



Scottish Paediatric Renal Urology Network (SPRUN)

ANNUAL REPORT 2017/18

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Executive Summary

The Scottish Paediatric Renal and Urology Network (SPRUN) is a nationally designated Managed Clinical Network (MCN) that was established in 2004.

The network encompasses renal and urological disease in children and young people (usually up to 16 years of age), who require specialist input into their care.

The progress of the network work plan from 1st April 2017 to 31st March 2018 is highlighted in this report.

2017/18 achievements included:

- Engagement with SPRUN stakeholders through a series of site visits to discuss local service delivery and challenges and identify priorities for the network's future programme of work
- Development of a three year strategic work plan
- Development of a communication strategy for the network
- Delivering healthcare professional education and conducting a learning needs analysis to inform a network education strategy
- Designing and carrying out a range of audits and quality improvement projects to improve service delivery and patient care, for example work to improve ambulatory blood pressure monitoring, auditing varicella zoster vaccination in children with steroid sensitive nephrotic syndrome and improvements in creatinine measurement.
- Starting a rolling programme of guideline and pathway revision and development

SPRUN plans for the year ahead include:

- Engagement with a broader range of stakeholders, e.g. adult services and primary care
- Development of a network education strategy
- Delivery of a programme of renal / urology professional education
- Review / development of guidelines and pathways
- Continue existing audit / QI programme
- Support the development of Scottish continence services for children and young people

Introduction

The Scottish Paediatric Renal and Urology Network (SPRUN) is a nationally designated managed clinical network, established in 2004. The network encompasses renal and urological disease in children and young people up to 16 years old, who may require specialist intervention but who can also be managed locally. The Network facilitates the care of children and young people with renal disease via local teams delivering care close to home with information and intervention being provided, as necessary, by the specialist unit.

This report details the progress achieved by SPRUN in the period 1st April 2017 - 31st March 2018. A proposed work plan for 2018-19 is also included.

Paediatric renal and urology services provide care to children and young people (usually up to 16 years of age) from across Scotland who have kidney and bladder/urinary tract related health issues that require specialist input.

Tertiary paediatric nephrology services are based at the Royal Hospital for Children (RHC) in Glasgow, which also hosts related national services such as the nationally designated renal transplant service and the paediatric renal dialysis service. Each local renal service comprises a paediatrician with an interest in nephrology, as well as nursing and wider multidisciplinary support. The local teams are supported by a visiting paediatric nephrologist from the tertiary centre who attends regular joint clinics. Some renal patients are managed locally outwith the combined renal clinics.

Tertiary paediatric urology services are provided by three multidisciplinary teams in Scotland: Aberdeen, Edinburgh and Glasgow. They include Paediatric Urologists and Urology Specialist Nurses at each tertiary centre. The Paediatric Urology teams in Scotland work closely together as a network and hold regular 'bladder meetings' to discuss cases. All three centres provide outreach to local centres with satellite clinics and close communication to support the care of patients locally as much as possible.

Aim/ Purpose of the Network

The purpose of the network is to facilitate clinical and other improvements in paediatric renal and urology disorders through delivery of objectives set by the National Specialist Services Committee (NSSC) for NHS Boards and SGHSCD within the national commissioning process.

Report against Work Plan

During 2017/18 the capacity of the network to develop and progress its work programme was constrained due to staffing challenges in key clinical services, which in turn had an effect on the clinicians' ability to support the network's objectives. As a result the network's key areas of work were focussed on a narrower range of activities than would ordinarily be the case. The key priorities for the network in 2017/18 included:

a. Communication and Engagement

(1) Local visits

A need had been identified for the network to refresh its long-term strategic priorities and its engagement with network stakeholders. A series of ten local visits was undertaken by the SPRUN

core team (Lead Clinician, Programme Manager and Programme Support Officer) between 20 October 2017 and 17 November 2017 to:

- Understand current local service provision and local challenges
- Learn from network stakeholders across Scotland what their main priorities were for the network to address over the next 3 – 5 years.

This updated the network's understanding of local service provision for renal and urology patients, what the main challenges are for local services and what the role for the network may be going forward to best support services in addressing these challenges. The main requirements emerging from these discussions were:

- (a) Network engagement with a wider range of stakeholders, including greater involvement of patients and families
- (b) Provision of ongoing education for healthcare professionals, including non-specialists such as staff in general paediatric services
- (c) Developing and implementing renal and urology related best practice guidance and standardised approaches across Scotland
- (d) Improving referral pathways and providing greater clarity around the patient journey
- (e) Facilitating better clinical communication and data management
- (f) Supporting the development of a cohesive national approach to managing continence issues in Scottish children
- (g) Better use of data to understand service quality and driving improvements
- (h) Improved support for young people throughout the transition into adult services

The information gathered at the local visits was subsequently used to define a strategic work plan for the network for the next three years (Appendix 1).

