



Nov 2012 issue

## Highlight report

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### Update: operating framework for Strategic Clinical networks released

The NHS Commissioning Board has published arrangements outlining the establishment, development and operation of **Strategic Clinical Networks**. The networks become operational from 2013, funded and hosted by the NHS Commissioning Board.

### Tackling the communication challenge for stroke patients is vital

A GP gives his perspective as a stroke survivor who had communication difficulties (aphasia) as a result of a stroke and makes some **recommendations to commissioners** on how to support people with this condition.

### Supporting the Use of GRASP-AF in Primary Care

The Atrial Fibrillation Association recently released **Grasp the Initiative**, a report to facilitate the national roll-out of the GRASP-AF tool and to promote its widespread use in GP practices. The report offers an introduction to GRASP-AF, demonstrates the potential the tool has in improving care for people with AF, and provides a series of practical recommendations on what more can be done by commissioners and primary care clinicians to promote the use of GRASP-AF.

### London specialist stroke units feature on ITV news



Dr Dulka Manawadu from Kings College Hospital was interviewed as part of a story on the London stroke model on **ITV's London Tonight** highlighting the successes of the last year.

### Walking and cycling - NICE guidance

NICE published guidance on **walking and cycling** to say more people should be encouraged to keep fit by incorporating walking and cycling into their everyday lives, in an attempt to tackle declining rates of physical activity in England.

#### Additional documents:

[QIPP Planner](#)

#### Information requests:

Email [info@slcsn.nhs.uk](mailto:info@slcsn.nhs.uk) or visit the [Network website](#).

## NHS Health Check/ prevention

### Response to the Cochrane Review

The NHS health checks team have put together an [assessment of the Cochrane review](#) published on 17 October.

### Obesity – NICE guidance

Obesity should be tackled by encouraging different organisations to work together through a 'community-wide' approach, according to [latest NICE guidance](#). By 2050, it is expected that more than half the adult population in England and a quarter of children will be obese.

### Anti-coagulation update

The Pharmacy working group was held on 29 November and the Network have developed a [transfer of care document](#) to compliment the [novel anticoagulant position statement](#) and [dabigatran and rivaroxiban prescribing guidance](#) now available on the [website](#). Please contact [Sara Nelson](#) if you are interested in joining this group.

### Arrhythmia/atrial fibrillation

#### Implementation support for GRASP AF

The Network has been supporting NHS Improvement to implement GRASP AF in GP practices through training in Lambeth, Lewisham and Greenwich. It is hoped this will cover approximately 50 practices once completed.

#### Training event for GPs in Bexley

Helen Williams, consultant pharmacist for the Network, presented the national and south London arrhythmia pathway and stroke prevention guidelines at an event to Bexley GPs on 30 November.

### Heart failure

#### Chronic heart failure - ivabradine

GPs can now offer ivabradine (Procoralan) to certain patients with chronic heart failure. The drug can be offered to patients with chronic heart failure of New York Heart Association class II to IV with systolic dysfunction who are in sinus rhythm, and whose heart rate is 75 beats per minute or more, with left ventricular ejection fraction of 35 per cent or less.

As a result the Network is updating their guidance on [prescribing Ivabradine](#).

### Heart Failure audit

The [National Heart Failure Audit 2011/12](#) was published on 27 November 2012, highlighting the urgent need for more patients who are admitted to hospital with heart failure to receive specialist care on a cardiology ward. This recommended practice reduces deaths and improves access to treatments and specialist follow-up. If care is provided by a cardiology ward the likelihood of survival is far greater than if a patient is admitted to other wards - on average 8 per cent died on a cardiology ward compared to 13 per cent on general medical wards and 17 per cent on other wards. The Network continues to support heart failure redesign with Lambeth, Southwark and Kings Health Partners as well as Kingston. Further information can be obtained by emailing [Alison Basa](#).

### Chest pain

#### Chest pain pathway

The Network Chest pain pathway and Revascularisation Group will be holding a sub group meeting focusing on community cardiology on 11 December. Please contact [Sara Nelson](#) for more information.

#### Inter hospital transfer report

A report on cross sector referrals of inter hospital transfers and current length of stay in relation to the London Cardiovascular project quality standards has been completed and circulated to the revascularisation group. Work is ongoing to upgrade the electronic inter hospital transfer system.

#### 11<sup>th</sup> MINAP report published

The national [Myocardial Ischaemia National Audit Project \(MINAP\)](#) has published its 11th annual public report on performance against national standards for hospitals that admit patients with a heart attack. All south London organisations now meet 'call to balloon' targets of 150 minutes.

## Prescribing

## Cardiac

## London Cardiovascular Project

Following the successful “go live” of the London Cardiovascular Project in April 2012, the pan London Cardiac Leadership and Advisory Group (CLAG) recommended that commissioners support the development of the high risk NSTEMIs and arrhythmia pathways to further improve patient access to care across London.

