

National Renal Advisory Board

Minutes of Meeting

NATIONAL RENAL ADVISORY BOARD MEETING

Held on Friday 23rd March, 2012 at 9.30 am

Board Room, Building 3, CMDHB, 19 Lambie Drive, Manukau

Present: Mark Marshall (Chairperson)

Michael Papesch, Tonya Kara, Rachael Walker, Fredrick Doss, Debbie Eastwood, David Mc Gregor, Murray Lekis, Karin Norman, Kelvin Lyn

Guest: John Collins (conference call), Paula Martin

Apologies: Nick Polaschek, John Schollum, Walter Van Der Merwe

Review of Previous Minutes

Formal approval of the minutes – agreed

Actions from Previous Minutes:

1. Mark to talk to Ian – Auckland region
2. Mark to write formally to RSA and Kidney Health regarding the proposal of combining the meeting for both professions, plus technicians who also need to be included
3. Kelvin will update the information on the website and ask Nick who is the contact to get the website updated
4. Mark to send Michael the last 3 sets of minutes for updating of the public minutes onto the website

General Business

ITEM 1 - TRANSPLANTATION

Discussion:

There are currently monthly meetings with National Health Board (NHB). The funding discussions are around; funded per head of incidence population, suggestion to use RRT numbers. The mechanism is being discussed – e.g. IDF, WIES, top slice

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Five Point Plan – Mark has heard back from the minister and he wants to meet in the near future. Question – what are the key messages? And who should go and see him?

Elements of the 5 point plan – most important element is getting this (transplantation) on the government's radar, this includes the need for extra funding for transplant – there is a process underway for this, so focus should be on paired exchange/ABO incompatible, Woodhouse Bill, increased support for transplant e.g. a pilot in the central region using a different support approach and potentially compare this to the model in the Auckland region.

The Minister could support getting more focus on transplantation without a significant financial investment and focus on the costs – Michael's graph – bending back cost curve would be important. The activity in the central region fits well with this discussion.

Paired Exchange – being managed by ADHB, to date there are 17 pairs, Tonya gave an update that there is a CNS who has been freed up to give her more time to undertake this work. The literature says that you need 100 pairs for an effective program.

Funding for Paired Exchange – suggestion we could get in an international expert to undertake a due diligence of our system also can we ask the group who set this up what has been done to date (Ian to give an update).

The NHB has taken on the role of working on a more sustainable funding model for transplantation. They are now in the phase of costing transplantation – work up and live donor work up is more challenging - the recipient work up, Middlemore Hospital has completed their an audit, and that nurse is going across to ADHB to do the same thing. Wellington are not able to do this.

Christchurch – Justin has talked to Dave – however this is prevalent patients – Dave might be able to get numbers. Other work is live donors – Christchurch is looking at this – along with costing – Mark confirmed that the costing is less important at this stage.

Action:

Rachael to follow how Hawkes Bay is going on the audit and feedback to Mark (Janine is undertaking this work).

Mark to send Rachael the details of the patients Janine should review

Mark to organise a teleconference with Michael, Murray and Ian to discuss the Paired Exchange program and how we might use funding to move this program forward – i.e. 100 paired exchanges listed

Who should visit the minister – agreement that Mark, Michael, & Ian (transplant)

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ITEM 2 – NRAB STRUCTURE

Michael – raised the concern about his term on the board – agreement that this should be added to the standard agenda – Michael to forward letter of appointment to this board, look at the terms of occupation, TOR for the consumer rep, determine the process for recruitment – however Rachael confirmed that Michael was appointed formally in 2010.

Actions:

Mark to put in a standard agenda item of members and their term for review at each meeting

Mark to confirm the standard term – thought to be 2 years and then renewable 3 years

Rachael to forward the minutes that had the names of members and term to Debbie for inclusion in the minutes

ITEM 3 - TAS IT BUSINESS CASE - NATIONAL IT PROJECT

No further progress – discussion to either update current antiquated system – or alternatively look at the Waitemata system which might be transferable and low cost – uses Soprano

Action:

Nil to date

ITEM 4 CHRONIC KIDNEY DISEASE PILOTS

There are four CKD pilots currently underway around the country and they are all providing regular reports.

Discussion:

CKD meeting – John, Rachael and MOH – Sara had a meeting to discuss the meeting

Plan of the day – guest speakers – epidemiology (looking for 3 papers – John updated on the speaker options and specific topics), and then pilot groups x 4 plus ADHB and Horowhenua, and Vili about decision support tools.

New CKD guidelines should be out so these can be discussed

Invite knowledgeable people from MOH, renal unit to send a representative nephrologists and nurse plus some primary health care clinicians (have some suggestions) and Kidney Health NZ

Outputs – useful information from pilots, i.e. costs, reliability, applicability, long term monitoring of CKD

CKD prevalence, incidence, outcomes – Mark to present (question test safe data)

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50-60 people to be invited – venue Villa Maria, Auckland

Funding – some \$ from pilots and MOH will put up some money - Tim Matthews from Australia might be available to come and talk about the barriers they have experienced in Australia

Is there anyone that should be invited? Someone from the Diabetes community would be beneficial; we need to link through Diabetes as part of long term conditions – suggestion Dr Brandon Orr Walker

Primary Care representative – suggestion through Procure – suggestion to NZNO for practice nurses

Actions:

