

2022 ANNA NATIONAL SYMPOSIUM

Lessons on Implementing Supportive Kidney Care from the Pathways Project (PP)

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The Pathways Project (PP) facilitated implementation of innovative supportive care practices for people living with advanced chronic kidney disease (CKD) and end-stage kidney disease (ESKD) who are seriously ill. Patients with ESKD have well documented needs for better supportive care, especially at the end of life. For instance, patients with ESKD are more likely than cancer patients to die in the hospital, often after an intensive procedure like cardiopulmonary resuscitation, and with a low referral rate to hospice. The PP, funded by the Gordon and Betty Moore Foundation, was a national collaborative to implement scalable innovations in kidney supportive care (KSC). Ten dialysis centers worked from 2019-2020 to implement supportive care best practices using the IHI Breakthrough Model, a collaborative quality improvement process.

In this session, we will share lessons learned from PP about integrating evidence-based best KSC practices into the workflow of dialysis facilities. Additionally, an interactive portion will guide participants in developing an initial plan for implementing one supportive care best practice of their choosing. Presenters will use interactive learning activities to:

- 1) Describe kidney supportive care evidence-based best practices
- 2) Discuss key lessons learned from the Pathways Project
- 3) Guide development of one nurse led plan-do-study-act (PDSA) cycle to test a kidney supportive care best practice

The presenters will highlight both the successes and challenges of the PP implementation strategy focusing on the role of the nephrology nurse, including identification of seriously ill patients in the dialysis center, and conducting goals of care conversations with them. This session will offer clear concepts and quality improvement methods for how to facilitate key aspects of supportive care.

Participants in this session will gain an understanding of implementation of KSC within the dialysis workflow and will develop an initial plan for implementation in their own dialysis centers.

Abstract selected for presentation at 2022 ANNA National Symposium.