

Joint Working

Executive Summary

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| Project title | Primary Care Initiation of Anticoagulation Project - North Central & North East London |
| Project partners | UCL Partners Academic Health Science Network Bayer plc Daiichi Sankyo |
| Project summary | <p>The project aims to support the development and confidence of GPs to initiate anticoagulation and associated service models to enable CCGs to commission primary-care anticoagulation services using GPs as prescribers.</p> <p>This project has two linked aims; to support the development and confidence of GPs to initiate anticoagulation treatment (as this has traditionally been done by others in the service); and to develop primary care anticoagulation service models involving GPs and using UCL Partners principles of sustainability, developing this further to transfer to other clinicians outside secondary care.</p> <p>Project objectives:</p> <ol style="list-style-type: none">1) Create an integrated care pathway for anticoagulation that is supported by clinical engagement across primary and secondary care2) Increase the number of patients with newly identified AF who are anticoagulated by GPs thus reducing the waiting times for anticoagulation across the CCG3) Test 2-3 different models of initiating anticoagulation and evaluate their impact both on clinicians and patients4) Develop a support package for roll out as part of the pan-London AF improvement programme |

Expected benefits to patients, the NHS and Bayer

Benefits for Patients

- Care closer to home
- Reduction in waiting times for anticoagulation initiation
- Prevention of serious incidents (which may have been caused by delay in anticoagulation initiation)

Benefits for NHS/UCL Partners Stakeholders

- Reduced mortality – this will be implemented as part of the pan-London AF programme which aims to save 350-450 lives over 5 years and prevent over 300 strokes prevented per annum. (calculated using QOF data from 2014-2015)
- Promote integrated working across clinical boundaries
- More patients receiving NICE recommended treatment for AF in a timely manner
- Developing skills of prescribers

Benefits for Industry Partners

Appropriate NICE approved anti-coagulation medicines including the company's medicines, delivered to more patients in line with national guidelines; including but not limited to NICE Clinical Guideline CG180 Atrial Fibrillation: management, NICE TA256 Rivaroxaban, NICE TA355 Edoxaban NICE TA249 Dabigatran, NICE TA341 Apixaban, for preventing stroke and systemic embolism in people with non-valvular atrial fibrillation.

Start date

May 2017

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Executive Summary

Project title

Bradford City Health Federation
“Non-Valvular Atrial Fibrillation Quality Improvement program (NVAFQIP)”

Project partners

Bradford City Health Federation
Daiichi Sankyo UK Ltd

Start date

March 2018

Project summary

Bradford City Health Federation - “Non-Valvular Atrial Fibrillation Quality Improvement program (NVAFQIP)”

Bradford City Health Federation and Daiichi Sankyo UK Ltd have entered into a joint working project entitled the “Non-Valvular Atrial Fibrillation Quality Improvement program (NVAFQIP)”

The overarching aim of this project is to improve the diagnosis rate and prevalence of NVAF and improve the clinical management of new and existing NVAF in primary care. Hence improving the morbidity and mortality of this cohort of NVAF patients via a reduction in Stroke and MI rates in AF patients, a reduction in Emergency and Elective Admissions in NVAF and unexpected preventable deaths from AF and an improved quality of life for patients across the Bradford City area.

Expected benefits to patients, the NHS and Bradford City Health

This is a particular issue for Bradford City CCG area as the prevalence rates are well below the national average and there is a significant group of undiagnosed NVAF patients in the population and varying quality of clinical management across the practices in Bradford. This will save the NHS considerable sums of money by the prevention of NVAF related Strokes and MI.