(2) Communication Strategy

The network's Communication Strategy was revised and approved by the SPRUN Steering Group in March 2018. The document describes how SPRUN intends to ensure that all its stakeholders are kept informed, receive relevant key messages in an appropriate manner and have a voice in the network. The strategy is available on the SPRUN website:

<http://www.sprun.scot.nhs.uk/wp-content/uploads/sites/22/2018/04/2018-03-SPRUN-Comms-Strat.pdf>

(3) Patient/Family Engagement

The network undertook a range of activities to ensure that patient and family views were integral to SPRUN's work. This included:

- A patient and family survey to explore what they would find useful in information videos on transplants, dialysis and CKD. Patient/family feedback will inform the development of a suite of videos in 2018/19.
- Development of a patient survey about their experience of ambulatory blood pressure monitoring (ABPM), as part of a quality improvement project on ABPM in Scotland (see page 8 for more detail on the project). The questionnaire was developed with input from Kidney Kids Scotland and is due to be rolled out as a prospective patient experience audit in early



2018/19. This will involve patients recording feedback about their experience of ABPM in real-time while they are undergoing the investigation.

- Planning for future patient and family engagement activities in partnership with Kidney Kids Scotland to ensure that network engagement initiatives are realistic and dovetail with similar work already undertaken by third sector partners. Immediate plans include SPRUN representation at forthcoming Kidney Kids Scotland family days and local initiatives in DGHs around “what matters to you” day in June 2018.

(4) SPRUN Branding



SPRUN worked closely with the NSS Communications team to develop a new visual identity for the network, within the overall brand of NHSScotland, that will be used on SPRUN publications and the website. The new visual identity and colour scheme is as below:

Scottish Paediatric Renal and Urology Network

(5) SPRUN Newsletter

To improve routine communication with the full range of its stakeholders, SPRUN decided to re-establish a regular newsletter, starting in spring 2018. Updates are expected to be issued as email news bulletins (and on the SPRUN website) three to four times per year.

b. Strategic Planning

A key part of the 2017/18 SPRUN work programme was the development of a renewed strategic plan for the network. This was largely informed by the aforementioned local visits, ensuring that the long-term work priorities of the network appropriately reflect the needs of stakeholders across Scotland. The full proposed three-year work plan is included in appendix 1.

c. Support Evidence Based Best Practice

Historically, services within the network have followed clinical guidelines developed in the tertiary centre in Glasgow. The network recognised the need to update the majority of the existing guidelines and agreed a rolling programme of work to review and where necessary revise them over the coming years. This work started with a multi-disciplinary review of the Nephrotic Syndrome guideline, which is expected to conclude in 2018/19. Following discussion at the local visits around better information on referrals and patient pathways, this review will include the development of pathways to sit alongside the clinical guideline.

d. Developing Capability for Renal and Urology Care in Scotland by Delivering Professional Education

(1) Multi-disciplinary Professional Education

SPRUN held its annual multi disciplinary educational event in Glasgow in March 2018. The programme focussed on nephrotic syndrome and hypertension. The event was attended by 25 delegates (including 5 via videoconference).

Delegate feedback about the event was positive, as summarised in figure 1 below.

