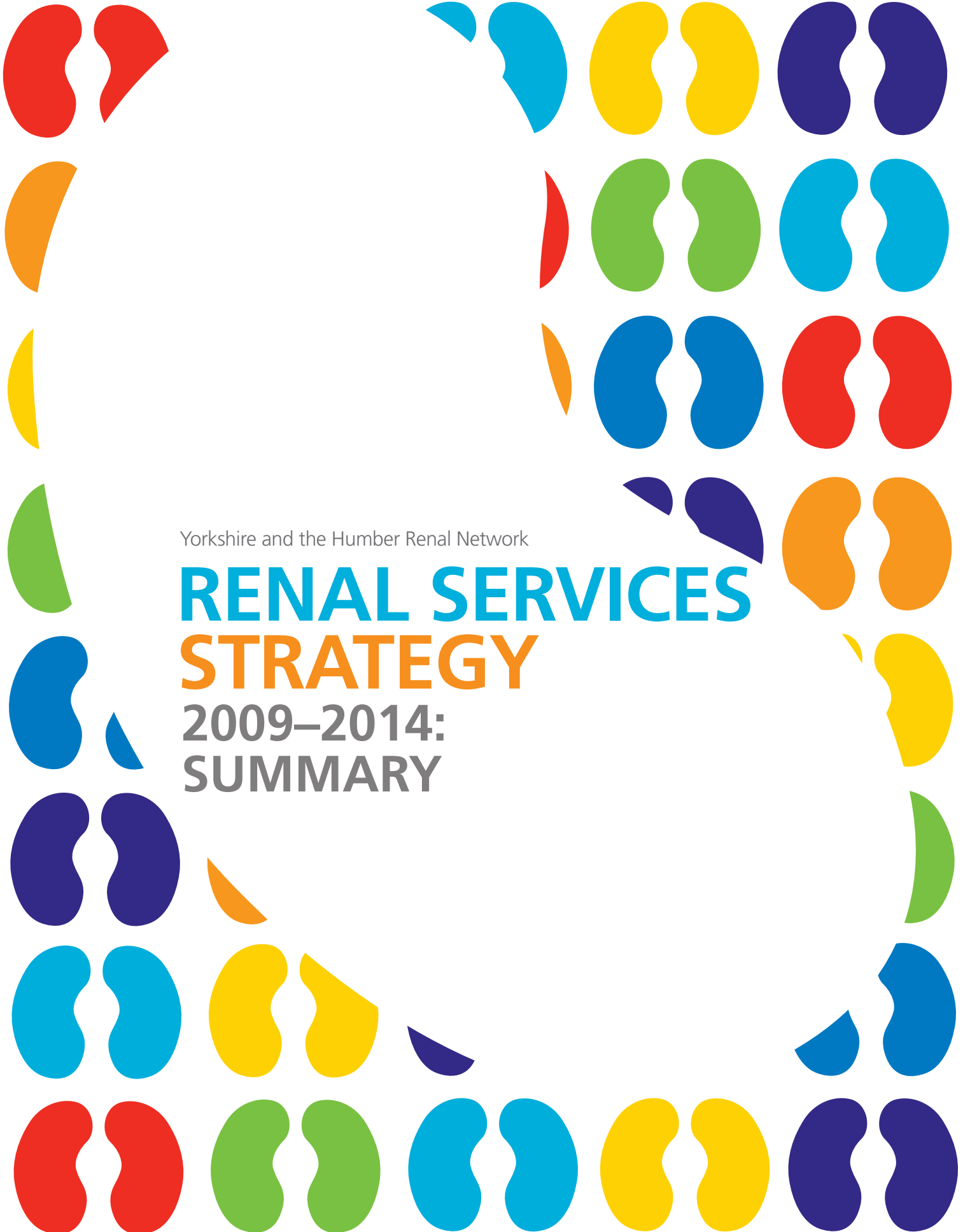


Yorkshire and the Humber Renal Network

RENAL SERVICES STRATEGY

2009–2014:
SUMMARY



OVERVIEW

The National Service Framework for Renal Services provides the vision for kidney services centred on the needs of each patient and forms the benchmark against which the Yorkshire and the Humber Renal Network will develop services. This strategy is an important step in ensuring that Yorkshire and the Humber delivers renal services that exceed these standards.

