

Scottish Paediatric Renal and Urology Network (SPRUN)

Annual Report 2024/25

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This document has been prepared by NHS National Services Scotland (NSS) on behalf of SPRUN. Accountable to Scottish Government, NSS works at the heart of the health service providing national strategic services to the rest of NHS Scotland and other public sector organisations to help them deliver their services more efficiently and effectively. The SPRUN Network is a collaboration of stakeholders involved in care of children with renal and urological disease, who are supported by an NSS Programme Team to drive improvement across the care pathway.

Introduction

The Scottish Paediatric Renal and Urology Network (SPRUN) is a nationally designated managed clinical network, established in 2004. The network encompasses renal and urological disease in children and young people up to 16 years old, who may require specialist intervention but who can also be managed locally. Specialist care is also offered to young people aged 16-18 years, who are being prepared for transition or by an individual case by case basis. The Network facilitates the care of children and young people with renal disease via local teams delivering care close to home with information and intervention being provided, as necessary, by the specialist unit.

Tertiary paediatric nephrology services are based at the Royal Hospital for Children (RHC) in Glasgow, which also hosts national services such as the renal transplant service, acute and chronic dialysis service, as well as managing children and young people with severe acute kidney injury, complex nephro-urology and rare diseases such as tubulopathies. The paediatric transplant and dialysis services are nationally designated with the aim of reviewing the more complex and rare renal conditions to be included in a wider paediatric renal service designation.

Each local renal service comprises a paediatrician with an interest in nephrology, as well as nursing and wider multidisciplinary support. The local teams are supported by a visiting paediatric nephrologist from the tertiary centre who attends regular joint clinics. Some renal patients are managed locally out with the combined renal clinics.

Tertiary paediatric urology services are provided by three multidisciplinary teams in Scotland: Aberdeen, Edinburgh and Glasgow. They include Paediatric Urologists and Urology Specialist Nurses at each tertiary centre. The Paediatric Urology teams in Scotland work closely together and hold regular “bladder meetings” to discuss cases. All three centres provide outreach to local centres with satellite clinics and close communication to support the care of patients locally as much as possible.

Lead Clinician update

Whilst we have continued to progress the work of SPRUN in this past year, nevertheless, 2024-2025 has been a year full of differing challenges for our network as a whole and for colleagues and teams within SPRUN.

During this past year, we bid farewell to Michael Durkan and Linda Watson, our PM and PSM respectively for many years. Linda, particularly, has been with SPRUN for a considerable period of time, and we are deeply indebted to both for their work and commitment to SPRUN over the years. SPRUN continues to work under new leadership and has continued its commitments, in education and setting priorities of our work, seeking to improve and enhance aspects of care provision supporting our patients and colleagues throughout Scotland.

The PD report will soon be published, and the transplant work-up data set has gone live and is being used by colleagues throughout SPRUN. Once again, my gratitude to all those involved in these and other projects for their contributions and for ongoing commitment to the network as well as my thanks to the Steering Group for their time and commitment.

I cannot finish without saying this year has brought much sadness to our network and Glasgow team in particular with the sudden loss of our friend and colleague Ian Ramage. Ian was a committed and passionate paediatric nephrologist whose contribution to the care and lives of so many children and young people with renal conditions throughout Scotland, will not be forgotten. From colleagues in various disciplines, to trainees, to peers, we all have learnt much from Ian and been supported through various points in their lives. His humour, wit and banter will not be forgotten and his pragmatic and straightforward approach to clinical questions will be forever remembered.

Current position

In light of the ongoing Scottish Government review of national networks, planning has been adapted to focus on core priorities and ensure continuity of essential services. We await further guidance to inform future strategic development.

The actions prioritised for SPRUN were:

Priority Action	Progress
To scope the current Peritoneal dialysis (PD) service in Scotland to understand current processes and identify any areas for improvement	The report was endorsed by Steering Group members and will be distributed to the GGC Service Manager for information. An action plan for improvement has been developed using the information.
To review and understand paediatric renal transplant pathway with the aim of standardising and allowing measuring / improvements in the transplant work up process.	The transplant work-up data project has been implemented with the intention to improving logistics and communication of transplant work-up throughout the network. This data will help to easily identify at what stage of the journey patients are at and improve patient care by identifying gaps. A user guide was also developed and is available for staff to assist in updating MS Lists.
Continue to deliver education as per SPRUN education strategy; sessions planned and advertised	Five education sessions were delivered in 2024/25 and recordings made available within the SPRUN Education MS Teams channel.