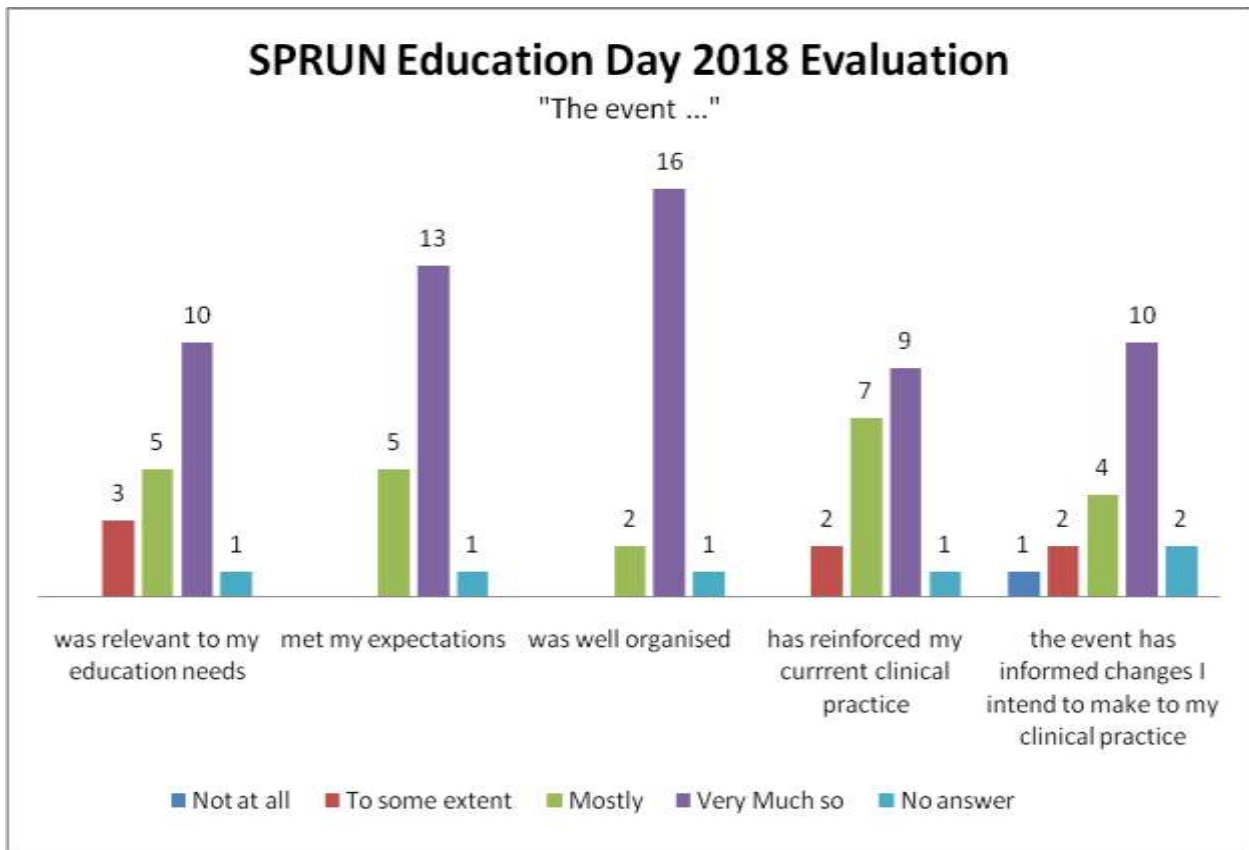


Fig. 1: SPRUN Multi-disciplinary Education Day – Evaluation

To reach a wider audience the presentations were recorded with a view to making them available on the SPRUN website as a podcast (the podcast has not yet been published to allow information governance questions to be clarified).

Delegates indicated a number of areas where they intended to change their clinical practice as a result of attending the event. The network will follow up on actual changes in practice as part of future education event evaluations.

In addition to the annual event, the network facilitated a range of other educational events including regular continuing professional development sessions delivered within the tertiary centre in Glasgow and multi regional continuing medical education for nephrologists in Scotland, Northern England and Northern Ireland.

(2) Education Strategy

A learning needs analysis was conducted by the network to review provision of multi-disciplinary education by the network and how it could be improved to best meet the needs of all stakeholders. Information gathering concluded at the end of March 2018 and findings will be utilised to develop an education strategy for the network in 2018/19.

e. Data Collection and Audit to Monitor and Improve Quality of Care

(1) Data Collection / Systems

Clinical data on paediatric renal patients is recorded on the Strathclyde Electronic Renal Patient Record (SERPR) when they attend tertiary services and some joint renal clinics. However, negotiations are ongoing to roll out SERPR more widely. Progress has recently been made in NHS Grampian and contact has also been made with NHS Tayside.

In order to have greater clarity about data capture of renal patients that are seen in local services and who would not ordinarily be recorded on SERPR, the network started an audit to identify other data systems used in local areas. This is expected to report early in 2018/19.

(2) Varicella Zoster Audit

Children with steroid sensitive nephrotic syndrome (SSNS) are at risk of becoming seriously unwell if they contract chickenpox whilst immunosuppressed. Effective vaccination is therefore of even greater importance in that cohort and blood tests to confirm the presence of varicella zoster antibodies are indicated. An audit was undertaken using SERPR data (i.e. patients in areas that do not use SERPR were not included). Detailed audit results are summarised in figures 2a and 2b.

