

Think kidneys CCG Acute Kidney Injury Quarterly Report

for NHS SOUTH WEST LONDON CCG (E38000245)-January 2020 to March 2020

The quarterly rate of AKI alerts in this CCG is 2,077 per million population

The confidence that this is an accurate estimate of the real rate of AKI alerts is AMBER

How to interpret the confidence rating

In respect of quarterly AKI rates all CCG are categorised as:

GREEN - where we are confident that all the labs serving this CCG population provided data for this period. This means that all labs in the CCG, and all labs in neighbouring CCGs, provided data. This is likely to be the real rate of AKI alerts in the CCG population during these three months.

AMBER - where only some of the labs serving this CCG population provided data for this period. The labs within the CCG provided data but not all the neighbouring CCG labs. Data for people living towards the boundaries of the CCG may well be missing. This means that the score is likely to be an under-estimation of the real rate of AKI alerts in the CCG population during these three months.

RED - where we have little or no data from the labs covering the CCG population for this period. This is because at least one of the labs within the CCG has not provided data. This means that the score is likely to be a significant under-estimation of the real rate of AKI alerts in the CCG population during this quarter.

How is this report different to earlier reports

Since the last CCG report there have been several changes to NHS structures – and in particular a significant reduction in the overall number of CCG in England. At the same time, we have changed the frequency of the AKI reports that we issue from quarterly to twice per year. We have made this change to give a small increase in the time laboratories have to report the warning-test-scores – because this small concession significantly increases the completeness of the data-returns and the overall number of CCGs for which we have GREEN level of confidence in the AKI rate.

With the increase in completeness of reporting, and the reduction in the number of CCG we now have an opportunity to modify the way we assess CCG population coverage. We hope to use this new method along with an explanation on how it differs to the current method in time for the next report.

How does NHS South West London CCG compare to others?



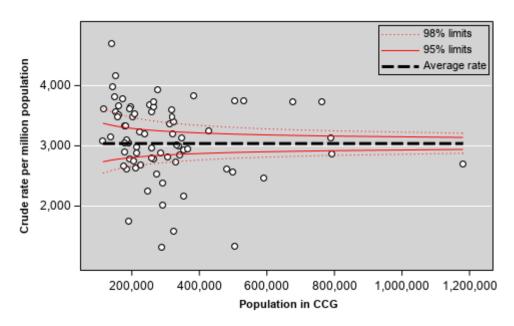
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In the three months covered by this report 168 of 190 pathology labs in England have provided sufficient data on AKI to be included in this report.

75 CCGs have an AKI rate confidence of GREEN. The range of rate of AKI alerts in these CCGs is shown below:

Figure 1. AKI rate for covered CCGs (January 2020 - March 2020)



What does this quarter's result say about the AKI rates for NHS South West London and how can we move a CCG that is RED/AMBER to GREEN?

Look at the list of labs which are required to enable reporting an AKI rate. In March 2015 NHS England issued a Patient Safety Alert requiring all labs to submit data on AKI to the UK Renal Registry (UKRR). Please contact your local labs directly if they are not reporting.



What can we say about mortality associated with AKI in England as a whole?

Over the last twelve months (January 2020 - March 2020) there have been 625,000 AKI episodes reported to the UK Renal Registry.

Using all the AKI alerts submitted in the last 12 months the overall age and sex adjusted thirty-day mortality is 15.8% and is higher with increased AKI stage.

Table 1. Thirty day crude and adjusted mortality for age and sex (January 2020 - March 2020)

AKI stage	N	Crude mortality (%)	Adjusted for age and sex (%)
1	436,089	12.41	11.04
2	104,418	26.36	23.25
3	87,269	29.38	26.89
Total*	627,776	17.09	15.77

^{*}The total number of episodes is lower than the total number of AKI episodes that have been reported to the UKRR because of missing data in the mortality adjustment



How to improve AKI reporting in NHS South West London if not GREEN?

These are the laboratories that need to send data to the UKRR to report an AKI rate for this CCG in order for the AKI confidence to be GREEN.

Table 2. Laboratories within the CCG

Home laboratories	Submitting data	
Name	Code	
KINGSTON HOSPITAL LABORATORY	692K0	Yes
MAYDAY UNIVERSITY HOSPITAL	692S0	Yes
LABORATORY		
ST HELIER PATHOLOGY	69750	Yes
ST GEORGE'S HOSPITAL	697N0	Yes

Table 3. Laboratories in the neighbouring CCG

Neighbouring		Submitting	
CCG's	Laboratories		data
	Name	Code	
E38000070	HAMMERSMITH HOSPITAL	691X0	Yes
	LABORATORY		
	CHARING CROSS LABORATORY	69Z02	Yes
E38000084	WEST MIDDLESEX UNIVERSITY	695Y0	Yes
	LABORATORY		
	CHELSEA & WESTMINSTER	690X0	Yes
	HOSPITAL LABORATORY		
	ST MARY'S HOSPITAL LABORATORY	69550	Yes
E38000202	THE ROYAL MARSDEN HOSPITAL	696L0	Yes
	PATHOLOGY SERVICES		
	ROYAL BROMPTON HOSPITAL	69850	Yes but poor
	LABORATORY MEDICINE DEPT		data quality
E38000244	ST THOMAS'S HOSPITAL	691W0	No
	LABORATORY		
	KING'S COLLEGE HOSPITAL	692H0	Yes
	LABORATORY		
	LEWISHAM HOSPITAL LABORATORY	692N0	Yes
	GUY'S HOSPITAL	696V0	No
E38000246	ASHFORD & ST PETER'S HOSPITAL	69050	No
	LABORATORY		
	EAST SURREY HOSPITAL	691F0	Yes
	LABORATORY		



	ROYAL SURREY COUNTY HOSPITAL LABORATORY	694B0	No
Neighbouring CCG's	Laboratories		Submitting data
	Name	Code	
E38000246	EPSOM HOSPITAL LABORATORIES	69760	Yes



Notes

What is Acute Kidney Injury (AKI)?

AKI is the term for a rapid decline in kidney function over a period of hours or days. It is commonly associated with acute illness especially in people who are more vulnerable because of their age or long-term conditions. As this report shows people with AKI have a significantly increased risk of dying. A significant proportion do not recover normal kidney function afterwards and develop chronic kidney disease. Several places in the UK are implementing strategies to tackle AKI.

What can I do if my CCG is AMBER or RED?

Look at the list of labs which are required to enable reporting an AKI rate. In March 2015 NHS England issued a Patient Safety Alert requiring all labs to submit data on AKI to the UKRR. Please contact your local labs directly if they are not reporting.

How is the rate of AKI alerts calculated?

An AKI alert is counted if it is received for person with a postcode inside the CCG boundary during the three-month reporting period. All stages of AKI alert are included, but during an episode of AKI only the first alert is counted. A person is considered to have a new episode of AKI (and included in the count/ rate) if they have never had a pervious alert, or it is more than 30 days since their last AKI alert. The three-month rate is calculated using the resident CCG population.

For further information about AKI please visit www.thinkkidneys.org