



Chairman's Interim Report May 2020

At this time of year we would normally be holding our AGM, but things are far from normal so it's been cancelled. As soon as we know it is safe to do so we will hold the meeting. This is a difficult and for some distressing time and we are conscious that many of you are self-isolating and may feel disconnected with what's going on but we are still here for you.

We thought it would be good to let everyone know what we've been up to this year and some of the ideas we have for the future. It's has been a busy year again and we have made real progress in bringing the charity back to life. The committee has been meeting regularly and are really pleased with what we've achieved. Thank you to everyone for their hard work and enthusiasm.

Two of our members have stood down this year, Eric Labrum and Pat Williams. We would like to thank them for their input and wish them well for the future

1.Membership

We have been actively promoting GKPA and our membership has increased from 158 last year to 220. The majority are on email and we have been able to save money on postage and communicate more often. It has also been rewarding to receive your emails.

We are still happy to post out to those who don't have email.

2.Newsletter

We have produced three newsletters which the medical staff from Gloucester Royal Hospital have also contributed to. We hope you have enjoyed them

3.Leaflet and Website

Our leaflet was finalised in August and has been distributed widely. All the hospital departments have some and we have visited GP surgeries in Gloucester and Cheltenham to leave some as well. Thank you to the publicity group for their hard work.

Our website went live at Christmas and we're very proud of it. Thank you to Roger Graham and Steve Syer for al the time and effort they put into it. Steve has also agreed to be webmaster and keep things up to date. We also now have a Facebook page.

4. Events

This year has been busy with several displays and events to publicise GKPA and to help kidney patients. Our holiday in September was enjoyed by everyone and will remain a regular event in our calendar but is unlikely to go ahead this year because of Covid19.

October was a busy month with display stands in the Atrium at GRH and at EDF highlighting chronic kidney disease and how GKPA can help.

We also held a Patient Info Drop in with the medical staff at GRH. We hope to hold similar events in the future.

World Kidney day in March was marked by a display in Kings Walk, Gloucester and at GRH.

Coffee and Chat was a new event for us. It was an informal meeting held at Community room at Tesco. It was very successful and feedback was people found it helpful. Again this is something we would like to continue when we can.

5.NKF

Three of us attended the NKF Patient Event and found it interesting and good to meet other KPA members

We have established links with Exeter and Bristol KPAs and hope to meet with them to discuss common issues.

6.Dialysis Bikes

We have been discussing this with the department and the possibility of helping to fund them.

7.Constitution

Our constitution was in need of simplifying, so it was easier to understand. It has been rewritten and will be presented to the members at our AGM for them to vote on. Thanks to Steve Syer for his hard work on this.

As you can see GKPA has been moving forward this year and have more plans for the future. Thank you to the medical staff at GRH for all their support. At the end of this report is a message from Dr Tom Pickett which will bring you up to date with what's going on at GRH.

We look forward to the time when we can meet with our members again. However we are still here and willing to help if we can. You can contact us by phone or email or through our website.

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Chairman

Message from Dr Tom Pickett Consultant Nephrologist and Clinical Lead

As you will all realise the last few months have been a time of huge change and stress for the Kidney Department at Gloucestershire Royal Hospital, as for the NHS as a whole. However, before I share a bit of what we have been doing to keep our staff and patients safe, I would like to pay tribute to those patients whom we have lost during this hard time, some due to coronavirus itself. We offer our sincere condolences to all their families and friends. When we are allowed to gather again I wonder if some sort of memorial event might be appropriate – perhaps that is something our GKPA committee could consider?

Among the changes that we have had to make has been virtually complete cessation of outpatient clinics. Two of our consultant colleagues who have been having to shield for health reasons themselves have been supporting us hugely by phoning patients who would otherwise have been seen so that we have been able to ensure that patients are not suffering harm for lack of watchfulness on our part. The remaining consultants have been working a very different pattern of shifts covering both the non-COVID renal ward 7b and what for much of the time has been a ward for COVID positive patients on 7a. We are pleased that the number of inpatients with the virus has now declined sufficiently that 7a has become a 'green' ward again in the last few days. That is good news for our long suffering nursing colleagues in particular. There has been quite a lot of illness amongst our staff in all areas but we are glad that all are now on the mend. I should mention our fantastic team of dietitians, specialist nurses and admin staff all of whom have been called upon to work in ways outside their normal patterns of work and all of whom have rallied round magnificently

Thankfully our transplant and peritoneal dialysis patients have been largely spared the virus but that has not been the case so much for our haemodialysis patients. Our transport service have transformed their working patterns to bring patients singly to and from dialysis and the Hospital provided surgical masks to all our haemodialysis patients as soon as the Renal Association made that recommendation. Val Gannon and the BBraun team have done an amazing job coping with all of this and isolating patients with the virus in side rooms. When for a while it looked as though there would be an overwhelming number of COVID-19 patients needing kidney support on our ITU, Val and the team rapidly installed and safety tested facilities to deliver haemodialysis for patients too sick to leave the critical care area. Finally I must, of course, thank you the patients and carers who have been so tolerant with us during this time when the normal consultant and dietitian visits have had to be suspended and dialysis times have been disrupted

That brings me to my final comments. What does the future hold? None of us know but we are beginning to plan for how we can restart some of the normal activity that keeps our patients as healthy as possible into the future. Already our surgical colleagues are beginning to do some fistula and peritoneal dialysis catheter operations. Both Oxford and Bristol are now doing some transplant operations. We consultants will be starting to see haemodialysis patients in a trouble shooting manner – full ward rounds will be a while yet. Most of our quality assurance and safety meetings will restart next month – in virtual form initially. I hasten to add that blood tests have been reviewed throughout this time and our nurses have been alerting us to problems as they happen. We are starting to see a few patients each week face to face in Gloucester and may start to do the same in Cheltenham in the next few weeks.

Of course it is possible that the virus may flare up again and, if so, our Trust has proved that it can quickly transform itself to be able to cope effectively with whatever happens. We will have to be flexible

and patient with each other and we will continue to try to keep you as informed as we are able. It is unclear what will be advised for our shielded patients (including all our transplant and dialysis patients) after the end of June. Watch this space and in the meantime please 'Stay Alert!' If you have any general questions about the renal service and the coronavirus perhaps you could contact the GKPA and we will try to answer them. If you have specific concerns about your own treatment then contact your own consultant via their secretary or your named nurse but please be aware that due to the shift pattern it may take us a while to respond. The Kidney Care UK website remains an excellent source of information: <https://www.kidneycareuk.org/news-and-campaigns/coronavirus-advice/>.

I wish you all the very best.

Tom Pickett

Consultant Nephrologist and Renal Lead