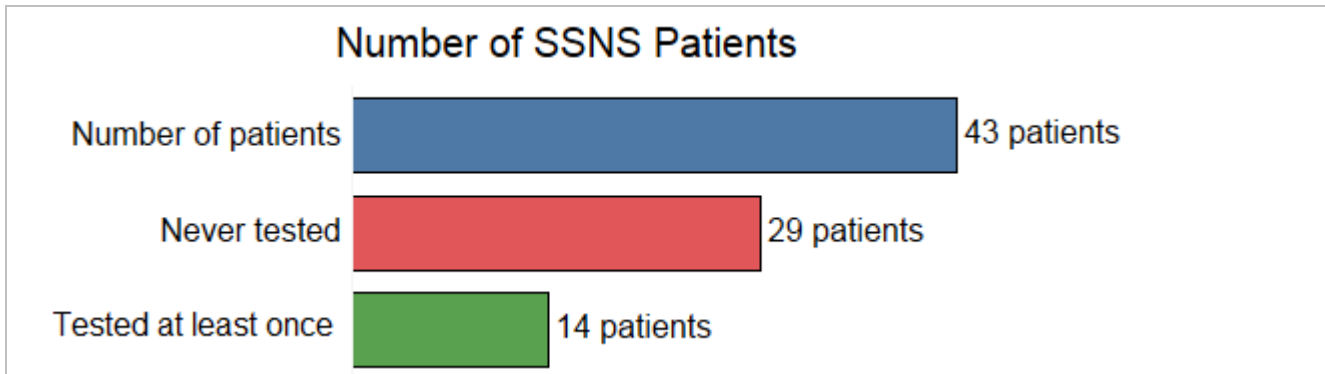


Figure 2a: Number of Patients in Varicella Zoster Testing in Nephrotic Syndrome Audit

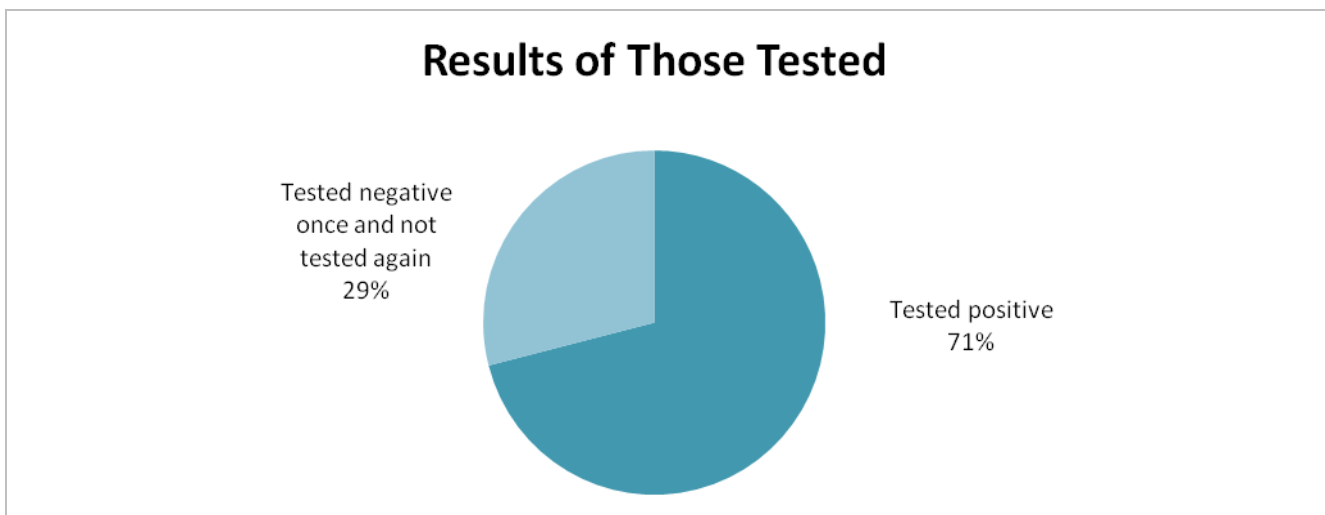


Figure 2b: Results in 14 Patients Tested for Varicella Zoster Antibodies

Results suggest that these blood tests might not be performed as often as is required, with a majority of children in the audit having no record of being tested and some cases not being re-tested when the first test did not show the presence of antibodies. However, the audit results may also indicate shortcomings in data capture and not accurately reflect clinical practice. Further work is needed to verify the data and clarify the reasons behind the audit results, and if required, identify appropriate measures for improving the monitoring of varicella antibodies in this cohort.

(3) Transition Audit

The network designed an audit to understand to what extent young adults who had recently transitioned were disengaged in their care, using (non-)attendance at adult renal outpatient clinics as a measure of engagement. Work is ongoing to identify appropriate data sources and the audit is due to be carried out in quarter one of 2018/19.

f. Measurable improvement in renal and urology care through effective continuous quality improvement (CQI)

SPRUN started a number of initiatives in 2017/18 designed to improve the quality of care using continuous quality improvement approaches. These are:

(1) Ambulatory Blood Pressure Monitoring (ABPM)

There is variation across Scotland in the use of ABPM, both in terms of the selection of patients for ABPM and how it is performed. The ABPM project aim is to standardise ABPM use in Scotland, ensuring that it is used appropriately in relevant patients and that it is performed to a high standard that yields valid results that can be used to inform management decisions. To date, a baseline audit of current ABPM provision has been undertaken and a patient experience survey was designed for roll out in May / June 2018. Work in 2018/19 will focus on developing guidance and education on the practical aspects of ABPM before re-auditing ABPM service provision.

