FROM AUDIT TO QUALITY IMPROVEMENT:
PUTTING DATA INTO ACTION

Ron Cullen, Chief Executive, Renal Association

The UK Renal Registry’s mission statement, “Putting Data into Action” aims to improve patient care by national audit and supporting research, innovation and quality improvement (QI). As the quality of the Registry’s data has improved, so has the desire to make a positive difference to kidney patients with the data we collect, and to ensure “quality assurance and quality improvement is built into all that we do”.

The QI programmes, delivered through the Registry’s QI facilitators in partnership with the renal community, have been working to deliver on this vision. New innovations have been introduced - the AKI master patient index, an increasing presence of patient focussed measures both as outcome measures and as tools to support a person centred approach to care, and the Kidney Quality Improvement Partnership which has been rolled out over the past 12 months across five regions and is about to move into the South West and Paediatric renal community this year. This is all part of the challenge and call to action for the public and professionals, within and beyond the renal community to Think Kidneys.

Read the full blog from Ron Cullen

Did you or your kidney unit take part in the 2017 Kidney Patient Reported Experience Measure (PREM)?

Your unit’s data from the 2017 Kidney PREM is accessible from the Registry on request.

Find out how to apply for your unit data and use it to improve kidney patient experience in the UK here.
ACUTE KIDNEY INJURY (AKI)

The AKI team were busy at UK Kidney Week 2018 sharing the news of the first national report on measuring the rate of AKI in England — Reporting the rate of Acute Kidney Injury within England.

We had an AKI session, featuring talks by James Medcalf (pictured left), who spoke about the Registry Master Patient Index, and Nick Selby who presented findings from the Tackling AKI project, now featured on the Think Kidneys website.

“Fluid prescribers need to think outside the box! Too little fluid...causes dehydration, confusion...increased risk of death and...AKI”

Read the latest iSpyAKI blog here

A NEW E-LEARNING PLATFORM FOR THE RENAL COMMUNITY — COMING SOON

The Renal Association Education and Training committee has established a sub-group to develop an exciting e-Learning platform for the renal community. Find out more.

WELCOME TO THE NEW KQUIP CO-CHAIRS

We welcome Paul Cockwell and Sharlene Greenwood as the new co-chairs of the Kidney Quality Improvement Partnership. Read their bios here.

KQUIP IS RECRUITING! JOIN THE KQUIP FACULTY

We are looking for people with interest or expertise in improving care for people with kidney disease through facilitation, project management, quality improvement or leadership to join the Faculty of the Kidney Quality Improvement Partnership. Find out more and apply here.
Improving AV Fistula and Grafts Cannulation Practice, Katie Fielding (MAGIC lead)

The session started with an overview of the KQuIP programme, followed by an insight into the up and coming BRS VA and VASBI cannulation recommendations. Katie concluded by giving the key elements of the KQuIP national QI project, MAGIC. The session was interactive, with the audience being asked—“what makes good and bad cannulation practice?” Delegates gave excellent responses with lots of good ideas shared.

Transplant First: Increasing Pre-emptive listing and living donor kidney transplantation, Kerry Tomlinson and Helen Spooner (Transplant First co-leads)

The session began with the audience divided into two groups; one looking at pre-emptive donor listings and the other at live donor listings. There were two breakout sessions: the first asked both groups to consider the barriers and the second session explored possible solutions. There was diversity in the audience which definitely added to the value of the discussions.

Home Therapies—Dialysis at Yours: Life Fulfilled – Day Life, Richard Fluck (Day Life lead)

Richard provided an update of the current national picture of home therapies to a well attended and interactive session, and took attendees through the methodology of the Day Life project.

KQuIP will be open for applications for a second region to take on the Home Therapies project Day Life in 2019. Contact james.mccann@renalregistry.nhs.uk for more information.

“The CKD patient-reported experience measure - generating lots of data for quality improvement”

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Rachel Gair presenting on Associations Between Patient Activation, Patient Characteristics and Patient Outcomes (above centre) and David Wellsted presenting on the 2017 Patient Reported Experience Measure (above right) at UK Kidney Week 2018.

