

Introducing the Think Kidneys programme

Overview presentation

Version 1.0

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Think Kidneys is a national programme led by
NHS England in partnership with UK Renal Registry

The primary aim of Think Kidneys is to ensure avoidable harm related to acute kidney injury is prevented in all care settings

Acute Kidney Injury

In the UK up to **100,000** deaths each year in hospital are associated with acute kidney injury. Up to **30%** could be prevented with the right care and treatment

NCEPOD
Adding Insult to Injury
2009



One in five people admitted to hospital in the UK each year as an emergency has acute kidney injury

Wang et al
2012



Just one in two people know their kidneys make urine

Ipsos MORI survey
July 2014



About 65% of acute kidney injury starts in the community

Selby et al
2012

Design principles for the Think Kidneys programme

- Global
- Primary, secondary and social care
- Multi-professional, with patients and across specialties
- Inclusive
- Measurement underpins evidence
 - Simplify data flows
 - Use to evidence change
- Strategy not tactics

Think Kidneys programme – what it is not about

❶ Bad doctors or nurses

- AKI is a patient safety issue and it is recognised that clinicians need the support of robust systems, education, risk assessment, improved diagnosis and reliable interventions

❷ It is not a failing of the NHS

- This is a global healthcare issue
- The NHS will have the first national system to measure the problem and to improve outcomes for patients

Think Kidneys' programme objectives

The primary aim of the National Programme is to ensure avoidable harm related to AKI is prevented in all care settings.

It will aim to do this by ensuring that:

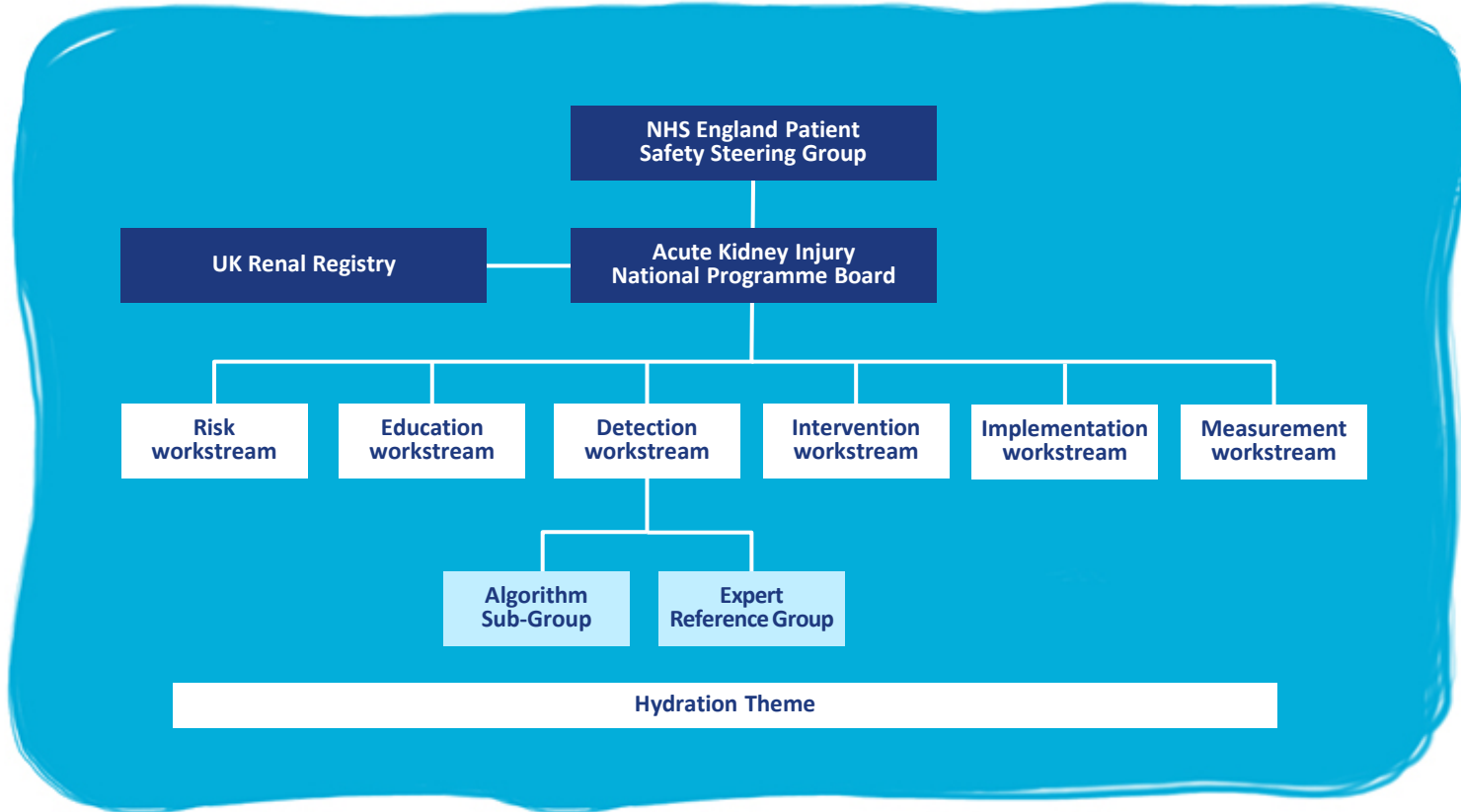
- A variety of tools and interventions are developed and implemented to support the prevention, early detection, treatment and enhanced recovery of patients with AKI
- Patients who develop AKI are appropriately managed to reduce further deterioration, long term disability and death
- Appropriate education and training programmes are developed for all health professionals based on best available evidence.

