

PRESS STATEMENT

Minister of Health, the Hon. Kim N. Wilson, JP, MP
Wednesday, 13 March 2024

Chronic Kidney Disease Integrated Care Pathway

Good afternoon everyone,

Thank-you for joining Dr. Peter Topham and I this afternoon, just before World Kidney Day – a day where globally, communities are working to raise awareness about the importance of kidney health, preventing kidney disease, and treatment. Given that the theme for 2024’s World Kidney Day is *“Kidney Health for All – Advancing equitable access to care and optimal medication practice!”*, it is entirely fitting for Dr. Topham and I to share the key findings and recommendations of the first phase of work on the Universal Health Coverage Chronic Kidney Disease Integrated Care Pathway initiative.

Universal Health Coverage is about ensuring equitable access to needed, quality healthcare, without creating a financial burden for the person requiring care. The Chronic Kidney Disease Integrated Care Pathway is a multi-disciplinary approach that details the essential care steps for people experiencing chronic kidney disease.

The Pathway specifies the care provided for kidney disease patients from beginning to end and defines what happens, when, and who is responsible at each stage of the care journey. This includes the prevention, presentation, diagnostics, diagnosis, treatment, and discharge or end of life for those at risk of or experiencing chronic kidney disease.

The disturbing reality for our community is that 50% of our residents have at least one chronic condition such as diabetes, heart, or kidney disease and the data reflects that this number continues to grow. Chronic kidney disease not only has a disproportionate impact on the Island’s health cost burden, not surprisingly, its prevalence is reflective of other chronic diseases in our community such as diabetes, obesity, and hypertension. The 2023 Joint Strategic Needs Assessment states, *“Bermuda appears to have a disproportionately high number of claims and costs for chronic kidney disease and that the prevention of chronic kidney disease should be a priority.”*

Simply put, chronic kidney disease ranks amongst the highest medical expenses for Bermuda. Given the high prevalence and high treatment costs of this disease on island, the existing model of chronic kidney disease care in Bermuda is unsustainable.

The Chronic Kidney Disease Integrated Care Pathway initiative is one of three undertaken by the Ministry of Health in 2023. You may recall that key findings and recommendations for the Acute Adult Mental Health Integrated Care Pathway were shared publicly last month.

Next month we also expect to share the results of the First 1,000 Days Integrated Care Pathway, which covers conception to children up to the age of two years old. The work on these pathways is in addition to pathways already completed or in progress by the Bermuda Hospitals Board.

The Chronic Kidney Disease Integrated Care Pathway work was driven by a multidisciplinary working group led by Dr. Topham, Consultant Nephrologist to the Bermuda Hospitals Board and supported by KPMG. The Working Group also included Dr. Lynette Thomas – Nephrologist at Bermuda Renal Associates, and Irena Ashton – Dialysis Nurse at Kidney Care Bermuda.

Consistent with all other pathway initiatives, this pathway initiative provided the opportunity to gain a deeper understanding of the current provision of chronic kidney disease-related health services in Bermuda, understand patients' experiences of these services, and identify both challenges and opportunities to be addressed or capitalised on to ensure an effective, efficient, and patient-centred care that is accessible and reflective of best practices.

Over a 20-week period, an extensive literature review was completed, along with broad stakeholder engagement. Interviews were conducted with patients with lived experiences, clinicians, health insurers, and non-profit care providers. Two workshops were also facilitated including participants representing patients, nephrologists, labs, family and social services, insurance specialists, clinicians, nursing staff, and primary care providers.

- 35 interviews were conducted with CKD patients, family members, clinicians, mental health experts, law enforcement agencies, judicial representatives, and community members.
- Also, two stakeholder workshops were facilitated, including one with patient and families with lived experiences. Participants also included clinical specialists, nursing staff, primary care physicians, allied health professionals, diagnostic professionals, family and social services, health visitors, and the non-profit sector.

This work combined, led to five main challenges and 17 opportunities for improvement being identified for the current state Chronic Kidney Disease Integrated Care Pathway.

At this time, I invite Dr. Topham to share with you the key findings and recommendations of the Working Group, after which I will discuss the next phase of work for this care pathway.

DR. TOPHAM COMMENTS

Thank-you Dr. Topham.

I, too, would like to thank the members of the Working Group and all our stakeholders who were willing to share their time, expertise, and experiences. Your efforts in producing this first phase of work not only provides a high-level roadmap for the next phase – implementing solutions to improve care for chronic kidney disease - but it also sets the tone for what is possible when we work collectively behind a common vision – a stronger health system that is easier to navigate, provides better health outcomes and is accessible and affordable to all.

While the barriers to care for chronic kidney disease that Dr. Topham just spoke about are not insignificant, many are addressable. It is important to note, as you have heard me say before, the Government cannot implement all the recommendations. Nor can they be implemented by stakeholders working in silos. It will take the continued, collective participation and commitment of all stakeholders, including the Government, health service providers, insurers, people with lived experience, and residents alike, to continue to lean into this work. The heavy lifting begins now.

Phase II will include actioning the prioritised recommendations. The Phase II Working Group is in the process of being formed so that we can commence work on implementing the key recommendations that are included in the final report.

To download the Chronic Kidney Disease Integrated Care Pathway Report, go to www.healthstrategy.bm/latestupdates.

Implementing universal health coverage and strengthening our overall health system requires a collective effort. The Government cannot do this work in isolation, nor should it.

In closing, let me reiterate the Ministry of Health’s commitment to driving the implementation of universal health coverage and providing access to affordable, quality healthcare to all Bermuda residents in partnership with, and including all, health stakeholders. Success begins by having a willingness to acknowledge existing challenges and then being proactive, thoughtful, and holistic in the approach to implementing solutions. This Phase I work provides the foundation for doing just that – creating a more effective pathway for preventing chronic kidney disease, improving the health outcomes and quality of life of those living with the disease, and highlighting concerns around affordability and access to treatment as we continue our work on strengthening Bermuda’s health system overall.

Thank-you.

ABOUT THE BERMUDA HEALTH STRATEGY AND UNIVERSAL HEALTH COVERAGE:

The Bermuda Health Strategy 2022 – 2027 (“The Health Strategy”) was developed as the next phase of work for the Ministry of Health as it works to achieve the vision of *“healthy people in healthy communities”*. The Health Strategy

provides the frame to shift Bermuda’s health system as it works to implement Universal Health Coverage and shift to a more people-centred approach to healthcare that focuses on delivering better care that meets the needs of individuals and families today and into the future. Bermuda’s Universal Health Coverage programme is a multi-year, multi-phased initiative that seeks to ensure *“all people have equitable access to needed informative, preventive, curative, rehabilitative and palliative essential health services, of sufficient quality to be effective, while also ensuring that people do not suffer financial hardship when paying for these services and critical medicines.”*

Media Contact:

Kerry Judd

Cel: 441.705.3615

Email: kerry@newbeginnings.bm