

Agenda Item

4.2

Quality Safety and Outcomes Sub-Committee
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Welsh Kidney Network

Dyddiad y Cyfarfod / Date of Meeting	15/12/2025
Statws Cyhoeddi / Publication Status	Open/ Public
	Not Applicable
Awdur yr Adroddiad / Report Author	WKN Quality and Patient Safety Lead WKN Lead Nurse WKN Deputy Network Manager
Cyflwynydd yr Adroddiad / Report Presenter	WKN QPS Lead
Noddwr yr Adroddiad / Report Sponsor	Melanie Wilkey, Director of Commissioning for Specialised Services

Pwrpas yr Adroddiad / Report Purpose	For Noting
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Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/Group)		
Committee / Group / Individuals	Date	Outcome
	Click or tap to enter a date.	Choose an item.

Acronyms / Glossary of Terms	
AV	Arteriovenous (Fistula)
CVUHB	Cardiff & Vale University Health Board
KPIs	Key Performance Indicators
NRI	National Reportable Incidents

NWJCC	NHS Wales Joint Commissioning Committee
UKKA	UK Kidney Association
WKN	Welsh Kidney Network

1. SITUATION/BACKGROUND

The purpose of this report is to provide a briefing on the current Quality Patient Safety issues within the services that are commissioned by the Welsh Kidney Network (WKN) across Wales.

The WKN is a vehicle through which specialised kidney services are planned and developed on an all-Wales basis in an efficient, economical and integrated manner and provides a single decision-making framework with clear remit, responsibility and accountability.

The WKN continues to work with the Regions to develop and monitor KPIs using real time Welsh data reporting, this has been enabled by the production of audit dashboards for commissioned areas. The WKN also incorporates the National published reports from the relevant UK audit organisations into this work. Collaboration work also continues with the UK Kidney Association with continued representation on the UKKA Patient Safety Group.

2. SPECIFIC MATTERS FOR CONSIDERATION

2.1 New Incidents for Reporting

There is one new NRI for this reporting period:

Provider organisation	Incident reference and date	Reported into JCC
Cardiff & Vale University Health Board	ID-10129 11 th November 2025	25 th November 2025

2.1.1 Brief description

There have been two cases of patients in CVUHB missing out on viable kidney transplant offers as a result of consultant workforce gaps leading to operating constraints. CVUHB have reported this NRI under principle 4 of the National Policy on Patient Safety Incident Reporting & Management.

2.1.2 The position of the JCC and WKN

JCC are aware that an investigation is underway to determine the detail and JCC/WKN are awaiting an invitation to join the initial review. NHS Blood and Transplant and Welsh Government have been informed.

In the interim the following measures have been put in place:

- JCC have asked CVUHB for assurance that this will not reoccur – a copy of the plan and the mitigated actions they have put into place to provide a safe transplant programme in Cardiff
- JCC have also requested a business continuity plan - other service provider options.
- The risk will be added to the JCC Organisational risk register subject to Senior Leadership Team Review.

NRIs under investigation are held on a log by WKN. On NRIs being closed a summary and learning outcomes are shared by WKN with the Nephrology and Transplant clinical community in Wales.

2.2 Closed Incidents

2.2.1 INC25-02-042 – Catastrophic AV fistula haemorrhage at home

A patient with an aneurysmal arteriovenous fistula used for haemodialysis had a catastrophic haemorrhage at home and passed away. An NRI investigation has been completed.

The patient's fistula had become aneurysmal over a period of time meaning the vessel wall had weakened and ballooned out, making it fragile and more prone to rupture. Following assessment by the vascular access clinic, to reduce the risk of bleeding, it was decided to stop using the AV fistula and a central venous catheter was inserted instead. A plan was made for the surgical excision of the aneurysmal segment and bridging of the fistula with a graft. The patient was comorbid and frail and there were delays in the process of assessing and establishing fitness for surgery. The patient had waited beyond the original recommended date of surgery when the haemorrhage occurred.

Recommendations:

- Continuous review of techniques within dialysis units should be audited and overseen by the Nephrology and Transplant Directorate.
- Review and education around patient preferences should be initiated.
- Staff recruitment, retainment, workload optimisation should be improved.
- There should be clear processes and escalation pathways for staff to follow to minimise any potential delays for patients who require additional investigations for fitness for surgery assessments.
- Patients on the urgent waiting list should be tracked and monitored against their intended surgery date so that any delays can be actioned or escalated sooner.
- Foster improved communication and coordination between different departments to streamline processes and ensure timely updates around surgical delays.

3. KEY RISKS

3.1 Risk Register

The Risk Register for the WKN is regularly reviewed through the following WKN groups:

- WKN Regional meetings with the three Welsh providers; Betsi Cadwaladr University Health Board (BCUHB), Cardiff & Vale University Health Board (CVUHB), Swansea Bay University Health Board (SBUHB)
- WKN Quality Patient and Safety Performance Assurance meetings;
- WKN Senior Leadership meetings; and
- The WKN Board.

There are in total six risks on the current Welsh Kidney Network Commissioning risk register, with no movement of risks within this reporting period.