You can explore all the TP-CKD 2018 abstracts that were presented at UK Kidney Week 2018 here.
TRANSFORMING PARTICIPATION IN CHRONIC KIDNEY DISEASE

It was encouraging so many patients attended and presented at UK Kidney Week. There was an emphasis on person centred care and patient reported measures.

Living with kidney disease has a profound impact on a person’s quality of life, symptom burden and how they experience their care, however collection of these outcomes has not been embedded in renal practice.

The TP-CKD programme is continuing to develop this conversation to ensure that it is seen as an important and central part of care delivery.

Read more on the TP-CKD programme by visiting the Think Kidneys website here.

AGNES’S STORY – HELPING OTHERS CAN HELP YOU TOO

Peer Support is one of the interventions suggested in the interventions toolkit, developed by patients and clinicians from the TP-CKD programme. These tools and interventions focus on developing a person’s skill and confidence to engage in self-management of their kidney disease.

The TP-CKD Intervention Pyramid: Tools that can help patients, family members and staff to use clinical appointments more effectively and enhance engagement of patients in their own care.

Agnes, a peer supporter at King’s College Hospital, London, described her experience in a blog written for the TP-CKD programme:

“My main reason for being a peer supporter was really just to help other patients. When you are sick and you go for dialysis, you don’t talk. You want to say things but you don’t as there is no-one to talk to about how you feel and whether it is going to be ok. After experiencing this myself I thought, why don’t I go and help others, talk to them and make sure they are not depressed or confused?...It has been such a great thing for me, and for the people I have met – I would encourage anyone thinking about it to get involved.”

You can read Agnes’s full story here.

TP2: A NEW PROGRAMME

With support from NHS England and the UK Renal Registry, a new QI programme —TP2— will continue to collect and explore how to embed patient reported measures into kidney care delivery, and how this can support a more personalised approach with patients and healthcare professionals working together as equals.

More information will be available via our website and in the next newsletter issue coming soon.
THE THINK KIDNEYS QUALITY IMPROVEMENT TEAM

“Our ambition is to ensure that people at risk of, or living with kidney disease are able to live their best life”

Rachel Gair
Julie Slevin
Leeanne Lockley
Catherine Stannard
James McCann
Teresa Jane-Wallace
Beth Carter-Crosby

UPCOMING EVENTS

We attend and organise events to highlight and share the work of the registry’s QI programmes. Here’s a few for your diaries:

◊ 4th October 2018: KQuIP South West Regional Day (Taunton)
◊ 8th—9th October 2018: Critical Care Nephrology (London)
◊ 9th November 2018: KQuIP/BAPN Paediatric QI Day (Birmingham)
◊ 7th December 2018: National PROMS Summit 2018 (London)
◊ 27th—29th March 2019: International Forum on Quality and Safety in Health Care (Glasgow)
◊ 3rd—5th June 2019: UK Kidney Week 2019 (Brighton)

INTERESTING READS

We’ve selected a few recent articles we enjoyed reading - follow the links to read them in full:

◊ A modern NHS requires collaborative leadership with patients as leaders at decision-making tables, David Gilbert, patient director, Sussex MSK Partnership (Central)
◊ How should we judge the NHS at 70? Dr Jennifer Dixon, Chief Executive, The Health Foundation
◊ Priorities for the plan: The long term NHS plan and beyond: views from leaders in charities and voice organisations

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THE UK RENAL REGISTRY

The UK Renal Registry is part of the Renal Association, a not for profit organisation registered with the Charity Commission (Registered in England No. 2229663).

We are recognised as having one of the very few high quality clinical databases open to requests from researchers. The UKRR collects, analyses and reports on data from 71 adult and 13 paediatric renal centres.

The sources of information (data and reports) held by the UKRR are a shared resource and are used to develop further research into kidney disease and improve the quality of care for renal patients.

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www.thinkkidneys.nhs.uk