

**Scottish Paediatric Renal and  
Urology National Managed Clinical Network  
(SPRUN)  
ANNUAL REPORT 2019/2020**

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1. Executive Summary .....	3
2. Introduction .....	3
3. Report on Progress against Network Objectives in 2019/20.....	4
4. Plans for the Year Ahead .....	8
5. Detailed Description of Progress in 2019/20 .....	9
6. Proposed Work Plan for 2020/21 .....	16
Appendix 1: Steering Group Membership .....	22
Appendix 2: Finance .....	23

## 1. Executive Summary

2019/2020 continued with the restructuring which began in 2018/2019. This is likely to continue into 2020/2021. As part of the standard national commissioning review cycle, SPRUN was reviewed this year. An Expert Review Group (ERG) was established, chaired by Professor Neil Turner, Professor of Nephrology, University of Edinburgh. A report of this review is due to be presented to the National Specialist Services Committee (NSSC) in June 2020 to inform the future status and priorities for the network.

Following analysis of the evidence presented, the ERG concluded that the network had added value to NHS Scotland through the following key achievements:

- Facilitating the care of children and young people with renal and urological disease via local teams delivering care close to home with information and intervention being provided, as necessary, by the specialist unit. This has improved equity of access for patients across Scotland.
- Ensuring equity of care for patients across Scotland. Care delivered by local teams with specialist input at joint clinics ensures patients no longer have to travel vast distances to access specialist services. This also reduces the wider impact of clinic appointments on patients and families such as reducing the impact on school absence.
- Ensuring delivery of education and access to guidelines. This has resulted in the best possible care being delivered for children with renal and urology disease regardless of geography.

The ERG identified an ongoing role for SPRUN as a national MCN, although the group agreed that this role could be refined and more focused. SPRUN was the most appropriate mechanism for delivering the priorities identified as part of the review engagement and these should be incorporated into the networks strategic and annual work plans.

The ERG also identified a few areas for improvement, including a governance restructure, supporting local delivery of care, use of data, engaging patients and developing the education programme. Pending approval from NSSC, these priorities have been incorporated into the 2020/21 work plan.

As with 2018/2019 the network has faced some challenges. Engagement with stakeholders continues to be an issue as the network relies on a small number of enthusiastic clinicians. Work needs to continue to engage more effectively with the wider renal and urology community.

Plans for the year ahead include:

- A refresh of the joint clinic guidance
- Supporting the development of a consistent transition process
- Develop and deliver a patient experience questionnaire to ensure that patient and families' priorities are reflected in the work of SPRUN and the local delivery of care.
- Continue to deliver a programme of education which meets identified needs
- Identify what data is available from existing sources and identify gaps to inform a data plan and quality improvement strategy

### *COVID-19*

Since February 2020, understandably NHS Scotland priority has been to prepare for and deal with COVID-19 impact and this has seen clinical and other resource diverted from network activity. The network has undertaken an exercise to not only capture the impact of this unprecedented situation on the current reporting period but also to assess the likely impact on delivery of the 20/21 work plan.

## 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 national services such as the renal transplant service, acute and chronic dialysis service, as well as managing children and young people with severe acute kidney injury, complex nephron-urology and rare diseases such as tubulopathies. Only the transplant service is nationally designated.

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 out with 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 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.

### **b) Network review**

The commissioning and performance management arrangements for national networks require all networks to be reviewed every 3-5 years to ascertain the extent to which they add value to healthcare in Scotland and to inform a decision on future status, priorities and funding. As part of this review cycle, SPRUN was reviewed during 2019/2020. An Expert Review Group (ERG) was established, chaired by Professor Neil Turner, Professor of Nephrology, University of Edinburgh.

Following analysis of the evidence presented, the ERG concluded that the network had added value to NHS Scotland through the following key achievements:

- Facilitating the care of children and young people with renal and urological disease via local teams delivering care close to home with information and intervention being provided, as necessary, by the specialist unit. This has improved equity of access for patients across Scotland.
- Ensuring equity of care for patients across Scotland. Care delivered by local teams with specialist input at joint clinics ensures patients no longer have to travel vast distances to access specialist services. This also reduces the wider impact of clinic appointments on patients and families such as reducing the impact on school absence.
- Ensuring delivery of education and access to guidelines. This has resulted in the best possible care being delivered for children with renal and urology disease regardless of geography.