Think Kidneys programme objectives

- Ensuring that commissioners, health care professionals and managers are aware of the importance and risks of AKI, and that appropriate local strategies to reduce the burden of AKI are developed.
- Developing a national registry and audit for AKI leading to an improvement strategy on a national and local basis to reduce variation in care.
- Involving patients and the public in understanding the risk of AKI and preventative measures through education and appropriate access to personal information.
- Supporting the development of a commissioning structure to allow local service configuration to provide quality care to individuals with AKI.
- Identifying the research agenda for AKI (including basic science, clinical care and service delivery).

Think Kidneys programme ambition

- This transformation will lead to well informed, proactive multi-professional teams, supporting patients, carers and the public. They will understand risk, prevention, recognition and recovery for their patients and for their organisations and be provided with appropriate tools and resources. Patients and their carers will understand their personal risk, be empowered to understand when to seek support and be provided with appropriate access.
- At organisational and national level agreed data will be collected and continuous national audit will be embedded into the learning process. Research and quality improvement for AKI will be established and robust.
- As AKI is a global health care issue, the NHS has the opportunity to lead on improving outcomes, providing systems and evidence for improvement in healthcare.



Think Kidneys' Programme Board members

Richard Fluck (Chair)

National Clinical Director – Renal, NHS England

Caroline Ashley

Renal Pharmacists Group & Co-Chair Intervention Workstream

Tom Blakeman

GP and Co-Chair of the Intervention Workstream

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Consultant, Leicester Hospital and Health Education England

Fergus Caskey

North Bristol Trust and Chair of the Measurement Workstream

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NHS Improving Quality

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North Bristol Trust and Chair of the Intervention Workstream

Michael Wise

Lay Representative

Lynn Woods

South Derbyshire CCG and Co-Chair of the Implementation Workstream

How we work

- Making use of expertise and enthusiasm from a wide range of professionals in the teams
- Co-production approach
- Learning by including lay representatives in all our work
- Understanding patient experience
- Making use of technology

Think Kidneys Detection workstream

Priorities

- Algorithm agreed and in place
- Education re algorithm
- Communicating with LIMS providers
- Messaging for primary care and the impact

Transmitting AKI Warning Stage Data to the UK Renal Registry Best Practice Guidance

Julie Slevin
Think Kidneys Programme
Development Officer

George Swinnerton
Senior Programming Lead
UK Renal Registry

Publication date 19.01.2015

Think Kidneys Risk workstream

Priorities

- ☉ Identify at risk groups
- ☉ Gain an understanding of at risk communities from existing data stores
- ☉ Identify events that mean AKI is more likely to happen
- ☉ Develop a matrix around the risk and the event
- ☉ Identify risk tools in use – are they fit for purpose or are new ones commissioned

Think Kidneys Education workstream

Priorities

- Identify educational tools in use – are they fit for purpose or are new ones commissioned
- Educational materials for health professionals particularly primary care on what AKI is and what steps to take including hospitalisation or not
- Educational materials for patients and carers on what AKI is and how to manage condition and any reoccurrences
- Endorsement of existing tools in use
- Develop a website
- Develop a publicity campaign to raise awareness

Think Kidneys Intervention workstream

Priorities

- Produce a range of Care Bundles designed around such things as medicines management, hydration etc
- Develop a decision tree for what action to be taken by healthcare professionals ie hydration, medicines management, tests and retesting, refer to specialists etc
- Consider good practice guidance around communicating AKI to GP with next steps, suggested follow ups, medicines review etc.

