

Scottish Paediatric Renal and Urology Network (SPRUN) ANNUAL REPORT 2018/2019

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1. Executive Summary

2018/2019 has been a year of restructuring for SPRUN. A lot of effort has been made to improve the structure and governance of the network to ensure it is better able to deliver on its objectives.

Key achievements for 2018/2019 include:

- Restructuring of the SPRUN Steering Group. This involved mapping the key stakeholders required and then approaching individual professions to ask them to identify their own representatives.
- Refreshing of patient involvement, beginning with a revised "Getting Involved" leaflet.
- Revised Nephrotic Syndrome guideline
- Development of an education strategy resulting in a refreshed education programme.

The network has faced some challenges in 2018/2019, most notably the time needed to restructure the Steering Group. It is hoped that this investment will enable the network to operate more effectively going forward. Engagement with stakeholders continues to be an issue as the network relies on a small number of enthusiastic clinicians. Work needs to continue to increase engagement with the wider renal and urology community.

Plans for the year ahead include:

- Continuing the improve the network structure by working alongside individual professional groups to ensure that priorities are aligned
- Development of a virtual patient reference group
- Development of a nephrotic syndrome resource based on an interactive pathway
- Development of standards of care
- · Further develop and implement the networks QI strategy

2. 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.

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.

3. Report on Progress against Network Objectives in 2018/19

National networks have agreed core objectives that reflect the Scottish Government's expectations for managed clinical networks, as described in CEL (2012) 29¹. The network's core objectives are:

- Design and ongoing development of an effective Network structure that is organised, resourced and governed to meet requirements in relation to SGHSCD Guidance on MCNs (currently CEL (2012) 29) (Annex) and national commissioning performance management and reporting arrangements;
- 2. Support the development, design and delivery of services that are evidence based and aligned with current strategic and local and regional NHS planning and service priorities.
- 3. Effective Stakeholder Communication and Engagement through design and delivery of a written strategy that ensures stakeholders from Health, Social Care, Education, the Third Sector and Service Users are involved in the Network and explicitly in the design and delivery of service models and improvements.
- 4. Improved capability and capacity in paediatric renal and urology care through design and delivery of a written education strategy that reflects and meets stakeholder needs.
- 5. Effective systems and processes to facilitate and provide evidence of continuous improvement in the quality of care (CQI).
- 6. Generate better value for money in how services are delivered

This report details the progress achieved by SPRUN in the period 1st April 2018 - 31st March 2019. A proposed work plan for 2018-19 is also included.

3.1. Effective Network Structure and Governance

Governance of SPRUN is delivered through a multidisciplinary Steering Group, with Dr Heather Maxwell, Consultant Paediatric Nephrologist, the current lead clinician. This group meets four times per year and provides strategic direction to the network. During 2018/2019 the SPRUN Steering Group has gone through a major restructuring. Previously the Steering Group membership included more than 50 stakeholders from within renal and urology services, many of whom had never attended a meeting. Due to high numbers there could also be a completely different attendance at each meeting, with numbers of attendees fluctuating quite considerably between meetings. These issues resulted in the May 2018 Steering Group meeting being cancelled due to lack of attendance.

In order to better support the network the Steering Group was restructured in August 2019. A mapping exercise took place to identify the key stakeholders who would need to be involved with the group. Each individual professional group was then approached to identify a number of representatives. These representatives provide a two-way conduit to the group, bringing relevant issues to the meetings and then reporting relevant topics back to their professional group. Sub-group leads and those leading on particular objectives such as QI or guidelines were also invited to the restructured group. Following this restructure work has taken place to ensure that members are aware of and fulfil their roles and responsibilities.

Once this new structure is embedded the terms of reference will be revised to properly reflect the new structure.

The networks Service Agreement runs until 31st March 2020.

