

Joint Working

Executive Summary

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

Joint Working

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.

Joint Working

Executive Summary

Project title

NHS Highland

‘Evaluation of post stroke arrhythmia monitoring technologies (R-TEST) to allow appropriate use of oral anticoagulant therapy’

Project partners

NHS Highland
Daiichi Sankyo UK Ltd

Start date

March 2019

Project summary

NHS Highland and Daiichi Sankyo UK Ltd have entered into a joint working project entitled ‘Evaluation of post stroke arrhythmia monitoring technologies (R-TEST) to allow appropriate use of oral anticoagulant therapy’. This project aims to detect paroxysmal atrial fibrillation (PAF) in patients admitted with stroke to reduce the risk of recurrent stroke by the appropriate use of oral anticoagulation. This project will allow NHS Highland to meet the current national guidelines for monitoring patients following a stroke. The expectation is that up to 16% of patients with cryptogenic stroke will have PAF and will be suitable for anticoagulation. These patients will be identified while inpatients and a consultant led decision about oral anticoagulation made before the patient is discharged. This will reduce future stroke risk with an expected associated reduction in readmission to hospital and saving of bed days.

Expected benefits to patients, the NHS and NHS Highland

This project will enable detection of paroxysmal AF in some patients and appropriate initiation of oral anticoagulation therapy. NHS Highland will also benefit from achieving national standards of care (post stroke monitoring) which was highlighted as a deficiency in a recent national review.

The benefit of this project for Daiichi Sankyo is increase in reputational profile, and the opportunity to work in partnership with the NHS, in which the overall aim is to improve the health and well-being of patients with atrial fibrillation through improved detection and management of the condition.

It is anticipated as part of the project that more patients may be treated with a pharmaceutical product. This may include but is not exclusive to products manufactured by Daiichi Sankyo.