



Feidhmeannacht na Seirbhíse Sláinte  
Health Service Executive

# Renal Services Programme

National Renal Office

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# Strategic Vision for ESKD Services

- The number of patients with ESKD will increase by 40-50 p.m.p. (170-200 patients) per annum.
- Transplantation is the best therapy for suitable patients and represents the best value for money.
- Home therapies offer an enhanced quality therapy and represent the next best value for money.
- Hospital/Clinic-based haemodialysis can also be an excellent therapy but is associated with the highest social costs, consumable costs, overhead costs, transport costs and ancillary costs.
  
- Planning should aim to maximise the proportion of patients receiving the best value therapies.
- HSE Area-based planning will optimise regional Capacity, Configuration and Governance of services.
- System-wide streamlining of Procurement, Contracting and Funding will enhance this.

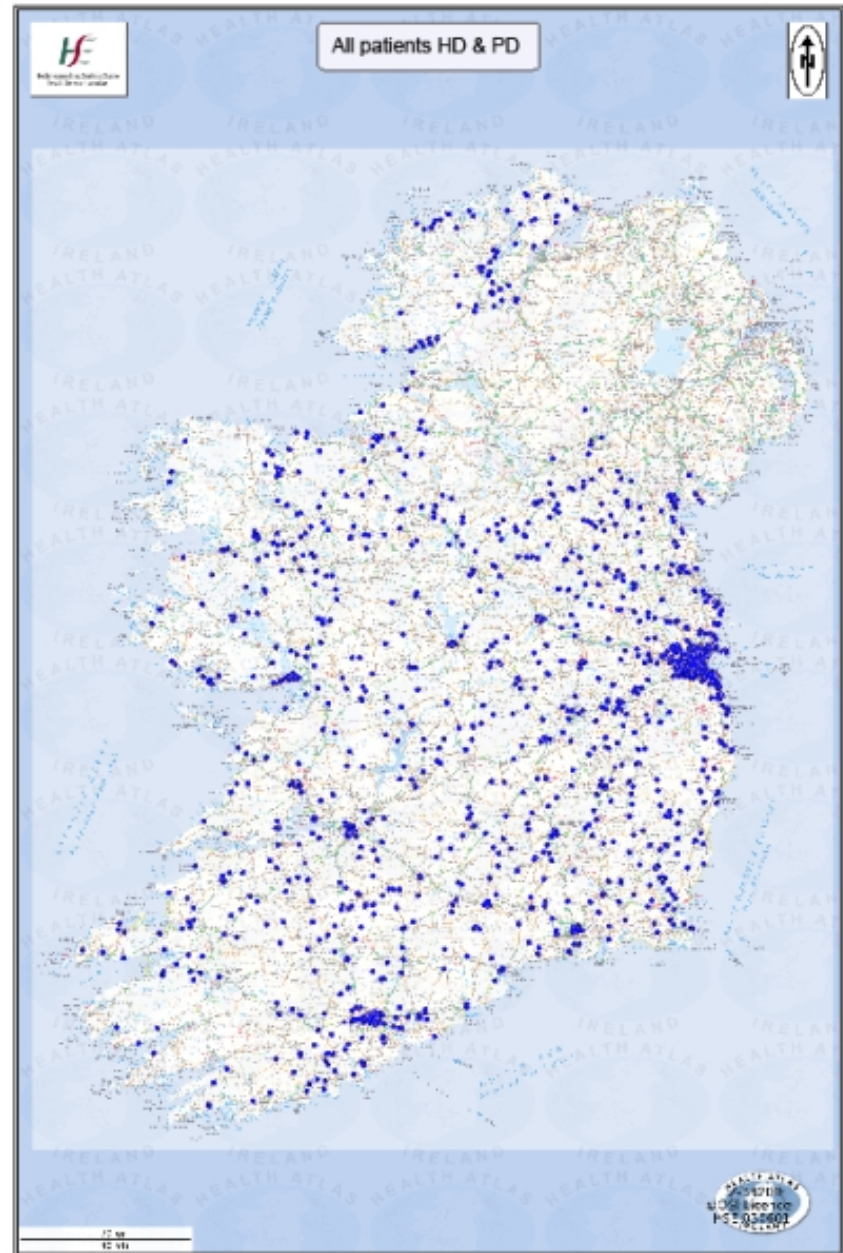
# Current Networks of Renal Units

(\*contracted Units)

