

Healthy Futures Programme

Stroke Programme - Hyper Acute Stroke Services Review / Atrial Fibrillation Project

Introduction

Following the development of a West Yorkshire Strategy by 10cc*, a programme of work was mobilised to collaboratively plan and commission health services on a West Yorkshire footprint. This initially focussed on four clinical pathways - Cancer Services, Paediatrics, Urgent/Emergency Care, and Stroke.

A mixed pool of resources (NHS Staff, Contractors and Consultants) were recruited to deliver the programme over the first 12 months. We were commissioned to manage and drive delivery of the Stroke Programme, the vehicle for delivering against the shared vision for stroke:

“To reduce the incidence of stroke and avoidable deaths due to stroke, across the West Yorkshire health economy, minimising the long term effects and improving the quality of life for survivors. This will be achieved by providing consistently high quality care that is responsive to individual needs, through encouraging healthier lifestyles and reducing inequalities in the risk factors of stroke”.

Programme Summary and Objectives

The projects that made up the programme and their key objectives were as follows:

Hyper Acute Stroke Services Review - to develop options that will deliver resilient hyper-acute services, improving outcomes for patients.

Atrial Fibrillation (AF) Project – key objectives:

- To ensure that all patients with AF are appropriately managed;
- To increase the prescribing of appropriate anticoagulants for known AF patients;
- To address unwarranted variation in the appropriate treatment and anti-coagulation of the known AF patient population;
- To support, encourage and facilitate the practise of medicines optimisation to ensure the right patients get the right choice of medicine, at the right time;
- Design and implement an effective and sustainable model of support in the most appropriate setting for patients on anti-coagulants;
- Deliver an effective and sustainable model of support for patients on anti-coagulants that adopts a principle of delivering care closer to home, when safe and cost effective to do so;
- To develop and implement a West Yorkshire AF anti-coagulation strategy.

Support Provided

We managed delivery of the projects and the interface with both the Stroke Leadership Team and Healthy Futures Programme Board. Within the two projects we undertook the following activities:

Hyper Acute Stroke Services Review

Current State Assessment - completed a current state assessment of service resilience for hyper-acute stroke services. This involved two steps:

1. Development of a baseline of stroke service provision to identify gaps in service resilience;
2. Tested elements of the sub-regional system to assess resilience for the future through a desktop scenario-modelling exercise of activity and financial flows.

Options Development and Appraisal - facilitated an options development and appraisal process (including a high level quantification of cost/benefits);

Implementation of Resilience Solutions - acted as the honest broker between commissioners and providers to support the development of provider resilience plans. Development of a hypertension performance dashboard and a draft hyper acute services contingency planning framework, including a repatriation protocol.

Atrial Fibrillation Project

AF Strategy - this set out the vision and described the approach to the service delivery and management of the known patient population;

Anti-Coagulation Baseline Report - baselined services across the geography highlighting collaborative and local opportunities for improvement;

Menu of Options for Addressing the Treatment Gap – documented and shared innovative approaches to addressing the treatment gaps;

AF Dashboard - developed an aid to facilitate local improvement in AF management;

AF Learning Event – facilitated a sub-regional learning event to share best practice.

Value Delivered To Client

- Delivered the agreed programme of work in the agreed timelines and to budget;
- Ensured that all outputs were clinically led, patient centred and managerially supported;
- Developed buy-in and commitment to the programme across commissioner and provider communities.

*A collaborative made up of the 10 Clinical Commissioning Groups of West Yorkshire and Harrogate and Rural District CCG