

**Debate Pack**

18 May 2022

Number 2022/0090

By Niamh Foley,  
Tom Powell

---

# Improving dialysis care outcomes

<b>1</b>	<b>Background</b>	<b>2</b>
<b>2</b>	<b>Improving access to dialysis</b>	<b>3</b>
<b>3</b>	<b>Parliamentary material</b>	<b>5</b>
<b>4</b>	<b>Press and journal articles</b>	<b>9</b>
<b>5</b>	<b>Further reading</b>	<b>11</b>

# 1

## Background

A Westminster Hall debate on ‘improving dialysis care outcomes’ is scheduled for 19 May 2022 at 3pm. The subject for this debate was determined by the Backbench Business Committee and Jim Shannon MP will open the debate.

The debate can be watched live on [parliamentlive.tv](https://parliamentlive.tv).

NHS renal services deal with patients with kidney failure and provide patients with renal replacement therapy (RTT). This includes dialysis and kidney transplants. In England around 58,000 people receive RRT.<sup>1</sup> According to NHS England around 4 in 10 RTT patients are treated by circulating their blood through a machine which cleans it of toxins (haemodialysis). This can be done either in hospital or at home. About 1 in 10 people are treated using the thin membrane that lines the abdominal cavity (the peritoneum) as a filter. This is called peritoneal dialysis. Approximately half of RTT patients are treated by having a kidney transplant.<sup>2</sup> Further information on haemodialysis and peritoneal dialysis can be found on the NHS website.<sup>3</sup>

An NHS England briefing in 2018 provided further background on the development of treatments for kidney failure. Regarding dialysis it noted that:

...in most cases dialysis can't cure kidney disease, so treatment is indefinite and has many restrictions unless a transplant is possible. Average life expectancy on dialysis is 5-10 years, but some patients have lived well on dialysis for 20 or 30 years.<sup>4</sup>

The UK Kidney Association, previously known as the Renal Association, is the professional body for UK nephrologists (renal physicians, or kidney doctors) and renal scientists in the UK. They provide annual reports on the incidence, management and outcome of renal disease.<sup>5</sup>

For further background, see:

- [Kidney Care UK webpage, facts and stats](#)
- [Kidney Care UK webpage, World Kidney Day 2022 \(10 March 2022\)](#)
- [Kidney Research UK webpage, Care and treatments for people with kidney failure](#)

---

<sup>1</sup> NHS England and NHS Improvement, Renal Medicine GIRFT Programme National Specialty Report, March 2021. [The full report is available on the UK Kidney Association website](#) (PDF).

<sup>2</sup> NHS England, [Renal Services Commissioning](#)

<sup>3</sup> [NHS website, Dialysis](#)

<sup>4</sup> NHS England, [Spotlight on Kidney failure](#), 2018 (PDF)

<sup>5</sup> The latest report is the UK Kidney Association's [23rd Annual report](#), which provides data to the end of 2019.

- [National Kidney Federation webpage, Home Dialysis Resource Centre](#)

## 2 Improving access to dialysis

In March 2021, NHS England and NHS Improvement published a report on renal medicine, as part of the Getting it Right First Time (GIRFT) programme.<sup>6</sup> It is based on data as well as visits to all 52 adult renal centres in England, including transplant centres, and is supported by professional societies and kidney patient charities.

A summary of the report noted that key recommendations included ensuring more kidney patients have the opportunity for dialysis at home. It recommends the promotion of home dialysis therapy to ensure it is offered to all suitable patients, reaching a minimum target rate of 20% of dialysis patients in every renal centre.<sup>7</sup>

The GIRFT report outlines seven actions to increase home therapy rates, including enhanced patient training facilities and staffing, and improved peritoneal catheter insertion services, to help achieve the minimum 20% target.<sup>8</sup>

The report also notes several other areas for improvement to renal services, learning from the experience of the Covid-19 pandemic, including improved access to kidney transplantation, and greater equity of access:

Patients who are able to receive a kidney transplant have a longer and better quality of life than those remaining on dialysis, and there are also economic benefits for the NHS. While transplant numbers have increased in the past decade (to 3,597 in 2018/19), there is significant geographical variation in transplant rates from living donors (LD) between patients cared for in referring centres compared with those cared for at units which also provide transplantation. There is also variation in access to transplants based on ethnicity, with patients from black and Asian communities less likely to receive a donated kidney.<sup>9</sup>

The report also calls for a radical review of haemodialysis vascular access provision:

The success and quality of haemodialysis (HD) care depends on creating safe, effective and long-lasting vascular access for the patient (the means of enabling blood to leave and return to the body), but current provision is below targets set

---

<sup>6</sup> NHS England and NHS Improvement, Renal Medicine GIRFT Programme National Specialty Report, March 2021. [The full report is available on the UK Kidney Association website](#) (PDF). [GIRFT](#) is a national programme designed to improve the treatment and care of patients through in-depth reviews of services, using data to support change.