### Arrhythmia

Following the implementation of the London cardiovascular arrhythmia pathway, all local hospitals can access consultant-led, physiologist supported emergency arrhythmia care 24 hours a day. The seven central units in London designated to deliver care were designated as arrhythmia centres following strict 'assurance' visits that assess resources and processes for the supply of 24 hour care

The pan London arrhythmia group proposes further improvements in access by assessing the feasibility of a London Ambulance Service (LAS) triaging protocol to enable direct access to the arrhythmia centres. In order to assess the improvement to patient care and outcomes, the new pathways will be piloted across London to identify which patients with arrhythmia emergencies would benefit from triaging and direct transfer to an arrhythmia centre. The arrhythmia group support the new pathway as earlier access to specialist care should result in an improvement access to care delivered and reduce length of stay, as rapid diagnosis and treatment should reduce the need for a double admission and extended stay in hospital.

Preliminary work between LAS and representatives from secondary and tertiary care identified three clinical scenarios that should be considered for triaging

- Complete Heart Block (CHB)
- Ventricular Tachycardia (VT)
- Multiple discharges from an Implantable Cardioverter Defibrillator (ICD)

Discussions for how best to implement and assess the new pathways are ongoing and a proposal for the pilot will be taken to the London Cardiovascular Clinical Leadership Group meeting on 7 December.

## NSTEMIs

The current London NSTEMIs pathway, commissioned in 2012/13, focused on the delivery of an emergency department screening and transfer protocol. The south London network is in the process of gaining commissioner approval to support the introduction of a revised pathway, which will see the introduction of London Ambulance Service paramedic triage for this small number of high risk patients. Patients will be identified by paramedic crews and taken directly to a cardiac centre. This change to the pathway will facilitate access to round the clock interventional diagnostics and treatment and provide world class care to all Londoners by providing more patients access to treatment within 24 hours of first onset of acute chest pain. The revised pathway is being piloted in north east London, with the support of local commissioners.

### Performance on the stroke units

Quarter 2 2012-13 performance reports are now available for Hyper Acute Stroke Units (HASU) and Stroke Units (SU) in south London, covering the London stroke standards collected by the London networks, for [south east London](#) and [south west London](#).

Annual assessments are under way for all the south London accredited HASUs and SUs and will be completed by the end of December. The next stage of accreditation visits for Princess Royal University Hospital and Queen Elizabeth stroke units will take place in January.

The latest results for the [Stroke Improvement National Audit Programme \(SINAP\)](#) for patients admitted in Quarter 2 are now available. South London sites scored higher than the national average of all indicators and Princess Royal has now moved up into the second quartile nationally for performance; St George's and Kings remain in the top quartile.

### London Ambulance Service Stroke Annual Report

London Ambulance Service published their [Stroke Annual Report: 2011/12](#), showing that over 8,250 suspected stroke patients were taken by ambulance directly to specialist hospitals in London last year.

## Stroke

Stroke

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## &gt;&gt;&gt;Stroke

**Stroke nurses seek national recognition for training**

Specialist stroke nurses have been working with the network to develop nursing competences for stroke units, to complement the HASU nursing competencies already produced. These have now been submitted to the UK Forum for Stroke Training for national accreditation, and will be formally launched early next year.

**South London Physiotherapy Peer Group meeting**

The South London Physiotherapy Peer group met on 21 November and discussed the forthcoming SSNAP database, gave an update on research projects across the region and heard an update on seven day service development in both acute and community trusts. The group will meet again in February 2013.

**Health economic analysis of clinical psychology led care after stroke**

**NHS Improvement – Stroke** have modelled the costs and potential cost savings of delivering a psychological support service for people post stroke. A stroke service where psychological care is led by a clinical psychologist, using a stepped approach has the potential to reduce the cost burden of stroke, with savings to the NHS and adult social care recovered in around two years. This modelling indicates that an investment of around £69,000 may deliver a benefit of around £108,300 to the NHS and social care in around two years.

**Professional development, resources and events**

**Seven day services event:** 12 December 2012, London

The focus of the day will be on the importance of seven day services and its contribution to improving patient outcomes and mortality, with a particular focus on the importance of early rehabilitation for patients with long term conditions. To reserve your place please contact: [Alyson Banks-Davies](#)

The **NHS Commissioning Board** are looking for up to 12 CCGs who want to work on effective community involvement in commissioning to express an interest in becoming a learning site. This could be particularly useful for commissioners looking to improve their 'life after stroke' services in partnership with the voluntary sector. The deadline for expressions of interest to be submitted is 14 December.

The Health Service Journal and Nursing Times **Care Integration Awards** are looking for organisations and individuals who promote integrated care. The entry deadline is 1 February 2013.

**Management of Hypertension in primary care** – 11-14 February 2013, £500

**Management of Heart Failure in primary care** - 26 February–1 March 2013, £500

Masterclass: **Setting-up a nurse-led cardiovascular clinic**, 6 March 2013 @ Hallam Conference Centre, London.

**Network diary dates**

10 Dec 2012 - SW London Stroke Acute Workstream meeting, 1400-1600 Wilson Hospital

11 Dec 2012 - South London Community Cardiology meeting 1300-1500, Network office

11 Dec 2012 - Pan London Carotid Endarterectomy Audit meeting, Ambassadors Hotel

14 Dec 2012 - SE London Stroke Acute Workstream meeting, 1000-1200, Network office

**NHS South London Cardiovascular and Stroke Network**

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