(2) Creatinine testing

Historically, there has been variation in how different biochemistry laboratories measure creatinine levels. In children, there are clinical advantages to using the enzymatic method and work is now ongoing to roll this out Scotland wide. Within the biochemistry laboratories the best opportunity for introducing such a change is when equipment contracts are renewed routinely. NHS Tayside have recently changed to an enzymatic test, and discussions are ongoing to schedule changes in other areas.

(3) Virtual clinics

A pilot project was delivered in NHS Lanarkshire to explore the feasibility and potential benefits of delivering dietetic consultations remotely using videoconferencing technology. The initial approach was to use Jabber videoconferencing but this had to be abandoned for practical reasons around patient access to Jabber at home. NHS Lanarkshire subsequently started a process of adopting Attend Anywhere for remote consultation, creating an opportunity for running the pilot using this technology. One PDSA cycle was completed successfully for a remote dietetic assessment via Attend Anywhere with a further four patients expected to be appointed in the next PDSA cycle.

Plans for the Year Ahead

The main priorities for SPRUN in 2018/19 are as follows:

- Engagement with a broader range of stakeholders
- Development of a network education strategy
- Delivery of a programme of renal / urology professional education
- Review / development of guidelines and pathways
- Continue existing audit / QI programme
- Support the development of Scottish continence services for children and young people

The full proposed work plan is included on page 15 of this report.

Network Governance

The network is overseen by a multi-disciplinary Steering Group (please see appendix 2 for membership details). The network lead clinician is Dr Heather Maxwell, Paediatric Nephrologist in Glasgow, who took up the role in January 2017.

Risks or Issues

Access to data continues to be challenging for the network. Through the service data manager in the West of Scotland, SERPR data is available to the network for audit purposes but as stated on page 5 this system does not currently cover the whole of Scotland. While efforts have been made to expand the availability of SERPR across Scotland, progress has been slow.

It should also be noted that IT support for clinical service delivery – especially with regards to data sharing across health board boundaries, which is essential for effective tertiary service outreach – remains an issue that should be looked at strategically.

Stakeholder feedback during the local visits strongly suggested that the existing remit of the network as a renal and urology network was correct. However, while this view was clearly shared among stakeholders in local services, views among tertiary urologists were more mixed regarding the perceived value of SPRUN from a urology perspective. As such, engagement of all relevant parties in the network, in particular with a view to delivering on urology related work (SPRUN's work programme in previous had been focussed largely on renal rather than urology issues), may be challenging.

Staffing challenges in the tertiary renal service in Glasgow are also an area of concern. This affects nursing and psychology staffing in particular and to a lesser extent medical staff. The tertiary service is a core component of Scottish paediatric renal service provision overall and any pressures in the tertiary service have an impact on the wider network. This also affects SPRUN itself if tertiary service staff are less able to contribute to SPRUN due to clinical commitments.

Detailed Description of Progress over Reporting Period

Objective Number	Smart Objective	Linked Dimensions of Quality	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31/03/2018	Anticipated Outcome	RAGB status
2017-01	<p>Ensure that patients' and families' views influence the work of the network through:</p> <ul style="list-style-type: none"> - the development of a patient engagement strategy designed in partnership with patients and families to reflect their preferred engagement methods 	1	Oct 2017 – Mar 2018	<p>Carsten Mandt, Linda Watson, Heather Maxwell, Sheena Dunsmore</p>	<p>Patient / family engagement included in draft communication and engagement strategy – practical engagement activities (surveys, focus groups, attendance at family days) agreed in partnership with Kidney Kids Scotland</p>	<p>The views of patients/ families and what is important to them are reflected in the work plans and strategic direction of SPRUN</p>	B
2017-02	<p>The network will design and deliver a programme of education that meets the needs of multidisciplinary staff delivering paediatric renal and urology services by:</p> <ul style="list-style-type: none"> - undertaking a learning needs analysis to inform 	2, 3, 4, 5	Oct 2017 – Mar 2018	<p>Carsten Mandt, Ihab Shaheen, Boma Lee</p>	<p>Two education leads identified.</p> <p>SPRUN education day on 9 Mar 2018.</p> <p>Learning needs analysis conducted to inform an education strategy for SPRUN (strategy itself to be agreed in 2018/19).</p>	<p>Multidisciplinary staff delivering paediatric renal and urology services have increased knowledge/ confidence</p>	B

