

Ref no: 056060619  
From: Commercial  
Date: 06/06/19  
Subject: Hyperkalaemia Patient Safety Alert

## REQUEST & RESPONSE

### Questions for consideration

In 2018 NHS Improvement issued a Patient Safety Alert (PSA), entitled [Resources to support safe and timely management of hyperkalaemia \(high level of potassium in the blood\)](#) which outlined specific actions for NHS trusts to implement in order to improve safety for patients at risk of hyperkalaemia. The deadline for completion was 8<sup>th</sup> May 2019. NHS Improvement's recommendations were to:

- 1) Identify a senior clinician in the organisation to lead the response to the alert
- 2) Review or produce local guidance (including key steps or easy reference guides) for the management of hyperkalaemia that aligns with the evidence-based sources highlighted by NHS Improvement
- 3) Ensure that local guidance can be easily accessed by all staff including bank and agency staff
- 4) Ensure relevant guidance and resources are embedded in clinical practice by revising local training and audit
- 5) Use local communication strategies to make all staff aware that hyperkalaemia is a potentially life-threatening condition and that its timely identification, treatment and monitoring during and beyond initial treatment is essential

I would like to request information which sets out what steps the Trust has taken to implement each of the recommended actions (1 to 5) outlined in the *Management of Hyperkalaemia* PSA. Specifically, I request the following information relating to the PSA:

1. Has a senior clinician in the Trust been appointed to lead the response to this alert?

	<b>Your response</b>
If yes, please name the individual	Dr Ragit Varia – Clinical Director AMU & Trust Acute Kidney Injury Lead
If no, please specify the reason for the lack of appointment and anticipated timelines for an appointment to be made	

2. Has the trust reviewed existing - or produced new - local guidance for the management of hyperkalaemia?

	<b>Your response</b>
If yes, please share the relevant guidance and provide details of any changes made during the review	The policy was reviewed and revised from original version by members of the AKI team in 2018 and a final policy was approved by Clinical Effectiveness Council 10 <sup>th</sup> September 2018.
If no, please specify why this has not taken place and any future plans to do so	

3. Has the trust taken steps to ensure that local guidance can be easily accessed by all staff?

	<b>Your response</b>
If yes, please outline the specific measures taken	The guidance is part of 'Prevention, identification and management of acute Kidney Injury (AKI) in adults in hospital' Policy (approved 2018 – review 09.2021). This policy is available on the Trust Intranet under the AKI page and the section on hyperkalaemia can be found on P.17 & 18 of the document, along with monitoring requirements to adhere to when Insulin/Dextrose is used on P.19.
If no, please specify the reasons why not and any future plans to do so	

4. Has the trust revised local training and audit to ensure that relevant guidance and resources are embedded in clinical practice?

	<b>Your response</b>
If yes, please outline the specific measures taken and signpost to updated documents	This is included in the Foundation Year medical training and delivered on an annual basis. It is also included in nursing training within the Trust. Resources all available on the trust intranet .
If no, please specify the reasons why not and any future timelines in doing so	

5. Has the trust used local communication strategies to raise staff awareness of hyperkalaemia diagnosis and treatment?

	<b>Your response</b>
If yes, please specify the measures taken	Global emails sent. Cascaded via Clinical Effectiveness Council as revised policy to all relevant staff
If no, please specify the reasons why and any future plans to do so	