HSE Area	Parent Renal Unit	Satellite HD Unit	PD Programme
Dublin North East	CGH (Cavan)		
	Beaumont (N.Dublin) Mater (N.Dublin)	fmc Northern Cross*	Yes Yes
Dublin Mid Leinster	MRH (Tullamore)		
	SVUH (S.Dublin) AMNCH (S.Dublin)	Beacon Sandymount*	Yes Yes
South	WRH (Waterford)	fmc Kilkenny*	Yes
	CUH (Cork)	KGH (Tralee)	Yes
West	MRHD (Limerick)	fmc Dock Road*	Yes
	MPUH (Galway)	Wellstone Ballybrit* MGH (Castlebar)	Yes
	LGH (Letterkenny)	SGH (Sligo)	Approved

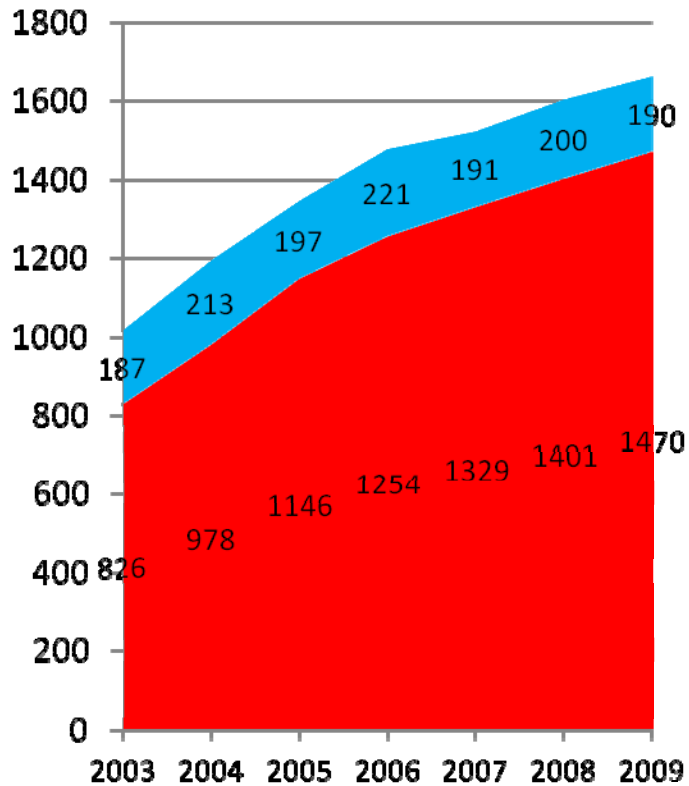
# Renal Health Intelligence

1. Biannual Census of ESKD patients
2. Mapping of ESKD patient residence
3. HD Patient Dependency Study
4. Surveys of Unit Resources
5. National Roll-Out of KDCPMS I.T. System