<sup>7</sup> [Summary of the Renal Medicine GIRFT Programme National Specialty Report](#), March 2021

<sup>8</sup> As above.

<sup>9</sup> As above.

by the clinical community and is not improving. The GIRFT report outlines a series of ten actions to help define and deliver target vascular access rates.<sup>10</sup>

NHS England and NHS Improvement Specialised Commissioning is undertaking a National Adult Renal Services Transformation Programme (RSTP). The recommendations from the GIRFT speciality report on renal medicine are being implemented by the RSTP. The RSTP has appointed five expert renal clinical leads and established four clinical workstreams improving access, identifying best practice and developing solutions in chronic kidney disease, acute kidney injury, dialysis and transplants. NHS England and NHS Improvement have established 11 renal clinical networks which are finalising workplans and determining local priorities identified nationally through the Programme.<sup>11</sup>

All RSTP workstreams intend to make key deliverables available by April 2023. This will include documentation outlining best practice, a data dashboard of metrics to support better decision making and support the review of the renal service specification led by NHS England and NHS Improvement's Renal Clinical Reference Group.<sup>12</sup>

In 2018 the National Institute for Health and Care Excellence (NICE) published a guideline, Renal replacement therapy and conservative management.<sup>13</sup> This guideline covers RRT (dialysis and transplantation) and conservative management for people with chronic kidney disease stages 4 and 5. It aims to improve quality of life by making recommendations on planning, starting and switching treatments, and coordinating care.

---

<sup>10</sup> [Summary of the Renal Medicine GIRFT Programme National Specialty Report](#), March 2021.

<sup>11</sup> PQ135529 [on [Kidney Diseases: Health Services](#)], 10 March 2022

<sup>12</sup> PQ157400 [on [Kidney Diseases: Health Services](#)], 27 April 2022

<sup>13</sup> NICE guideline [NG107], [Renal replacement therapy and conservative management](#), October 2018

# 3

## Parliamentary material

### Parliamentary questions

#### Kidney Diseases: Health Services

**27 April 2022 | 157397**

**Asked by: Peter Dowd**

To ask the Secretary of State for Health and Social Care, when the Renal Services Transformation Programme's clinical workstreams on (a) improving access, (b) identifying best practice, (c) developing solutions to chronic kidney disease, (d) acute kidney injury and (e) dialysis and transplant plan to report their findings.

**Answering member: Edward Argar**

All Renal Services Transformation Programme workstreams intend to make key deliverables available by April 2023. This will include documentation outlining best practice, a data dashboard of metrics to support better decision making and support the review of the renal service specification led by NHS England and NHS Improvement's Renal Clinical Reference Group.

The clinical leads for the five workstreams were appointed by a competitive process. Once in post, clinical leads, supported by the programme team, recruited individuals with expertise in the relevant areas of the overall work plan. The teams are multi-professional with involvement by patient and public voice partners. Membership is not funded and is under continual review to ensure representation from relevant subject matter experts. Membership will continue to evolve as the workstreams develop. The clinical networks are at varying stages of resourcing and developing annual work plans. These workplans will include their local renal priorities and are currently being developed for review and agreement by regional commissioning teams by the end of the first financial quarter in 2022.

Guidance has been developed for specialist advice and the implementation of personalised care follow up for chronic kidney disease and transplants. This is available to providers via the National Outpatient Transformation Programme Futures platform. While NHS England and NHS Improvement do not intend to mandate the guidance, its use will be recommended to support providers and networks in the recovery of outpatient services following the pandemic.

#### Kidney Diseases: Dialysis Machines

**7 April 2022 | 128158**

**Asked by: Mr Laurence Robertson**

To ask the Secretary of State for Health and Social Care, what assessment he has made of the annual cost to the NHS per patient for (a) in-centre haemodialysis, (b) home haemodialysis, and (c) home peritoneal dialysis.

**Answering member: Maria Caulfield**

The average annual cost per patient for in-centre haemodialysis, home haemodialysis and home peritoneal dialysis in England is shown in the following table.

