

Patient Satisfaction with Nurse-Led Chronic Kidney Disease Clinics: A Multisite Quality Improvement Study

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Background

There is international evidence that nurse-led chronic kidney disease (CKD) clinics provide a comprehensive approach to achieving clinical targets effective in slowing progression of CKD.^{1,2} Across Queensland (Australia) this model has been established in 18 renal outpatient CKD clinics with either nurse practitioners or advanced practice renal nurses. The nurse functions as a case manager, coordinating care pathways, and working from a holistic framework. The Australian Safety and Quality Framework³ requires healthcare organisations to engage with consumers by using consumers' experiences and expertise to ensure the healthcare is safe and of a high quality. Whilst data is routinely collected on clinical outcomes, limited data is available on patient satisfaction with innovative models of coordinated care.

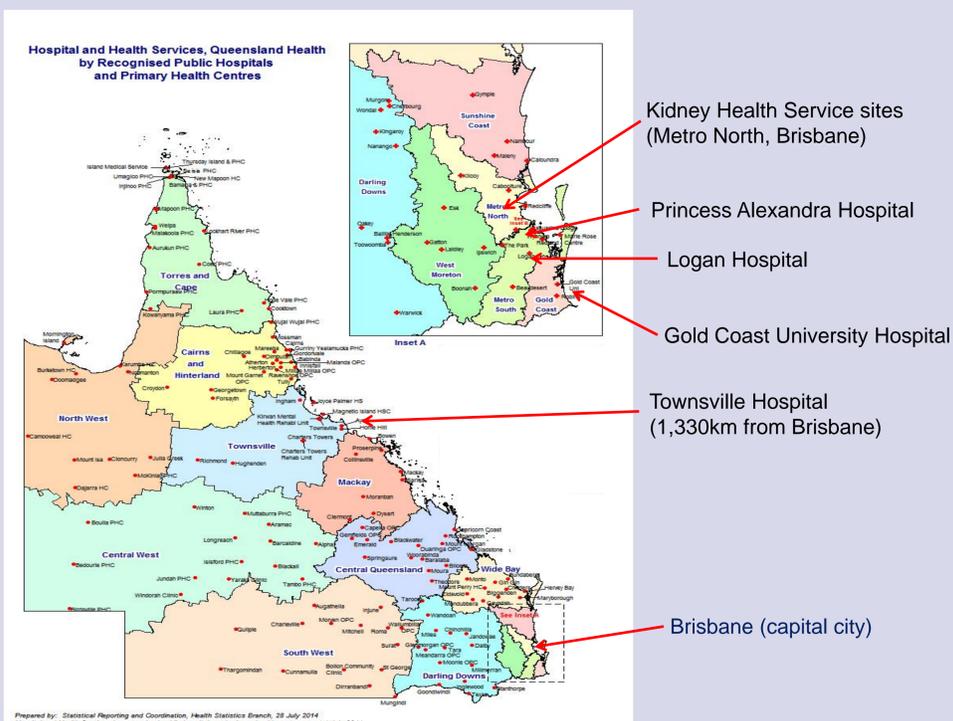
Aim

To measure patient satisfaction levels with CKD nurse-led clinics.

Methods

- **Design:** Descriptive cross-sectional survey
- **Sites:** 5 CKD nurse-led clinics (metropolitan, regional and remote locations; see figure 1)
- **Inclusion criteria:** adults (> 18 years of age; no upper age limit) with CKD stages 2-5. Exclude - serious cognitive impairment
- **Procedure:** 6 month period (n=873); 32 item questionnaire (demographics and patients experience with health service using the modified Nurse Practitioner Patient Satisfaction questionnaire⁴)
- **Human ethics approval:** All sites; CKD nurses from the clinics were not involved in the recruitment and data collection processes.

Figure 1: Study sites Queensland, Australia



Area Comparison: Queensland = 1,760,648 km² Germany = 357,168 km²

Results

- Response rate was 64% (n=561), half were male (55.5%) with a median age of 71-80 years (43.5%) and most were pensioners or retired (84.2%)
- 74.2% attended for review (figure 2) and 87% had attended for > 12 months (figure 3)
- 93.7% of patients travelled less than 50kms to a kidney clinic with only 6.3% travelling greater than 50km
- Table 1 presents responses to some satisfaction questions.

Figure 2: Main Reasons for Attending the Clinic

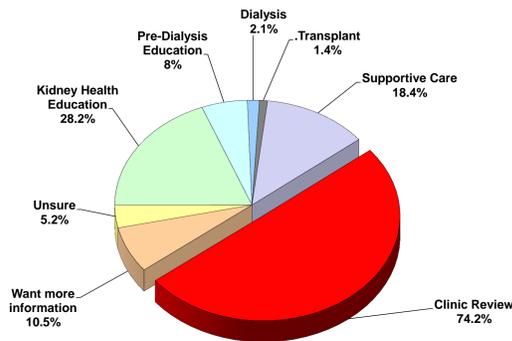


Figure 3: Time Known to CKD Service

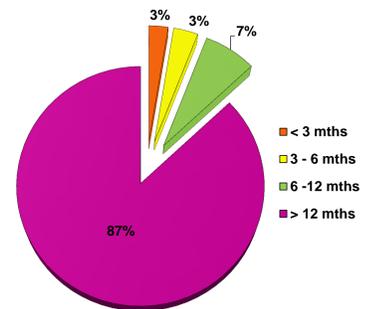


Table 1: Satisfaction Items

Satisfaction Item	Response (%)
1. Did the kidney nurse ever say that there is more than one treatment option to consider for your kidney problem?	Yes (68.7%)
2. Did the kidney nurse give you enough information about each dialysis option?	Yes, definitely (84.2%)
3. Did the kidney nurse ask you which dialysis treatment you preferred?	Yes, definitely (78.4%)
4. When there was only one treatment option to consider, did the kidney nurse give you enough information about this option?	Yes, definitely (78.3%)
5. Did the kidney nurse recommend a treatment for a health problem or symptom that was bothering you?	Yes (71.5%)
6. How often did the kidney nurse give you clear instructions about your health?	Always (83.8%)
7. Do you feel that the kidney nurse encouraged you to share in decisions made about your health?	Always (72.6%)
8. Did the kidney nurse give you the help you need to make changes in your habits or lifestyle that would improve your health or prevent illness?	Yes, definitely (74.4%)
9. Did the kidney nurse discuss your medications with you?	Yes (90.7%)
10. Overall, how would you rate the quality of care provided by the kidney nurse?	Highly satisfied (83.8%)

Implications for Practice

- ❑ Patients were highly satisfied with, and confident in the care they were receiving in the nurse-led clinics.
- ❑ In an era of person-centred care, it is important to measure patient satisfaction with specific tools.
- ❑ Each site can use the results to benchmark with other clinics and to monitor change over time.

References

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4. Gardner G, et al. 2009. *AUSPRAC: The Nurse Practitioner Research Toolkit*. Australian College of Nurse Practitioners, AUSPRAC (<http://eprints.qut.edu.au/72604/>).