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¹ Please see: https://www.sehd.scot.nhs.uk/mels/CEL2012_29.pdf

3.2. Service Development and Delivery

a) Review of nephrotic syndrome guideline

The nephrotic syndrome guideline was identified as the main priority in the network's routine programme of reviewing and updating guidelines. The previous version of the guideline was developed and hosted by NHS Greater Glasgow and Clyde (GG&C), which had been convenient but meant there was no ownership by the wider network and excluded stakeholders from other Health Boards from the guideline development process. The guideline was also 46 pages long which made finding the relevant sections difficult. At the first meeting of the group it was agreed that a solution was needed to both of these issues.

In order to resolve the ownership and hosting issue discussions took place with the clinical governance team in NHS GG&C. The outcome was that the guideline would continue to be hosted on the NHS GG&C guideline portal with an acknowledgement that it had been developed in conjunction with SPRUN. All future updates on the guideline will continue to use this model. In order to make the 46 page guideline more accessible and user-friendly, a larger piece of work began to create a nephrotic syndrome resource based on the guideline. This resource, hosted within the SPRUN website, will involve splitting the guideline into sections to make it easier to navigate. Each section will also include further reading and useful links. An interactive pathway is also being developed. As this is a bigger piece of work than initially anticipated it has been carried forward to 2019/2020.

b) Guidance on key urology topics

Discussions have taken place to identify key urology topics which would be useful for clinicians who see both renal and urology patients. Due to staffing issues within Urology it has not been possible to take forward any of these identified topics. Engagement continues with urology and it is hoped that some of this work can begin in 2019/2020.

3.3. Stakeholder Communication and Engagement

a) Professional engagement

The revised Steering Group structure is expected to result in a more engaged professional community. Each individual profession now has a representative on the Steering Group who can take issues to the group on their behalf. This representative is also expected to report back to their professional group after SPRUN meetings with any relevant updates.

In order to engage the wider network in the work of SPRUN there is now a section dedicated to SPRUN business at the annual education meeting. This section is used to give an update on the previous year and allow for engagement around priorities for the coming year. This model was used for the SPRUN meeting in

March 2019. Although the meeting took place too close to year end for full feedback to be included in this report, initial feedback – which has been positive – is summarised below under section 3.4.

b) Patient and family engagement

Although a number of attempts have been made to engage directly with patients and families none of these have been particularly successful. One such activity was the video project, this project was set up to allow patients and families the opportunity to prioritise which information videos should be developed. A webpage was created which contained information on the project and a survey which allowed for a selection of top 5 videos from a shortlist. This approach only resulted in 2 responses despite the website being promoted within SPRUN and the link being retweeted by a number of organisations such as NHS NSS and Glasgow's Children's Hospital Charity.



Figure 1: Revised SPRUN Getting Involved leaflet

The lack of success around these activities resulted in a rethink on the approach to engaging patients. It was agreed that the "Getting Involved" leaflet would be revised. This leaflet now better describes the actual activities the patients and families could engage in rather than focusing on how to contact SPRUN. Once finalised this leaflet will be distributed to patients and families with the aim of creating a virtual patient reference group. This group could then be engaged to comment on/contribute to SPRUN work. Although the information leaflet has been completed the creation of a virtual reference group is an objective for 2019/2020.

3.4. Education

Following the completion of a Learning Needs Analysis in 2017/2018, SPRUN has developed an education strategy. This education strategy has split education into three distinct strands:

- Host an annual education meeting aimed at stakeholders involved in SPRUN
- Deliver education sessions aimed at professionals involved in the care of renal and urology patients
- Pilot of a roadshow style education session aimed at generalists to raise awareness and increase knowledge of renal and urology conditions

In order to make education opportunities as accessible as possible, SPRUN piloted the recording of audio at an education event to make this available via its website. Although the initial pilot session was not entirely successful due to difficulties in preparing the recorded material to comply with data protection, it was agreed that it would be worthwhile to have another attempt. The SPRUN education event on 29th March 2019 was recorded. It is hoped that this audio will be available alongside the slides once the content has been reviewed.

The annual education meeting that took place in Station Hotel, Perth on 29th March 2019 was attended by 37 delegates. The event provided updates on a range of clinical topics and provided an opportunity to engage delegates with the work of SPRUN. Initial feedback from the event is included below:

Will your practice change?