The ERG identified an ongoing role for SPRUN as a national MCN, although the group agreed that this role could be refined and more focused. SPRUN was the most appropriate mechanism for delivering the priorities identified as part of the review engagement and these should be incorporated into the networks strategic and annual work plans.

The recommendations of the group have still to be approved by NSSC however based on the evidence reviewed the Expert Review Group made the following recommendations:

1. SPRUN should be restructured to find a model that enables the network to function effectively, encouraging network members to take ownership and increase wider engagement. This should incorporate a comprehensive review of its communication strategy, covering website and messaging – including maintenance of stakeholder lists and methods of communication with them. Consideration should also be given to appointing an external chair to the Steering Group. As part of the restructuring there should be a review of whether Urology should continue to be a part of SPRUN and if so, how they can most effectively engage.
2. Identify those areas where structures or activities could be put in place to better support the local delivery of care. Three particular areas were raised:
  - a. Transition (already in the work plan)
  - b. Sustainability of regional staffing and support, in view of concerns of fragility of arrangements in several centres
  - c. Begin to audit or benchmark joint clinics.
3. SPRUN should link with existing data sources such as UK Renal Registry or the SERPR system which covers the West of Scotland to ascertain if existing information can be used to identify areas for improvement or if further data collection is necessary.
4. SPRUN should build on their “Getting Involved” leaflet by liaising directly with patients to ensure their views and priorities are reflected in the work of SPRUN.
5. SPRUN should review its education strategy to ensure that structured education and training is provided ensuring that it meets the needs of the whole multi-disciplinary team. This should be an addition to the existing Annual Meeting.

Subsequent discussion at NSD SMT identified that: the review reports and recommendations (SPRUN and the Paediatric Renal Transplant Service (PRTS)) did not fully reflect and consider emerging issues in relation to the current model of renal and urology provision and asked for further information to inform an NSD position of the role of the network for recommendation to NPPPRG/NSSC.

Following the emerging issues identified NSD SMT recommended a meeting of stakeholders be scheduled to come together in partnership to clarify the position, scope the implications, identify and explore options for a future model of service provision that meets relevant standards and is aligned with Scotland's healthcare policy aims. Representatives should include NSD as commissioners; clinical and management leads and representatives from the network and relevant tiers of service provision.

The review was due to report to NHS Boards and Scottish Government through the National Specialist Services Committee (NSSC) in March 2020 however due to the emerging issues identified the review will now report to a later NSSC.

### **3. Report on Progress against Network Objectives in 2019/20**

National networks have agreed core objectives that reflect the Scottish Government's expectations for managed clinical networks, as described in CEL (2012) 29<sup>1</sup>. The network's core objectives are:

1. 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.

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<sup>1</sup> Please see: [https://www.sehd.scot.nhs.uk/mels/CEL2012\\_29.pdf](https://www.sehd.scot.nhs.uk/mels/CEL2012_29.pdf)

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 1<sup>st</sup> April 2019 - 31<sup>st</sup> March 2020. A proposed work plan for 2020-2021 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 should meet four times per year and provide strategic direction to the network however issues with poor attendance at Steering Group meetings identified during 2018/2019 have continued with some meetings cancelled. This was considered as part of the SPRUN review. The ERG suggested that a smaller more agile group could be a better way forward for the network. Plans to explore changes to the governance model are on hold until the proposed stakeholder meeting can take place. See below for more information on the SPRUN review.

The network's Service Agreement runs until 31<sup>st</sup> March 2020. A new Service Agreement has been produced.

