



Executive summary of Cardio Renal Metabolic Joint Working Outputs

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Project title	EffiKacy – Efficient Group Consultations for CKD Patients
Duration	The duration of this Joint Working Agreement is from 17 February 2025 – 15 August 2025
Project partners	NHS Wallsend PCN AstraZeneca UK Limited
What was the issue to be addressed?	<p>The EffiKacy project aims to enhance the management and optimisation of care for patients with kidney disease through the following objectives:</p> <p>Establishment of Additional Clinic Capacity: Develop additional clinic capacity within the PCN Additional Roles Reimbursement Scheme (ARRS) framework to implement guideline-directed medical therapy (GDMT) for eligible DKD and CKD patients.</p> <p>Efficiency Assessment of Delivery Methods: Evaluate the efficiency of group consultations sessions compared to individual virtual reviews in delivering medical optimisation, determining the most effective method for patient engagement and treatment optimisation.</p> <p>Improvement of Disease Registers and Awareness: Enhance the accuracy of disease registers and increase disease awareness among patients with CKD and DKD.</p> <p>Optimisation of Patient Care: Determine the percentage of CKD and Diabetic Kidney Disease (DKD) patients that can be optimised through group sessions versus telephony clinics.</p> <p>The project aimed to assess the following objectives: The number and percentage of patients attending virtual reviews and receiving GDMT interventions. The number and percentage of patients attending group sessions and receiving GDMT interventions. Baseline prevalence data (absolute numbers and percentages) and monitor changes on a monthly basis. Patient-reported satisfaction levels comparing group sessions to virtual reviews.</p>

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	<p>These objectives will guide the project in enhancing patient care and optimising treatment delivery methods.</p>
<p>What were the results?</p>	<p>The project delivered benefits to the NHS and Patients living with Chronic Kidney Disease.</p> <p>CKD prevalence identification: improved from 1,709 (4.04%) to 2,039 (4.71) (+330).</p> <p>Structured reviews completed: (509 by pharmacy technicians; 435 by pharmacists).</p> <p>Medical optimisation advanced: LLT initiated/intensified in 29 (27 declined); ACEI initiated/increased in 24 (6 declined); SGLT2i initiated in 8 CKD and 229 diabetic CKD patients.</p> <p>Whilst patient feedback on patient group consultations was positive, there was a high attrition rate in those attending:</p> <p>Of 181 patients invited, 49 accepted, 34 attended. Triage identified 186 unsuitable patients. It is hypothesized that health literacy is a barrier to engagement which needs to be addressed and that many patients were considered unsuitable due to frailty.</p> <p>Operational learnings delivered a sustainable workflow, improved skill mix, and a legacy for ongoing CKD diagnosis and management, with foundations for scale-up.</p>