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Objective Number	Smart Objective	Linked Dimensions of Quality	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31/03/2018	Anticipated Outcome	RAGB status
	the development of an education strategy - delivering a multidisciplinary education day						
2017-03	The network will work to reduce variation in the measurement of blood pressure by: - scoping existing practice in different areas - developing an Investigation and First Line Management Guideline - identifying key audit measures associated with the guideline	2, 3, 4, 5, 6	Oct 2017 – Mar 2019		Working group being convened to look at current practice and develop guidance. Audit measures agreed to carry out audit in March 2018 with further work (patient experience audit, development of information and guidance documentation) to be carried out in 2018/19.	Patients receive standardised care based on evidence and best practice	G
2017-04	The network will work towards developing an approach to transition by: - scoping the transition	1, 2, 3, 4, 5, 6	Aug 2017 – Nov 2017		Scoped local practice during local visits in Nov 2017. Requires further detailed work. Work to audit engagement after transition is ongoing.	Development of a consistent approach to transition that meets the needs of young people moving from	B

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Objective Number	Smart Objective	Linked Dimensions of Quality	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31/03/2018	Anticipated Outcome	RAGB status
	arrangements that currently exist in each area					paediatric to adult services.	
2017-05	The network will identify where electronic information is stored about renal and urology patients by mapping out the systems used by the various professionals involved in each health board area.	4	Aug 2017 – Mar 2018	Susan Burns, Carsten Mandt, Michael Cairns	Work ongoing to collate information about IT systems available in each area. To be carried forward to 2018/19. Continue to pursue rolling out SERPR more widely (progress being made in NHS Grampian).	Electronic patient information is available to clinicians when needed.	A
2017-06	The network will ensure that it is properly organised and supported to deliver its objectives by: - establishing a working model - developing a communications strategy to engagement of all	1, 2, 3, 4, 5, 6	May 2017 – Nov 2017	Heather Maxwell, Carsten Mandt, Linda Watson, Karyn Robertson	Information gathered through local visits across Scotland and fed back to SG in Nov 2017. Comms and engagement strategy ratified at 9 March SG meeting.	Effective delivery of network objectives with the engagement of all relevant stakeholders.	B

Objective Number	Smart Objective	Linked Dimensions of Quality	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31/03/2018	Anticipated Outcome	RAGB status
	stakeholders						
2017-07	<p>The network will ensure that all stakeholders are clear about its purpose and aims by:</p> <ul style="list-style-type: none"> - agreeing and sharing a vision and 5 year work plan - reviewing and agreeing the scope of the network 	1, 2, 3, 4, 5, 6	May 2017 – Nov 2017	Steering Group	Information gathered through local visits across Scotland and fed back to SG in Nov 2017. Strategic work plan agreed at 9 March SG meeting.	All stakeholders are clear about the goal of the network and their role in achieving it.	B

RAG status key

RAG status	Description
RED (R)	The network is unlikely to achieve the objective/standard within the agreed timescale
AMBER (A)	There is a risk that the network will not achieve the objective/standard within the agreed timescale, however progress has been made
GREEN (G)	The network is on track to achieve the objective/standard within the agreed timescale
BLUE (B)	The network has been successful in achieving the network objective/standard to plan

The Institute of Medicine's six dimensions of quality are central to NHS Scotland's approach to systems-based healthcare quality improvement; therefore objectives should be linked to these dimensions:

1. **Person-centred:** providing care that is responsive to individual personal preferences, needs and values and assuring that patient values guide all clinical decisions;
2. **Safe:** avoiding injuries to patients from healthcare that is intended to help them;
3. **Effective:** providing services based on scientific knowledge;
4. **Efficient:** avoiding waste, including waste of equipment, supplies, ideas, and energy;
5. **Equitable:** providing care that does not vary in quality because of personal characteristics such as gender, ethnicity, geographic location or socio-economic status; and
6. **Timely:** reducing waits and sometimes harmful delays for both those who receive care and those who give care.

Proposed Workplan – SPRUN 2018-2019

Objective Number	Smart Objective	Linked Dimensions of Quality	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 1/04/2018	Anticipated Outcome	RAGB status
2017-03	<p>The network will work to reduce variation in the measurement of blood pressure by:</p> <ul style="list-style-type: none"> - scoping existing practice in different areas - developing an Investigation and First Line Management Guideline - identifying key audit measures associated with the guideline 	2, 3, 4, 5, 6	Oct 2017 – Mar 2019		Carried over from 2017/18 work plan.	Patients receive standardised care based on evidence and best practice	G
2017-05	The network will identify where electronic information is stored about renal and urology patients by mapping out the systems used by the various professionals involved in each health board area.	4	Aug 2017 – Oct 2018	Susan Burns, Carsten Mandt, Michael Cairns	Carried forward from 2017/18 work plan.	Electronic patient information is available to clinicians when needed.	G

