

Urgent Unplanned Care (Late Presenter)
PATHWAY 1 - FINAL DRAFT

First unplanned RTT Date collected on data screen	Known Patient with sudden AKCC New Patient sudden onset of AKCC Patient referred for RRT assessment
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4 weeks from 1st Urgent Renal Replacement Therapy Document date	Patient referred and reviewed in < 20 working days of first RRT and date documented (this time frame is important to enable SDM) If RRT confirmed proceed as below ↓	Discuss care options – PD,HD, Transplantation, Supportive Care Refer to relevant nurse specialist for education and support (including vein preservation) Review options and agree treatment plan with patient and family	For Supportive Care For PD	Manage via supportive care pathway
(Clock: ZERO)	Refer for RRT assessment Metric 1	Vein mapping and vascular access plan recorded VA nurse education & information on vein preservation and care		

2 weeks from Initial consultant review to VA assessment (Clock: 2 weeks)	One Stop Consultant Vascular Access Assessment <2/52 from date of referral Metric 2	Vein mapping and Vascular Access plan recorded Patient receives VA nurse education and information about vein preservation and care	PD assessment in <2/52 of referral (KPI measure)
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3 weeks from VA assessment to surgery (clock: 5 weeks)	Undergo surgery <3/52 from date of VA assessment. Metric 3a	Consultant delivered surgery <3/52 (KPIs 1. Surgery 5 weeks after referral 2. 70% day case) Metric 3b (day case)	PD insertion < 2/52 postassessment Commence PD < 2/52 post insertion (KPI measure)
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