

Conservative Kidney Management

Pathway Development

Conservative Kidney Management (CKM) is a treatment option that some end-stage renal patients choose as an alternative to dialysis or transplant.

It is important to note that patients who choose CKM do *not* stop receiving care. These patients often have very complex needs that range from symptom management to advance care planning to preparing for end of life.

Dr. Sara Davison and her team have received a three year grant to develop a Provincial Kidney Conservative Care Clinical Pathway that will provide sustainable, high-quality, evidence-based care for patients unlikely to benefit from dialysis.

What's the Plan?

Together with you, we plan to:

- improve the experience of our patients and their families when CKM is the chosen treatment.
- develop processes and tools that will help physicians and staff provide consistent, high-quality care to CKM patients and families.

We intend to accomplish this by:

- seeking input from staff, physicians, patients, and other key stakeholders.
- engaging staff and patients in a collaborative process from beginning to end so that the final result is comprehensive, practical, and beneficial for patients and families.
- strengthening and formalizing relationships with other key care providers such as palliative care and homecare.

Why is this Important?

For some elderly patients, dialysis provides no benefit. These patients are often frail, and experience functional decline and cognitive impairment after starting dialysis. The last days of their lives are often characterized by high rates of hospitalization, ICU admissions, and intensive procedures.

Patients whose chronic kidney disease is managed conservatively (without dialysis) may live as long as patients who elect to start dialysis. They tend to preserve their functional status, maintain a better overall quality of life, and have fewer hospital admissions.

If you have an interest in this area, please feel free to contact us to receive future updates about this project!

How to Get Involved

- ➔ We are starting **working groups** and are currently developing the clinical guidelines. If you are interested in being involved, please contact us. We will also have evaluation and implementation committees.
- ➔ We need your help to recruit CKM patients and their caregivers to be involved in the project. Please use the attached "**Patient Engagement Script**" that is intended to be discussed with patients/families in a manner that you feel comfortable.
- ➔ In August, we will be sending a needs assessment **survey** to gather input from RIC staff and physicians.
- ➔ The pathway will be circulated in March 2016 for **input**, and **implementation** will begin in September 2016 at UAH, RAH, GNCH, and RDRH.

The Project Team



Dr. Sara Davison, MD, MHSc
Project Lead

Sara is a professor in the Division of Nephrology. She has a general nephrology outpatient practice and she is an attending nephrologist on hemodialysis and peritoneal dialysis units as well as inpatient and consultation services. She heads the restructuring of End-of-Life Care for NARP. Sara learned how to fly a plane before she could drive a car and currently shares a home with fish, reptiles, parrots, rodents (including a chinchilla!) and a dog. Oh, and three teenagers to boot.



Dr. Konrad Fassbender, PhD
Project Co-Lead

Konrad is a health economist, recently appointed as Scientific Director for the Covenant Health Palliative Institute and Assistant Professor in the Division of Palliative Care Medicine. Konrad supervises medical trainees, graduate students and teaches health economics, health finance and econometrics. He enjoys cooking and gardening and has one very smart daughter!



Beth Tupala, RN, CHPCN(c),
Research Nurse

Beth is an RN with a background in palliative care. She works on palliative teams in acute care and homecare, and has held front-line, consultant, and educator positions. Beth has two small children (a baby and a 2.5 year old) and when she gets a quiet moment, she usually spends it reading, gardening, or perhaps *thinking* about a going for a run.



Vanessa Steinke, MHA,
Senior Project Manager

Vanessa has a background in business, quality improvement and information technology. She has successfully developed and implemented provincial clinical pathways in orthopedics and cardiology, so we can't wait to see what she helps us come up with! She is a fantastic baker, which she manages to do with two small children (1 and 3 years old). She also likes hiking, skiing, and is learning to play cello.



Betty Ann Wasylynuk, RN
Clinical Nurse Educator, NARP

Betty Ann has been working with the renal program as the palliative educator for 4 years. She will now be contributing her energy and enthusiasm to this project in addition to her regular work projects. Now that her grown children have left home, Betty Ann loves trying new places and restaurants in town. Interesting tidbit: she really likes crazy amusement park rides, the scarier the better!



Saad Syed, Summer Student

Saad is a 2nd year science student at the U of A who is working as a summer student on the project. He likes to snowboard and play ping pong, and, fun fact: he was born in New York City.

Contact

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