



## CONSULTATION

This Treatment pathway has been circulated to the following individuals for consultation

Name	Designation
Dr Weng Oh	Renal Consultant
Dr Michael Cornes	Consultant in Biochemistry

This Treatment pathway has been circulated to the chair(s) of the following committee's / groups;

Renal business meeting

## IMPLEMENTATION

### Plan for implementation

*How are you going to implement and ensure all relevant staff are aware of this pathway?*

Please publish in GP connect

Please discuss in Pathology Users Meeting

Please establish link (ideally hyperlink) from any eGFR result on ICE

Pathway to be available online for primary care and hospital

## DISSEMINATION

Please publish in GP connect

Please discuss in Pathology Users Meeting

## TRAINING AND AWARENESS

*This section should refer to training as identified in the Trusts Training Needs Analysis Appendix A of the Trusts Mandatory Training Policy*

GPs are already familiar with eGFR and chronic kidney disease; however this pathway helps introduction of CKD care with new CKD EPI equation which will identify previously not reported eGFR levels of 60-90


## REFERENCES

All references should be 'Harvard' referenced

Title	Code
<a href="https://www.nice.org.uk/guidance/cg182">https://www.nice.org.uk/guidance/cg182</a>	



## MONITORING AND COMPLIANCE

**This section should identify how the Trusts plan to monitor compliance with and the effectiveness of this Treatment pathway. It should include auditable standards and/or key performance indicators (KPIs) and details on the methods for monitoring compliance**

What	How	Who	Where	When
<i>These are the 'key' parts of the process that we are relying on to manage risk.</i>	<i>What are we going to do to make sure the key parts of the process we have identified are being followed?</i>	<i>Who is responsible for the check?</i>	<i>Who will receive the monitoring results?</i>	<i>Set achievable frequencies.</i>

## EQUALITY IMPACT ASSESSMENT

*To be completed by the Treatment pathway owner and submitted to the appropriate committee for consideration and approval.*

		Yes/No
1.	Does the treatment pathway affect one group less or more favourably than another on the basis of:	
	Race	
	Ethnic origins (including gypsies and travellers)	
	Nationality	
	Gender	
	Culture	
	Religion or belief	
	Sexual Orientation	
	Age	
2.	Is there any evidence that some groups are affected differently?	
3.	If you have identified potential discrimination, are any exceptions valid, legal and/or justifiable?	
4.	Is the impact of the policy/guidance likely to be negative? If so can the impact be avoided?	
5.	What alternatives are there to achieving the policy/guidance without the impact?	
6.	Can we reduce the impact by taking different action?	
7.	Other comments	

If you have identified a potential discriminatory impact of this key document, please refer it to Human Resources, together with any suggestions as to the action required to avoid/reduce this impact.

For advice in respect of answering the above questions, please contact Human Resources.

## FINANCIAL IMPACT STATEMENT

*To be completed by the Treatment pathway owner and submitted to the appropriate committee for consideration and approval.*

		Yes/No
1.	Does the implementation of this document require any additional Capital resources	
2.	Does the implementation of this document require additional revenue	
3.	Does the implementation of this document require additional manpower	
4.	Does the implementation of this document release any manpower costs through a change in practice	
5.	Are there additional staff training costs associated with implementing this document which cannot be delivered through current training programmes or allocated training times for staff	
6.	Other comments	

If the response to any of the above is yes, please complete a business case and which is signed by your Finance Manager and Directorate Manager for consideration by the Accountable Director before progressing to the relevant committee for approval