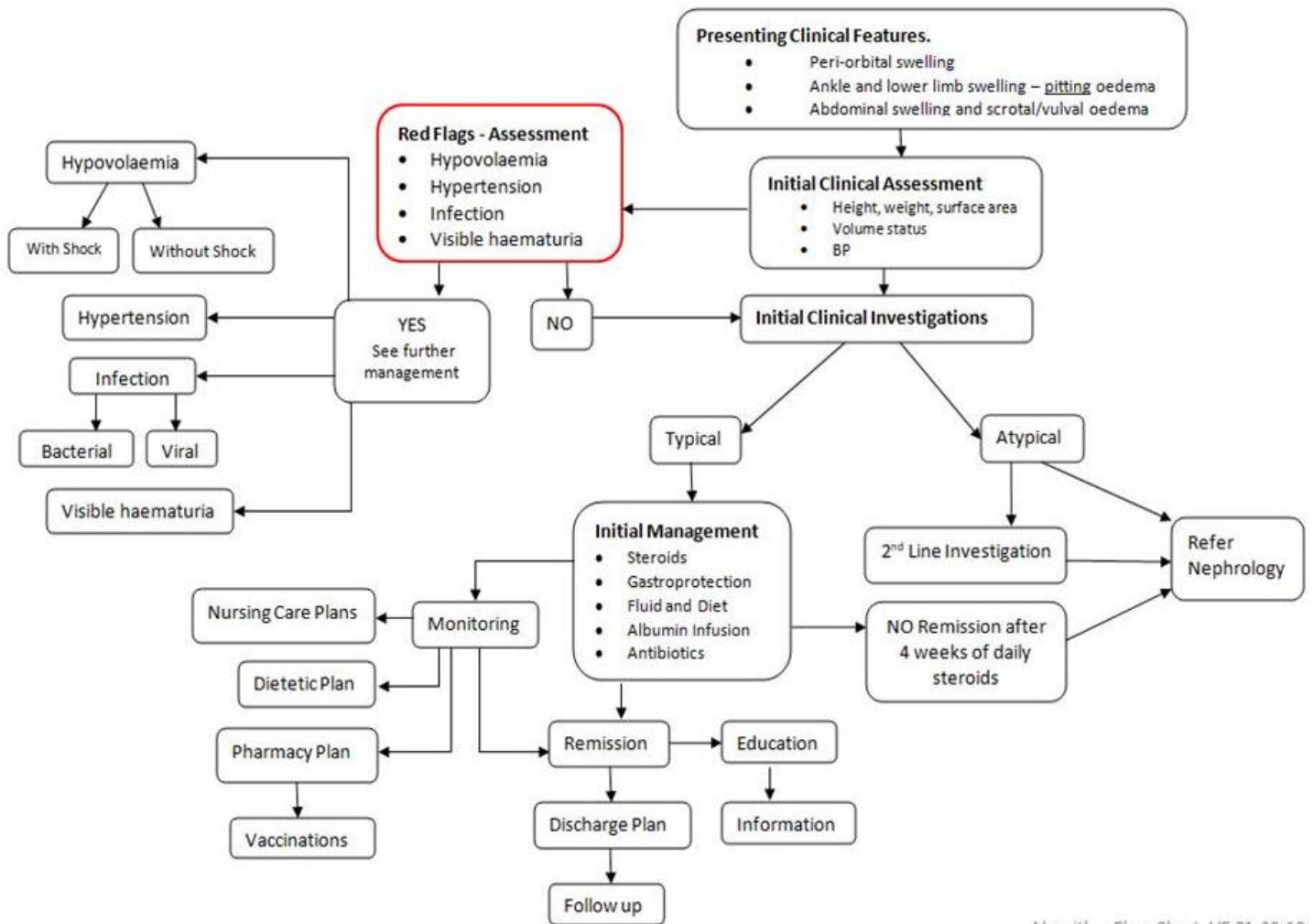
#### *a) Nursing input*

As part of the plans to engage with the wider stakeholder group, conversations have begun with nurses to better understand their priorities to allow SPRUN to support them better. Initial conversations took place with RHC ward nurses. It was agreed that some training resources could be provided which could be added to the SPRUN website. Further discussions are required in order to take this forward. Initial conversations have also taken place around Renal CNS common issues. A meeting is being planned to discuss this further and to scope the possibility of re-establishing the nursing sub-group. This would allow for some nursing standards to be developed.

