

To: All Havering GPs:

Dear Colleagues,

Virtual Chronic Kidney Disease Service for Havering practices

We are pleased to inform you of the progression of the Virtual Chronic Kidney Disease (vCKD) service at BHRUT.

On **18th May 2026**, Havering GPs will switch from the current *Advice and Guidance* model and will transition fully to the vCKD service, designed to provide a more streamlined, proactive, and clinically responsive approach to patient care.

This development reflects our commitment to improving collaboration between primary and secondary care while ensuring patients receive timely specialist input without unnecessary delays or hospital visits.

What is Changing?

- The vCKD Service will replace the existing Advice and Guidance pathway for CKD-related queries.
- Patients will be reviewed within a virtual clinic led by hospital Renal Consultants.
- Clinical data will be assessed remotely within EMIS, and clear, actionable management plans will be communicated directly to you through the EMIS workflow.
- Clinical nephrology reviews will be embedded in the shared record in EMIS and sent to EMIS workflow as a formatted clinical letter that can be filed in EMIS documents.

How to Refer

Referral pathway and criteria information are attached as separate documents to this communication.

In the meantime, please continue to use the Advice and Guidance pathway as usual until 18th May when the A&G will be switched off.

The Virtual CKD Service can deliver a more efficient, responsive, and clinically effective pathway for both practices and patients.



Why is this better for General Practice?

1. Faster Specialist Input

Virtual review allows for earlier risk stratification and intervention, supporting safer patient management and reducing clinical uncertainty.

2. Reduced Administrative Burden

Fewer back-and-forth advice requests means less time spent clarifying plans. You will receive concise recommendations and follow-up guidance in a single communication.

3. Clear Management Plans

Each review will provide structured advice on monitoring, medication optimisation, and thresholds for escalation, helping you manage CKD confidently within primary care.

4. Improved Patient Experience

Patients will remain under your care with specialist oversight, avoiding unnecessary outpatient appointments and travel.

5. Proactive Care for High-Risk Patients

The virtual model enables earlier identification of patients at risk of progression, ensuring those who need face-to-face renal input are prioritised appropriately.

6. Stronger Primary – Secondary Care Partnership

This service is designed to complement your expertise, offering collaborative support while maintaining continuity for your patients.

Thank you for your continued partnership and for the vital role you play in the care of people living with CKD.

If you have any questions ahead of the launch, please contact the hospital renal administrative team on **01708 435 000 ext 2221, 2223, 2277** or via email - bhrut.renal.team@nhs.net

Yours faithfully,

BHRUT Renal Team