Out of the 12 BAU objectives outlined in the 2024/25 workplan, 11 were successfully completed. The review of one SPRUN guideline continues. This objective will be carried forward and prioritised in the 2025/26 workplan.

The network continued to make use of technology and remote communications to progress work this year. This has continued to be effective, saving time on travel and promoting economic and climate friendly practices.

Highlights

Education

SPRUN education sessions provide general paediatric , medical, nursing and multidisciplinary teams across Scotland with tailored CPD education for renal and urology conditions. The programme is a rolling 3-year programme which covers the nephrology and nephro-urology curriculum. Without these sessions there would be no dedicated renal education for local DGH teams seeing renal and urology patients in their general clinics.

These education sessions are tailored to each condition but in the main they cover:

- The basic principles of managing common renal conditions – ensuring that patients care is as close to home as possible
- The management of more complex renal and nephro-urology conditions and when to escalate these patients to paediatric renal and/or urology
- Case studies, investigations and common findings

The majority of sessions were delivered via Microsoft teams to ensure equity of access. The session in August, covering Kidneys & Biochemistry, was a hybrid meeting providing the opportunity for networking and the benefits of face-to-face teaching and discussion. Following each meeting, a recording of the session is made available on the education Teams channel.

Five sessions took place in 2024/2025.

Date	Title	Attendees	Number of boards represented
30/04/2024	Antenatal Hydronephrosis - Postnatal Management, Urology Perspective	44	8
31/05/2024	Miscellaneous Topics	25	8
29/08/2024	Kidneys & Biochemistry	49	12
31/10/2024	Endocrine Renal	32	10
25/11/2024	Miscellaneous Topics	30	8

Summary and feedback from responses to 2023/24 evaluation questionnaires are below:

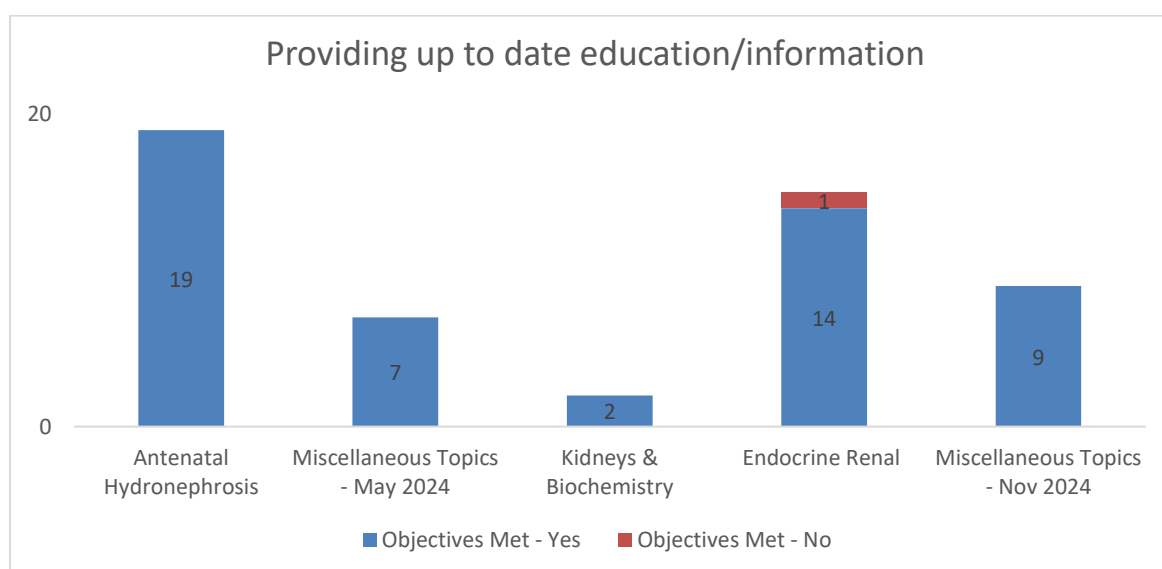


Fig 1 – Was the event objective met?

