

# Collaborative working to deliver Improvements in Atrial Fibrillation.

NHS England South Central, Medical Directorate Conference  
7<sup>th</sup> June 2017

*Hannah Oatley, Clinical Innovation Adoption Manager, Oxford AHSN*

# AF Improvement Opportunity within Thames Valley



## Detection Gap:

Around 20,000 patients with AF but undiagnosed



## Treatment Gap:

6500 high risk patients with known AF not receiving any anticoagulation therapy.

Potential 325 strokes per annum

**210 preventable strokes**  
**£5.3m cost**



## Optimisation Gap:

5500 patients prescribed anticoagulation but not adequately anticoagulated

Potential 280 strokes per annum

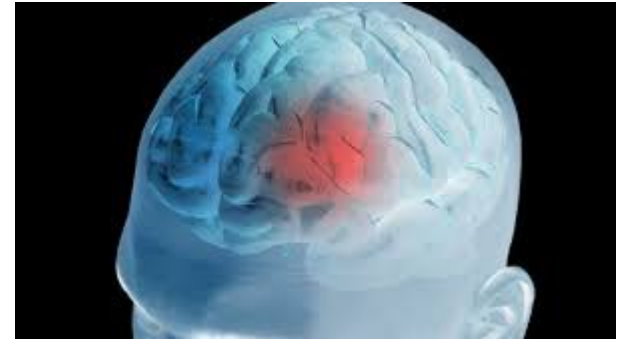
**180 preventable strokes**  
**£4.4m cost**

# Why is stroke prevention in AF such a challenge?

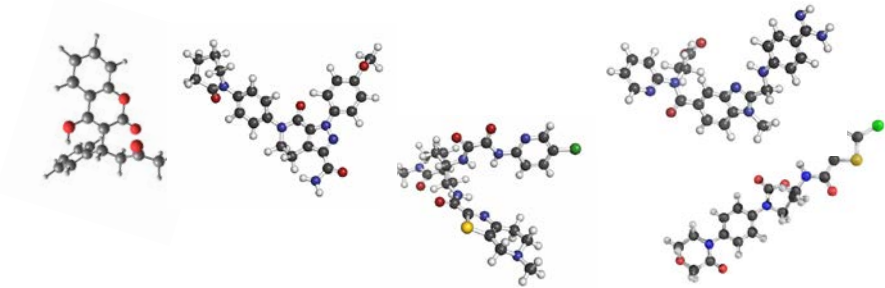
We can identify the patients at risk....



And yet...in Thames Valley

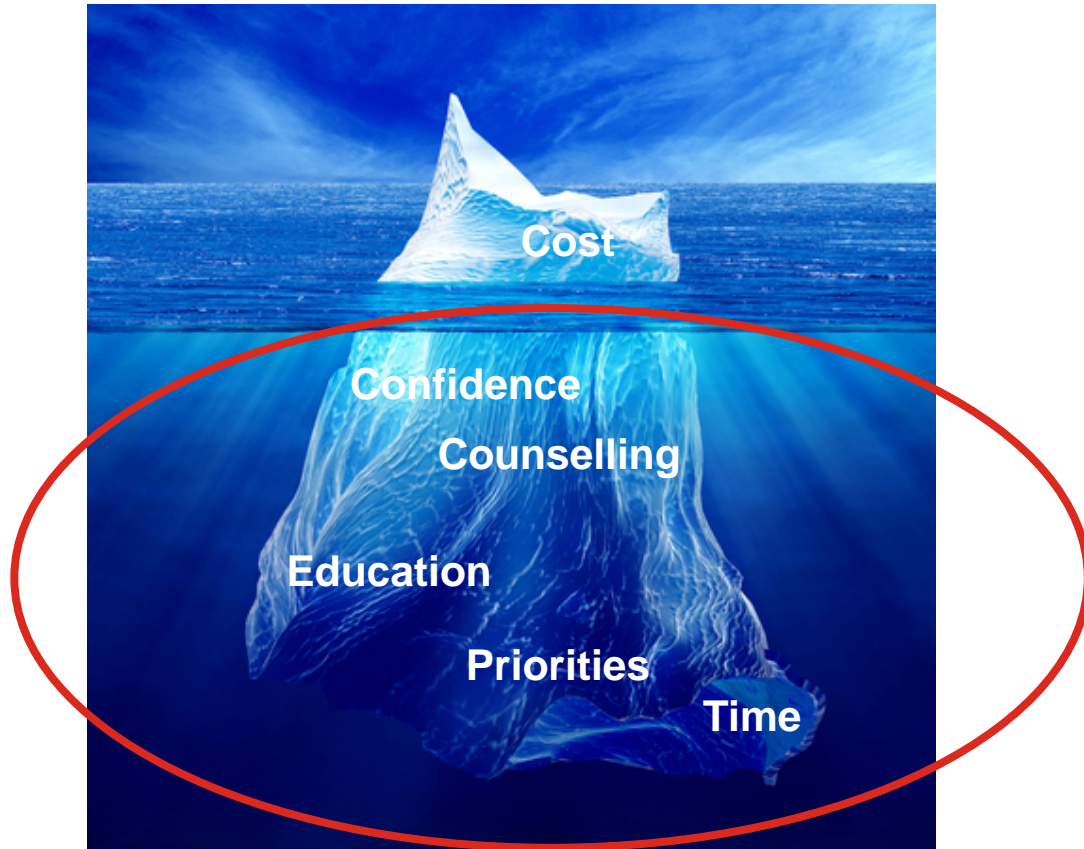


We have effective therapies for stroke prevention...



**570 strokes** last year in patients with  
known AF prior to stroke

# What factors do we need to address?





## **Detection Gap:**

*Around 20,000 patients  
with AF but undiagnosed*

- Public Health Campaign
- Raising AF awareness in general population
- Increase opportunistic pulse checking, especially in over 65s:
  - Health checks
  - Long term condition reviews
  - Every contact counts



- NHS England funding for mobile ECGs
- Use in general practice and in TIA clinics
- AHSNs coordinating national roll out
- All CCGs in TV engaged
- Will need careful consideration of pathway



**Treatment Gap:**  
*6500 high risk patients  
with known AF not  
receiving any  
anticoagulation therapy*



**Optimisation Gap:**  
*5500 patients prescribed  
anticoagulation but not  
adequately anticoagulated*

## Excellence in AF

- Buckinghamshire and East Berkshire
- Joint working with Bayer
- Support for case finding
- Support for desk top review
- Support for Face to face reviews
- Quality improvement approach
- Upskilling

## Pharmacist-led services in primary care

- Funded by Pfizer
- West and East Berkshire
- Joint working with Bucks Healthcare
- Pharmacist based in GP practice
- GPs refer patients for initiation, transition and counselling
- Aiming to upskill practice based pharmacists as well as GPs



**Optimisation Gap:**  
*5500 patients prescribed  
anticoagulation but not  
adequately anticoagulated*

## Improving TTR control in Oxfordshire

- Funded by Pfizer
- Joint project – OUH Haematology, Oxon CCG, AHSN
- 1.5 WTE Anticoagulation pharmacists appointment to support GPs in reviewing patients with poor TTR
- Education sessions, structured patient review, funding for GP backfill
- Running until April 2018
- Results from pilot will be used to inform future commissioning decisions