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Tuesday 31stth August 2023

Dear Colleague,

ACTION REQUESTED:

- 1. Be aware that the UKRR plans to publish a comparison of data completeness from kidney centres on the UKKA website in mid-October 2023. It will also be available for regional renal networks and NHS England.
- 2. Review the attached spreadsheet which describes the data items included in that assessment. We welcome feedback if you think it could be improved. The closing date for comments is the 30th of September 2023.
- 3. Review how your centre compares and discuss with your data manager any 'easy fixes' for example highlighting to your system supplier if an observation you collect is not being mapped to the UKRR return.
- 4. Consider planning with your business manager, trust, system supplier and renal network how to migrate to a daily UKRDC feed.

Background

There have been several attempts to compare how well individual kidney centres are at providing data to the UKRR, most recently as part of the individual GIRFT data packs circulated before their site visits in 2019.

Some items have always been important - for example knowing precisely who the data refers to (an accurate NHS number), and basic demographics for equity assessment. The treatment timeline has also always been critical to understand which treatment a patient starts with, or changes to, joins or leaves a centre. And when a patient dies.

Other indicators of a high-quality data return are newer - and the current priorities are more 'timely data' (really only practicable with a daily UKRDC feed), and information on patients with advanced CKD, dialysis and transplantation planning. These are the groups of patients where recent quality improvements have generally been focused.

The long-established and the 'new' are both reflected in the completeness measure - where there are scores for accurately identifying patients, reliable reporting of timelines, and for haemodialysis session records (for dialysis access in particular). It also incorporates whether your site includes patients with advanced CKD (stages 4 and 5 under your follow-up), is sending the data daily (the UKRDC feed), and includes information on future care planning (dialysis and transplant). These were selected because they are all used in a current quality measure (be that the specialised services quality dashboard, the RSTP dashboard, or the UKRR annual report).

If you would like to discuss ways that we could work together to improve the data quality from your centre please let us know. Sometimes it is very easy - just that an item you collect and thought you were sending is not mapped correctly to your data-return. Migration to a UKRDC feed would be more involved, but is fully supported by regional networks and most of the renal system suppliers now.

Kind regards,

James Medcalf, Medical Director of the UK Renal Registry