

Kidney professional experiences of managing people's advancing chronic kidney disease.

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PURPOSE: To investigate kidney professionals' experience of how to support the delivery of care for people with advancing chronic kidney disease (CKD) to inform the Yorkshire Dialysis and Conservative Care Decision Aid (YoDCA) content.

METHODS: Survey design employing qualitative methods. Semi-structured interviews elicited views about patient management and treatment decision making from eight kidney professionals recruited from three renal units in West & South Yorkshire, UK. Semi-structured interviews lasted no longer than 60 minutes and took place in clinics. They were audio-recorded, transcribed and analysed using thematic framework analysis.

RESULTS: Staff employ a mixture of face to face consultations, home visits and written information to support people with worsening CKD make decisions about treatments and care plans. Services differed in how their care is organised to support people making conservative care choices, and the training to talk about end of life care; some spoke about difficulties in initiating conversations about stopping dialysis and advance care planning. Conservative care was presented as an active option involving symptom management, advance care planning and quality of life assessment; dialysis as life-lengthening, but burdensome.

CONCLUSIONS: Although different care pathways exist between units, staff put considerable time and effort into preparing people with kidney disease to make treatment decisions, and planning for care. To facilitate staff to better support people making this choice, themes identified from staff interviews were integrated in to the Yorkshire Dialysis and Conservative Care Decision Aid (YoDCA) including: information on advance care planning, everyday activities, EKD and treatment routines, life expectancy, kidney and treatment failure, care at the end of life, and framing both treatments as active disease management options for advancing chronic kidney disease.