



## National Renal Advisory Board



Held via "ZOOM"

Wednesday, 11 March 2020



9:30am – 2pm

<b>Chairperson:</b>	Catherine Tracy
<b>Committee Members:</b>	Ashik Hayat, Balaji Jagannathan, Brett Butterworth, Chris Hood, Ian Dittmer, Jane Ronaldson, Jennifer Walker, Jon Hosking, Michael Campbell, Nick Cross, Sue Riddle
<b>Guests:</b>	Terry O'Donnell, Rob Turner, Erica Fairbank, Drew Henderson
<b>Apologies:</b>	Dee Hackett, Suetonia Palmer, Mark Hodge



## MINUTES

Wednesday, 25 February 2020			
Ref	Topic	Responsibility	Action
1.0	<b>Review Terms of Reference</b> <ul style="list-style-type: none"> <li>Society name has changed</li> </ul>		
2.0	<b>Previous Meeting Minutes</b> <ul style="list-style-type: none"> <li>Anti-Phospholipase A2 receptors antibodies testing discussion               <ul style="list-style-type: none"> <li>Ian to escalate to Regional SMO's</li> </ul> </li> <li>PD in Rest Homes/Care Facilities               <ul style="list-style-type: none"> <li>Ian drafted letter; will send to Catherine to review before sending out as previous Chair of NRAB.</li> </ul> </li> <li>Reimbursement of Costs for Home dialysis               <ul style="list-style-type: none"> <li>Outcome: Ask for completion of data from non-responding DHB's.</li> <li>Was to be discussed at Nov meeting but nothing was reported.</li> <li>Catherine to follow-up.</li> </ul> </li> <li>Workforce Planning – deferred to next meeting.</li> <li>Late CKD database – deferred to next meeting.</li> </ul>	 NRAB_Mins_13Nov19 (2).pdf	Ian  Ian  Catherine
3.0	<b>Upcoming changes to the funding of Rituximab</b> <ul style="list-style-type: none"> <li>From 1 March 2020 there will be two different brands of rituximab (Riximyo and Mabthera)</li> <li>Each will be funded for use in different clinical indications.</li> <li>Riximyo - newly funded brand will be funded for people using rituximab for all conditions apart from those with rheumatoid arthritis.</li> </ul>	 2020-02-20 Ritiximab Update Letter fm Ken	



	<ul style="list-style-type: none"> <li>• Mabthera - currently funded brand and will remain funded for people using this for rheumatoid arthritis.</li> <li>• There is a 9-month transition timeframe until 1 Dec 2020 to allow hospitals to transition usage from Mabthera to Riximyo</li> <li>• Rituximab needs to be prescribed by brand to ensure correct brand is used</li> <li>• Medication has had its indications broadened in Rheumatology and Oncology but not Renal</li> <li>• There is a lack of Rituximab for Membranous GN</li> <li>• Application to be made for use of Rituximab</li> <li>• Need a lead person to lead a group who can oversee process; <b>Nick to send out email to possible leads/group members</b></li> </ul>		Nick
4.0	<p><b>Nominations for the Nephrology Subcommittee of PTAC</b></p> <ul style="list-style-type: none"> <li>• PHARMAC looking to appoint one new member to the Nephrology Subcommittee of PTAC.</li> <li>• Need 2 nominations from NRAB</li> <li>• Ashik has volunteered</li> <li>• <b>Send email asking for 2<sup>nd</sup> nomination (Dahlia)</b></li> </ul>	 2020-02-07 Nomination letter from	Dahlia
5.0	<p><b>HDC endorsement of RRT therapies</b></p> <ul style="list-style-type: none"> <li>• Counties talked about approaching HDC to secure agreement that we don't have to offer centre based haemodialysis if there's an opportunity for home-based. Seeking to see if HDC endorsed; no one able to tell us</li> <li>• Jenny's understanding - HDC said required to offer a "reasonable" therapy but not required to offer all therapies;</li> <li>• <b>Chris to check for precedence : may have been a patient under the care of Dr Michael Lam</b></li> </ul>		Chris
6.0	<p><b>ANZSN (Written Report)</b></p> <ul style="list-style-type: none"> <li>• NZ Annual Nephrology Rpt – report preparation is delayed and will be available for NRAB meeting in May           <ul style="list-style-type: none"> <li>○ Will need to discuss how the 2021 reporting will continue as Suetonia stepping back from role (preparing report)</li> <li>○ Rachel Walker was a possibility but no longer able to.</li> <li>○ <b>Nick to speak with Suetonia to discuss role and what her plans are, time frames, etc ; can then go back to ANZSN regarding how we want our data presented, etc.</b></li> <li>○ Other suggestions:               <ul style="list-style-type: none"> <li>▪ Approach MoH to fund a person to write reports for NRAB;</li> <li>▪ Could talk to some of the academic institutions to see who could do it</li> </ul> </li> </ul> </li> <li>• KPIs – ANZSN KPI Working Group reported recently to the ANZSN Exec and the Clinical Policy Advisory Committee.           <ul style="list-style-type: none"> <li>○ KPS report recommendations are currently under</li> </ul> </li> </ul>	 ANZSN report to NRAB 11 March 2020.	Nick



