

# Dialysis commissioning: time for the kidney community to seize the initiative

In October 2014, the kidney community was informed by NHS England that it intended to devolve dialysis services to clinical commissioning groups (CCGs).<sup>1</sup> Initially, no consultation was planned and it was intended that the new model be implemented from April 2015. NHS England did not provide a clear explanation for the basis of its proposed changes, nor did it explain the expected improvements or the rationale for implementation within such a short period of time. The approach of devolving responsibility for dialysis to CCGs was inconsistent with the commissioning of kidney transplantation, which would remain a specialised service, despite being part of the same care pathway for people with kidney failure.

The British Kidney Patient Association (BKPA) worked hard with policy-makers and others to present the case against the proposal and, instead, for NHS England to work with the kidney community towards a better solution.<sup>2</sup> Following concerted pressure from kidney charities, patients and professionals, the decision was reversed.<sup>3</sup> In our submissions to NHS England, and subsequently, we have made it clear that our charity wishes to collaborate in order to develop a better solution for commissioning.

## The British Kidney Patient Association believes that any future commissioning approach must include:

- National standards and pricing for kidney care
- Robust evaluation methodology, measurement and reporting procedures, so that quality, experience and outcomes of care can be seen and acted upon in a timely manner
- A means to enforce standards in order to ensure adherence
- Clear accountability for everyone along the care pathway, so that patients know who is responsible for their care
- Guaranteed access to all suitable choices and locations of care
- Demonstrable, achievable outcomes for patients
- Access to a skilled multidisciplinary workforce to care for patients' medical, social and psychological needs
- The sharing of learning and good practice between networks.

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## Current situation

We have been assured by NHS England that there are no immediate plans to review the commissioning arrangements for dialysis. However, the BKPA is aware of variations in care across the country, including in the timely diagnosis of chronic kidney disease and the access to a full choice of dialysis therapies. There will, of course, be other changes in the NHS, as new developments occur and new models of care emerge, and the BKPA believes that we must not wait until another change to kidney services is imposed.

## Commissioning for improvement

We believe that improving the quality of care for kidney patients is essential, and that commissioning has an important role in driving improvement. Our view is that specifications, tariffs and accountability must continue to be held at a national level so that patients can expect the same standard of care wherever they live. Future models should look at the whole kidney care pathway, not at dialysis alone, from chronic kidney disease detection and early management to transplantation, dialysis and supportive care.

At a regional level, the West Midlands and London strategic clinical networks have decided to focus on specific aspects of kidney care that reflect local needs, and evaluate the improvements that this focus may deliver.<sup>2</sup> The London network, directed by the *Kidney Health: Delivering Excellence* report<sup>4</sup> and patients, is focusing on prevention, personalised care and home therapy. These approaches retain national accountability and are of great interest, as they cover areas large enough to see the effects of innovation across the area and small enough to be able to respond to local needs.

## Conclusion

The BKPA concludes that now is the time to take the opportunity to evaluate a regionally based model of care. We are working with policy-makers, patients, professionals and commissioners to achieve this.

We want to see concerted and focused joint action to improve outcomes, care and commissioning of the whole kidney care pathway; this will require patients, healthcare professionals and their representative charities to work together ■

## References

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3. Department of Health. *Arrangements for the transfer of commissioning responsibilities for renal dialysis and morbid obesity surgery services from NHS England to Clinical Commissioning Groups. Government response to consultation*. Leeds: Department of Health, 2015. [www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/404242/Government\\_Response.pdf](http://www.gov.uk/government/uploads/system/uploads/attachment_data/file/404242/Government_Response.pdf) (last accessed 17/09/15)
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