

Joint Working

Executive Summary

Project title: Remote detection and diagnosis of Atrial Fibrillation (AF): service redesign project – SDSmyhealthcare GP Federation

Project partners NHS – SDSmyhealthcare GP Federation and supported Primary Care Networks
Daiichi-Sankyo UK Ltd

Start date July 2021 - February 2022

Project summary

The project aims to improve the AF detection gap by detecting AF and confirming AF diagnosis using digital health technologies. In addition, this project brings detection and diagnosis of AF into patients' homes, allowing at-risk patients access to the right treatments at the appropriate time.

The project allows systematic and opportunistic case finding and managing local AF pathway (adhering to local guidance) whilst patients are at home. The project intends to improve outcomes - the detection gap, health economic outcomes and enhance the healthcare professionals' and patients' experiences with remote detection and diagnosis of AF.

This project is second of four/five pilots planned to run in parallel across various regions. Each pilot project will be individually evaluated, and the collective outcome for overall evaluation.

Expected benefits to patients the NHS & Daiichi-Sankyo

Expected benefits to patients:

- Shorter time to diagnosis of cardiac arrhythmia with digital health technologies in comparison to conventional 12 lead ECG and/or ambulatory cardiac monitoring.
- Higher proportion of AF detection with subsequent access to treatment and management of atrial fibrillation.

- Avoidance of patients to attend the GP practices and outpatient setting in times of COVID, and detection and diagnosis conducted remotely.
- Prevention of AF related stroke, hospitalisation, morbidity and mortality secondary to undiagnosed and untreated AF.
- Increased awareness of Atrial Fibrillation, and patient empowerment.
- Improvement of patient experience with novel detection/diagnosis devices in comparison with conventional management.

Expected benefits to NHS:

- Able to conduct systematic and opportunistic case finding remotely at scale (i.e. high risk group at PCN/CCG level).
- Higher proportion of AF detection due to systematic and opportunistic case finding, in addition to conventional care pathway.
- Shorter time to diagnosis of cardiac arrhythmia with digital health technologies in comparison to conventional 12 lead ECG and/or ambulatory cardiac monitoring.
- Able to offer AF detection/diagnosis and subsequent treatment to vulnerable and shielded patients during COVID-19.
- Able to adhere to local guidance.
- Reduced primary and secondary care workload and improved efficiencies.
- Financial benefit due to prevention of AF related stroke and subsequent hospitalisation, morbidity and mortality.
- Reduction in cost of repeat investigation due to delay in diagnosis and outpatient reviews.
- Improvement of HCP experience with novel detection/diagnosis devices in comparison with conventional.
- Bringing services from secondary to primary care and supporting NHS Long Term Plan.

Expedited benefits to Daiichi-Sankyo:

- Recognised and engaged as a trusted partner of choice for the NHS.
- Raise Daiichi Sankyo corporate profile and awareness for digital health solutions for patient outcomes improvement.
- Create more opportunities for the appropriate use of Direct Oral Anticoagulants, including Daiichi- Sankyo UK's medicines in suitable patients in line with NICE / local treatment guidelines. If this improvement occurs, we are likely to see an increase in DOAC prescriptions.
- Potential of scaling across wider NHS outreach and supporting local guideline/requirements.
- Journal publication and associated publicity likely resulting in future collaborations.