In-centre haemodialysis (three cycles per week)	£24,726
Home haemodialysis (three to four cycles per week)	£25,116
Home peritoneal dialysis (six cycles per week)	£21,216

Notes:

1. All costs will be indicative, as Market Forces Factor (MFF), transport costs, planned outpatient review and non-elective care will differ between patients and provider contracts.
2. It should be noted that reference costs represent the average cost per patient of delivering therapies in England, not the annual cost, as this is how the tariff is set. We have provided the average cost per patient for different types of haemodialysis and peritoneal dialysis as this data is held.

**Kidney Diseases: Dialysis Machines**

**17 December 2021 | 83405**

**Asked by: Chris Green**

To ask the Secretary of State for Health and Social Care, what assessment he has made of the variation in access to home kidney dialysis for patients from Black, Asian or minority ethnicity backgrounds compared to patients from other backgrounds; and what assessment he has made of the reasons for that variation.

**Answering member: Edward Argar**

No recent assessment has been made of the variation in survival rates for patients receiving dialysis at home compared to those receiving dialysis in-centre. Data on survival rates between home and in-centre dialysis is currently unsuitable for detailed comparative analysis, as there is a natural patient selection bias.

Information regarding the socio-economic and ethnic background of home dialysis patients is not collected centrally. As such, no specific assessment has been made of any variation in access to home dialysis. NHS England's Renal Services Transformation Programme aims to increase the provision of and equitable access to home therapies for kidney dialysis patients, following the recommendations of the Getting it Right First Time (GiRFT) national report on renal medicine published in September 2021.

### **Kidney Diseases: Dialysis Machines**

**17 December 2021 | 83404**

**Asked by: Chris Green**

To ask the Secretary of State for Health and Social Care, how many patients from lower socio-economic backgrounds have received kidney dialysis treatment at home in the last five years compared to patients from higher socio-economic backgrounds.

**Answering member: Edward Argar**

No recent assessment has been made of the variation in survival rates for patients receiving dialysis at home compared to those receiving dialysis in-centre. Data on survival rates between home and in-centre dialysis is currently unsuitable for detailed comparative analysis, as there is a natural patient selection bias.

Information regarding the socio-economic and ethnic background of home dialysis patients is not collected centrally. As such, no specific assessment has been made of any variation in access to home dialysis. NHS England's Renal Services Transformation Programme aims to increase the provision of and equitable access to home therapies for kidney dialysis patients, following the recommendations of the Getting it Right First Time (GiRFT) national report on renal medicine published in September 2021.

### **Kidney Diseases: Dialysis Machines**

**1 December 2021 | 80489**

**Asked by: Elliot Colburn**

To ask the Secretary of State for Health and Social Care, pursuant to the Answer of 9 November 2021 to Question 62570, on Kidney Diseases: Dialysis Machines, when his Department expects all renal centres to meet the recommendation outlined in the GiRFT report to achieve a 20 per cent minimum home dialysis rate; and what steps his Department plans to take to encourage those centres that have achieved a 20 per cent minimum home dialysis rate to increase that rate.

**Answering member: Edward Argar**

The Getting It Right First Time (GIRFT) speciality report on renal medicine, published September 2021, recommended that all renal centres provide a minimum of 20% of patients with dialysis services at home within 12 months.

NHS England and NHS Improvement's Renal Services Transformation Plan (RSTP) has established 11 regional clinical networks to meet this recommendation. Of 51 renal centres, 16 units have met or exceeded this minimum level, with several centres achieving more than 30% of patients receiving dialysis at home. NHS England and NHS Improvement have asked renal networks to ensure units continue to develop home therapies and increase levels of dialysis at home. Providers, integrated care systems and regional commissioners will monitor progress via the UK Renal Registry and NHS England Renal datasets.

The GIRFT report set a deadline for all centres to establish the required staffing model by September 2022. NHS England and NHS Improvement are encouraging clinicians and centres to consider the GIRFT recommendations in their work and the individual sites will evaluate how best to implement them.

## Early Day Motions

### World Kidney Day

**19 March 2021 | EDM 1621**

That this House notes that World Kidney Day takes place on Thursday 11 March 2021 on the theme of living well with kidney disease; recognises that people living with Chronic Kidney Disease are particularly vulnerable to covid-19 and have faced difficulty in accessing treatment, in attending life-maintaining dialysis sessions and have struggled with their mental health; commends the important work charities, such as Kidney Care UK, have done to support kidney patients throughout the pandemic and raise awareness of issues facing vulnerable patients; further recognises that only a small number of life-saving kidney transplants have been able to take place as health systems have not been able to support them safely during the covid-19 outbreak; and calls on the Government to ensure that the backlog of transplants will be reduced as the NHS begins to recover from the outbreak.