### **3.2. Service Development and Delivery**

#### *a) Review of nephrotic syndrome guideline*

Following previous discussions which highlighted issues with the length of the previous version, the guideline was restructured into three interactive flowcharts. These charts included initial presentation, relapse and recurring relapse. These interactive flowcharts, hosted on the SPRUN website, will provide easy access to the necessary information. The full flowchart is available from the website; on clicking section of the flowchart further information is displayed. Feedback had been requested on the final version and this showed that it would be valuable resource for the network as it provided direct access to the necessary information without the need to navigate multiple pages of a document. Plans had been in place to launch it formally at the SPRUN Annual Education Meeting in March, unfortunately this had to be cancelled due to the current COVID-19 situation. Discussions are taking place on how best to launch the guideline virtually. An image of the refreshed format of initial presentation is below:



Algorithm Flow Chart: V5 21-08-19

**b) Service map for Scottish Renal and Urology services**

A service map has been developed and added to the SPRUN website. This map contains information on:

- Where clinics are held
- Who the local team is
- Upcoming clinic dates

It is hoped that this can be further developed to provide as much information as possible on renal and urology care in Scotland. There are still a small number of board areas to be updated, these will be added to the service map once the details have been confirmed with the local teams.

It has not been possible to progress a number of other service improvement objectives. The Haematuria guideline was due to be reviewed following the review of the Nephrotic Syndrome guideline. This was planned before it became apparent that the review of the Nephrotic Syndrome guideline would become a bigger project than initially anticipated. While it is still planned to review this guideline it will be carried forward to 2020/2021. A session on developing a guideline for Haematuria was planned for the education event which had to be postponed due to COVID-19.

An objective to develop and agree standards of care for renal and urology services also stalled primarily due to limited buy in from the clinical community. Although drafts were produced the work did not progress and the core team agreed that a revised version of the joint clinic guidance, which could then be audited, could be a more useful piece of work. Following discussions with wider stakeholders this will be taken forward in 2020/2021