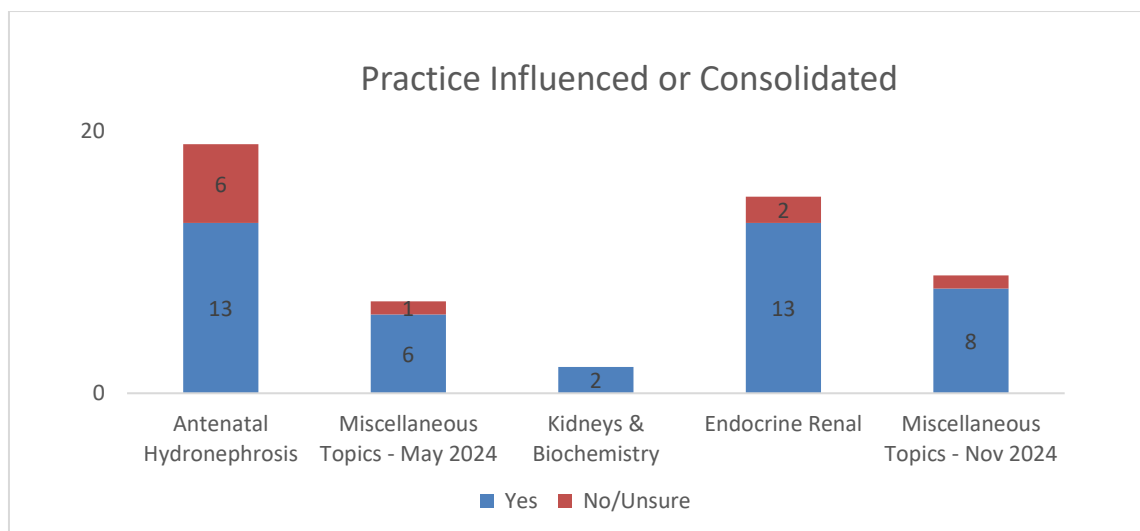


Fig 2 – Was your practiced influenced / consolidated?

Figures 1 and 2 above show two of the standard questions included in evaluations. Did the event serve its purpose and is practice influenced / consolidated. These questions show that the SPRUN events continue to meet the needs of stakeholders.

Paediatric renal transplant pathway

A data set for transplant workup has been developed alongside IMS. This data set allows local teams and the Glasgow Renal team to document and review transplant workup across health boards. The list documents all the transplant work-up necessary and required to be complete prior to transplantation for each individual patient with access given to individual local team members and the Glasgow renal team. Being able to access data, real time across health boards, allows a smoother transplant work-up process, ultimately improving the transplantation journey.

Unique Patient ID Enter value here	Health Board Ayrshire and Arran	Primary Renal Diagnosis Enter value here
Current RRT —	Transplant Book given to parents —	Date (Transplant Book) Enter value here
Transplant discussion with parents —	Date (Transplant Discussion) Enter value here	Transplant Type —
Proposed Date Enter value here	Current Urine Output (ml/24) Enter value here	Date of U/O Assessment Enter value here
Blood Group —	Tissue Type —	Tissue Type Date Enter value here
PRA Screen (3 Monthly) —	PRA Date Enter value here	Unacceptable Antigens —
Antigen Decision Date Enter value here	Varicella IgG —	Date (Varicella Test) Enter value here
EBV IgG —	Date (EBV Test) Enter value here	CMV IgG —

Fig 3 – Example of transplant workup data collected on MS Lists

The project has been implemented and a user guide created to assist staff in updating their Health Board MS List.

Peritoneal Dialysis (PD)

The PD service in CYP in Scotland is undertaken and supported primarily by the PD nurse specialist and the renal team based at the Royal Hospital for Children, Glasgow. Due to the specialised requirements of the service, for it to function currently and provide quality care to CYP, families need ongoing and frequent attendance at RHC, Glasgow.

The overall objective of the project was to scope the current PD service in Scotland to understand current processes and identify any areas for improvement.

In total there have been 36 PD patients in Scotland since 2014. A breakdown by board area is included below:

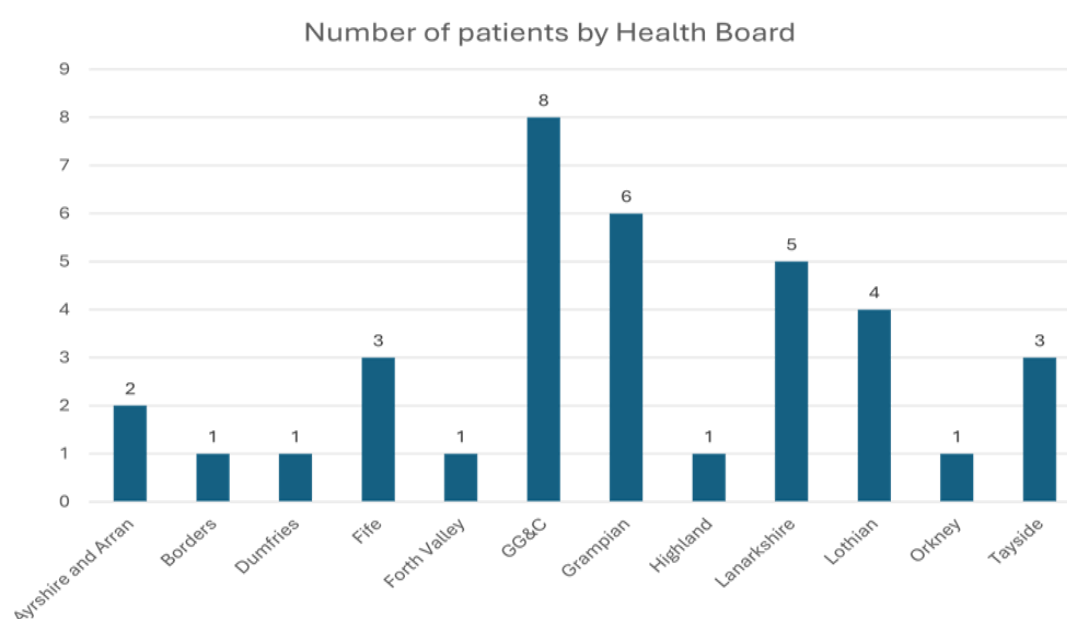


Fig 4 – Number of PD patients since 2014 by Health Board area

The report concluded that most PD care is undertaken in RHC, Glasgow and with much dependent on one individual – the PD nurse specialist. There are some aspects of care that will always need tertiary level expertise from RHC, Glasgow especially those that require specialist knowledge or require substantial experience. However, the burden on the renal service to ensure patient centred care delivery can be considerable. This is often excessive and dependent on one individual person (PD Nurse specialist). It would be possible, with some additional resource, both in Glasgow for the renal nurse specialist team and in other health boards, along with support from the Glasgow team for some aspects of care such as training and reviews to return to local teams. Appropriate resources and training are key to ensuring this can happen.

This would also help to ease the burden of travel, and associated issues, on families. This burden on families to travel, to ensure appropriate delivery of care, is also considerable.

Following this review and discussions with the local service, a PD Driver diagram has been developed to allow for small tests of change to the process and for this to be taken forward using QI methodology. In addition to this, PD will continue to be collected on an ongoing basis by the PD nurse specialist to allow comparison.

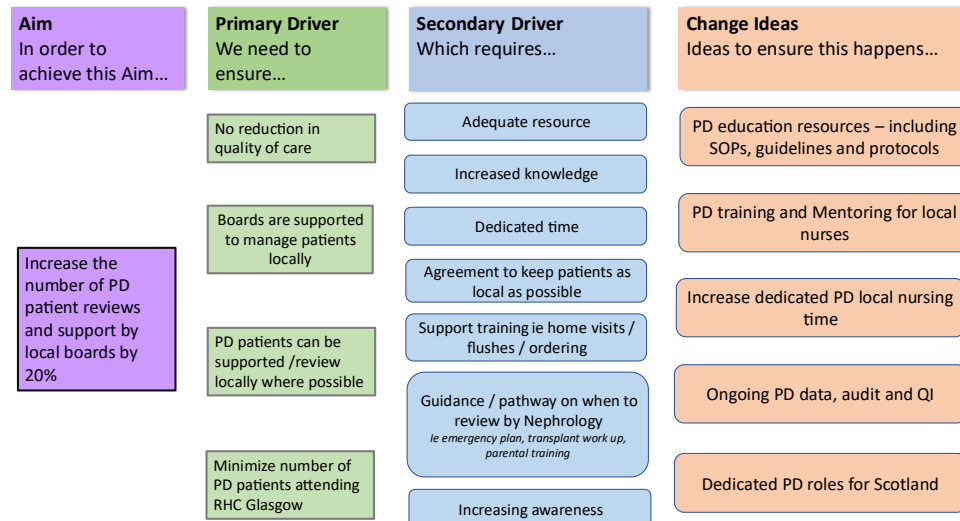


Fig 5 – PD Drive Diagram

Hyperkalaemia Guideline

The network has developed a pathway which will form part of a full guideline for development in 2025/26.

