall - Think?Transplant video

Think?Transplant (youtube.com)