



South London Cardiac and Stroke Network Highlight report - March 2012

March 2012

Senior responsible officer - Lucy Grothier, Director, SLCSN  
Report through 31st March 2012

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**London Cardiovascular Project update**

Since beginning implementation in November 2010, steady and significant progress on the London Cardiovascular Project has occurred in each of the seven work streams.

**NSTEACS**

The high risk NSTEMI pathway is live for all SEL and SWL units. A2 assessments and corresponding action plans have been completed.

Fourth quarter data will need to be produced locally (e.g. per cent of patients on high risk pathway seen within 24 hours, median length of stay).

**Arrhythmia**

All central unit sites (St Thomas', King's College, St George's) have been assessed and assurance

letters have been sent to chief executives.

Quality standards have been signed off for device therapy and ablations, emergency arrhythmia services and arrhythmia clinics. Local unit assurance visits to review DGHs against the quality standards have been completed at all South London sites (except PRUH, scheduled for 11<sup>th</sup> April).

**Cardiac surgery**

Site assessments and corresponding action plans have been completed for all non elective cardiac surgery sites. Network teams have agreed analysis criteria for non elective inter-hospital transfer (IHT) length of stay (LOS) reporting (first time isolated CABG). Data for non elective patients will be captured on the IHT electronic referral system. To demonstrate the

proportion of IHT patients referred electronically, a comparison will be made with Hospital Episode Statistics (HES) data.

**Non elective cardiac surgery**

Work is underway to improve LOS data quality, promote the full use of the inter-hospital transfer (IHT) system and improve discharging of patients on IHT to allow data capture of whole patient journey. An IHT guide for referring and receiving hospitals will be produced in time for the training of the new junior doctors. The fourth quarter performance report for IHT usage and LOS targets will be presented to the June Pan-London Cardiac and Stroke Network Board.

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**Heart failure - New commissioning guide**

It is recommended that all South London boroughs implement the SLCSN [heart failure commissioning guide](#).

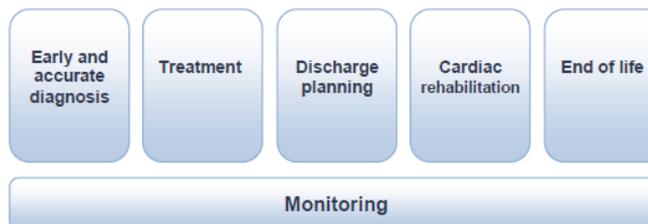
All South East London (SEL) boroughs are currently reviewing their services against the guide. Further information can be obtained by emailing [Alison Basa](#).

**HF meeting**

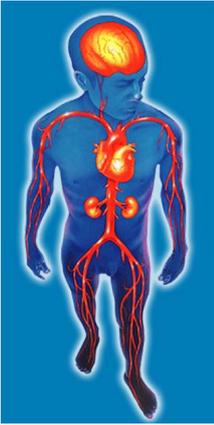
The Network Heart Failure meeting was held on 29<sup>th</sup> March. South West London (SWL) clinicians and commissioners in attendance are now reviewing whether [Choose and Book](#), the national electronic referral service for provider outpatient clinics, can be used to gather data about NT-proBNP/BNP use. (Currently this information is not available.)

**Top tips for GPs**

A set of four heart failure postcards, [Top tips for GPs](#), has been produced by the NHS Heart Improvement Programme.



Structure of the HF commissioning guide



The CVD Outcomes Strategy will create a joined-up approach across the NHS, public health and social care, to secure the improved care set out in the Outcomes Frameworks.

## Events - Designing the future of networks, CVD strategy

### Designing the future of networks

The London Cardiovascular and Stroke Networks are holding an event for clinical colleagues on 17th May to discuss the role of networks in the new NHS architecture. For more information, please email the Networks, [info@slcsn.nhs.uk](mailto:info@slcsn.nhs.uk).

### CVD Outcomes strategy

A number of engagement events for the Department of Health (DH) Cardiovascular Disease Outcomes Strategy will be held across the country. A national event, scheduled for 10th May, is aimed at national organisations, professional associations and third sector/voluntary agencies.

