**Background**: Transplantation is considered the best treatment for people with end stage kidney disease providing the best quality of life. However, transplantation is a complex treatment and ensuring people truly have a good understanding of what is involved in this life long treatment, remains a challenge. To aid decision making and to prompt live donor referrals, all patients are actively encouraged to attend our large formal transplant seminars with family and friends.. This is supported by 1:1 clinical consultations and written literature. It was felt that both pre and post operative information was suitably provided, however, our transplant clinic pharmacist raised concerns that many of the new transplant patients had a poor understanding of what their post transplant treatment plan involved. Many patients reported a lack of knowledge regarding post operative medication, frequency of clinic visits and post operative requirements such as ureteric stent removal. This was causing heightened anxieties in the early weeks post transplant.

We concluded that patients predominantly focussed on activation on the waiting list and waiting for the transplant “call”. Assimilating what to expect after the transplant was lost.

**Aim**: To improve the provision of education and support for patients with focus on reinforcing information once active on the kidney transplant waiting list.

**Method:** A monthly patient information seminar was developed to target those who are newly active on the kidney transplant waiting list, including those hoping for a living donor transplant. The information format focuses on what to expect once they received the transplant “call”, the peri-operative stay and their follow up. The latter includes the post-transplant medication regimes and clinic appointments schedules with the aim of improving adherence to the medication regimen and long term follow up plan. Participants are encouraged to attend the seminar with family and friends for support. The new seminar structure has a multidisciplinary approach (Consultant Renal Nurse, CNS for Transplantation, the Transplant Clinic Pharmacist and a member of the medical team) and is delivered as small informal group sessions to aid interaction. This enables patient’s questions and concerns to be easily addressed. It allows the team to pick up on misunderstandings, provide reassurance and allay any anxieties about what to expect. We focus on embedding key take home messages.

**Results:** These seminars commenced in March 2016 and we widely advertised the dates to all recipients newly activated on the national waiting list via our nursing and medical colleagues. A simple questionnaire was used to gather feedback. At 12 months the feedback analysis reported that 95% of attendees found the session to be generally excellent and very helpful.

Comments included: “informative and re-assuring as [waiting] it’s an emotional time", others found it “particularly easy to ask questions due to the small number of people” and “helpful to meet the staff who would look after me after my transplant”. Areas not covered were also highlighted as a concern for patients, such as financial help; allowing us to signpost people for further support. The main limitation for the first year was the low numbers of attendees; with an average of 6 recipients plus family members attending (range 3 to 14 per session). We have since changed the format and now send formal invitations to better reach our target audience.

**Future**: We recognise that refresher transplant recipient seminars for those listed > 1 year would be helpful and we will look to develop these. We will also plan to take the seminars on the road to the satellite dialysis units as we have found that many are unable to attend the sessions due to their dialysis commitments.