**3.3. Stakeholder Communication and Engagement**

## SPRUN Annual Report 2019/2020

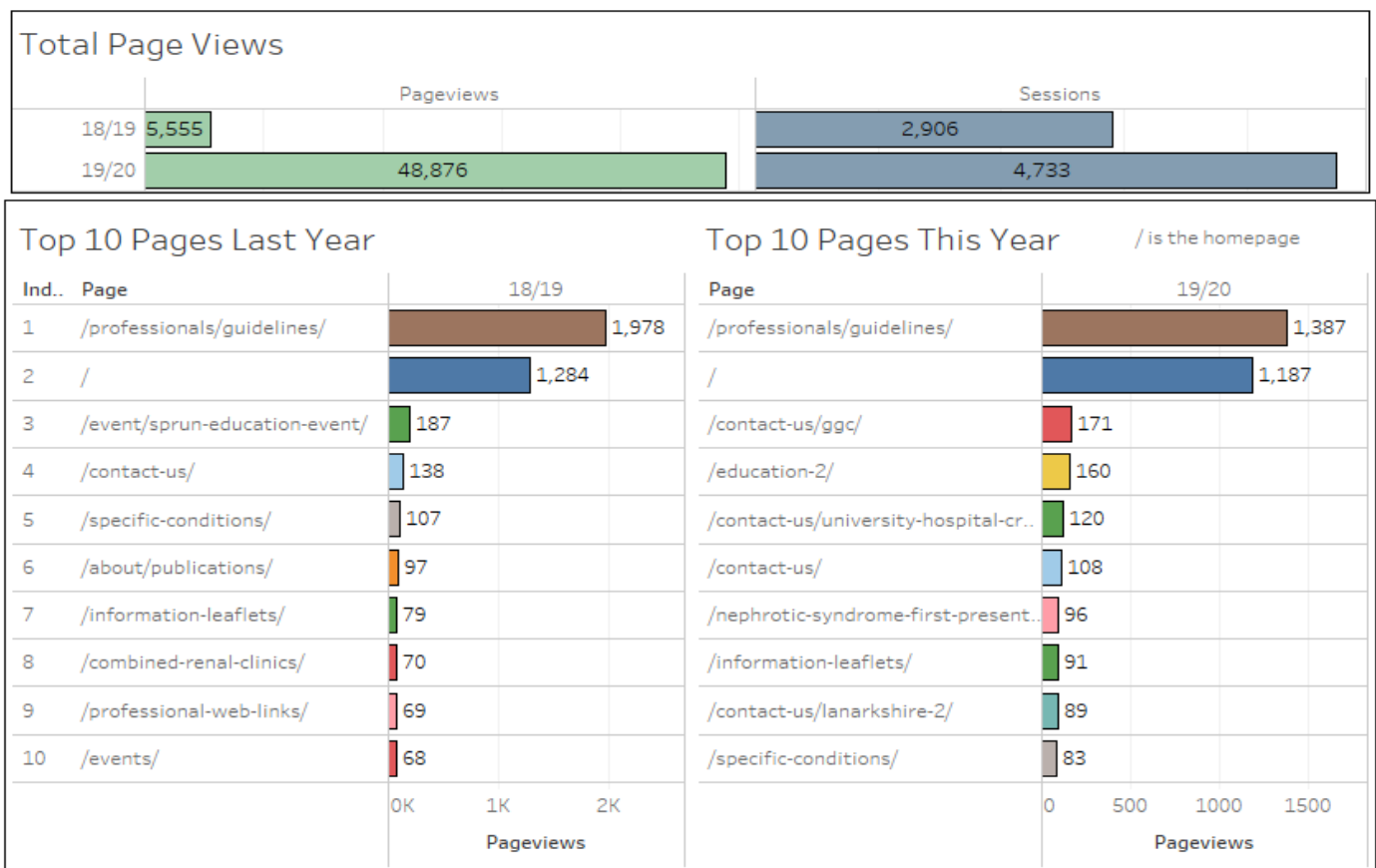
### a) Patient reference group

Following the refresh of the network's "Getting Involved" leaflet these have been printed and distributed to local teams. So far 16 families have come forward to confirm that they would like to be part of a virtual group which would help identify patient and family priorities and provide contribution / comment on other SPRUN projects. In order to properly utilise this group it will be necessary to develop a programme of activity for the group to ensure contributions are meaningful and that families remain engaged. This is included in the workplan for 2020/2021

### b) SPRUN website

The SPRUN website continues to be reviewed and updated with new developments including the revised Nephrotic Syndrome guideline and map of renal and urology services. Below are analytics data for the website from Google Analytics:

Full year report: from 1/4/19 > 31/3/20



An objective to work in partnership with 3<sup>rd</sup> sector organisations to develop patient / family engagement activities has not progressed. A patient event had recently taken place, organised by the NHS Greater Glasgow and Clyde Renal Unit, so it was not ideal to run another event so soon. Plans are in place to develop and deliver a patient experience questionnaire in 2020/2021.

### 3.4. Education

#### 1. Annual Education Meeting

The 2020 Annual Education Meeting was due to take place at the Station Hotel, Perth on 27<sup>th</sup> March 2020. Unfortunately this had to be postponed due the COVID-19 situation. Plans for the programme had included a morning session on Haematuria and an afternoon urology session with a focus on Post Urethral Valves. Discussions are ongoing on how best to deliver education sessions virtually.



## 2. Education sessions

Although the Annual Education Meeting had to be postponed, SPRUN delivered two short education sessions open to all teams which were accessible by video conferencing. Topics included: "Is One Kidney Enough?", 'Bladder and Bowel Health in Children' an Educational Resource and Feedback from the International Paediatric Dietitians Meeting.

## 3.5. Audit and Continuous Quality Improvement

### 1. Nephrotic Syndrome guideline audit

Planned audit of the Nephrotic Syndrome guideline has been postponed in line with the delay in publication outlined in section 3.2 this will be therefore be carried forward into 2020/2021.

### 2. Ambulatory Blood Pressure Monitoring

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 an ABPM QI action plan. An action plan has been drafted but is yet to be finalised. The action plan aims to standardise and then improve the approach to ABPM in children and young people.

## 3.6. Value

The evidence gathered as part of the review of SPRUN highlighted the high regard that local DGH teams had for the network in relation to transforming services, particularly through implementation of local clinics supported from the specialist centre. This was supplemented by other areas of need such as education. SPRUN was ideally placed to deliver on these areas, and in new areas of focus such as transition. Stakeholder feedback collected as part of the review process highlighted the network's positive impact on standardising care, with a number of those responding commenting specifically on this.

However, it is recognised that in order for the full value of SPRUN to be realised it will be necessary to better integrate SPRUN, Paediatric Renal Transplant and the paediatric renal service based in NHS GG&C.