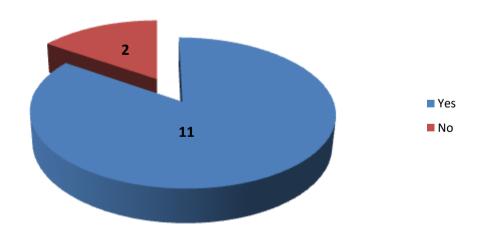


Figure 2: Attendees were asked whether their practice would change as a result of attending this event

Impact on practice

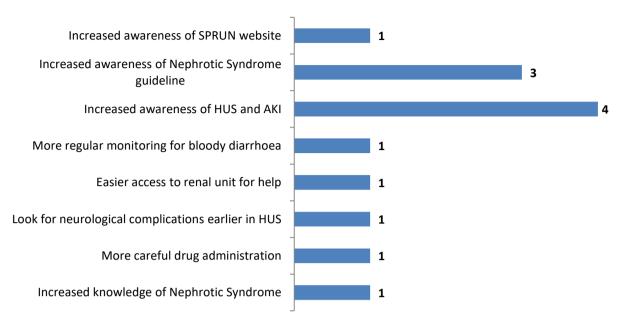


Figure 3: SPRUN education event: impact on practice

Figures 2 and 3 show the impact on practice from attending this event. Figure 2 show that 11 of the 13 attendees to respond indicated that their practice would change. Figure 3 shows the impact on practice that was identified.

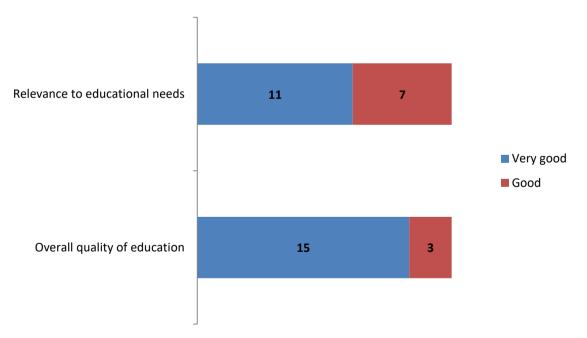


Figure 4: Quality and relevance of education

Figure 4 shows how delegates rated the quality of the education offered and how relevant the event was to their educational needs. All 18 delegates rated both as either good or very good.

What have you gained as a result of attending this event? Increased Awareness of SPRUN 2 Increased Guideline Awareness 3 Increased Knowledge of AKI 3 Increased Knowledge of HUS 6 Networking 6

Figure 5: Participant gain from attending the event

Figure 5 shows what delegates have gained as a result of attending this event. The most common benefit reported was an increase in knowledge for Haemolytic Uremic Syndrome (HUS) and Acute Kidney Injury (AKI).

3.5. Audit and Continuous Quality Improvement

A Quality Improvement strategy has been developed during 2018/2019. This QI strategy identifies the key priorities for SPRUN over the coming years. These include:

- Reviewing the Steering Group structure
- Increasing engagement within SPRUN from both professionals and patients/families
- Redeveloping the SPRUN website
- Auditing standards and guidelines
- Standalone QI projects such a Ambulatory Blood Pressure Monitoring project

A network lead for quality improvement has been identified and initial quality improvement projects have been agreed. Quality Improvement projects for Ambulatory Blood Pressure Monitoring (ABPM) and Creatinine testing were identified as initial projects. It is intended that these projects will reduce variation and drive up quality of care. Links have been made with the Scottish Clinical Biochemistry Managed Diagnostic Network to support the work on Creatinine testing with a view to standardising laboratory practice across Scotland.

The ABPM project initially focussed on mapping the provision of ABPM across Scotland. This was subsequently followed up with a survey which was circulated to patients and families at the start of their ABPM period. The results of this project are being used to develop a ABPM QI action plan.

A planned transition audit to better understand the transition process and the impact on patients was delayed to allow for the Steering Group restructure to be completed. The restructured Steering Group now includes adult service representation. The transition survey has now been circulated however results are not yet available.

