

Introduction: The UK Renal Registry's 24th Annual Report

The UK Renal Registry (UKRR) collects and reports data annually on approximately 70,000 kidney patients on kidney replacement therapy (KRT) in the UK. The annual report is an audit of the care provided to these patients at each of the 68 adult and 13 paediatric centres against national standards, in particular, the UK Kidney Association's guidelines – ukkidney.org/health-professionals/guidelines/guidelines-commentaries.

The 24th Annual Report includes patients who started KRT in 2020, as well as all patients who were on KRT at the end of 2020. The chapters are split by treatment modality (transplant, in-centre haemodialysis, peritoneal dialysis and home haemodialysis), as well as by adults and children. The online appendices cover the methodologies, including how data are collected and coded (appendix A) and include basic analyses at Integrated Care System and health board level (appendix B) – ukkidney.org/audit-research/annual-report. Plain English summaries of the annual report have been developed in partnership with the UK Kidney Association's Patient Council and all graphs used in the report are available for use in presentations – ukkidney.org/audit-research/annual-report.

How to interpret centre analyses and outlying centres

The UKRR advises caution when comparing centre-specific attainment of clinical audit measures, because for many of these analyses no adjustment can be made for the range of factors known to influence the measured variable. The UKRR does not test for significant differences between centres – arbitrary 95% and 99% confidence intervals are created from the data to illustrate variability between centres and highlight outlying centres. Centre comparisons will become more meaningful when more comorbidity data (via linkages) and advanced CKD data are included to understand differences in the transition of patients onto both RRT and conservative non-dialysis pathways. Despite these shortcomings, identifiable centre-specific analyses on the survival of KRT patients are published in the annual report. Although the UKRR has no statutory powers, the UKRR senior management team communicates survival outlier status with kidney centres prior to publication. Centres are asked to report their outlying status internally at trust level and to follow-up with robust mortality and morbidity meetings. They are also asked to provide evidence that the clinical governance department and chief executive of the trust housing the service have been informed. In the event that no such evidence is provided, the chief executive officer or medical director of the UKRR informs the president of the UK Kidney Association, who then takes action to ensure that the findings are properly investigated.