## 4. Plans for the Year Ahead

The key priorities for SPRUN for the year ahead include:

- Taking forward review recommendations
- A refresh of the joint clinic guidance
- Supporting the development of a consistent transition process
- Develop and deliver a patient experience questionnaire to ensure that patient and families' priorities are reflected in the work of SPRUN and the local delivery of care.
- Continue to deliver a programme of education which meets identified needs
- Identify what data is available from existing sources and identify gaps to inform a data plan and quality improvement strategy

A proposed full workplan for 2020/2021 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 re-engage them have shown little gain. It is hoped that the stakeholder meeting proposed further to the Review findings will identify and lead to more effective collaboration.

## 5. Detailed Description of Progress in 2019/20

### ***SPRUN WORKPLAN – 2019-2020***

Please ensure that the annual workplan reflects the agreed objectives in the current network strategic workplan.

All work objectives should be listed under the most appropriate heading. Headings correspond to the agreed network core objectives:

1. 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](#));
2. Support the 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 User are involved in the Network and explicitly in the design and delivery of service models and improvements.
4. Improved capability and capacity in 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.

When defining network objectives please consider the NHS Scotland policy aims described in [Realistic Medicine](#), as well as the Institute of Medicine's six dimensions of quality, which are central to NHS Scotland's approach to systems-based healthcare quality improvement:

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.

SPRUN Annual Report 2019/2020

Key

RAGB status	Description
<b>RED (R)</b>	The network is unlikely to achieve the objective by the agreed end date.
<b>AMBER (A)</b>	There is a risk that the network will not achieve the objective by the agreed end date but progress has been made.
<b>GREEN (G)</b>	The network is on track to achieve the objective by the agreed end date.
<b>BLUE (B)</b>	The network has been successful in achieving the network objective to plan.

Objective Number	Smart Objective	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31-12-2019	Anticipated Outcome	RAGB status
<b>1. Effective Network Structure and Governance</b> [linked to Quality Dimensions 3,4,5,6]						
2019-01	Continue to improve network structure by engaging with individual professional groups			Ongoing	Improved stakeholder communication and engagement	<b>G</b>
2019-02	Engage with nurses to understand nursing priorities allowing SPRUN to better support them.			Initial conversations took place with RHC ward nurses. Further discussions required in order to take this forward.  Initial conversations also took place around Renal CNS common issues. A	Improved nursing communication and engagement	<b>G</b>

SPRUN Annual Report 2019/2020

Objective Number	Smart Objective	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31-12-2019	Anticipated Outcome	RAGB status
				meeting is being planned to discuss further		
<b>2. Service Development and Delivery</b> [linked to Quality Dimensions 1,2,3,4,5,6]						
2019-03	Develop Nephrotic Syndrome pathways and further resources following the review of current guideline			Final draft circulated for feedback. Ready to be formally launched. Had been planned for SPRUN event in March which unfortunately had to be cancelled due to current COVID-19 situation.	Patients receive standardised care based on evidence and best practice	<b>G</b>
2019-04	Review Haematuria guideline using process agreed during Nephrotic Syndrome guideline review			Carried forward due to delays with NS guideline which turned into a bigger project than was initially anticipated. Initial session planned for education event which was cancelled due to COVID-19.	Patients receive standardised care based on evidence and best practice	<b>R</b>
2019-05	Develop and agree standards of care for paediatric renal and urology services			Following a number of attempts to engage with a SoC there was little buy in from the clinical community. Agreed to postpone this objective and replace it was a revised joint clinic	Patients receive standardised care based on evidence and best practice	<b>R</b>

SPRUN Annual Report 2019/2020

Objective Number	Smart Objective	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31-12-2019	Anticipated Outcome	RAGB status
				guidance which could then be audited.		
2019-06	Develop a service map for Scottish Renal and Urology services			Service map has been compiled and added to the SPRUN website. A small number of clinics are still to be finalised once responses are received from the local team.	Awareness of current service provision for both patients and professionals	<b>G</b>
2019-07	Engage with diagnostic networks around input into imaging provision and guideline development			Discussions are ongoing	Ensuring guidelines are achievable from the outset and reducing variation	<b>A</b>
<b>3. Stakeholder Communication and Engagement</b> <small>[linked to Quality Dimensions 1,3,4,5,6]</small>						
2019-08	Engage with patients and families to establish a patient reference group			A number of responses were received from interested parents. Although a group has been established a plan is now needed to ensure they have meaningful opportunities to engage	Patient / family feedback about their issues and priorities	<b>G</b>

