



Together we can achieve health

Diana M. Collins MSN, ACNP

Thanks to our speaker!



Diana M. Collins MSN, ACNP

Clinical Instructor at Delaware Technical
Community College

- Nurse educator
- Expert in patient-provider communication & strategies for patient involvement and advocacy

Objectives

- Learn ways patient-provider communication can improve patient's health long-term.
- Develop steps patients can take to improve their conversations with health care providers.
- Learn how patients can be active members of their health care team.

Introduction

- Patient advocacy is important in today's health care.
- Increase health awareness and patient-provider communication.
- Communication begins with the provider but it does not end there.

Statistics

- African Americans (17.01%) and Mexican Americans (15.29%) are more likely to have CKD than Caucasians (13.99%). (CDC, 2017)
- Patient awareness is less than 10% for those with stages 1 to 3 CKD. (CDC, 2017)
- Awareness is higher among people with stage 4 CKD. (CDC, 2017)

Disparities in Health Care

- Health and health care disparities are closely linked with social, economic and environmental disadvantage.
- Negatively affects groups of people who have systematically experienced greater obstacles to health.



(Healthy People 2020)

Barriers to Communication

- Physicians or nurses' own values vs. the patients'
- Time constraints
- Paternal or authoritative approach to communication
- Medical jargon and terminology
- Distractions
- Cultural differences
- Body language

Literacy

- Color blind
- Social class





Cultural



Body Language



Effective Communication

- Active listening
- Non-verbal communication
- Asking questions
- Be clear
- Clarify and summarize



Gina

Gina is a 43 year old Caucasian female. She is married and does not have children. She works as a sales representative and has been diagnosed with PKD. Prior to this diagnosis Gina had a history of frequent UTI's and kidney stones.

Gina stated “I felt defeated after speaking with the nephrologist. He told me I had this disease and gave me a list of things to look out for and what I should expect. But all I heard was at some point I can lose kidney function.”

What do you recall?

- Repeat or write down what you recall from the visit.
- Make notes on what was unclear to you.
- Consider what you would like to know about your health.



Gina

- I asked “when I will lose kidney function?” and all that was said was “it will happen over time and we need to monitor your values. The cysts are non cancerous but they can cause damage”.
- Before I could ask more questions my provider says “We are going to take some more labs today and schedule a follow-up in a few weeks. Are there any more questions.” At this point I just want to go home even though I had so many questions.

What happened...

- Was Gina present during the conversation?
- Did the physician/ NP recognize the look of despair?
- Did Gina ask questions?
- How can Gina prepare for her next visit?

Gina

- “I did have the follow up and I asked my provider if I can ask some questions. I was able to ask about my blood pressure and about my medications. I also was able to ask about diet and if I had any restrictions. At this time he appeared to be more engaged in the conversation and that made me feel better.”

Diagnosis

- Pathophysiology
- Etiology
- Prognosis
- Treatment



Patient Education

- Know the disease
- Process the information
- Share your findings with family and friends
- Keep it simple



Visual Aids

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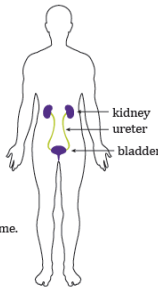
All about kidney disease

The kidneys

Your kidneys are vital organs. You need them to live, just like you need your heart and lungs. They filter waste and extra fluid out of your blood to make urine. Your kidneys also do other important jobs including:

- Control chemicals and fluid in your body.
- Help control your blood pressure.
- Help keep your bones healthy.
- Help your body make red blood cells.

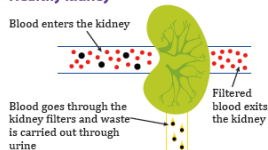
Most people have two kidneys. Each kidney is located near the middle of your back, one on each side of your spine. Each kidney is connected to your bladder by a thin tube called a ureter.



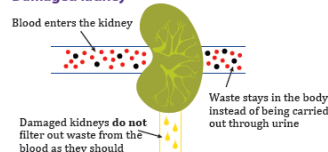
Chronic kidney disease (CKD)

- CKD means you have lasting damage to your kidneys that may get worse over time.
- It is most often caused by diabetes or high blood pressure.
- CKD may be preventable. Finding and treating CKD early may delay or even prevent kidney failure.