A mapping exercise was planned in a number of areas to establish pathways and identify gaps in continence services for children and young people. Although an initial survey had been ready to circulate for some time this was delayed due to further engagement from Bowel and Bladder UK and Scottish Government representatives at a late stage. This survey of continence services has now been circulated. The results will form the basis of an engagement event to be held in June 2019.

3.6. Value

SPRUN has progressed a number of longer-term work items this year to enable the network to add value. However, as they are longer term objectives their full impact will only emerge later in 2019/20. The Steering Group has been restructured to ensure it better supports the work of SPRUN. This restructuring should also ensure that communication improves by ensuring each professional group represents their profession and not just their area. Revised nephrotic syndrome guidance and pathways ensure that clinicians out with the tertiary centres are better supported to treat patients as close to home as possible. The refreshed Learning Needs Analysis and education strategy supports an education programme aimed at ensuring clinicians have access to education that develops and maintains their awareness, clinical skill and expertise.

Patient and family engagement has been refreshed to engage with more patients. This will result in the creation of a virtual patient reference group which will ensure that the SPRUN work plan also reflects patient priorities.

A number of quality improvement projects are ongoing, supported by a Quality Improvement strategy. This strategy ensures that SPRUN continues to focus on continuous quality improvement.

4. Plans for the Year Ahead

The key priorities for SPRUN for the year ahead include:

- Continuing to improve the network structure by working alongside individual professional groups to ensure that priorities are aligned
- Development of a virtual patient reference group
- Development of a nephrotic syndrome resource based on an interactive pathway
- Development of standards of care
- Further develop and implement the network's QI strategy

A proposed full workplan for 2019/2020 is included in page 16 of this report.

Risks/issues

Stakeholder engagement

Engagement within SPRUN remains an issue. Much of the work is driven by an enthusiastic core group. Engagement from many of the district general hospitals has been minimal and recent attempts to reengage them have shown little gain. Part of the recent restructure of the Steering Group has involved attempting to engage with the centres on the periphery. With SPRUN due for review in 2019/2020 there is a risk that a review group will not look favourably on the lack of engagement from the wider community.

5. Detailed Description of Progress in 2018/19

Objective Number	Smart Objective	Linked Dimensions of Quality	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31/03/2019	Anticipated Outcome	RAGB status
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		ABPM survey developed to seek patient views. This was then circulated to local clinicians to be distributed to patients. Responses are being collated to create an action 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	4	Aug 2017 – Oct 2018	Susan Burns, Carsten Mandt, Michael Cairns	This was carried forward from 2017/18 work plan. The mapping has now been complete. This better supports the network when audits arise.	Electronic patient information is available to clinicians when needed.	В

Objective Number	Smart Objective	Linked Dimensions of Quality	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31/03/2019	Anticipated Outcome	RAGB status
	various professionals involved in each health board area.						
2018-01	Improve stakeholder engagement in the network by: Involving additional professional stakeholders e.g. adult service or primary care Delivering a range of patient / family engagement activities in liaison with third sector partners	1, 3, 4, 5	Apr 2018 – Mar 2019	Carsten Mandt; Linda Watson; Dr Heather Maxwell	Steering Group membership is an evolving process. Work continues to restructure the Steering Group to better support the work of the network. Initial work involved restructuring the SG to ensure that there was proper representation of those involved in the care of patients. Dr David Walbaum has agreed to join the SG as an adult nephrology representative. Work has begun to create a wider patient network that can engage with SLWG and pieces of work. An engagement activity took place around prioritising patient information video.	Broader representation at Steering Group; patient / family feedback about their issues and priorities	G

Objective Number	Smart Objective	Linked Dimensions of Quality	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31/03/2019	Anticipated Outcome	RAGB status
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	Education strategy developed and signed off at October 2018 Steering Group.	Development of an education programme that systematically meets the needs of SPRUN stakeholders	В
2018-03	Delivering a professional renal / urology education programme in line with the SPRUN education strategy (minimum: an annual education day)	2,3,4,5,6	Apr 2018 – Mar 2019	Dr Ihab Shaheen; Ms Boma Lee; Linda Watson	Annual education day took place 29 th March. Initial SPRUN education session took place in December.	Improved knowledge for relevant healthcare professionals that either reinforces existing best practice or results in changes in practice	В
2018-04	Explore options to make SPRUN education available electronically	2,3,4,5,6	Apr 2018 – Mar 2019	Linda Watson; Carsten Mandt	Initial pilot of recording session has taken place. Although it was not entirely successful it was agreed that there was enough material to continue the pilot. The SPRUN event on 29 th	Wider variety of education options available, allowing greater uptake by more practitioners	В