This will be followed by a se-

ries of regional CVD strategy events, one each in the North, South, Midlands and London regions. The London event will be held on 27th June. The primary aim will be to obtain participants' views on the scope, main issues and priorities for the strategy. A further consultation via the DH website is planned for the summer, which will build on the outcomes from the regional events.

### Newsletters

New SLCSN newsletters are now available for download:

- [SLCSN news for patients and public](#)
- [Stroke-news](#)

### NHS Health Check

The DH recently [announced the inclusion of an alcohol check](#) for those diagnosed with hypertension in the NHS Health Check beginning April 2013 as part of the Home Office's Alcohol Strategy. It will include identification, brief advice and referral to specialist services, as appropriate.

### Supporting Greenwich in CR

The SLCSN supported Greenwich as they submitted a successful funding bid to the British Heart Foundation. We look forward to working closely with them to progress this work. Please contact [Alison.basa@slcsn.nhs.uk](mailto:Alison.basa@slcsn.nhs.uk) for further information.

### BACPR standards published

The second edition of the [BACPR Standards and Core Components for Cardiovascular Disease Prevention and Rehabilitation](#) was published in March.

Seven standards together with seven core components aim to ensure that rehabilitation programmes are clinically and cost effective, and achieve sustainable health outcomes for patients.

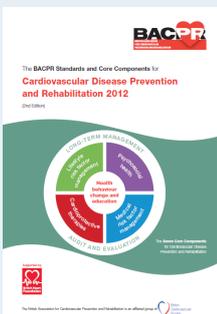
### SLCSN Arrhythmia meeting

The next SLCSN arrhythmia roundtable meeting will be held on 20th June from noon-2pm at the Network offices. Please email [Richard Whitfield](mailto:Richard.Whitfield) for further information.

### Heart Rhythm Week 21-27 May

The Arrhythmia Alliance (AA) is aiming to raise awareness of heart rhythm disorders during Heart Rhythm Week, 21st -27th May. Get involved by ordering your [free awareness pack](#).

AA will be hosting regional [Cardiac Update meetings](#) for all healthcare professionals involved in the care and provision of arrhythmia services, including treatment of heart rhythm disorders, such as atrial fibrillation. The London event will be held on 22nd May at the London Hilton Hyde Park.



BACPR standards for CVD prevention



Get involved with AA's Heart Rhythm Week, 21st-27th May

## Recent NICE guidance

### **TAVI for aortic stenosis** *Familial hypercholesterolaemia*

NICE has produced guidance on [Transcatheter aortic valve implantation for aortic stenosis](#), which may be an alternative to surgical valve replacement in patients for whom conventional aortic valve replacement is not suitable, or who are at very high risk.

NICE has recently published two new implementation tools to support the recently reviewed *Familial hypercholesterolaemia* (FH) clinical guideline (CG71). (The [review decision](#) is posted on the NICE website.)

The [implementation advice](#) focuses on the genetic cascade testing recommendations in practice and includes examples of existing FH genetic cascade testing services.

The [electronic audit tool](#) enables those conducting clinical audits to input data, from which charts and reports are created automatically.

An updated [slide set](#) can assist in local dissemination of the guidance. These resources and the original implementation tools are available on the [CG71 web page](#). Further local information to support FH is available on the [Network website](#).



### **Prescribing - Dabigatran: HTA released**

The NICE health technology appraisal (HTA) for dabigatran was released in March advocating the use of dabigatran for patients with AF. The rivaroxaban appraisal is due May 2012; apixaban is due February 2013. An extraordinary meeting to discuss the implications and update the [Network interim guidance](#) has been arranged for April 17th from 2-3:30pm. All are welcome. Please email [Sara Nelson](mailto:Sara.Nelson@slcsn.nhs.uk) for further information.

### **Dabigatran impact paper published**

A **dabigatran commissioning and budget impact paper** for healthcare professionals and a **patient information leaflet** have been produced and are [available upon request](#) from the Network.

The next SEL Revascularisation meeting will be held 24th April. We welcome SWL participation.