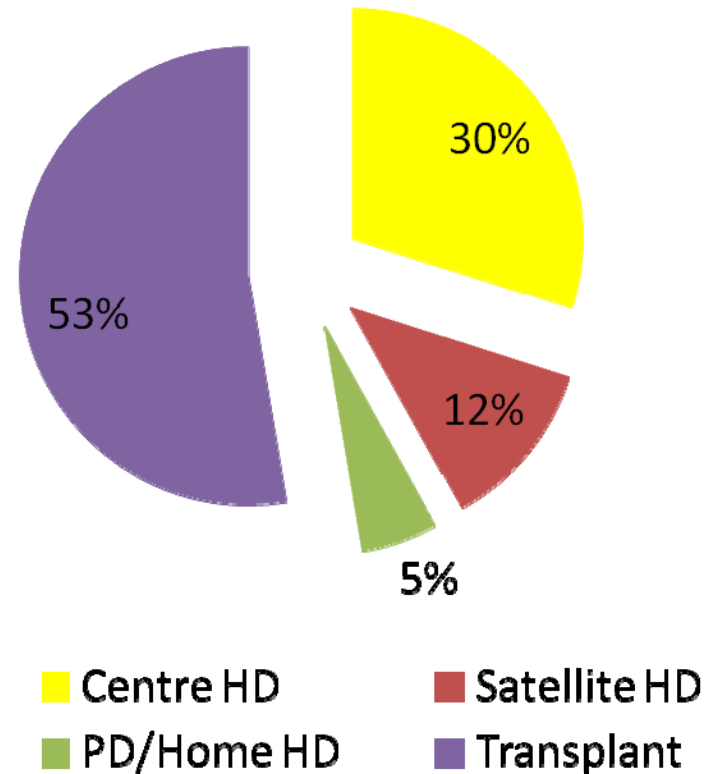


# Epidemiology

## Growth in ESKD Dialysis



## RRT Treatments 31/12/2009



# Priorities for Renal Services

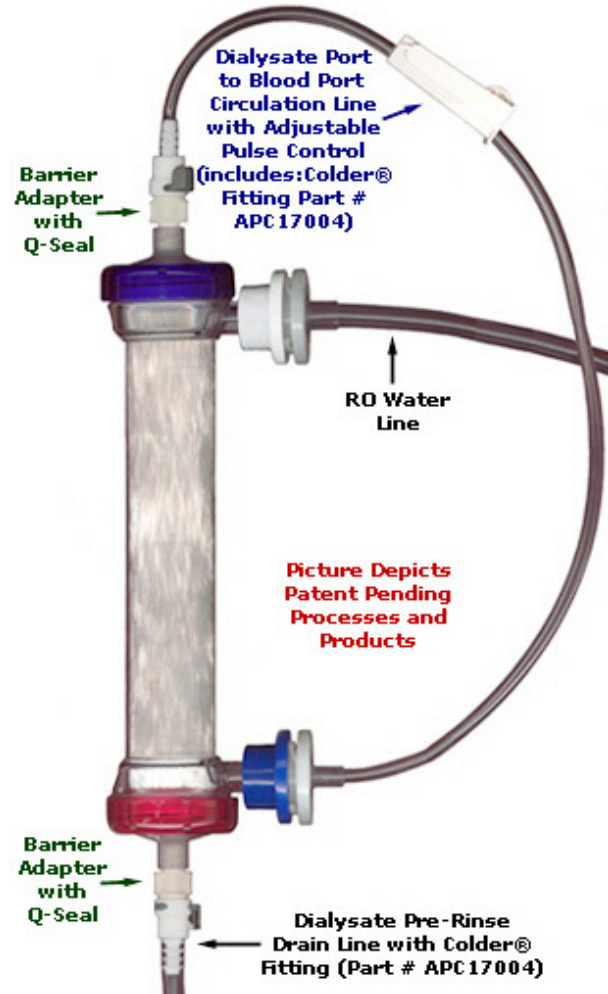
## ESKD Services

- Transplant Rate  
>175 p.a
- Home Therapies  
60 p.m.p. (80 HHD)
- Network of HD facilities  
20-30 p.m.p. growth p.a.
  
- No routine HD after 24.00h
- Reduced travel for HD
- Parent HD Units configured to support AKI/Satellites
- KDCPMS/Renal Registry

## Other Renal Services

- Leaner, smarter organisation of Renal Units
  
- Integrate Renal Units with Acute Medicine Programme
  
- Develop Outreach services for non-ESKD patients
- Standardised evaluation & management of CKD in community setting
- Better access to dietetic services

# Procurement Projects



## Equipment/Consumables

HSE South complete

HSE West (Cavan, Midlands) ongoing

## Contracted Satellite Units

4 planned Dublin/Environs

Midlands/South East

## Home Therapies

Home HD tender complete

PD therapy under review

## Consider

Patient Transport (>225,000 journeys/yr)

ESA's

# Major Identified Risks

- Decrease in Renal Transplantation rate
- Potential abrupt loss of large HD facility
- Inadequate access to vascular access procedures
- Extremely poor access to dietetic services
- Clinical governance of contracted HD Units