Objective Number	Smart Objective	Linked Dimensions of Quality	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31/03/2019	Anticipated Outcome	RAGB status
					March was also recorded to allow access. This will be available once the content has been reviewed.		
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	Nephrotic syndrome guidelines has been reviewed and completed. A basic pathway has been developed however pathway development has evolved into a bigger piece of work to develop a complete resource for nephrotic syndrome. This has been carried forward to the 2019/2020 work plan.	Patients receive standardised care based on evidence and best practice	G
2018-06	Support evidence based practice by developing guidance on key urology topics (e.g. micturating cystourethrograms, posterior urethral valves or bladder failure)	1, 2, 3, 4, 5, 6	Jun 2018 – Mar 2019	Ms Boma Lee	Work on urology objectives has been difficult due to staffing issues within urology services.	Patients receive standardised care based on evidence and best practice	R

Objective Number	Smart Objective	Linked Dimensions of Quality	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31/03/2019	Anticipated Outcome	RAGB status
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	This audit was delayed to allow for completion of restructured SG membership which would include adult representation. The survey has been reviewed alongside adult colleagues and has been circulated. Results were not available for this reporting period	Better understanding of impact of transition on patient engagement with services	A
2018-08	Roll out enzymatic creatinine testing in Scottish biochemistry laboratories	2,3,4,5	Apr 2018 – Mar 2019	Dr Heather Maxwell	Links being established with SCBMDN to support this.	Standardised and more clinically appropriate creatinine testing	В
2018-09	Evaluate NHS Lanarkshire pilot of virtual dietetic clinics	1,2,3,4,5,6	Apr 2018 – Sep 2018	Louise Gibson; Linda Watson	Following a successful pilot a further cycle will take place with increased numbers.	Identify lessons learnt from pilot with a view to potential further roll out	G

Objective Number	Smart Objective	Linked Dimensions of Quality	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31/03/2019	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	Action plan developed.	Better monitoring of varicella antibodies in children and young people with nephrotic syndrome	В
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 Morrison; Carsten Mandt;	Mapping exercise to take place in Lothian, Tayside and Highland to establish pathways and identify gaps in current service. This has taken slightly longer than anticipated due to engagement by Bowel and Bladder UK and Scottish Government at a late stage. The survey has now been circulated and forms the basis of an engagement event in June 2019.	Development of a standardised, effective approach to continence in children and young people in Scotland	A

6. Proposed Work Plan for 2019/20

Objective Number	Smart Objective	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31-03-2019	Anticipated Outcome	RAGB status
1. Effecti	ive Network Structure and Governa	nce [linked to Qu	uality Dimensions 3	3,4,5,6]		
2019-01	Continue to improve network structure by engaging with individual professional groups				Improved stakeholder communication and engagement	
2019-02	Engage with nurses to understand nursing prioritises allowing SPRUN to better support them.				Improved nursing communication and engagement	
2. Servic	e Development and Delivery [linked to	Quality Dimension	ns 1,2,3,4,5,6]	'		
2019-03	Develop Nephrotic Syndrome pathways and further resources following the review of current guideline				Patients receive standardised care based on evidence and best practice	
2019-04	Review Haematuria guideline using process agreed during Nephrotic Syndrome guideline review				Patients receive standardised care based on evidence and best practice	
2019-05	Develop and agree standards of care for paediatric renal and urology				Patients receive standardised care based on evidence	

