

Renal Dialysis Quality Dashboard 2017/18



Indicator Reference Number	Domain	Theme	Measure	Rationale	Name of Indicator/ Description	Numerator	Denominator	Period Type	Frequency	Data Source Numerator	Data Source Denominator	Target	Interpretation Guidance	Notes	Reporting Periods			
															Q1	Q2	Q3	Q4
DIAL_01	Domain 1: Preventing people from dying prematurely Domain 5: Treating and caring for people in a safe environment and protecting them from avoidable harm.	Clinical Outcome	Peritonitis rate	Hospital renal teams minimising risks of Peritoneal Dialysis (PD).	Peritonitis rate in patients receiving Peritoneal Dialysis (PD).	Number of episodes of peritonitis in PD patients (an effluent cell count with white blood cells (WBC) >100/mL (after a dwell time of st 2 hr), with at least 50% polymorphonuclear neutrophilic cells, with peritonitis being the most likely cause) occurring during the quarter.	Number of patient days on PD.	Rolling Annual	Quarterly	(External Source Data) - UKRRR/From local renal unit audit data	(External Source Data) - UKRRR - Standard activity items for PbR data flow		Lower is better	Peritonitis rate is per 1000 patient days on Peritoneal Dialysis. 1. Peritonitis defined as: an effluent cell count with white blood cells (WBC) >100/mL (after a dwell time of st 2 hr), with at least 50% polymorphonuclear neutrophilic cells, with peritonitis being the most likely cause. 2. Excludes episodes where another cause. 3. Excludes relapsing peritonitis (infection with SAME organism) which should be counted as a single episode.	Jul 16 - Jun 17	Oct 16 - Sep 17	Jan 17 - Dec 17	Apr 17 - Mar 18
DIAL_03	Domain 1: Preventing people from dying prematurely Domain 5: Treating and caring for people in a safe environment and protecting them from avoidable harm.	Clinical Outcome	Rate of Staph Aureus bacteraemia	Hospital renal teams minimising risks of Haemodialysis (HD).	Rate of Staph Aureus bacteraemia in patients treated with chronic haemodialysis.	Number of episodes of Staph Aureus bacteraemia (A person from whose blood Staphylococcus aureus has been isolated and reported by a diagnostic microbiology laboratory in the absence of a positive blood culture with the same organism in the previous two weeks) occurring in chronic haemodialysis patients.	Number of patient days on HD.	Rolling Annual	Quarterly	(External Source Data) - UKRRR - From data routinely collected by national surveillance and locally linked to known chronic (prevalent is term used in renal registry) haemodialysis patients.	(External Source Data) - UKRRR - From data routinely collected and then reported to renal registry.		Lower is better	Rate of Staph Aureus bacteraemia per 1000 patient days on Haemodialysis. Numerator: Counts episodes of Staph Aureus bacteraemia in the year but excludes repeat positive blood cultures within 14 days of the index episode. The denominator (patient days on haemodialysis) calculated as the total number of patient days spent on haemodialysis, whether acute or chronic. e.g. 1 patient on HD for whole year = 365 days.	Jul 16 - Jun 17	Oct 16 - Sep 17	Jan 17 - Dec 17	Apr 17 - Mar 18
DIAL_04	Domain 2: Enhancing quality of life for people with long term conditions.	Clinical Process	Access to transplant listing	Hospital teams supporting transplantation.	Access to transplant listing.	For patients in denominator the number who had a decision recorded about suitability for transplant work up recorded at the time of starting chronic dialysis.	Number of patient starting dialysis who have been seen by the renal unit 90 or more days before the start of chronic dialysis.	Quarterly	Quarterly	(External Source Data) - UKRRR - From local renal unit audit data.	(External Source Data) - UKRRR - From data routinely collected and then reported to renal registry.		Higher is better		Apr 17 - Jun 17	Jul 17 - Sep 17	Oct 17 - Dec 17	Jan 18 - Mar 18

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															Q1	Q2	Q3	Q4
DIAL_05	Domain 4: Ensuring that people have a positive experience of care.	Process	Patient View uptake	This metric measures performance against the service specification - A06/S/a section 2.0. Providers are to ensure that patient health records and any other personal data relating to a patient's treatment are returned to the national Renal Patient View System for those patients who wish to participate in this system. This metric is a marker of patient involvement in their own care.	Percentage of renal patients receiving treatment with end stage kidney disease (dialysis and transplant) registered on the National Patient View System.	Number of renal patients receiving treatment with end stage kidney disease (dialysis and transplant) registered on the Patient View System.	Number of renal patients receiving treatment with end stage kidney disease (dialysis and transplant).	Quarterly	Quarterly	(External Source Data) - UKRR	(External Source Data) - UKRR		Higher is better		Apr 17 - Jun 17	Jul 17 - Sep 17	Oct 17 - Dec 17	Jan 18 - Mar 18
DIAL_06	Domain 4: Ensuring that people have a positive experience of care.	Process	Patient View usage	This metric measures performance against the service specification - A06/S/a section 2.0. Providers are to ensure that patient health records and any other personal data relating to a patient's treatment are returned to the national Renal Patient View System for those patients who wish to participate in this system. This metric is a marker of patient involvement in their own care.	Percentage of renal patients receiving treatment with end stage kidney disease (dialysis and transplant) registered on Patient View that have accessed the system within the last three months.	Number of renal patients receiving treatment with end stage kidney disease (dialysis and transplant) registered on Patient View that have accessed the system within the last three months.	Number of renal patients receiving treatment with end stage kidney disease (dialysis and transplant) registered on the Patient View System.	Quarterly	Quarterly	(External Source Data) - UKRR	(External Source Data) - UKRR		Neutral		Apr 17 - Jun 17	Jul 17 - Sep 17	Oct 17 - Dec 17	Jan 18 - Mar 18

Data collection has been approved by the Review of Central Returns - ROCR  
ROCR/OR/2230/001MAND