The first joint South London Revasc meeting will be held on 14th September. Please contact [sara.nelson@slcsn.nhs.uk](mailto:sara.nelson@slcsn.nhs.uk) if you would like to join the group.

### **Upcoming prescribing meetings**

The Cardiovascular Prescribing Forum meeting was held on 14th March; the next one is planned for 21st June. We welcome CCG representatives. Please email [Sara Nelson](mailto:Sara.Nelson@slcsn.nhs.uk) if you are interested in joining the group.

The next Industry Working Group meeting will be held 22nd May.

## **Acute stroke work stream**

### ***Site assessments***

The Stroke Units (SUs) at the South London Healthcare Trust (SLHT) have successfully passed their A1(3) assessments. Queen Elizabeth Hospital was assessed and passed 1st March, the Princess Royal University Hospital (PRUH) on 5th March.

The TIA service at the PRUH was also assessed and achieved a Gold Standard. The assessment for QEH will be held in May as a new pathway has been implemented from 1st February.

The HASU at the PRUH will be assessed for A1(3) and A2(1) standards in May, and the SUs at PRU and QEH will be assessed for B and A2(2) standards in June.

### ***South London Repatriation work stream***

The South London Repatriation work stream meeting was held on 9th March. The group discussed issues with repatriating stroke patients and mimics back to stroke units and local hospitals. Data was presented on length of stay, the number of direct admissions, readmissions, repatriation of mimics and end of life length of stay on an SU (to check HASUs weren't transferring someone who was going to die within a short time).

Acute work stream meetings for SEL and SWL will take place in May. For more information about these meetings, please contact [Helen.o'kelly@slcsn.nhs.uk](mailto:Helen.o'kelly@slcsn.nhs.uk).

## **Rehab stroke work stream**

### ***Complex inpatient neuro rehabilitation***

The London Complex Stroke Inpatient Rehabilitation group met on 5th March. It was agreed that the consortia would aim to improve the assessment and decision processes to ensure referring clinicians are informed within 10 days of receipt of referral. If unsuitable for the unit patients will be referred to an appropriate second unit for assessment and admission (as appropriate) within five weeks.

Networks will continue to communicate referral guidance within their areas.

### ***Psychological support***

Clinical teams from across South London attended a pan-London workshop to look at ways to improve psychological support for people who have had a stroke.

The day was highly successful, and a number of teams are expected to bring forward proposals for auditing current services to the next Rehabilitation work stream meeting.

### ***Early supported discharge (ESD) and community stroke rehabilitation***

The next South London Rehabilitation Work stream meeting will be held on 19th April. For more information about this meeting please contact [Elaine.hayward@slcsn.nhs.uk](mailto:Elaine.hayward@slcsn.nhs.uk). The Network will be finalising the work plan for stroke rehabilitation at this meeting.

The Network contributes to a pan-London Rehabilitation Implementation Plan. This includes reporting on availability and quality of community stroke services and a review of non stroke unit inpatient care. It was agreed that the London Clinical Director, Prof Tony Rudd, would visit all provider units. Although the numbers of patients going to such services is limited in South London, the Network will be arranging his visits to the relevant units shortly.

The Network continues to work with boroughs where ESD services have not been commissioned to make the case for such services.

## Commissioning and contract implications

### CARDIAC

#### **Hypertension guidance**

NICE [Hypertension guidance CG127](#) recommends ambulatory BP monitoring for diagnosis which will create a significant cost pressure initially. Commissioning and [Managing uncomplicated hypertension](#) prescribing guidance has been completed. The Network is working with Wandsworth and Lambeth to support service development.

#### **Cardiac rehabilitation tariff**

A [£467 post-discharge rehab tariff](#) (from page 33 onwards) is being introduced by the Department of Health and will be mandatory for integrated providers (such as Lewisham, Guy's and St Thomas' and Croydon). It is expected to become mandatory for all providers in 2013/14. This is not an activity based tariff; it must be applied. The Network has developed guidance for organisations on what the new tariff could mean for them.

