

All Wales Medicines Strategy Group

Grŵp Strategaeth Meddyginiaethau Cymru Gyfan



CEPP National Audit – Medicines Management for Chronic Kidney Disease

February 2017

This report has been prepared by a multiprofessional collaborative group, with support from the All Wales Prescribing Advisory Group (AWPAG) and the All Wales Therapeutics and Toxicology Centre (AWTTC), and has subsequently been endorsed by the All Wales Medicines Strategy Group (AWMSG).

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1.0 AUDIT

The All Wales Prescribing Advisory Group (AWPAG), NHS Wales Informatics Service (NWIS) (part of Public Health Wales) and the Welsh Renal Clinical Network have developed this audit. The document is for primary care to use to support local prescribing initiatives as part of CEPP.

NICE guidance, quality standards and broader information used to derive the audit standards are:

- [NICE QS5: Chronic kidney disease in adults](#)
- [NICE Chronic kidney disease pathway](#)
- [NICE CG182: Chronic kidney disease in adults: assessment and management](#)
- [NICE CG181: Cardiovascular disease: risk assessment and reduction, including lipid modification](#)

A 100% target has been stated within the audit standards detailed below. However, it is recognised that in a small number of patients, achievement of the stated target may not be possible due to specific patient factors. In such patients, clear documentation of these decisions should be made in their medical records.

1.1 Aim and objectives

Aim:

The aim of the audit is to ensure that patients with CKD (stage 3–5) receive appropriate medicines management.

Objectives:

- To ensure the prescribing for patients with CKD (stage 3–5) is in line with the NICE recommendations;
- To review the prescribing of non-steroidal anti-inflammatory drugs (NSAIDs) in patients identified as having CKD (stage 3–5);
- To review blood pressure control in patients with CKD (stage 3–5) and hypertension (with and without diabetes) to ensure optimal therapy;
- To investigate if patients with CKD (stage 3–5) are prescribed required statin therapy.

1.2 Audit standards

- 100% of patients with CKD (stage 3–5) who have been prescribed an NSAID have this medication reviewed and stopped if appropriate.
- 100% of CKD (stage 3–5) patients without diabetes and a measured ACR < 30 (PCR < 50) have blood pressure below 140/90 mmHg.
- 100% of CKD (stage 3–5) patients with diabetes or a measured ACR ≥ 30 (PCR ≥ 50) have blood pressure below 130/80 mmHg.
- 100% of CKD (stage 3–5) patients with diabetes and hypertension are treated with a renin-angiotensin system antagonist (RASA).
- 100%¹ of CKD (stage 3–5) patients are offered treatment with a statin.

1.3 Method

The National CKD Audit (NCKDA) aims to [measure](#) the management and outcomes for patients with CKD by [collecting](#) Primary Care data from NHS practices in regions throughout [Wales](#) using Audit+. In order for individual practices to participate in this audit access to the practice data will be enabled through Audit+. These data will be for adult patients only.

Using Audit+ practices can identify the following groups:

¹ 100% standard target in line with NICE clinical audit standards in accordance with Prudent Health Care principles of informed patient choice

Sample 1. Number of patients with CKD (stage 3–5) who have been prescribed an NSAID within the last 12 months
Sample 2. Number of patients with CKD (stage 3–5) and uncontrolled hypertension
Sample 3. Number of patients with CKD (stage 3–5), hypertension and diabetes not on a renin-angiotensin system antagonist (RASA)
Sample 4. Number of patients with CKD (stage 3–5) not on a statin

2.0 COMPLETE DATA SUMMARY SHEETS 1–4

3.0 COMPLETE PRACTICE REVIEW SHEET

(Use the data summary sheets to inform discussion).

4.0 RETURN DATA SUMMARY SHEETS AND PRACTICE REVIEW SHEET TO (localities to insert contact)

DATA SUMMARY SHEET 1

Sample 1. Number of patients with CKD (stage 3–5) who have been prescribed an NSAID within the last 12 months.

Practice: _____

Date of audit: _____

	Number	Percentage of practice population
Practice list size		100%
(A) Number of patients with CKD (stage 3–5)		
	Number	Percentage of (A)
(B) Number of patients with CKD (stage 3–5) issued with a prescription for an NSAID within the last 12 months		

	Number	Percentage of the audit sample
(C) Sample size i.e. number of CKD (stage 3–5) patients issued with a prescription for an NSAID within the last 12 months		100%
(D) Number of CKD (stage 3–5) patients with a clear indication for NSAID use documented and recorded in their patient notes		
(E) Number of CKD (stage 3–5) patients with assessment of prescribing risk/benefit of NSAID use documented in patient notes		
(F) Number of CKD (stage 3–5) patients in whom the NSAID has been stopped		

DATA SUMMARY SHEET 2

Sample 2. Number of patients with CKD (stage 3–5) and uncontrolled hypertension.

Practice: _____

Date of audit: _____

	Number	Percentage of practice population
Practice list size		100%
(A) Number of patients with CKD (stage 3–5) and hypertension		
	Number	Percentage of (A)
(B) Number of patients with CKD (stage 3–5) and hypertension, with their blood pressure outside of recommended targets on the two most recent readings		

	Number	Percentage of the audit sample
(C) Sample size i.e. the number of CKD (stage 3–5) patients with uncontrolled hypertension		100%
(D) Number of CKD (stage 3–5) patients with uncontrolled hypertension despite the use of maximum tolerated therapy of antihypertensive drugs at therapeutic doses		
(E) Number of CKD (stage 3–5) patients with uncontrolled hypertension, with assessment of prescribing risk/benefit documented in patient notes		
(F) Number of CKD (stage 3–5) patients with uncontrolled hypertension despite the use of maximum tolerated therapy reviewed by secondary care renal specialists		

DATA SUMMARY SHEET 3

Sample 3. Number of patients with CKD (stage 3–5), hypertension and diabetes not on a RASA.

Practice: _____

Date of audit: _____

	Number	Percentage of practice population
Practice list size		100%
(A) Number of patients with CKD (stage 3–5), type 2 diabetes and hypertension		
	Number	Percentage of (A)
(B) Number of patients with CKD (stage 3–5), type 2 diabetes and hypertension, and not issued a repeat RASA prescription within the last 12 months		

	Number	Percentage of the audit sample
(C) Sample size i.e. the number of CKD (stage 3–5) patients with type 2 diabetes and hypertension not on a RASA		100%
(D) Number of CKD (stage 3–5) patients with type 2 diabetes and hypertension with assessment of risk/benefit of RASA prescribing documented in notes		

DATA SUMMARY SHEET 4

Sample 4. Number of patients with CKD (stage 3–5) not on a statin.

Practice: _____

Date of audit: _____

	Number	Percentage of practice population
Practice list size		100%
(A) Number of patients with CKD (stage 3–5) not on a statin		

	Number	Percentage of the audit sample
(B) Sample size i.e. the number of CKD (stage 3–5) patients not on a statin		100%
(C) Number of CKD (stage 3–5) patients with assessment of risk/benefit for statin prescribing documented in notes		
(D) Number of CKD (stage 3–5) patients in whom statin therapy has been stopped and reasons are clearly documented in notes		
(E) Number of patients in whom statin use has been discussed and declined by the patient.		

PRACTICE REVIEW SHEET

A. What lessons did the practice learn from carrying out this audit?

B. What discussion/activities did the practice undertake as a result of the audit?

C. What changes has the practice agreed to implement as a result of this audit?

This audit was completed by:

Name(s): _____

Signature(s): _____

Practice (name and address):