The Yorkshire and the Humber Renal Network has responsibility for the entire patient pathway and makes a commitment to **reduce the development of kidney disease**, through ensuring high coverage of prevention and disease management interventions across primary and secondary care, to **ensure early identification and referral** of patients likely to need Renal Replacement Therapy, and adequate preparation and choice of treatment type and to **ensure timely availability and access** to Renal Replacement Therapy.

These aims will be achieved through the delivery of a comprehensive five year work plan which will be supported by the development of clear standards, performance monitoring mechanisms and commissioning frameworks. This will be underpinned by robust information, and incentives for quality improvement, and strengthened by clinical leadership and patient and carer engagement.

Renal Services, along with services in the NHS as a whole, face challenging times and difficult decisions may be required. The existence of the Yorkshire and the Humber Renal Network means that a collaborative, coordinated and consistent approach to planning and delivering services can be developed within anticipated constraints.

The Yorkshire and the Humber Renal Network Strategy for Renal Services 2009-2014 clarifies roles and responsibilities and provides a comprehensive backdrop against which to address all the challenges and opportunities facing renal services over the coming years

The full version of the document, including the full five-year work plan, can be found at: www.yhscg.nhs.uk/renal-network.htm

WHAT ARE THE AIMS OF THE YORKSHIRE AND THE HUMBER RENAL STRATEGY?

This Yorkshire and the Humber Renal Network Strategy outlines the aims of the Network and sets out a 5-year work plan.

The aims of the Yorkshire and the Humber Renal Network are:

- To reduce the development of kidney disease, through ensuring high coverage of disease management interventions across primary and secondary care.
- To ensure early identification and referral of patients likely to need Renal Replacement Therapy, and adequate preparation and choice of treatment type.
- To ensure timely availability and access to Renal Replacement Therapy.

WHAT IS THE NATIONAL CONTEXT?

The National Service Framework (NSF) for Renal Services ¹, published in 2004 and 2005, sets out a 10 year plan for the improvement of renal services and included comprehensive quality markers across the pathway of renal disease. The NSF thus represents the benchmark against which the Yorkshire and the Humber Renal Network will develop services.

In addition, there is a range of associated guidance and quality standards the Network will aim to meet. These include relevant National Institute of Clinical Excellence (NICE) guidance ², Quality and Outcomes Framework ³ (QOF) standards, 18 week Commissioning Pathway ⁴, Putting Prevention First ⁵, the Organ Donation Taskforce recommendations ⁶ and the End of Life Care in Advanced Kidney Disease Framework ⁷.

Treating patients with Acute Kidney Injury (AKI) especially those with disease so severe as to require dialysis support is a key service offered by specialist renal units. The recently published results of a National Confidential Enquiry into Patient Outcome and Death (NCEPOD) ⁸ review of the care of patients who died in hospital with a primary diagnosis of AKI indicated that only 50% of patients were deemed to have received an overall standard of care that was considered good. This was particularly striking for those who developed AKI post admission where only one third received good care.

THE YORKSHIRE AND THE HUMBER RENAL NETWORK

A Network should engage all stakeholders, including clinical and other staff, commissioners, managers and patients. It can provide a structure for service planning and delivery, promote seamless care and support staff by targeting resources where they are most needed.

The Yorkshire and the Humber Renal Network comprises of a single Renal Strategy Group for the whole of the Yorkshire & the Humber region, supported by three Local Implementation Groups, which reflect and support local commissioning, provider and patient population groups and relationships.



WHAT IS COMMISSIONING?

'Commissioning' is the strategic planning and resource allocation function of the NHS, mostly done by Primary Care Trusts (PCTs). It involves buying in services (purchasing) from a range of health service providers (including GPs, dentists, and community pharmacists, NHS and private hospitals, and voluntary sector organisations) to meet the health needs of local people, and monitoring how well they are being delivered.