### STROKE

#### **HASU and SU**

See the [Stroke performance update](#) for detail of HASU and SU progress against the performance monitoring framework as of 26th January. QEH and PRUH are still subject to the accreditation process. All other units have passed for this financial year (2011/12). Plans for performance monitoring for 2012/13 are being finalised by the London Clinical Advisory Group.

#### **Acute and community service specification**

The following service specifications have been agreed:

- [Community rehab and ESD](#)
- [Acute](#)

### LCVP

- NSTEACS - No new issues
- Cardiac surgery - No new issues
- Arrhythmia - Awaiting confirmation of arrhythmia assessment from PRUH
- Vascular - No new issues

## Decisions required

### **Cardiac**

- Approval for QMAS data awaited from Bromley; all other boroughs have granted access
- Approval for SLCSN access to ePACT data awaited from all boroughs except Croydon

### **Stroke**

No decision required

### **Vascular**

No decision required

#### **Additional documents**

- [Key risks/issues and mitigating actions](#) - A full risk log and mitigating actions is available on request.
- [Stroke performance update](#)
- [London Cardiovascular Project progress matrix](#)

## Dates for your diary

**24 April - SLCSN SEL Revasc meeting**

**17 May - Designing Clinical Networks** | hosted by the London Cardiovascular and Stroke Networks

**21-27 May - Heart Rhythm Week** | Arrhythmia Alliance

**22 May - SLCSN Industry Working Group**

**22 May - Regional Cardiac Update** | Arrhythmia Alliance

**20 June - SLCSN Arrhythmia Roundtable meeting**

**21 June - SLCSN Cardiovascular Prescribing Forum**

**27 June - London CVD Outcomes Strategy** | Department of Health

**14 September - SLCSN Joint South London Revasc meeting**

## South London Cardiovascular and Stroke Network

SRO:	Lucy Grothier, Director
Circulation:	NHS South East London and NHS South West London
Report for period:	1st-31st March 2012
Completed by:	Sara Nelson

## London Cardiovascular Project update (*cont'd from front page*)

### **Mitral valve**

Site assessments have been completed in all mitral valve (MV) cardiac surgery sites with action plans developed to ensure full implementation by March 2012. Low volume repair operator activity was due to stop in October 2011. Formal confirmation was requested in February 2012. To date, formal replies have been received only from King's College Hospital and St George's Hospital. The Network Director is following up locally to ensure formal responses are on file for each cluster.

The Society of Cardiothoracic Surgeons (SCTS) CCAD database is planned for use in MV audits and measurement against key performance indicators (KPIs). The Networks are working with surgical colleagues and the SCTS database committee to finalise definitions of data collection and methodology for analysis. This will provide clinically led and sustainable reporting.

### **New technologies**

The New Technologies work stream is working to ensure there is a properly considered and structured manner for the roll out of new cardiac technologies across London (including understanding of the financial and clinical impacts). Initial meetings brought together cardiac surgeons, cardiologists, commissioners, public health leads and network representatives to develop a prioritisation tool which supports decision making as well as a process to identify technologies that should be considered for introduction. Meetings held have resulted in the creation of a draft assessment tool.

### **Vascular**

Complex arterial vascular surgery has been centralised at St George's Hospital site. No other sites in SWL are providing this service.

King's Health Partners (KHP) is working collaboratively to support the centralisation of inpatient services to the St Thomas' site. The additional hybrid theatre planned to open on St Thomas' site in summer 2012 has en-

countered construction delays which will affect go live. The new build is now expected to open winter 2012.

Work is ongoing to ensure clear timelines and agreement across stakeholders for the phased move of services from the King's Hospital site. The transfer of arterial vascular inpatient services from Lewisham to St Thomas' will continue as planned; all inpatient care will move to St Thomas' by the end of the first quarter.

A single on call rota for the vascular network will be implemented as planned to ensure patients can access the consultant-led service.

The Pan-London Cardiac and Stroke Network Board requests SEL commissioners to obtain firm assurance by the service providers of formal confirmation, including timescales, for the completion of the centralisation of services.

Discussions are occurring around new pathways for carotid endarterectomy. New pathways and referral systems are in development, led by the team at GSTT.