

## Joint Working

### Executive Summary

<b>Project title</b>	Bradford City Health Federation  “Non-Valvular Atrial Fibrillation Quality Improvement program (NVAFAQIP)”
<b>Project partners</b>	Bradford City Health Federation Daiichi Sankyo UK Ltd
<b>Start date</b>	March 2018
<b>Project Support</b>	Daiichi Sankyo UK Ltd direct contribution £70,000. NHS Bradford City Health Federation indirect contribution £70,000.

### Project summary

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

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 (NVAFAQIP)”

The overarching aim of this project is to improve the diagnosis rate and prevalence of NVAFAQ and improve the clinical management of new and existing NVAFAQ in primary care. Hence improving the morbidity and mortality of this cohort of NVAFAQ patients via a reduction in Stroke and MI rates in AF patients, a reduction in Emergency and Elective Admissions in NVAFAQ 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 Daiichi Sankyo UK Ltd

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 NVAFAQ 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 NVAFAQ related Strokes and MI. This will benefit patients with a higher proportion of NVAFAQ detection with subsequent access to treatment and management of atrial fibrillation. This project will also create more opportunities for the appropriate use of Direct Oral Anticoagulants, including Daiichi Sankyo UK’s medicines

in appropriate patients in line with local treatment guidelines. If this improvement occurs, we are likely to see an increase in DOAC prescriptions.