Intervention workstream – what we are doing next

What	When
Guidance document – how to transmit AKI Warning Stage data to the UK Renal Registry	End of Jan 2015
Produce 1 st report of AKI data captured	April 2015
Develop linkages with other data sets	June 2015

Think Kidneys Measurement workstream

Priorities

- Demographic information demonstrating the size of the AKI problem – need to define national AKI ‘message’ content
- Establish data items and linkage for ‘Registry’
- Demographic information demonstrating size of at risk group
- Measure adherence of acute sector to care bundles
- Consider downstream consequences for AKI

Measurement workstream – what we are doing next

What	When
Guidance document – how to transmit AKI Warning Stage data to the UK Renal Registry	End of Jan 2015
Produce 1 st report of AKI data captured	April 2015
Develop linkages with other data sets	June 2015

Think Kidneys Implementation workstream

Priorities

- Develop commissioning tools – service specifications, CQUINs, enhanced service agreements
- Provide evidence that tools work
- Collect baseline data from the pilot projects

Implementation workstream – what we are doing next

What	When
Signing up additional CCGS to the AKI Pathfinder Project	End of Jan 2015
Produce a Lessons learned by Southern Derbyshire CCG	March 2015
Analysing baseline data from Southern Derbyshire	April 2015

Think Kidneys Programme – Key deliverables

- Primary Care package
- Secondary Care package
- Measurement
- Commissioning levers
- Healthcare System Change
- Public Campaign

Think Kidneys Programme – Key milestones

AKI Programme	September 2014 - April 2016					
	Sep-Mar 2014/15	Apr-15	May-Sep 2015	Oct-15	Nov-Mar 2015/16	Apr-16
DETECTION WORKSTREAM		Implement Secondary Care AKI Warning Test		Test Primary Care Data in shadow form		Launch AKI Warning test to Primary Care
EDUCATION WORKSTREAM	Develop Secondary Care education packages including pilot testing	Launch Secondary Care education packages	Develop Primary Care education packages including pilot testing	Test Education packages for Primary Care	Refine Primary Care Education packages	Launch Primary Care education packages
						Evaluation of Primary Care packages
						Launch Public/Patient Campaign
INTERVENTION WORKSTREAM	Develop Secondary Care package including development of tools and pilot testing	Launch Secondary Care package	Develop Primary Care package including development of tools and pilot testing	Test Primary Care package and tools	Refine Primary Care package and tools	Launch Primary Care package
RISK WORKSTREAM	Develop Secondary Care Risk Assessment tools and pilot tools	Launch Secondary Care Risk Assessment Tools	Develop Primary Care Risk Assessment tools and pilot testing	Test Primary Care Risk Assessment tools and pilot testing	Refine Primary Care risk Assessment tools	Launch Primary Care Risk Assessment tools
MEASUREMENT WORKSTREAM		CCG Level report on initiation of Secondary Care AKI Warning Test	Design Quarterly Reports at CCG level for Primary Care	Commence Quarterly Reports at CCG Level based on shadow form results from Primary Care Data		Registry in place
			HQIP Proposal			Costed Business Case
						National Audit
						Formal quarterly reports at CCG level re uptake in primary care
IMPLEMENTATION WORKSTREAM	Development of Primary care Commissioning levers and tools					
	Development of Secondary Care Commissioning levers and tools					

Think Kidneys Programme – What have we achieved so far

- Established a Programme Board
- Recruited a Programme Manager
- Established 6 workstreams, identified and commenced work on workstream priorities
- Issued an NHS England Patient Safety Alert for the Detection of AKI in secondary care settings
- Agreed a brand for the programme – Think Kidneys
- Launched the Think Kidneys website

Think Kidneys Programme – What have we achieved so far

- Launch event for internal stakeholders
- Major event for healthcare professionals on educational resources required
- Educational event for Trusts who have not already implemented a detection system for acute kidney injury
- Published an Acute Kidney Injury Warning Algorithm Best Practice Guidance tool
- Commenced work on a secondary care package and an educational tools package, to be published March 2015
- Arranged a consultation event with primary care and commissioners March 2015

Think Kidneys Programme - Summary

- The NHS England AKI programme is well established
- It will deliver change in 2-3 years
- A national system of measurement will commence in summer 2014
- As part of the NHS England Patient Safety group it will aim to make the NHS the safest healthcare system in the world.

Contact Think Kidneys or find out more

Visit our website at www.thinkkidneys.nhs.uk

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