Objective Number	Smart Objective	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31-03-2019	Anticipated Outcome	RAGB status
	services				and best practice	
2019-06	Develop a service map for Scottish Renal and Urology services				Awareness of current service provision for both patients and professionals	
2019-07	Engage with diagnostic networks around input into imaging provision and guideline development				Ensuring guidelines are achievable from the outset and reducing variation	
3. Stakeh	nolder Communication and Engager	nent [linked to (Quality Dimensions	s 1,3,4,5,6]		
2019-08	Engage with patients and families to establish a patient reference group				Patient / family feedback about their issues and priorities	
2019-09	Review and develop website to ensure it is a useful resource				Improved engagement with all stakeholders	
2019-10	Work in partnership with 3 rd sector organisational to develop patient/family engagement activities				Improved patient communication and engagement	

Objective Number	Smart Objective	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31-03-2019	Anticipated Outcome	RAGB status
4. Educa	tion [linked to Quality Dimensions 1,2,3,4,5,6]				·	<u>'</u>
2019-11	Hold a network members day				Effective communication with wider network membership	
2019-12	Deliver a programme of education sessions based on identified needs (minimum of 3 sessions)				Education and training opportunities for clinicians involved in the renal and urology patients which either reinforces existing best practice or results in changes in practice	
2019-13	Pilot of local renal and urology road show aimed at general paediatric staff				Education and training opportunities for clinicians involved in the renal and urology patients which either reinforces existing best practice or results in changes	

Objective Number	Smart Objective	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31-03-2019	Anticipated Outcome	RAGB status	
					in practice		
5. Audit a	and Continuous Quality Improveme	nt [linked to Quality	y Dimensions 1,2	2,3,4,5,6]			
2019-14	Develop audit based on revised nephrotic syndrome guideline				Monitoring of revised guideline to ensure patients receive standardised care based on evidence and best practice		
2019-15	Develop and implement ABPM action plan based on audit results				Patients receive standardised care based on evidence and best practice		
6. Value	6. Value [linked to Quality Dimensions 1,2,3,4,5,6]						
2019-16	SPRUN to be reviewed during 2019/2020				Ensure that network continues to meet its core objectives		

Appendix 1: Steering Group Membership

Name	Designation	Organisation
Ben Reynolds	Consultant Paediatric Nephrologist	NHS Greater Glasgow and Clyde
Bridget Oates	Consultant Paediatrician	NHS Ayrshire and Arran
Caroline O'Hare	Pharmacist	NHS Lothian
Catriona Morrison	Consultant Paediatrician	NHS Tayside
Corrie Darbyshire	Clinical Psychologist	NHS Grampian
Craig Oxley	Consultant Paediatrician	NHS Grampian
David Hughes	Consultant Paediatric Nephrologist	NHS Greater Glasgow and Clyde
David Walbaum	Consultant Nephrologist	NHS Grampian
Emma McGinlay	Ward Manager, Renal Unit	NHS Greater Glasgow and Clyde
Fiona Graham	Specialist Dietitian	NHS Greater Glasgow and Clyde
Gillian Walker	Renal Dietitian	NHS Greater Glasgow and Clyde
Heather Maxwell	Consultant Paediatric Nephrologist	NHS Greater Glasgow and Clyde
Ihab Shaheen	Consultant Paediatric Nephrologist	NHS Greater Glasgow and Clyde
Kay Devlin	Specialist Dietitian	NHS Forth Valley
Lauren Peebles	Play Therapist	NHS Greater Glasgow and Clyde
Leanne Millar	Renal Nurse Educator	NHS Greater Glasgow and Clyde
Lee Boma	Consultant Paediatric Surgeon and	NHS Greater Glasgow and Clyde
	Urologist	
Liz Hunter	Clinical Psychologist	NHS Greater Glasgow and Clyde
Rozi Ardill	Consultant Paediatrician	NHS Lothian
Sheena Dumore	Kidney Kids Scotland	
Susan Burns	Renal Data Manager	NHS Greater Glasgow and Clyde
Tracey Bruce	Staff Nurse	NHS Highland
Tracey McGregor	Renal Nurse Specialist	NHS Lothian

Appendix 2: Finance

The annual budget for SPRUN is £5,000. A breakdown of the spend for 2018/2019 is below.

SPRUN Financial Information