SPRUN Annual Report 2019/2020

Objective Number	Smart Objective	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31-12-2019	Anticipated Outcome	RAGB status
2019-09	Review and develop website to ensure it is a useful resource			Ongoing, will continue to evolve naturally as other items develop.	Improved engagement with all stakeholders	<b>G</b>
2019-10	Work in partnership with 3 <sup>rd</sup> sector organisations to develop patient/family engagement activities			Carried forward to 2020/21 work plan.	Improved patient communication and engagement	<b>A</b>
<b>4. Education</b> [linked to Quality Dimensions 1,2,3,4,5,6]						
2019-11	Hold a network members day			Had been due to take place on 27 <sup>th</sup> March however was postponed due to COVID-19 situation	Effective communication with wider network membership	<b>A</b>
2019-12	Deliver a programme of education sessions based on identified needs (minimum of 3 sessions)			Complete.	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	<b>B</b>
2019-13	Pilot of local renal and urology road show aimed at general paediatric staff			On hold due to a debate around the purpose of the session. Due to a number	Education and training opportunities for	<b>A</b>

SPRUN Annual Report 2019/2020

Objective Number	Smart Objective	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31-12-2019	Anticipated Outcome	RAGB status
				of cancelled Steering Group meetings it was not possible to have a wider discussion.	clinicians involved in the renal and urology patients which either reinforces existing best practice or results in changes in practice	
<b>5. Audit and Continuous Quality Improvement</b> <small>[linked to Quality Dimensions 1,2,3,4,5,6]</small>						
2019-14	Develop audit based on revised nephrotic syndrome guideline			Carried forward due to delays with NS guideline which turned into a bigger project than was initially anticipated.	Monitoring of revised guideline to ensure patients receive standardised care based on evidence and best practice	<b>A</b>
2019-15	Develop and implement ABPM action plan based on audit results			Meeting planned took place 6/8. Action plan and measures discussed. Further work to be completed via email.	Patients receive standardised care based on evidence and best practice	<b>A</b>
<b>6. Value</b> <small>[linked to Quality Dimensions 1,2,3,4,5,6]</small>						
2019-16	SPRUN review			Review to report to NSSC in June 2020. Towards the		<b>G</b>

SPRUN Annual Report 2019/2020

Objective Number	Smart Objective	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31-12-2019	Anticipated Outcome	RAGB status
				end of the review it emerged that there was a move to expand the scope of the PRTS. Further work was agreed to align both reviews.		



## 6. Proposed Work Plan for 2020/21

### *Draft SPRUN WORKPLAN – 2020-21*

Please ensure that the annual workplan reflects the agreed objectives in the current network strategic workplan.

All work objectives should be listed under the most appropriate heading. Headings correspond to the agreed network core objectives:

7. 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](#));
8. Support the design and delivery of services that are evidence based and aligned with current strategic and local and regional NHS planning and service priorities.
9. 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 User are involved in the Network and explicitly in the design and delivery of service models and improvements.
10. Improved capability and capacity in renal and urology care through design and delivery of a written education strategy that reflects and meets stakeholder needs.
11. Effective systems and processes to facilitate and provide evidence of continuous improvement in the quality of care (CQI).
12. Generate better value for money in how services are delivered.

When defining network objectives please consider the NHS Scotland policy aims described in [Realistic Medicine](#), as well as the Institute of Medicine's six dimensions of quality, which are central to NHS Scotland's approach to systems-based healthcare quality improvement:

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

#### Key

RAGB status	Description
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SPRUN Annual Report 2019/2020

<b>RED (R)</b>	The network is unlikely to achieve the objective by the agreed end date.
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<b>BLUE (B)</b>	The network has been successful in achieving the network objective to plan.