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Objective Number	Smart Objective	Linked Dimensions of Quality	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 1/04/2018	Anticipated Outcome	RAGB status
2018-01	<p>Improve stakeholder engagement in the network by:</p> <p>Involving additional professional stakeholders e.g. adult service or primary care</p> <p>Delivering a range of patient / family engagement activities in liaison with third sector partners</p>	1, 3, 4, 5	Apr 2018 – Mar 2019	Carsten Mandt; Linda Watson; Dr Heather Maxwell		Broader representation at Steering Group; patient / family feedback about their issues and priorities	G
2018-02	Support professional education by developing an education strategy for SPRUN	2,3,4,5,6	Apr 2018 – Sep 2018	Carsten Mandt; Dr Ihab Shaheen; Ms Boma Lee		Development of an education programme that systematically meets the needs of SPRUN stakeholders	G
2018-03	Delivering a professional renal / urology education programme in line with the SPRUN education strategy (minimum: an	2,3,4,5,6	Apr 2018 – Mar 2019	Dr Ihab Shaheen; Ms Boma Lee; Linda Watson		Improved knowledge for relevant healthcare professionals that either	G

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Objective Number	Smart Objective	Linked Dimensions of Quality	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 1/04/2018	Anticipated Outcome	RAGB status
	annual education day)					reinforces existing best practice or results in changes in practice	
2018-04	Explore options to make SPRUN education available electronically	2,3,4,5,6	Apr 2018 – Mar 2019	Linda Watson; Carsten Mandt		Wider variety of education options available, allowing greater uptake by more practitioners	
2018-05	Support evidence based practice by: - Reviewing existing nephrotic syndrome guidelines - Developing a nephrotic syndrome pathway	1, 2, 3, 4, 5, 6	Feb 2018 – Mar 2019	Dr David Hughes		Patients receive standardised care based on evidence and best practice	G
2018-06	Support evidence based practice by developing guidance on key urology topics	1, 2, 3, 4, 5, 6	Jun 2018 – Mar 2019	Ms Boma Lee		Patients receive standardised care based on evidence and	G

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Objective Number	Smart Objective	Linked Dimensions of Quality	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 1/04/2018	Anticipated Outcome	RAGB status
	(e.g. micturating cystourethrograms, posterior urethral valves or bladder failure)					best practice	
2018-07	Carry out transition audit on engagement of young adults post-transition to adult care	1,2,3,4,5,6	Apr 2018 – Sep 2018	Carsten Mandt; Linda Watson		Better understanding of impact of transition on patient engagement with services	G
2018-08	Roll out enzymatic creatinine testing in Scottish biochemistry laboratories	2,3,4,5	Apr 2018 – Mar 2019	Dr Heather Maxwell		Standardised and more clinically appropriate creatinine testing	G
2018-09	Evaluate NHS Lanarkshire pilot of virtual dietetic clinics	1,2,3,4,5,6	Apr 2018 – Sep 2018	Louise Gibson; Linda Watson		Identify lessons learnt from pilot with a view to potential further roll out	G

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Objective Number	Smart Objective	Linked Dimensions of Quality	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 1/04/2018	Anticipated Outcome	RAGB status
2018-10	Develop an action plan to address issues identified in the 2017 varicella audit	1, 2, 3, 4, 5, 6	Apr 2018 – Sep 2018	Dr Heather Maxwell		Better monitoring of varicella antibodies in children and young people with nephrotic syndrome	G
2018-11	Support the development of Scottish continence services for children and young people through audit, service mapping and development of pathways	1,2,3,4,5,6	Apr 2018 – Mar 2019	Dr Catriona Marrison; Carsten Mandt;		Development of a standardised, effective approach to continence in children and young people in Scotland	G

Appendix 1: Proposed Strategic Work Plan 2018-21

Strategic Objective	Year 1 (2018/19)	Year 2 (2019/20)	Year 3 (2020/21)
Improved stakeholder communication and engagement	<p>Work in partnership with 3rd sector to develop patient/family engagement activities</p> <p>Engage with adult renal / urology services, e.g. via Scottish Renal Association</p> <p>Engagement with primary care and general paediatrics</p>	<p>Implement and evaluate activities developed in year 1</p>	<p>Implement and evaluate activities developed in year 1</p>
Build capacity in renal/urology care through education for relevant healthcare professionals	<p>Develop education strategy, based on learning needs analysis (carried out in 2017/18)</p> <p>Deliver programme of education to meet identified needs of relevant staff groups</p> <p>Determine best way(s) of making SPRUN education available electronically</p>	<p>Deliver programme of education</p> <p>Develop education on hypertension (on hypertension (with a focus on showing proper cuff size and the use of Doppler)</p> <p>Signposting to psychology training packages for non-psychology staff</p> <p>Evaluate impact of SPRUN education on clinical practice</p>	<p>Deliver programme of education</p> <p>Evaluate impact of SPRUN education on clinical practice</p>
Standardised best practice: Guidelines, Standards and Pathways	<p>Develop revised nephrotic syndrome guideline and pathway</p> <p>Develop and implement ABPM action plan based on 2017/18 audit</p>	<p>Develop revised haematuria guideline and pathway</p> <p>Revise joint clinic guidance and pathway</p> <p>Develop a service map / directory for</p>	<p>Develop acute kidney injury guideline and pathway</p> <p>Develop guidance on urological topics (e.g. micturating cystourethrograms, posterior urethral valves or bladder</p>

