Kidney Supportive Care Program
MNHHS

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What is the problem

‘Patients with advanced CKD have a high burden of physical and psychosocial symptoms, poor outcomes and high costs of care’

‘Supportive care should be available to all patients with advanced CKD and their families throughout the entire course of illness’

KDIGO Executive Summary on Supportive Care in CKD, 2015.
Pre Kidney Supportive care

On dialysis/Not on dialysis

Symptom burden
Distress
Ambivalence
Conflict

End of Life/
Acute Crisis

Specialist Palliative Care

Terminal care
Kidney Supportive care

Referral criteria for KSCp:
High burden symptom distress
Those considering withdrawal from dialysis
Those with ambivalent decision making
Those on dialysis with a new diagnosis of a 2nd life limiting disease
Evaluation & research

• AusHSI & SEED funding
  – Evaluating implementation of KSCp
  – Profiling KSCp activities
  – Economic evidence
  – Clinical evidence
  – Satisfaction
  – Degree of acceptance and culture shift
  – Building system capacity
Anticipated Outcomes

- Improved QOL and symptom measures
- Less acute hospitalisations
- Linkages with community providers
- Uptake in advance care planning
- Less futile treatment
- Increased patient and clinician satisfaction
Current State

- Averaging 6 new referrals a week and rising
- Positive feedback from patients and their families
  - “After seeing you guys I felt like a new man’
  - “They were at my door wanting an appointment”