

**Title: Assessing the Conservative Kidney Management Pathway from a Patient and Family Perspective**

There is an increasing incidence of chronic kidney disease (CKD) in Alberta with the greatest increase amongst those over 75 years of age. Many require relocation from rural to urban communities for dialysis. These older dialysis patients are often frail; have extremely high rates of morbidity and mortality; and experience functional decline and cognitive impairment after starting dialysis. Moreover, their quality of life (QOL) is poor and their end-of life care is characterized by high rates of hospitalization, intensive care unit admission, and intensive procedures. Dialysis provides no benefit for some frail, older patients. For these patients, the provision of non-dialysis Conservative Kidney Management (CKM) may result in similar survival, better preservation of physical and cognitive function, preserved QOL, no burden associated with the dialysis procedure, fewer admissions to acute care settings, and care in their preferred/home community.

The provision of CKM has been identified as a priority by both CKD patients and the national and international kidney community. In recognition of this, the Kidney Health Strategic Clinical Network (KHSCN) has identified improving access to and reducing variation in management for patients choosing non-dialysis care (CKM) as a strategic priority. The development of a CKM clinical pathway is currently underway and will be available on-line in the fall 2016. This CKM pathways aims to provide sustainable, high-quality, evidence-based, care for patients with advanced CKD who are unlikely to benefit from dialysis in a coordinated, standardized and equitable manner across Alberta.

Patient and family-centered care and assessing patient-reported outcome measures, including the patient experience, are guiding principles for all KHSCN supported work. Projects that evaluate this CKM pathway, from the patient and/or family perspective, are a priority for the KHSCN. These projects may range from engagement with the pathway and the educational materials to the impact on patient outcomes in any of the six dimensions of quality (acceptability, accessibility, appropriateness, effectiveness, efficacy, and safety).