	<p>consideration.</p> <ul style="list-style-type: none"> <li>○ Working Group NZ member anticipates that the KPI program implementation will require discussion with the NRAB in early 2020.</li> <li>○ Will include discussion about the appropriate governance and oversight mechanisms for NZ renal units that are performing below acceptable practice.</li> <li>○ It is possible that the draft KPI Working group report will be sent to the NRAB Chair and the ANZSN representative for comment prior to completion and presentation to CPAC. (Catherine does not have report).</li> <li>○ It's likely that the KPI recommendations made by ANZSN following consideration of the draft report will be ready for discussion at an NRAB meeting in Q1 of 2020.</li> </ul> <ul style="list-style-type: none"> <li>● Letter sent to Catherine from Professor Neil Boudville – wanted to have teleconference around gaining the NRAB's perspective on society role and setting the standards for Nephrology and how might work together to promote shared interest in supporting quality in renal care in NZ.</li> </ul>		
<b>8.0</b>	<p><b>Kidney Transplantation 2019</b></p> <ul style="list-style-type: none"> <li>● Intention of report is for clinicians can use to get more money;</li> <li>● The report uses spreadsheets from Ian Phillip in Wellington &amp; Christchurch to figure out how many transplants have been done and also for classifieds (ie ethnicity, donor source, etc)</li> <li>● Also includes ANZDATA for the denominators (ie how many people on dialysis)</li> <li>● 221 kidney transplants in NZ (130 recipients of kidneys from deceased donor source and 91 kidneys from live donors) - record year; tremendous increase</li> <li>● NZ is top two or three countries in the world in terms of live donors per million population; making good progress</li> </ul>	Nick Cross	
<b>9.0</b>	<p><b>Psychologists in Renal</b> <b>Deferred to next meeting</b></p>	Nick Cross	
<b>10.0</b>	<p><b>Key Performance Indicators &amp; Progress Report</b></p> <ul style="list-style-type: none"> <li>● NRAB should have a formal process /system to look at how to manage outliers</li> <li>● First step could be for NRAB to discuss the KPI report when it comes through and look to see if there are outliers there and then initial discussions with unit leads regarding any issues that may need to be addressed</li> <li>● Drew has tried to have some conversations with the Health, Safety, Quality Commission; no one has gotten back to him however could be one area where it may be worth taking this discussion</li> </ul>	<p>Drew Henderson</p> <p> ANZSN_KPI_ReportToNRAB_13Nov19.pdf</p> <p> Letter - Ms Catherine Tracy.pdf</p>	



	<ul style="list-style-type: none"> <li>The structure of NZ healthcare system is a challenge because each DHB makes their own decisions; how do we influence DHBS</li> <li>Mentorship could be helpful; get CD's from each unit to have zoom meeting once a month so that they could talk about issues that are in common and seek advice</li> <li>Ask the Health &amp; Safety Quality commission to put our KPI's into their Healthcare Variation Atlas <ul style="list-style-type: none"> <li>Drew and Sue Riddle to meet to discuss further; include Alan Merry</li> </ul> </li> </ul>		Drew/Sue
11.0	<p>Nominees for NZASRDP Board Representative</p> <ul style="list-style-type: none"> <li>Possibly Dr David Simple (Auckland Renal Physician); currently talking to him about the role</li> </ul>	Balaji Jagannathan	12pm
12.0	<p><b>Pharmac</b></p> <ul style="list-style-type: none"> <li>Haemodialysis <ul style="list-style-type: none"> <li>Now half-way through process of getting all devices on to contract</li> <li>Had 7 responses to RFP; of that 2 were for consumables</li> <li>1 currently out for consultation</li> <li>1 contract sent to be signed</li> <li>3 under negotiation</li> </ul> </li> <li>If new contracts are needed contact supplier directly to discuss</li> <li>Baxter consultation – currently out to market for feedback; closes 25 March; sent out to procurement managers</li> </ul>	Terry O'Donnell / Rob Turner	
13.0	<p><b>Renal Consumers sitting in on Governance Meetings</b></p> <ul style="list-style-type: none"> <li>What are other Renal services doing in this space?</li> </ul> <p>Deferred to next meeting</p>	Jon Hosking	
14.0	<p><b>Kidney Health New Zealand (Next part of operational plan for 2020/2021)</b></p> <ul style="list-style-type: none"> <li>Michael to send through to Dahlia to circulate to group.</li> </ul>	Michael Campbell	Michael
15.0	<p><b>COVID19 Dialysis Unit Response</b></p> <ul style="list-style-type: none"> <li>We will continue to follow the MoH guidelines/ringing healthline, etc – the same will be for all our patients and transplant patients who are being followed up regularly by the case transplant coordinators</li> <li>Jenny suggested that all DHBs phone their transplant recipient if they believe they have patients who might stop taking their meds due to the shortage of medications.</li> <li>Would be good to send the advice that was circulated in today's meeting "Information for Screening and Management of COVID-19 in the Outpatient Dialysis Facility – Release Date March 4, 2020" to all Clinical Directors and suggest that they contact their patients with plans for their area; initiate a "Zoom" meeting for the units to talk to each other in terms of helping each other.</li> </ul>		



	<ul style="list-style-type: none"><li>• Can first circulate that letter around to NRAB group to help edit; letter might say “things that some DHB’s are considering include..” – list of questions to ask</li><li>• Need to have the capacity to get private transport if they are unwell – also good to communicate to the transport agencies as well.</li></ul>		Catherine
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Meeting closed: 2pm