

Transforming Participation in Chronic Kidney Disease

Aim: To empower people to take greater control of their health and wellbeing in partnership, leading to better outcomes

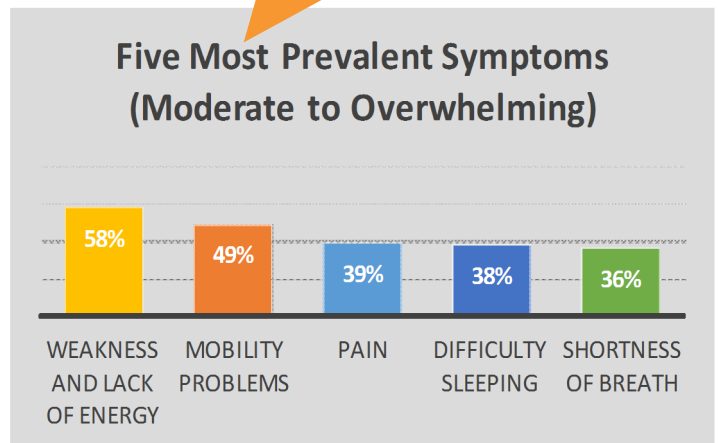
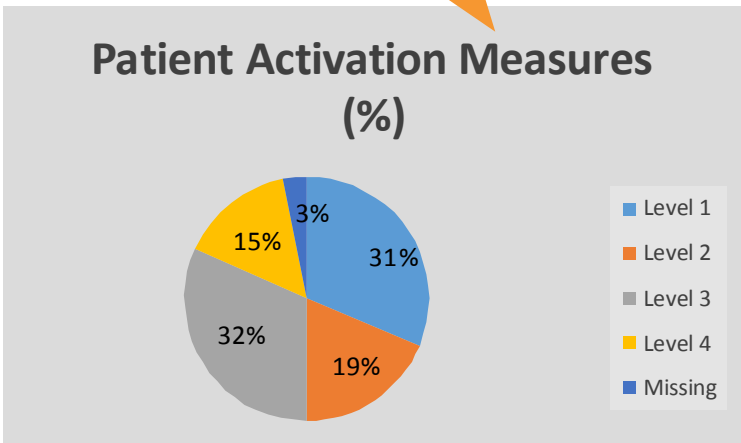
An activated person is one who has been supported to develop the knowledge, skills and confidence to make informed choices about their health care, and who uses services appropriately to support these choices

The Problem: Between 25 and 40 per cent of the population have low levels of activation

(Hibbard and Cunningham 2008)

Data from the UKRR reflects a similar picture...

Data from the UKRR also indicates that patients suffer from a symptom burden that has the potential to impact on quality of life and activation...



Measuring patients' activation levels means clinicians can identify those who may need additional support and target it appropriately. The score provides a guidance on the type and amount of support that is likely to be helpful to the patient...

A Developmental Scale of Patient Activation:

The PAM is calculated as a score which corresponds to a PAM level:

Level 1
Disengaged and overwhelmed.
 Their perspective: my doctor is in charge of my health.

Level 2
Becoming aware but still struggling.
 Their perspective: I could be doing more.

Level 3
Taking action.
 Their perspective: I'm part of my health care team.

Level 4
Maintaining behaviours and pushing further.
 Their perspective: I'm my own advocate.



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The following is a recommended intervention identified by the TP-CKD programme for implementation with both staff and patients, to test the following question:

“Can the use of intervention tools help to improve the knowledge, skills and confidence of patients with kidney disease to enable fuller participation in the management of their own health?”

To explore other interventions identified by the programme, visit our Interventions Toolkit at:

www.thinkkidneys.nhs.uk/ckd/resources/

Ask Three Questions

‘Ask 3 Questions’ is a simple way of helping patients get more involved in their treatment and care. It supports the NHS’s aim of “no decision about me, without me’.

The three questions are:

1. What are my options?
2. What are the pros and cons of each option for me?
3. How do I get support to help me make a decision that is right for me?
4. An optional fourth question may also be asked: ‘What if I do nothing?’



Addressing these questions during a consultation can aid decisions about the best course of action for each individual patient.

What are the benefits?

Ask 3 Questions...

- Is quick and effective, not expensive to use and easy to implement
- Helps patients to have a better understanding of their health, encouraging them to get involved in managing their own healthcare
- Improves communication between patients and health professionals
- Helps patients be more in control of their own health and care

How can it be used?

For patients

- The key message for patients is to always be prepared to ‘Ask 3 questions’ when discussing your treatment options
- You might find it helpful to think about these questions before each consultation

For staff

- Encourage the use of the “Ask 3 Questions” technique in your clinical practice
- When responding to questions, it is helpful to use plain language, simple illustrations, and check patients understanding of the information you’ve given