## 4

# Press and journal articles

The following is a selection of news and media articles relevant to this debate.

Please note: the Library is not responsible for either the views or the accuracy of external content.

## Press articles

['Dialysis machine saved my life but I can't afford to run it'](#)

Louise Hosie & Kevin Scott, STV News

11 May 2022

[Diaverum launches new holiday dialysis booking platform](#)

Vicky Karantzavelou, Travel Daily News (online)

5 May 2022

[Dialysis patient forced to choose between heating and home treatment amid cost of living crisis](#)

Monifa Bobb-Simon, ITV News

3 May 2022

['It's about what is right': mother's fight for shot at new kidney for autistic son](#)

Mark Brown, The Guardian

13 March 2022

[Dialysis patient appeals for life-saving kidney donor](#)

BBC News

1 October 2021

[Kidney transplants cancellation 'devastates' charities](#)

BBC News

3 August 2021

[£1.1m research to improve uptake of home kidney dialysis treatments](#)

The University of Sheffield

18 March 2021

## Journal articles

[Recovery of dialysis patients with COVID-19: health outcomes 3 months after diagnosis in ERACODA](#)

Marc H Hemmelder et al., Nephrology Dialysis Transplantation

14 January 2022

## 5

## Further reading

[Joint statement from professional and patient societies on Dialysis Away from Base \(DAFB\) in the UK](#)

Kidney Care UK

10 May 2022

[Backbench Business Committee transcript \(PDF\)](#)

House of Commons

19 April 2022

[Renal Medicine: GIRFT Programme National Speciality Report \(PDF\)](#)

By Dr Graham Lipkin and Dr William McKane, GIRFT Clinical Leads for Renal Medicine & NHS

March 2021

[PREM \(Patient Reported Experience Measures\) 2020](#)

Kidney Care UK

2020

[Spotlight on kidney failure \(PDF\)](#)

NHS

2018

[Renal replacement therapy and conservative management](#)

NG107, National Institute for Health and Care Excellence (NICE)

3 October 2018

### Disclaimer

The Commons Library does not intend the information in our research publications and briefings to address the specific circumstances of any particular individual. We have published it to support the work of MPs. You should not rely upon it as legal or professional advice, or as a substitute for it. We do not accept any liability whatsoever for any errors, omissions or misstatements contained herein. You should consult a suitably qualified professional if you require specific advice or information. Read our briefing '[Legal help: where to go and how to pay](#)' for further information about sources of legal advice and help. This information is provided subject to the conditions of the Open Parliament Licence.

### Sources and subscriptions for MPs and staff

We try to use sources in our research that everyone can access, but sometimes only information that exists behind a paywall or via a subscription is available. We provide access to many online subscriptions to MPs and parliamentary staff, please contact [hoclibraryonline@parliament.uk](mailto:hoclibraryonline@parliament.uk) or visit [commonslibrary.parliament.uk/resources](https://commonslibrary.parliament.uk/resources) for more information.

### Feedback

Every effort is made to ensure that the information contained in these publicly available briefings is correct at the time of publication. Readers should be aware however that briefings are not necessarily updated to reflect subsequent changes.

If you have any comments on our briefings please email [papers@parliament.uk](mailto:papers@parliament.uk). Please note that authors are not always able to engage in discussions with members of the public who express opinions about the content of our research, although we will carefully consider and correct any factual errors.

You can read our feedback and complaints policy and our editorial policy at [commonslibrary.parliament.uk](https://commonslibrary.parliament.uk). If you have general questions about the work of the House of Commons email [hcenquiries@parliament.uk](mailto:hcenquiries@parliament.uk).

The House of Commons Library is a research and information service based in the UK Parliament. Our impartial analysis, statistical research and resources help MPs and their staff scrutinise legislation, develop policy, and support constituents.

Our published material is available to everyone on [commonslibrary.parliament.uk](https://commonslibrary.parliament.uk).

Get our latest research delivered straight to your inbox. Subscribe at [commonslibrary.parliament.uk/subscribe](https://commonslibrary.parliament.uk/subscribe) or scan the code below:



 [commonslibrary.parliament.uk](https://commonslibrary.parliament.uk)

 [@commonslibrary](https://twitter.com/commonslibrary)