Objective Number	Smart Objective	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31 <sup>st</sup> March 2020	Anticipated Outcome	RAGB status
<b>1. Effective Network Structure and Governance</b> [linked to Quality Dimensions 3,4,5,6]						
2020-01	Identify a model that enables the network to function effectively, encouraging network members to take ownership and increase wider engagement.		Core team		Improved stakeholder communication and engagement	
2020-02	Ensure the stakeholders are properly supported with new ways of working by developing and signposting to guidance on Attend Anywhere.		Core team			
<b>2. Service Development and Delivery</b> [linked to Quality Dimensions 1,2,3,4,5,6]						
2019-03	Develop Nephrotic Syndrome pathways and further resources following the review of current		M Durkan	Final draft circulated for feedback. Ready to be formally launched. Had	Patients receive standardised care based on	

SPRUN Annual Report 2019/2020

Objective Number	Smart Objective	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31 <sup>st</sup> March 2020	Anticipated Outcome	RAGB status
	guideline			been planned for SPRUN event in March which unfortunately had to be cancelled due to current COVID-19 situation.	evidence and best practice	
2019-04	Review Haematuria guideline using process agreed during Nephrotic Syndrome guideline review		TBC	Carried forward due to delays with NS guideline which turned into a bigger project than was initially anticipated.	Patients receive standardised care based on evidence and best practice	
2020-02	Development of a programme of pathways or guidelines based on identified stakeholder priorities.		M Durkan		Consistent practice in Scotland delivering patient-centred care	
2020-03	Refresh of joint clinic guideline to ensure reflects current picture and support the Scottish Government aim of delivering care as locally as possible.  Once refreshed the guideline will be audited and a benchmarking exercise completed.		Core team		Consistent application of joint clinics across Scotland to allow tertiary input close to home	
2020-04	Support the development of a consistent transition process by:		M Durkan / L Watson		Delivery of improved and consistent	

SPRUN Annual Report 2019/2020

Objective Number	Smart Objective	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31 <sup>st</sup> March 2020	Anticipated Outcome	RAGB status
	<ul style="list-style-type: none"> <li>Establishing the current transition process</li> <li>Identifying areas of improvement and developing a plan for improvement</li> </ul>				transition services	
<b>3. Stakeholder Communication and Engagement</b> [linked to Quality Dimensions 1,3,4,5,6]						
2020-05	Set up a SLWG to seek the views of patients and their families via a patient experience questionnaire.		TBC		Improved engagement with patients and ensure SPRUN objectives reflect patient priorities	
2020-06	Scope the requirements and interest in re-establishing a nursing group to take forward nurse priorities		L Watson		More effective network through involving key stakeholders	
2020-07	Engage with DGH staff to understand the priorities of local teams and how SPRUN can continue to support them  In the current climate this is likely to take place via Microsoft Teams meetings or similar.		Core team			
<b>4. Education</b> [linked to Quality Dimensions 1,2,3,4,5,6]						

SPRUN Annual Report 2019/2020

Objective Number	Smart Objective	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31 <sup>st</sup> March 2020	Anticipated Outcome	RAGB status
2020-08	Engage with SPRUN stakeholders to allow them to feedback on how education is delivered going forward via a Learning Needs Analysis. To include at least: <ul style="list-style-type: none"> <li>• Current priority topics</li> <li>• Optimal format</li> </ul>		I Shaheen		Improved knowledge for relevant healthcare professionals that either reinforce existing best practice or results in changes in practice	
2020-09	Continue to deliver a programme of education which meets identified needs of staff groups including continuing with annual education event		I Shaheen			
<b>5. Audit and Continuous Quality Improvement</b> <small>[[linked to Quality Dimensions 1,2,3,4,5,6]</small>						
2019-15	Develop and implement ABPM action plan based on audit results		B Oates		Patients receive standardised care based on evidence and best practice	
2020-10	Identify what data is already available from existing sources. Use this to identify audit and QI activity based of activities above and existing data sources.		M Durkan / L Watson / S Burns		Identified service improvement projects based on emerging outcome data	

SPRUN Annual Report 2019/2020

Objective Number	Smart Objective	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31 <sup>st</sup> March 2020	Anticipated Outcome	RAGB status
<b>6. Value</b> [linked to Quality Dimensions 1,2,3,4,5,6]						

## Appendix 1: Steering Group Membership

<b>Name</b>	<b>Designation</b>	<b>Organisation</b>
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 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 Urologist	NHS Greater Glasgow and Clyde
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 2019/2020 is below:

