

# Enhancing care and saving lives of people with chronic kidney disease: learning from the project

## Key findings

The project worked with participating practices to:

- reduce the gap between observed and expected prevalence of patients with CKD by 50% by October 2012
- achieve a higher than 95% compliance with the CKD care bundle
- achieve NICE targets for systolic blood pressure in 80% of people on the CKD register
- increase the knowledge and confidence of primary care practitioners in managing people with CKD and facilitating self-management in those patients
- facilitate collaborative self-management in people with stage 3-5 CKD, developing and refining tools for self-management and evaluate the self-management programme from the perspective of patients and practitioners.

In total the care bundle was applied to 1,310 patients and, of these, 910 patients (69.3%) agreed to the self-management component of the intervention.

The intervention was applied to  $\ge 20\%$  of the registered CKD population in 14 practices,  $\ge 30\%$  in 10 practices and  $\ge 50\%$  in 5 practices.

The recorded prevalence of CKD in the 20 practices that completed the project was 4.1% ( $\pm 1.5\%$ ) at the start and 4.8% ( $\pm 1.6\%$ ) at the end.

The overall mean reliability for practices returning more than 6 months data was as follows: month one, 76%; month three, 87%; month six, 98%; month nine, 98%; month twelve, 100%.

## Successes

- For many practices the intervention is now embedded in day-to-day care, demonstrating that the intervention can be easily sustained within a practice's own capacity and developing expertise.
- Over 900 patients signed up to the self-management programme, 70% of the patients who have received the care bundle.
- Patients gained a better understanding of their disease and the actions they could take, such as life-style changes, that could help delay the progression of their condition. This was apparent from focus group discussions and reports from Practice Staff.

• The majority of practices are keen to carry on using the updated patient education booklet and DVD so they can inform their patients about CKD in an informative but sensitive manner.

# Challenges

- Implementation of the project was delayed by five months due to the need to seek ethical approval.
- It was harder to recruit and maintain engagement with GP practices than originally anticipated.
- Some GP practices costed their time in rolling out interventions in standard hours and were unwilling to participate unless the programme was cost neutral.
- In primary care there is a high degree of autonomy with many different structures, staffing levels and knowledge levels that all brought their own challenges.
- It was originally planned to approach practices through their Primary Care Trusts (PCTs). However, due to the limited influence of PCTs on their local practices, the team had to resort to approaching individual practices, involving the Primary Care Research Network and other networking activities to attract practices.
- Obtaining measurement data from the GP practices was sometimes difficult and there is a wide variation in the ability of practices to interrogate their data systems.
- During the project, the team discovered the bundle was only being implemented in a small number of patients within each practice, which would be unlikely to show demonstrable improvements at practice level. In order to achieve greater exposure to the bundle, the team then focused attention on four in-depth practices who agreed to target a greater number of patients.

#### Advice to others doing similar projects

- To obtain buy in from GP practices, it is necessary to have a sound business case as well as clear clinical advantages and outputs.
- Be aware that the financial implications of implementing an intervention, even if it is wholly or partially supported through national guidelines, will be factored in by many practices.
- Patient and service user representatives can play a critical role in persuading practices to participate and in developing the materials to support and subsequently sustain a project.
- Local champions are a critical resource if they are appropriately engaged.
- Be aware that sometimes senior support does not translate into activity. It is therefore essential to select champions who can directly influence practice participation.
- Where ethical approval has been gained seek the support of the UK Clinical Research Network whose funding can prove a valuable incentive to practice participation.
- Plan for 'sustainability' and 'generalisation' at the outset.

### Publications from this project

The full QI-CKD Trial have now been officially published in the leading journal <u>Kidney</u> <u>International.</u>

A <u>supplement in the Journal of Renal Care</u> contains details of various Health Foundationsupported renal initiatives. It is free to download and includes details of both the QI-CKD and ENABLE projects co-ordinated by Kidney Research UK.

The Kidney Research UK '*Package of Innovation (POI) for managing kidney disease in primary care*' has been developed by a team of practitioners and people with experiences of kidney disease and other chronic conditions. The resources within the Package are based on those that were used in a quality improvement project (ENABLE-CKD) carried out during 2010-2012 which was funded by The Health Foundation and managed by the charity. The project involved implementing a care bundle for chronic kidney disease in 26 GP Practices in England and Wales. The materials have now been updated following 2014 NICE Guidelines on the management of CKD (CG182) and Lipid modification (CG181).

The aim of the 'Package of Innovation' is to improve the quality of care of people with kidney disease in the community by helping the primary healthcare team to:

- Identify people who have kidney disease in their Practice.
- Improve their knowledge and management of kidney disease.
- Educate people about kidney disease.
- Facilitate self-management in people who have kidney disease.

The materials are freely available to download from the <u>Kidney Research UK resources</u> <u>webpage</u>.