KQuIP/UKRR Regional Day Yorkshire & Humber 6th July 2017

National Coal Mining Museum, Wakefield Session B – 13.30-17.30





6th July 2017 - 13.30-14.30

Quality Improvement – theory and practice

Maureen McGeorge and John Bibby, Improvement Academy - Yorkshire &

Humber AHSN





6th July 2017 - 14.30-14.45

Quality Improvement – the patients' perspective

Fiona Loud, Kidney Care UK





Kidney Services quality improvement day Wakefield, July 2017

Fiona Loud,

Policy Director – Kidney Care UK

Formerly known as British Kidney Patient Association

Our mission, since 1975

"To improve the care and daily quality of life for everyone affected by kidney disease, no matter who they are, where

they live or the stage of kidney disease"





What does Quality Improvement mean to people with kidney failure?

- A TV quiz show starring Stephen Fry?
- Absolutely no idea?
- A nice idea but no more?
- Something they do in other places?
- Not interesting or relevant to me?....especially compared with the fear of the unknown

What are patients talking about?

- Venous access, buttonholing, rope-laddering
- Starting HD, starting PD, home hd
- Hoping for a transplant
- Getting the call for a transplant
- Emotions, depression, anxiety
- Peer support
- Current affairs, food....



We are often talking about the same thing - Mutual ambitions

- 1. Awareness & Identification reduce cardiovascular risk
- 2. Prevent or delay disease progression
- 3. Inform self-management
- 4. Deliver person-centred care
- 5. Prevent and treat AKI
- 6. Preparation & choice
- 7, 8 & 9. Improve outcomes from transplantation, equity, increase numbers & live well with a transplant
- 10 & 11. Deliver better dialysis consistently & support patients to live well
- 12. Improve the care of children and young people
- 13. Access to & awareness of the multi-professional team
- 14. Treat and support people with rare diseases
- 15. Research produce a national strategy
- 16. Conservative care choice & multi-professional support







KIDNEY HEALTH: DELIVERING EXCELLENCE A progress report for 2017























What we found Variation

A need to drive up quality & consistency of care

- Increase public awareness of kidney disease
- Better identification of patients with kidney disease in primary care
- Promote person-centred care, including experience from patient viewpoint and self-management
- Increase the number of transplants and deliver more equitable provision
- Reduce the wide variation in access to home dialysis therapies and self-care





















An Ambition for Quality Improvement

Added for 2017: The kidney community promotes, encourages and supports continuous quality improvement and sharing of best practice by all healthcare workers to deliver better, safer, less variable and more efficient care.

'Patients have been fully integrated as advisors at all stages of the Kidney Health programme. As a result, the outcomes and ambitions are based on improving the burden of treatment and not only looking at kidney disease itself. I'm particularly pleased that Ambition 17 has been added which focuses on improving quality and safety of patient care.'

Tracey Rose, patient member of Kidney Health Partnership Board





















The Kidney Health work has nurtured improved quality of healthcare for patients with renal disease by championing the potential of a collaborative approach between professionals and patients.'

Dr Richard Baker: Chair, NHS England Clinical Reference Group for Renal Services, Consultant Nephrologist, Leeds Teaching Hospitals Trust

https://www.kidneycareuk.org/news-andcampaigns/news/kidney-health-delivering-excellence/



















Patient reported experience survey – BKPA & UK Renal Registry

- How the renal team treat you
- Access to the renal team
- Support
- Communication
- Patient Information
- · Diet and fluid intake
- Tests
- Sharing decisions about your care —
- Privacy and dignity
- · Scheduling and planning
- Transport
- The environment
- Your overall experience

39/52 units submitted returns

Reasonably positive but areas marked with an arrow came out lowest



Home dialysis

- NICE recommended up to 15% on home HD back in 2002 yet only 4% uptake
- PD is falling back, at 6%
- Registry figures show variation in availability of choices
- With 29,000 on dialysis and just 5,000 on the transplant list dialysis choices are absolutely vital for patients
- Ripe for quality improvement

Home dialysis roadshows

- For kidney units aiming to increase uptake, with capability to support patient demand
- 2 x pilots, PDSA approach
- 4 more completed, 3 more in pipeline
- Supported & developed by Kidney Care UK
 - 2 x Campervans with HD and PD kit & expert patient advocates dialysing in situ
 - Industry Partners
 - Information stands
 - Food & drink available all day





Margery and Earnest





Transplantation: Abi & Shashi both need kidneys



http://www.mirror.co.uk/news/uknews/transplant-would-change-lives-nine-10712821



Vascular access: Renal registry patient council

- A group of patient advisers, externally recruited to the council
- Meeting quarterly
- Selected vascular access as topic for study by UKRR multidisciplinary fellowship



What can QI mean to patients and their families?

- Many patients are aware that not all units are the same
- A focus on those areas which are of vital importance
- Person-centred care supporting their choices, in their unit
- Working with the multi-disciplinary team
- Not a one-off initiative



What does Quality Improvement mean to patients?

WE ARE ALL A LITTLE BROKEN.
BUT THE LAST TIME I CHECKED,
BROKEN CRAYONS STILL COLOR
—— *— THE SAME. —— *—



Thank you

- www.kidneycareuk.org
- https://www.renalreg.org/study-groups/the-ukrenal-registry-patient-council-study-group/
- https://www.kidneycareuk.org/news-andcampaigns/news/kidney-health-deliveringexcellence/

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541424

Tweet: @KidneyCareUK



6th July 2017 - 15.00-16.45

Quality Improvement – the national KQuIP Projects QI Breakout Sessions

MAGIC – Vascular Access – Katie Fielding

Home Therapies and SHARE-HD – Louise Wells & Martin Wilkie

Transplant First – Richard Baker & Kerry Tomlinson





6th July 2017 - 14.45-15.00

Refreshments





6th July 2017 - 16.45-17.20

Feedback from the breakout sessions





6th July 2017 - 17.20-17.30

Closing statement and next steps

John Stoves and Louise Wells