The 'Commissioning Cycle' is detailed in the diagram below:

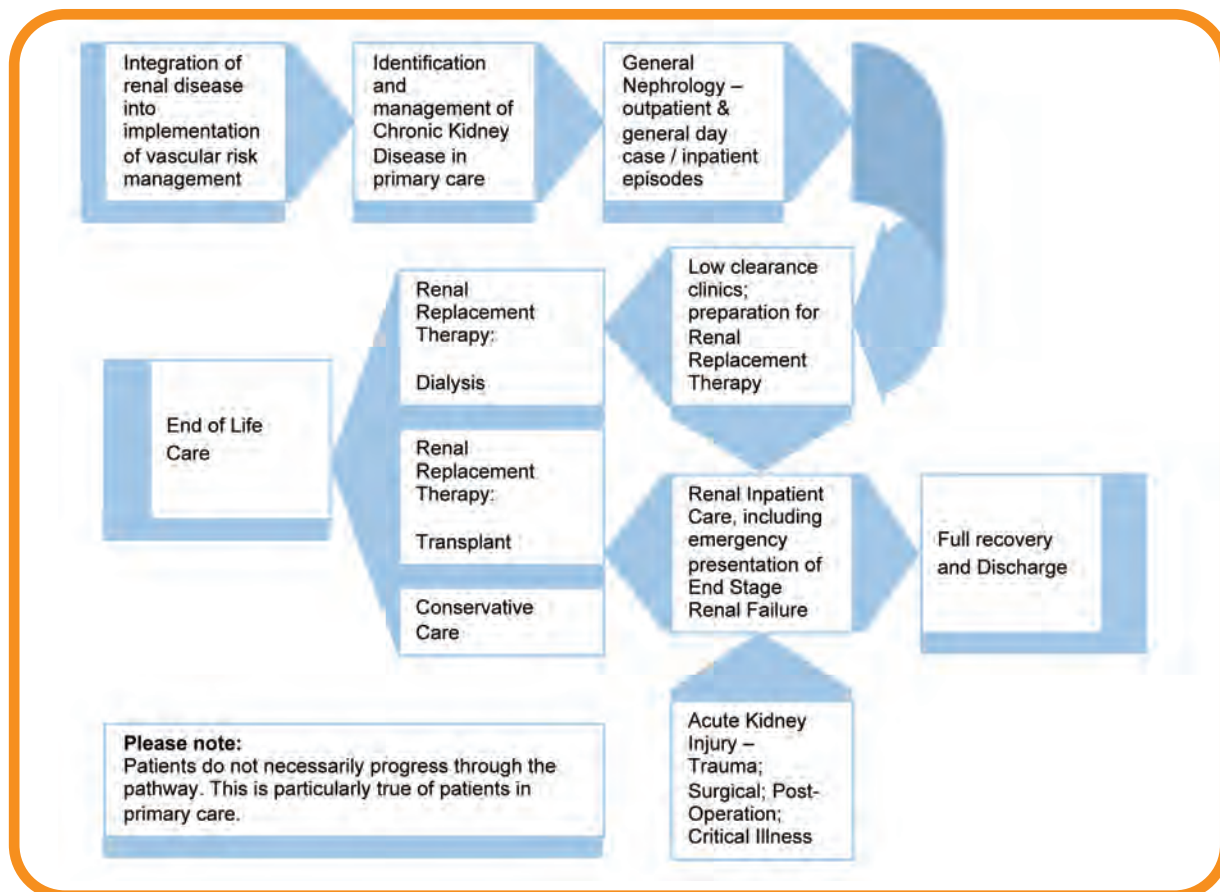


WHAT ARE THE ROLES AND RESPONSIBILITIES?

The majority of patients with renal disease are principally cared for in primary care. Primary Care Trusts (PCTs) are responsible for planning and commissioning these renal services. However, there are significant advantages to some aspects of the renal pathway being planned across more than one PCT boundary. Therefore, certain elements of renal care, namely renal replacement therapy (dialysis and transplantation), are planned collaboratively by PCTs working at a regional level. The Yorkshire and the Humber Specialised Commissioning Group (SCG) has responsibility for commissioning these areas. The Yorkshire & the Humber SCG is a permanent Joint Committee of, and acts on behalf of, all 14 PCTs in the Yorkshire & the Humber Strategic Health Authority area.

The remit of the Yorkshire and the Humber Renal Network covers all aspects of the renal patient pathway (see next section for an approximate illustration of the pathway). The Yorkshire and the Humber Renal Strategy Group, and the Local Implementation Groups aligned sub regionally, and local arrangements in PCTs, need to provide expert advice to PCTs on commissioning renal services.

