

South London Cardiovascular Networks

Workstream updates | August 2021

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Heart Failure update

August 2021

Report from

Sally-Anne Holman

Manager

Alice Ward

Progress

South London Heart Failure Network

- South London Heart Failure Network meeting bi-monthly. Next meeting 29 September
- RBH and Harefield Hospital clinicians included
- Croydon specific report finalised and established engagement with borough transformation team
- Kingston borough considering funding community HFNS team and community MDT

South West London Cardiology Network

- SWL heart failure pathway drafted and disseminated for sign-off

Pan London Heart Failure Steering Group

- HF Diagnostic survey analysed. Priority areas identified for South London
- Plans in place for extensive HFNS mapping survey

Other

- Heart Failure Nurse Specialist Forum meeting quarterly – next meeting in September 2021
- Primary care education sessions in place (SWL June, October; SEL April, November)

Required support

Focus over the next month

South London Heart Failure Network

- South London HF Network to identify non-compliance with GIRFT report and develop action plan
- Identify non-compliance with CPIP requirements and develop action plan
- Work with Croydon borough team to support services at Croydon University Hospital
- Build-in mapping for RBHT
- Establish business case for heart failure-renal MDT for KHP

South West London Cardiology Network

- Finalise SW London Heart Failure pathway and plan dissemination/.communication strategy

Pan London Heart Failure Steering Group

- Following analysis of diagnostic survey, develop action plan to reduce inequality and develop services
- Establish what the CPIP priorities are for heart failure

Risks / issues

- Lack of clarity on sign off process within new ICSs for new pathways
- Lack of clarity around commissioning/funding processes to support development of services where there is inequity
- Lack of clarity around CPIP programme

Cardiac Rhythm Management (CRM) update August 2021

Report from	Sally-Anne Holman
Manager	Alice Ward

Progress

South London EP Recovery

- EP Recovery group in place
- Monitoring and reporting of EP waiting list data process in place
- Primary care AF guidelines revised in light of revised NICE Guidelines

South London CRM Network

- Chairs appointed for CRM network group

South West London Cardiology Network

- SW London AF pathway drafted and disseminated for sign-off

Other

- Arrhythmia Nurse Specialist Forum established. Next meeting in October 2021; included training programme and sharing of best practice/mutual support
- Primary care education sessions in place (April, June, October)

Focus over the next month

South London EP Recovery

- Link EP recovery group with operational management and establish how mutual aid can support SGH's recovery

South London CRM Network

- Establish South London CRM Network group based on previous clinical council membership
- Establish action plan for implementing GIRFT recommendations
- Review secondary care AF pathway in light of newly revised NICE guidelines

South West London Cardiology Network

- Finalise SW London AF pathway and plan dissemination and communication strategy

Required support

Risks / issues

- Lack of clarity on sign off process within new ICSs for new pathways
- Lack of clarity around CPIP programme

Chest Pain update

August 2021

Report from	Sally-Anne Holman
Manager	Alice Ward

Progress

- South London Chest Pain Network**
- Chest pain working group meeting quarterly
 - Data collection well established; amendments to improve quality of analysis agreed
 - Processes in place to collect data in Croydon University Hospital established
 - Final draft of South London RACPC referral pathway agreed
 - Final draft of RACPC DoS agreed
 - Agreement to develop South London referral form reached
- South West London Cardiology Network**
- SW London RACHC pathway disseminated for sign off
 - Primary care education sessions in place (April, June, July, October)

Required support

Focus over the next month

- South London Chest Pain Network**
- Identify non-compliance with CPIP requirements and reporting mechanisms and develop action plan
 - Embed RACPC referral pathway and DoS into all trusts' governance and eRS
 - Finalise standardised referral form and disseminate to all CCG borough teams
 - Amend data collection spreadsheet
- South West London Cardiology Network**
- Sign-off South London RACHP pathway and develop communication plan

Risks / issues

- Lack of clarity on sign off process within new ICSs for new pathways
- Lack of clarity around CPIP programme
- Resistance to developing a south London diagnostic pathway

Cardiology PIFU update August 2021

Report from

Sally-Anne Holman

Manager

Alice Ward

Progress

Pan London Cardiology PIFU

- Cardiology PIFU pilot went live on 1st June as planned
- SOP and training resources developed
- Shared decision making for clinicians and for admin/managers developed and available for use in other trusts
- Feedback so far is that resources developed to support implementation have been very useful
- Staff and patient satisfaction Questionnaires developed ready for dissemination
- Implementation checklist developed for other trusts starting to implement PIFU in cardiology