Rachael/John to consider the suggestion of inviting Dr Brandon Orr Walker (Diabetes)

ITEM 5 PD REGISTRY – John Update

The PD registry has had a review process undertaken, and now the PD registry has been updated, however there is an ongoing process of data clean up – research fellow to work on the data and look at reports, problem for centres is data going in and nothing coming out, therefore centres have raised concerns about continuing to contribute to the registry

Option is to close the registry and just continue ANZDATA

Data collection on registry, limited scope, electronic scope, contribute to ANZDATA

People running registry – nephrologists, nurses and bio stats knowledge

Feedback – northern centres stay in, southern including wellington – want to opt out – responses discussed at nephrology meeting – quite good support to continue – some that opted out would reconsider if registry got up and running –

Outcome to continue – John to discuss with Stephen – data requirements

Value of registry – depends on what it can deliver in a very timely manner – and would support national buy –in. The new bio stats person is working hard on the data, focusing on peritonitis complications – once data is ready (John is happy with it) – expected date not available however John is meeting with her this pm and then should have a clearer picture

Ownership of the registry – there are 3-4 nephrologists who have indicated they want to be involved – Northland, Waitemata, Auckland and maybe Waikato – no nurses at the moment, but should be achievable, John is getting together a teleconference with this group in late April – this group will take over the management of the registry and then the fellow will join in August.

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Workload required in addition to ANZDATA and lack of output – having output data would help in getting buy in from Wellington

Data on complications of peritonitis

Action:

John to organize a teleconference with 3-4 nephrologists who have indicated they want to be involved in late April

ITEM 6 REPORT ON KIDNEY HEALTH NEW ZEALAND

- Continuing regional workshops
- Home HD patients expenses – what are we doing?
- Kidney stones – common problem, so Kidney Health are going to look into providing more information on this
- World Kidney Day – various activities around the country – there was great print and social media coverage
- Kelvin has spoken to Nick – he is following this up - should we give \$50k to Cari Guidelines

Action:

Kelvin to circulate current information on reimbursement for HHD patients

Kelvin to go back and review the booklet based on discussion today – predialysis is an area of concern

All join Facebook – please join the website for Kidney Health

ITEM 7 SUB COMMITTEE REPORTS

STANDARDS & AUDIT SUB COMMITTEE – (GRANT not available)

We need to find someone to take on the leadership of this group – Mark to follow up

TRANSPLANTATION SUB COMMITTEE – TONYA

Nil

RSA NURSING INTEREST GROUP –KARIN

Nursing Advisory group on track to present Knowledge and Skills framework on target to present July 2012) – out for consultation and then National nursing consortium (NZNO, Maori nurses and tertiary sector) who are tasked by nursing council to review groups applying for speciality nursing groups – one endorsed to date - respiratory

Actions:

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Continue to progress above

NZ BOARD OF DIALYSIS PRACTICE - FREDRIC

The Board had a meeting yesterday, Bonent examine shortly, nurses from Auckland region doing the exam. Medical Sciences Council will cover the dialysis technicians. Fredrick will write to Clinical Physiologist Board to be under this and then covered by the Medical Sciences Council – not sure on the timeframe. NZBDP will be an incorporated professional society. Some work is on hold as the council has its own templates. Technician course Fredrick is talking to MIT who are open to run the course – prerequisite papers. They could assist us to take through NZQA.

Action:

Mark to do a support letter from ANZSN and NZRAB directly to Fredrick supporting the technicians

ITEM 8 RENAL SERVICE IMPROVEMENT PROJECTS

No update

GENERAL BUSINESS

PD DOPPS

Now up to 5th phase – 2 centres contributing in Auckland region to Haemo DOPPS – comprehensive data available – new proposal afoot – PD DOPPS

The focus will be on technique failure/outcomes – there are a lot of issues to be resolved i.e. definitions – when do you start etc

Initiative to improve PD outcomes – funding would be required about \$50k – Mark – sees an opportunity to get a 3-4 year grant (HRC) to support the broader PD and PD registry work on a national basis. Put forward what do we need to do to maximise PD utility, how do we do the transition to Haemo – this PD DOPPS would assist us in getting this information and comparing internally and internationally. This could be framed as health care delivery, cost effectiveness for a grant – if the PD registry was well supported this would come together on a national basis. ARMAC – Australian forum which might also be an avenue – they don't have grant rounds.

We should try multiple agencies for funding or supporting – not really a MOH specific initiative

Advisory board support would be helpful for this initiative – John would appreciate some indication from the board on the direction to be documented

Home Dialysis Centre – Christchurch

In the June quake the HHD Training suffered damage and then further in the December, now the building codes have shifted – the building no longer complies with building requirement (4 storey) –

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unfortunately it will need to be demolished. Currently the unit is looking for another suitable site/premise

Home Dialysis Meeting

Kelvin up date - Interesting meeting in Australia, there were very high quality presentations from NZ. We would ideally like to have the next meeting in NZ – somewhere with direct flights.

Action:

Mark to send a message to Renal HOD's to let Kelvin know if there is interest

Emergency Dialysis Plan

Action:

Debbie to ask MMH doctors to do a triage form as an attachment to the plan

Dave to work with Adrian to document key activities that a disaster centre might use to manage if they were in a similar situation as Christchurch

Agreement to load onto the NZRAB website

Next Meeting

To be sent out by Mark – closet to the dates this year