THE RENAL PATIENT PATHWAY



WHAT IS THE HEALTH NEED?

Health, wellbeing and quality of life are influenced by a complexity of different factors, for example, where we live, our social and economic status and the way we live our lives.

Information on the health needs of patients with renal disease is continually being updated. The most recent comprehensive health needs assessment ⁹ in this region was undertaken in 2008 prior to the formation of the Yorkshire and the Humber Renal Strategy Group. This was undertaken to inform the development of commissioning arrangements for renal services through the Specialised Commissioning Group. It gives a snapshot of key issues in renal disease. Further work undertaken since this time will be published in due course.

Table of the estimated, diagnosed and undiagnosed Chronic Kidney Disease population in Yorkshire and the Humber (2009-10):

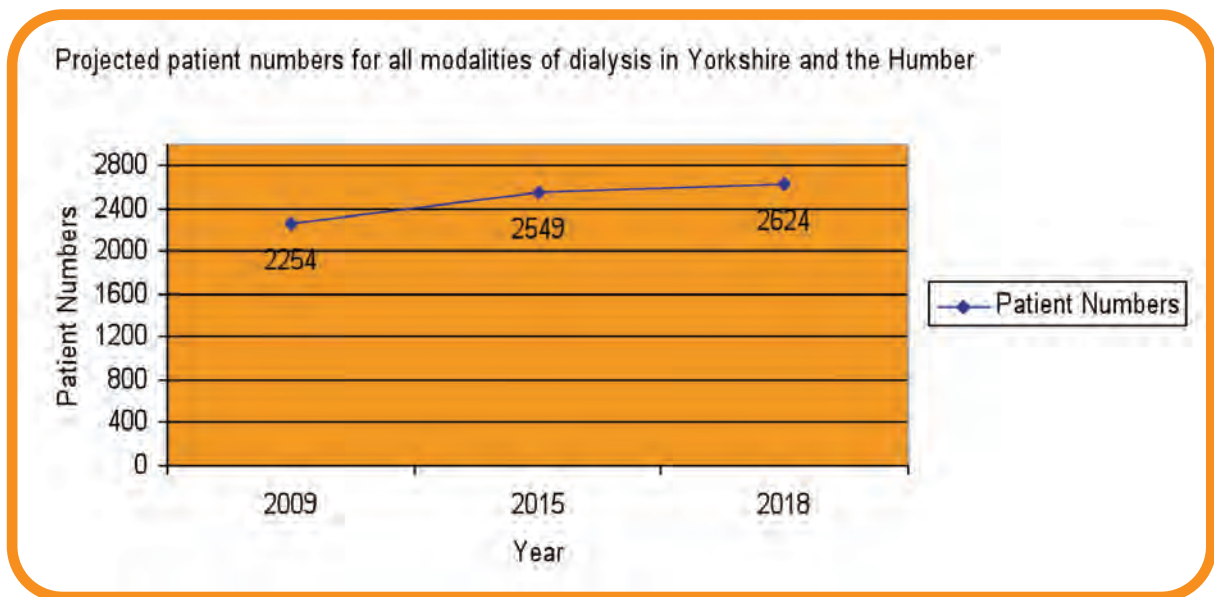
Yorkshire & the Humber	Current Position
Number of People registered with a GP	5,382,498
Estimated number of people with Chronic Kidney Disease	358,488 ^a (7%)
Number of People diagnosed with Chronic Kidney Disease	168,506 ^b (47%)
Estimated undiagnosed population	189,982 (53%)

Source: a: Estimate taken from NEOERICA model (2009)

b: NHS Information Centre QOF Extract for Yorkshire & the Humber (2007-08)

YORKSHIRE AND THE HUMBER RENAL NETWORK PREDICTED FUTURE DEMAND

Current Yorkshire and the Humber models predict that over the next 9 years (up to 2018) the region will have an additional 370 patients in the prevalent population requiring dialysis (Source: current RRT demand model). It should be noted that the figures stated in this section are subject to review and may change. Further work is being done on future demand modelling currently. The detail of this should not delay planning for increasing the capacity in dialysis services, particularly haemodialysis.