Required support

Focus over the next month

Pan London Cardiology PIFU

- Identify PIFU readiness in other South London trusts
- Work with GSTT, LGT and Croydon University Hospital in implementing PIFU in cardiology
- Encourage all trusts to start process of implementing PIFU in cardiology in light of national push for PIFU and link to Elective Recovery Fund

Risks / issues

- Capacity of trusts' PAS to support PIFU easily
- Lack of capacity – clinical and admin staff stretched and tired

Improving Referrals update August 2021

Report from	Sally-Anne Holman
Manager	Alice Ward

Progress

- South West London Cardiology Network**
- Meetings held with services managers to establish process for developing standardised DOSs and referral forms
 - Suggested DoSs and standardised referral forms out for consultation with clinicians
 - Meetings held with eRS champions to gain insight into primary care’s needs regarding eRS and referral forms
- KHP C Improving Referrals**
- Open Access Echo form for KHP revised and disseminated
 - Known Valve Disease clinic established – joint KHP DOS developed. KCH clinic has gone live
 - Primary care education event planned for September for referral and management for valve disease and echo interpretation

Focus over the next month

- South West London Cardiology Network**
- Work on developing standardised DOSs and referral forms for SW London
 - Review in detail referral forms and establish what is the minimum number of forms is required
 - Finalise draft DoSs
 - Link in with CDH work regarding standardised referral forms

Required support

Risks / issues

- Lack of capacity for a project which is not essential
- Feasibility of gaining agreement across four trusts

ICC update August 2021

Report from

Kathryn Harrop

Progress

- Start date for course agreed for January 2022 instead of October 2021.
- Assigned co-chairs for each of the 6 sessions.
- Arranged steering group meetings for Sept, Oct and December.
- Discussion about format of course e.g. online, which platforms to use.

Focus over the next month

- Create sample website for next steering group meeting on September 9th with separate information areas for the general public and course participants.
- Pull materials/content together for course once available.

Required support

Risks / issues

- Keeping up momentum on creating course content, especially given the start date has been pushed back to January and taking into account winter pressures.

Aortic stenosis update August 2021

Report from

Kathryn Harrop

Progress

- Strong DGH representation at the most recent working group meeting, with helpful discussion and feedback on proposed pathway.
- DGH sharing pathway with local teams.
- General agreement at the working group meeting about the need to work in the same way and speed up diagnosis.

Focus over the next month

- Get waiting times and estimated referral volumes data from RBH
- Set up local meetings with RBH and continue with KCH and GSTT meetings.
- Develop local roadshow to take to hospitals to show how the pathway would work.
- Develop a referral crib sheet with a checklist and updated recommendations for testing.

Required support

Risks / issues

- Some hospitals proceeding more quickly than others with setting up joint clinics and single point of access.

IHT update August 2021

Report from

Kathryn Harrop

Progress

- Weekly IHT capacity planning meetings set up with clinical leads and bed managers with the aim of managing capacity across the network during peaks of increased activity.
- New form of monthly IHT data.
- Started to collect data from trusts on waiting lists.

Focus over the next month

- Engage with HR to align bank rates for staff across the network and continue to drive for Saturday lists.
- Finalise pathway for escalation triggers to flag when network goes over an agreed number of patients waiting and what to do.
- Create comms plan for more DGH engagement.
- Establish capacity for next 6 months, looking at the scale of the challenge, what the increase in activity has been.

Required support

- Dan Kyle, Informatics Project Manager

Risks / issues

- Getting all bank rates aligned promptly.
- September start date looking unlikely for Saturday lists, which may impact waiting lists.
- Very difficult operationally for some hospitals – staff working through breaks, doing long days when should just be normal.

Cardiac rehab update August 2021

Report from

Alice Ward

Manager

Progress

- Survey draft agreed for data collection on rehab services, agreed that the pan-London team will resource conducting the survey
- Opportunity to bid for funding on an ICS basis. Funding is from NHSE to increase access to cardiac rehab for groups who wouldn't currently access services.
 - ODN asked to support the SEL paper.
 - Joining up with SWL to ensure consistency.

Focus over the next month

- Analysis of results of the cardiac rehab survey
- Arrange / support NHSE primary care event

Required support

- None

Risks / issues

- Ensuring appropriate meeting attendance (eg avoid solely project management representation)
- Lack of current PM resource for this workstream

Collaborative Procurement update August 2021

Report from	Alice Ward
Manager	[Name]

Progress

- SGH deputy CFO has signed the redistribution letter and agreed to support access to savings for clinical teams
- CRM contract monitoring meetings being arranged for Q1
- Pre-Q1 CRM report suggests underperformance at several Trusts and need to address before September
- HST and ODN submitted for the HSJ awards and GO awards
- Kate presented the PCI case study to HFMA with HST

