

Anticoagulation Service Redesign

Engagement from April - May 2013

Engagement Update

V2.1 2014 08 18

1. Project background

Anticoagulant medicines reduce the ability of the blood to clot (coagulation means clotting). This is necessary because if the blood clots too much, then clots can block blood vessels and lead to conditions such as a stroke or pulmonary embolism. In Leeds there are approximately 10,000 people who take the anticoagulant drug, Warfarin.

New anticoagulant drugs have recently become available and this has prompted a review of the service and its patients. It has been agreed that a service redesign may help prioritise patients who need the service and improve the way care is delivered.

This level three engagement outlined a number of redesign options for the anticoagulant service and sought the views of service users and the wider public on the changes.

A survey was used to gather the thoughts and experiences of anticoagulant service users and the wider public. It asked about patient satisfaction with the current service, access and asked for people's views on six proposals for the new service.

The survey was shared widely including with

- Anticoagulant patients in community and hospital clinics
- CCG patient, public and voluntary sector networks; and
- GP practices in the Leeds.

Patients told us that they are very satisfied with the current anticoagulant service. They also broadly supported all six of the redesign proposals. There were mixed views on the level of choice patients should have about their treatment. Some patients felt that the clinician and commissioners should make some choices on behalf of patients, other people felt strongly that they should be in control about all aspects of their care. Patients travelled to their appointment in different ways but generally preferred appointment early in the week and early in the day. All patients wanted to be able to access clinics close to home.

The wider public (who do not use the service) also broadly supported all six of the redesign proposals. Many people stressed the important of prevention, both in terms of supporting health lifestyle choices and using drugs to reduce risks of stroke. The engagement found that the public had polarised views on choice but similar views on access to services.

The initial report made a series of recommendations to the clinicians and commissioners responsible for developing the service specification and contracts. This report can be found on our website here: <http://www.leedswestccg.nhs.uk/getting-involved/anticoagulation-patient-survey.htm>

This engagement update outlines the progress we have made so far and the extent to which we have implemented the recommendations from patients and carers of the service.

2. Time line

Date	Progress
November 2013	Engagement plan presented at NHS Leeds West CCG PAG
November 2013 – February 2014	Engagement period
April 2014	Engagement report taken to the PAG and published on the website
Summer 2014	Anticoagulant Service Development Project Board starts to meet

3. Recommendations

Recommendation	Extent met	detail
Feedback the high satisfaction rating to clinicians and managers in the anticoagulant service.	✓	The outcomes from the patient engagement, including the current high satisfaction rating have been shared with managers and clinicians within the anticoagulation service.
Implement the changes in a way which maintains the high level of satisfaction	✓	Patient satisfaction will be monitored as part of the new service
Ensure that the CCGs continue to work with public health to address prevention.	✓	Prevention of stroke remains a priority for all three Leeds CCGs, and we are continuing to work with our public health colleagues in addressing this.
Enable patients to exercise some level of choice in decisions about their care. This might include transferring to the new drug for reasons other than 'clinical benefit' and choosing how they receive their test results.	?	The lead in this area is currently away. We will provide a response in the next update.
Reassure patients about the accuracy of finger prick testing	?	Providing patient assurance concerning accuracy of finger prick testing is a key aspect of the LTHT led patient engagement strategy. This issue will be picked up in the engagement workstream of the development project board
Develop opportunities for patients to self-manage their anticoagulant medication and testing	?	The lead in this area is currently away. We will provide a response in the next update.
Provide patients with their results by text and email.	✓	We envisage that the vast majority of patients will receive their results and any changes in dosing within clinic. Patients will be given a choice of how they will receive their results. This will include an option to receive results by text or email.

Locating anticoagulant clinics with other services where possible	?	This is being considered as part of the facilities and estate workstream (which is one of the individual workstreams within the overall project rollout plan)
Locating anticoagulant clinics with good parking nearby	?	This is also being considered as part of the facilities and estate workstream. It should be noted that it is likely that the bulk of clinic locations will be in community NHS estate, and availability of parking was a key factor in agreeing the design of these estates
Locating anticoagulant clinics on a good bus route	?	This is also being considered as part of the facilities and estate workstream. It should be noted that it is likely that the bulk of clinic locations will be in community NHS estate, and proximity to bus routes was a key factor in agreeing locations of these estates
Provide appointments at different times of the day but with more appointments in the morning	?	This is also being considered as part of the facilities and estate workstream.
Provide appointments on different days of the week but with more appointments early in the week	?	This is also being considered as part of the facilities and estate workstream
Provide appointments on Saturdays but not Sundays	?	This provision of Saturday morning clinics is being considered as part of the facilities and estate workstream.
Provide appointments after 9:30 for patients with a bus pass	✓	Patients will be able to choose to attend appointments after 9:30am so that they can use their bus pass.
Provide appointments as drop-ins where possible	?	The appointment system is being considered within the overall project rollout plan

4. What happens next?

Following the engagement, the Anticoagulant Service Development Project Board was established. This board will oversee the development of the new anticoagulant service. Seven workstreams will report into the board and one of these workstreams will cover engagement. The engagement workstream will use the engagement report alongside other evidence to ensure that patient experience is used in the final design of the service. This group will also seek to recruit a patient representative to attend meetings and provide assurance.

We will provide another update for this project in due course. If you have any questions about this work, please contact us using the details below.

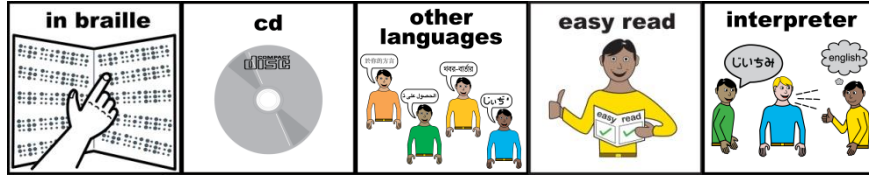
Alternative formats

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If you need this information in another language or format please contact us by telephone: **0113 84 35470** or by email: commsleedswestccg@nhs.net

Jeśli w celu zrozumienia tych informacji potrzebuje Pan(i) pomocy w innym języku lub innej formie, prosimy o kontakt z zespołem ds. kontroli położniczej (maternity review team) pod numerem tel.: **0113 84 35470** lub poprzez e-mail na adres: commsleedswestccg@nhs.net

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Further information

If you would like any more information about this project or NHS Leeds West Clinical Commissioning Group, or have any questions or comments, please write to:

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