HOW ARE PATIENTS AND CARERS INVOLVED IN THE YORKSHIRE AND THE HUMBER RENAL NETWORK?

Renal services benefit from having a well established culture of patient involvement. Patients and carers stay in contact with their services for many years and develop strong relationships with the clinical teams and they therefore have valuable insights to share.

Renal patients and carers bring a unique perspective which no professional can express and their views are invaluable in ensuring that services remain focused on patient needs.

The Yorkshire and the Humber Renal Network aims to achieve active patient and carer representation and will support involvement in a number of ways:

- Developing an ongoing programme of patient & carer involvement
- Patient representation at all relevant Renal Strategy Group and Local Implementation Group meetings
- Developing an information pack and programme of support for patient and carer representatives
- Establishing links between the Renal Network and the local patient groups/ Kidney Patient Associations
- Maintaining consistent access and availability of appropriate information to facilitate an informed and planned care pathway
- Actively working with the National Kidney Federation regarding initiatives to support patient involvement.

Consideration will be given to ensuring that patients from different backgrounds and communities are involved and that all patients and carers are represented.

The Yorkshire and the Humber Renal Network is committed to involving patients and the public, including Overview and Scrutiny Committees so that their views are taken into consideration during the planning, improvement, monitoring and evaluation of all renal services across the region.

WHAT ARE THE PRIORITIES?

Priority Area	Objective
Acute Kidney Injury & Critical Care	To ensure a systematic approach to the planning for more effective management of acute admissions across the region so that both provider trusts and PCTs are clear how best to manage acute admissions in addition to chronic care
Anaemia Management	To develop alternative models for the provision of IV Iron in primary care and support the implementation of best practice in relation to anaemia management across primary care in the region
Capacity Planning for Dialysis	To ensure an appropriate mix of home haemodialysis, satellite and main unit haemodialysis and peritoneal dialysis capacity appropriate to clinical and geographical need to meet current and future requirements and ensure care closer to home.
Conservative Care	To ensure full supportive treatment for those with advanced kidney failure who, in conjunction with carers & the clinical team, decide against dialysis – Linked to the End of Life Care in Advanced Kidney Disease Framework
Emergency Planning	To ensure that services for patients requiring renal replacement therapy have robust business and service continuity plans in place
End of Life Care	To develop a Yorkshire & Humber wide approach to End of Life Care for Advanced Kidney Disease, based on the End of Life Care in Advanced Kidney Disease Framework
Health Needs Assessment	To ensure that service development and commissioning arrangements are informed by regular health needs assessment
Home-Based Therapies & Self-Care	To increase the number of patients undertaking home-based therapies (HD & PD) and self-care, ensuring that all patients are offered these options, where clinically appropriate
National Service Framework Milestones	To ensure progress against the National Service Framework (NSF) milestones and identify gaps and areas for development
Patient & Public Engagement & Involvement	To ensure patient & carer involvement is integral to the Renal Network and that there is patient & carer input into commissioning, performance management and service improvement arrangements.
Pre Dialysis Year	To ensure consistent and equitable renal care across the region, including timely and appropriate access to services
Primary Care Capacity, Quality & Expertise	To develop the capacity and capability of primary care in the identification and management of CKD and to ensure effective communication between primary and secondary care.
Supporting Young Adults with Kidney Disease	To review existing provision in place to support young adults with kidney disease and develop approaches to support both the transition from paediatric services and presentation in young adulthood
Transplant Capacity	To ensure equity of service across the region and to increase transplantation where possible within local control
Transport	To ensure that there is equitable, reliable and effective patient transport for renal haemodialysis patients
Workforce Planning	To ensure that there is sufficient capacity within the workforce to deliver the required standards of renal services

HOW WILL THE STRATEGY BE IMPLEMENTED AND MONITORED?

The Yorkshire and the Humber Renal Network is responsible for the implementation of this Strategy. A component of this work is the establishment of a single commissioning framework (including performance management and quality) for Renal Services in the region.

In addition, the delivery of the Strategy will be supported by:

- Clearer Standards and Performance Monitoring
- Incentives
- Information
- Clinical Leadership and Support
- Five-Year Work Plan

The Yorkshire and the Humber Renal Strategy and progress against the work plan will be reviewed on annual basis.



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