Healthy kidney



Damaged kidney



You are at higher risk for CKD if you:



Have diabetes



Have high blood pressure



Have heart disease



Have a family member with kidney disease



Are African-American, Hispanic, Native American, or Asian Pacific Islander



Are over 60 years old

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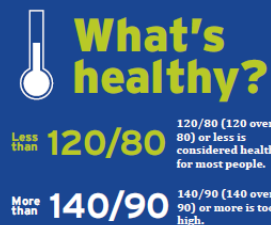
 **KNOWYOURKIDNEYS**

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Blood pressure and kidney disease

High blood pressure is the second most common cause of kidney disease.

Your heart pumps your blood through tubes (blood vessels) called arteries and veins. When your blood moves through the blood vessels, it pushes against the inside of them and creates pressure. Blood pressure is the pressure created inside your arteries and veins when your blood flows through.



High blood pressure and your kidneys

High blood pressure (hypertension) means your heart is working too hard to pump your blood. It usually shows no signs. The only way to know if you have high blood pressure is to get tested.

High blood pressure can cause kidney disease. When blood flows too forcefully through the tiny blood vessels in your kidneys, this can hurt or weaken these tiny vessels. Over time, this can lead to kidney disease.

Kidney disease can cause high blood pressure. Healthy kidneys help control your blood pressure. When your kidneys don't work well, they don't do a good job controlling your blood pressure. This can cause high blood pressure.

What does a blood pressure test do?

- It measures how hard your heart is working to pump blood.
- It uses an inflatable cuff that tightens around your arm and slowly loosens. As it loosens, a meter measures the pressure in your arteries when your heart pumps.
- A blood pressure test can be done by your doctor or nurse, at home, or in some pharmacies and grocery stores.
- Check your blood pressure regularly, and tell your doctor if you get a high result.



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 **KNOWYOURKIDNEYS**

Gina

- “My experience continues to be great with my physician. I am able to call with questions and the office gets back to me in about 24-48 hour unless its an emergency. Being able to communicate with my physician has helped me get a better understanding of what I should expect with the polycystic kidney disease.”

Hello my name is...

- Introduce yourself
- Ask questions about your provider
- Meet the staff
- Be receptive
- Be yourself

“To treat me you have to know me”



Speak up!

- Ask questions.
- Bring notes.
- Bring a family member or friend.
- Know what works for you and your family.



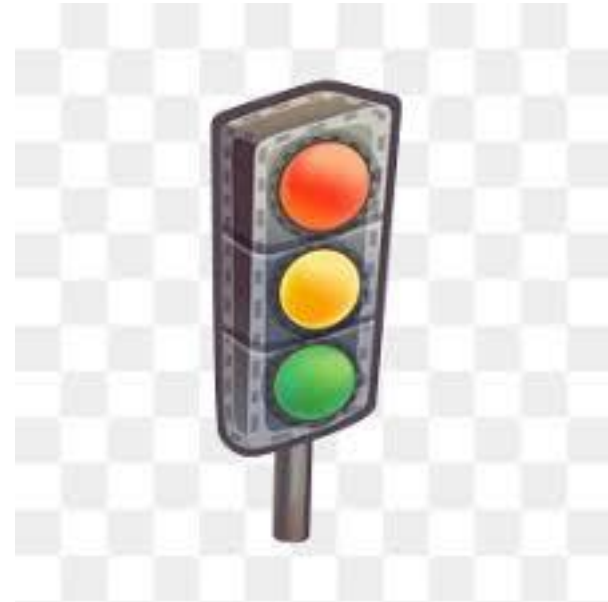
Communicate



- Communicate your wants and needs to your provider.
- Explain the difficulties you have with treatment (if any).

Mindful Communication

- Red light = Closed
- Yellow light = In-between
- Green light = Open



Closed Communication



- The person is not receptive to what is being said.
- Communication channel is closed.

In-between Communication



- Clarification
- Facial expressions and body language
- What caused the communication to begin to close?

Open Communication



- Stay informed.
- Communication channels are open.
- There is an even exchange of information.
- Be respectful when communicating.

Conclusion

- Patient power
- Obstacles that you will face
- Value assessment
- Be persistent
- Be patient



Questions?



Next Month's Webinar



Dr. Michael Heung

- Associate Professor and the Associate Chief for the Division of Nephrology
- University of Michigan

How to be a Heart Healthy Kidney Patient: The Key Role of Sodium and Fluid

Thursday, February 22, 2018 | 1-2 p.m. (EST)

- How heart disease affects patients with kidney disease
- The role of sodium and fluid in contributing to heart disease
- Methods for sodium and fluid management

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