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## An audit involving questionnaires in CKD outpatients: Are doctors meeting patient education standards regarding disease severity and progression at two Birmingham hospitals?

Katie Allen

University of Birmingham Medical School, United Kingdom

**Background:** The GMC requires all consultations to be a partnership between the doctor and patient whereby information is shared effectively, regarding likely disease progression. Since CKD can entail life-changing complications including dialysis, the importance of good patient understanding is of paramount importance. Despite this, it is often noted that patients are unsure of the reason for their clinic attendance and their ideas about their renal disease severity and progression dramatically contrast with their doctor's views.

**Methods:** At BHH and GHH, pre and post-appointment questionnaires were distributed at general renal clinics. Differences in patients' thoughts on their likelihood of needing dialysis in 2 years and their understanding of the purpose of their appointment were compared by the before and after time points. Predictions of disease progression were extrapolated from the doctors' graphs plotting eGFR. To determine if education standards are being met, matching of patient's thoughts and those from the medical perspective was looked for. The two hospitals were compared.

Conclusions and Discussion: Overall, at both hospitals, education levels were suboptimal since for all outcomes far fewer than 100% of patients reported the maximum understanding levels or had thoughts matching their actual disease status or doctors' predictions. Some quality education is however taking place in some appointments because the percentage of patients whose idea of their disease severity matched their actual renal disease category by eGFR almost doubled after the appointment compared to before. This is positive and reassuring, but 38% of patients still leaving their appointment in non-agreement means there is vast room and need for improvement in the information delivery taking place. Great diversity was found in understanding of their reason for clinic attendance, for example 8% of patients reported a decrease in their understanding after the appointment whilst for others it improved, further highlighting that changes are required.

## **Biography**

Katie Allen is a medical student at the University of Birmingham, currently rotating around hospital placements throughout the West Midlands. she has completed this audit under the supervision of Dr Hugh Rayner, nephrology consultant at the Heart of England NHS Foundation Trust. As the lead for the "Please Write to Me" campaign, he believes strongly in the importance of effective communication with patients and the necessity of investing time to improve the relevant standards. The ongoing valuable opportunities that being a student provides to observe clinical practice involving a vast range of doctors, clinical settings and patient populations, has allowed me to develop an interest in the quality of patient education, particularly for long-term conditions.

katieelizabethallen@hotmail.co.uk