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Strategic Objective	Year 1 (2018/19)	Year 2 (2019/20)	Year 3 (2020/21)
	Develop guidance on urological topics (e.g. micturating cystourethrograms, posterior urethral valves or bladder failure)	Scottish renal/urology services Develop guidance on urological topics (e.g. micturating cystourethrograms, posterior urethral valves or bladder failure)	failure)
Data / Quality Improvement	Support the further roll-out of SERPR in Scotland Audit patient engagement after transition to adult care Quality improvements in ABPM (see under best practice) Evaluate NHS Lanarkshire pilot on remote clinics	Support the further roll-out of SERPR in Scotland Develop key performance indicators for routine audit Develop audit linked to revised guidelines	Support the further roll-out of SERPR in Scotland Develop key performance indicators for routine audit Develop audit linked to revised guidelines
Service Development	Support the development of Scottish continence services for children and young people through audit, service mapping and development of pathways	Support the development of Scottish continence services for children and young people through audit, service mapping and development of pathways	Support the development of Scottish continence services for children and young people through audit, service mapping and development of pathways

Appendix 2: SPRUN Steering Group Membership

Health Board	Member/Contact	Designation
Ayrshire & Arran	Dr Bridget Oates	Consultant Paediatrician
Borders	Dr Andy Duncan	Head of Clinical Services Paediatrics and Child Health
	Mandy Stephens	General (Acute) Registered Nurse
Dumfries & Galloway	Dr Raj Shyam	Consultant Paediatrician
	Jill Lindsay	Community Childrens Nurse
Fife	Dr Evelyn Menzies	Associate Specialist Paediatrician
Forth Valley	Christine Black	Paediatric Renal Link Nurse
	Caroline McAlpine	Continence Nurse for Children
Grampian	Dr Craig Oxley	Consultant Paediatrician
	Lynne Riach	Paediatric Renal Clinical Nurse Specialist
	Mr Chris Driver	Consultant Surgeon & Urologist
	Marion Hird	Clinical Nurse Specialist in Paediatric Urology
Greater Glasgow & Clyde	Dr Heather Maxwell	Consultant Paediatric Nephrologist
	Dr David Hughes	Consultant Paediatric Nephrologist
	Dr Ihab Shaheen	Consultant Paediatric Nephrologist
	Dr Ben Reynolds	Consultant Paediatric Nephrologist
	Angela Lamb	Paediatric Renal Pharmacist
	Susan Burns	Renal Data Manager
	Dr Louise Pittendrigh	ST7
	Fiona Graham	Paediatric Renal Dietitian
	Jacki Smart	General Manager Surgery
	Ursula Monachan	Advanced Paediatric Nurse Practitioner (Renal)
	Ms Boma Lee	Consultant Paediatric Surgeon & Urologist
Highland	Dr Elizabeth Hunter	Clinical Psychologist
	Dr Alan Webb	Consultant Paediatrician
	Dr Janaki Vedarajan	Speciality Doctor in Paediatrics
Lanarkshire	Patricia Rankine	Community Children's Nursing Team Leader
	Dr Thin Thin Saing	Associate Specialist Paediatrician
Lothian	Dr Fiona Cameron	Associate Specialist Paediatrician
	Dr Rozi Ardill	Consultant Paediatrician
Lothian	Gillian Walker	Renal Dietitian Team Lead
	Tracey McGregor	Renal Nurse Specialist
	Dr Catriona Morrison	Consultant Paediatrician
Tayside	Sandra Lloyd	Paediatric Renal/Enuresis Nurse
Third Sector/Family Representation	Member/Contact	Designation
Kidney Kids Scotland	Sheena Dunsmore	Manager

Appendix 3: Finance

The annual operational network budget is £5,000.

In 2017/18, total net spending against this budget was **£1,696.36**.

SPRUN Financial Information

Network	Type (group)	2017-18
SPRUN	CATERING AND VENUE HIRE	£1,679.37
	PRINTING	£16.99
Grand Total		£1,696.36

