

Table 1: The characteristics of multidisciplinary CKD clinics

Referral criteria to CKD clinic		
Referral criteria?	57/71	80.28%
eGFR cut off as part of the criteria?	35/57	61.40%
Management of patients nearing dialysis initiation		
Policy whereby all patients assessed for home dialysis	52/71	73.24%
All patients offered dialysis modality education?	71/71	100.00%
Dialysis modality education		
During clinics visits or through educational materials	29/71	40.85%
Group dialysis modality education (or combination)	42/71	59.15%
Decision to initiate dialysis made in conjunction with regular multidisciplinary team meetings	27/71	38.03%
Dedicated dialysis modality coordinator? *	23/71	32.39%
Do they see all patients who are approaching the need for dialysis?	18/23	78.26%

*though individual nurses may fulfill this role in some centers

Table 2: Multidisciplinary CKD clinic staff opinions for program improvement

Suggestions for improvement (overall themes)	
1	Request for more staff (or more time from existing staff) (nurses, nephrologists, experts, clerical staff, data leads, etc)
2	Need for more space
3	Need for more/improved/standardized teaching or educational aids/tools
4	Need for better CKD clinic processes (better flow of patient referral, standardized guidelines, decrease wait times, offer telehealth, offer clinical pathway, timely insertion of catheters, better communication, team model, etc)
5	Encourage home therapies, more dialysis options, support for dialysis for patients in rural communities , early identification of patients for home therapies, patient council, etc.
6	Early outreach/referral of patients, preventative programs