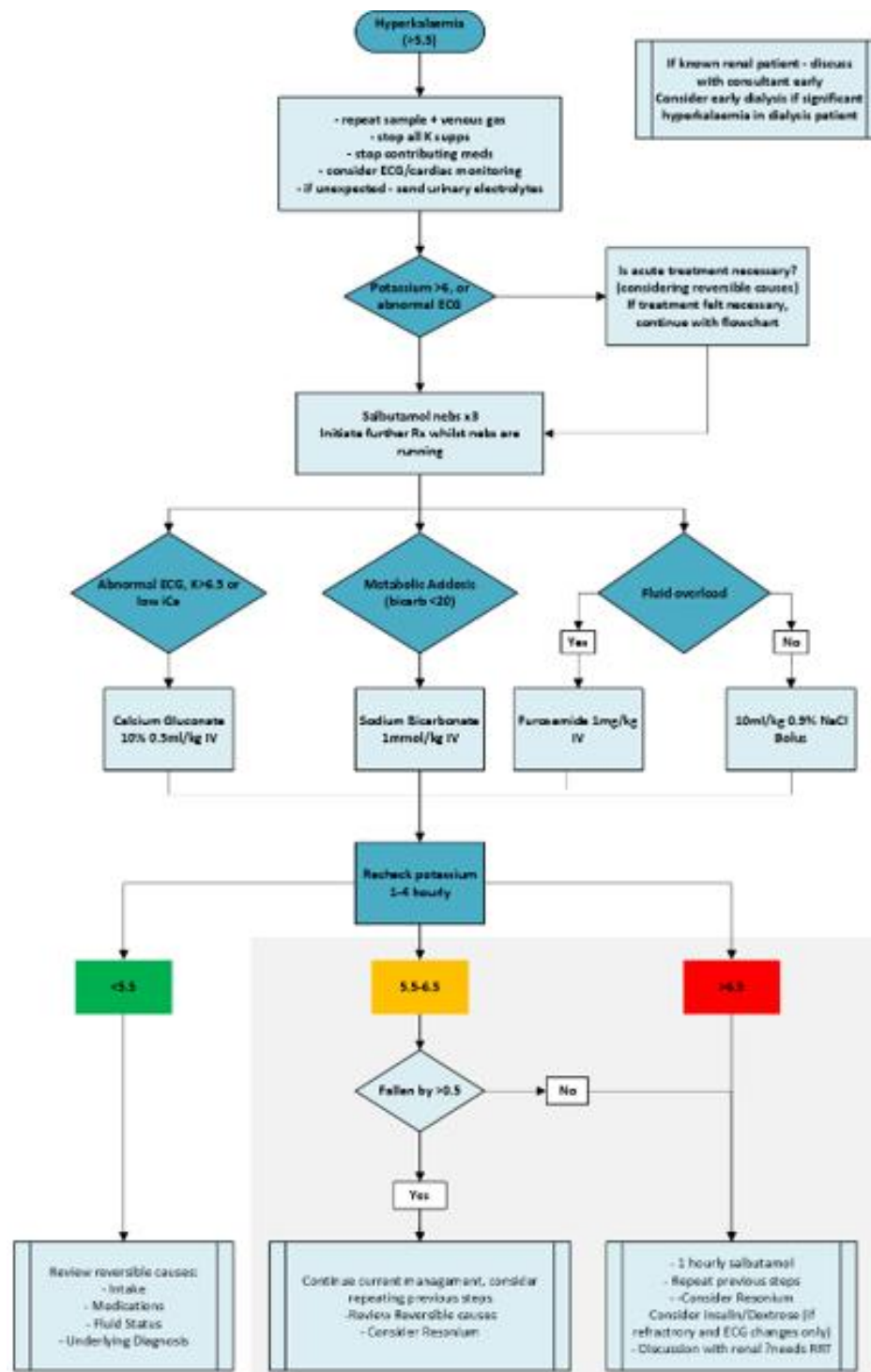


Fig 6 – Hyperkalaemia Guideline Flowchart

Website Review

A project to review and update the SPRUN website was completed. The website had nearly 5,000 visitors during 2024/25. The top 10 pages can be seen in the table below:

Content	Visitors	Views
Home	4,898	29,327
Information Leaflets	548	665
Greater Glasgow & Clyde	508	727
Publications	497	642
Guidelines	493	797
Grampian	412	649
Web Links	399	507
Lothian	384	539
Patients	329	716
Professionals	319	690

Looking forward – 2025/26

Due to ongoing review of national networks, networks have been asked to only plan activity for the first two quarters of 2025/26. SIBDN have agreed the following activities:

Continued from 2024/25:

- Finalise the hyperkalaemia guideline.

Network business as usual activity:

- Network quarterly meetings including SPRUN Steering Group
- Deliver education sessions as per SPRUN education strategy
- Management of network communication channels
- Review of network documentation

Finance

The network operated within its allocated budget in 2024/25, focusing on low-cost, high-impact activities such as virtual education and digital resource development..

Risks and issues

The network recognises the importance of maintaining national coordination in areas such as education, clinical guidance, and quality improvement. Continued support will be essential to sustain these benefits for patients and professionals.

Stakeholders have highlighted the importance of maintaining national coordination to sustain improvements in care. Continued support will be essential to build on existing progress and deliver future benefits.

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