3.1.1 Closed risks

There are no closed risks in this reporting period.

3.1.2 New risks

There are no new risks in this reporting period

3.1.3 Risks above 15

There is one risk above 15 and appears on the JCC Organisational Risk Register; JCC 65, WKN 18 – Renal Dialysis Capacity across Wales, risk rating 16.

IF...the number of patients requiring dialysis continues to grow annually at a rate of 3–4% (or higher based on some projections)

THEN...the demand will exceed current capacity across Wales for both unit-based and home dialysis.

RESULTING

- Limited availability of unit-based dialysis slots
- Decreased accessibility to unit-based dialysis facilities near patients' homes
- Increased reliance on twilight (evening) dialysis slots, which are associated with elevated patient safety risks, such as fewer medical staff being available and patients traveling home late at night.
- Delays or limits on the number of patients accessing home dialysis, as the growing demand exceeds the capacity of the nursing workforce to provide timely training and ongoing monitoring.
- Increased pressure on the NEPTS service to transport a greater number of patients to and from dialysis session 3 times per week

Controls in place	Action plan
<p>Additional capacity provided in Welshpool and through the new Bridgend Dialysis Unit will be monitored through provider meetings</p>	<p>Commission a distinct piece of work on Demand and Capacity Modelling, The HEOR presentation was provided to WKN Network Board meeting 24/09/25 on the demand.</p> <p>Further workshops to be held with the regional providers (x3) to go through the regional detail</p> <p>Monitor the variation between the 1.77% uplift applied as part of the IMTP Foundation plan and the projected 3.7% growth for dialysis across Wales - Qtr 4 2025/26</p> <p>Risk will form part of the IMTP plan for 2026/202</p>
<p>Focus on increasing home therapies and transplant will increase capacity in the units, although a percentage of patients will return to unit dialysis for respite or due to kidney transplant failure, which needs to be accounted for when assessing capacity pressure</p>	<p>Full workforce analysis with Regions and bench marking to quantify the various staffing costs per session.</p>
<p>Strategic Prevention workstreams; medium/long term effect</p> <ul style="list-style-type: none"> • All Wales Community Healthcare Pathway for referrals for Chronic Kidney Disease have been agreed and introduced into Primary Care. • National Primary Care CKD optimisation project approved as a mandatory component of the new GMS contract for all GP practices in Wales 	<p>Monitor the variation between the 1.77% uplift applied as part of the IMTP Foundation plan and the projected 3.7% growth for dialysis across Wales - Qtr. 4 2025/26</p> <p>Risk will form part of the IMTP plan for 2026/202</p>

4. ASSESSMENT

Objectives / Strategy

Dolen i Amcan (au) Strategol CBC / Link to JCC Strategic Objectives(s)	Ensure Quality
Dolen i Ddeddf Llesiant Cenedlaethau'r Dyfodol – Nodau Llesiant / Link to Wellbeing of Future Generations Act – Wellbeing Goals 150623-guide-to-the-fg-act-en.pdf (futuregenerations.wales)	A Healthier Wales
	If more than one applies please list below:
Dolen i Hwyluswyr Ansawdd <i>(Canllawiau Statudol Dyletswydd Ansawdd (llyw.cymru)) / Link to Enablers of Quality</i> (Duty of Quality Statutory Guidance (gov.wales))	Whole-systems Perspective
	If more than one applies please list below:
Dolen i Feysydd Ansawdd <i>(Canllawiau Statudol Dyletswydd Ansawdd (llyw.cymru)) / Link to Domains of Quality</i> (Duty of Quality Statutory Guidance (gov.wales))	Safe
	If more than one applies please list below:
Effaith Amgylcheddol/ Cynaliadwyedd (5R) / Environmental /Sustainability Impact (5Rs)	No - Not Applicable
	If more than one applies please list below:

Impact Assessment		
Ansawdd <i>Ydych chi wedi ymgymryd â Sgrinio Asesiad o'r Effaith ar Ansawdd? / Quality</i>	Yes: <input type="checkbox"/>	No: <input checked="" type="checkbox"/>
	Outcome:	If no, please include rationale below:

<i>Have you undertaken a Quality Impact Assessment Screening?</i>		
Cydraddoldeb <i>Ydych chi wedi ymgymryd â Sgrinio Asesiad o'r Effaith ar Gydraddoldeb? /</i> Equality <i>Have you undertaken an Equality Impact Assessment Screening?</i>	Yes: <input type="checkbox"/>	No: <input checked="" type="checkbox"/>
	Outcome:	If no, please include rationale below:
Cyfreithiol / Legal	There are no specific legal implications related to the activity outlined in this report.	
Enw da / Reputational	There is no direct impact on the reputation of the Joint Committee as a result of the activity outlined in this report.	
Effaith Adnoddau <i>(Pobl / Ariannol) /</i> Resource Impact <i>(People / Financial)</i>	There is no direct impact on resources as a result of the activity outlined in this report.	

5. RECOMMENDATIONS

The Quality Safety and Outcomes Sub Committee is asked to:

- **Note** the report.