Focus over the next month

- Meeting with GSTT, KCH and SW London Heads of Procurement to discuss next area for collaboration (valve, EP, perfusion, vascular).
- Arrange September PCI contract monitoring meetings

Required support

- None at this stage

Risks / issues

- CRM compliance needs adjustment before end Q1
- Clinical engagement in future projects likely challenging
- Large admin workload arranging multiple meetings

Primary Care Education and Engagement update August 2021

Report from

Sally Anne / Andrea

Manager

[Name]

Progress

- Cardiology events planned up until November 2021 across both SEL and SWL signalling 1 year of events.
- 26 July – Chest pain and ischaemic heart disease
 - 80 registrants, 45 attendees
 - recorded version accessed 923 times

Focus over the next month

- Pre-meet for September event:
 - 14 Sep: Medicines optimisation for cardiovascular diseases (atrial fibrillation, heart failure, and ischaemic heart diseases)
 - 30 Sep: Valve disease (management, treatment, referral) and echocardiogram reports
- Look ahead for autumn/winter schedule

Required support

- None additional

Risks / issues

- GP engagement may be less due to vaccination roll out.

CHD Network update

August 2021

Report from

Joe Eurell

Manager

Sally Watts

Progress

Network Merger with RBH

- Singular Work Plan 2021-22
- Branding (new name/logo)
- Patient Registry and website
- Next joint management meeting September

Cardiac Physiology

- Business Case submitted for network physiologist
- Rolling out one-stop model in additional network centres
- Additional screening (freeing up ELCH consultant for complex CHD)

PEC Working Group

- Peer support and PEC-led issues
- Guideline consolidation
- Echo training sessions confirmed
- Future webinars for shared learning

Required support

- Lack of access to non-invasive investigations at Lewisham & Greenwich for paediatric patients

Focus over the next month

Communication

- Joint vision statement
- Web page on ELCH site
- Next issue of CHD Network newsletter
- Curating content for website

PPV

- Develop existing PPV forum
- Expand membership and involve RBH
- EDI initiative

Annual Review

- Meeting to take place beginning November
- Draft agenda and working with speakers

ACHD

- Series of catch up meetings with Level 2 and Level 3 teams

Risks / issues

- Test and Trace having an impact on staffing
- Potential RSV surge

South West Vascular Network update June 2021

Report from	Daniel Malynn
	Daniel Malynn

Progress

- Ashford and St Peter Service Transformation**
- Specialist Commissioning issued notification letter of block contract change for half 1 of FY 21/22
 - Draft protocol and SLA for covering of BMI Runnymede
 - Draft SLA covering Salary costs of linked Consultant.
 - Drafted Patient Engagement for those affected by change.
- National Wound Care Strategy – Lower Limb First Tranche Implementation site**
- SW/ St George’s delivered second round interview, working with community provider to finalised details,

Focus over the next month

- Ashford and St Peter Service Transformation**
- Agree date for steering group
 - Local issued notification letter of block contract change for half 1 of FY 21/22
 - Sign Off of Protocol and SLA for covering of BMI Runnymede
 - Sign Off SLA covering Salary costs of linked Consultant.
 - Patient Activity Tracking
- National Wound Care Strategy – Lower Limb First Tranche Implementation site**
- Confirm bid yeah or nay
- Repatriation**
- Re-engage non arterial centres in formalising and signing repatriation agreements.

Required support

Risks / issues

- SW & Surrey cancellation of steering group, has urgency post change
- GM at St George’s has left the Trust – means will need to support more on ops around SLA’s and Repatriation Agreements

South East Vascular Network update June 2021

Report from

Daniel Malynn

Daniel Malynn

Progress

Lewisham and Greenwich Trust .

- Twice weekly presences in place for majority* of summer.
- Getting agreement for locum or substantive consultant post for Lewisham in October.
- Twice weekly QEW presences agreed and paper gone the LGT board.
- Gerry led excellent meeting with surgeons on what is expected of them.

Dartford and Gravesham NHS Trust

- Agreed pilot for new vascular CNS wound care clinic in Sidcup to started
- All CNS clinics changes signed off.

Required support

Focus over the next month

Vascular Ultrasound / Duplex Scanning

- Finding literally anyone to pull together service across KCH,GSTT and LGT.

Lewisham and Greenwich Trust

- Advert for LGT Consultant, to be ready to replace Hayley in late Sept/ October.

Dartford and Gravesham NHS Trust

Risks / issues

Deep venous update August 2021

Report from

Elsie Griffin

Manager

Daniel Malynn

Progress

Best practice

- Amendments made to the acute DVT catheter directed thrombolysis protocol to align with existing practice
- Drafted chronic DVT pathway to include with new protocol

Patient engagement follow-up

- Approval received for the patient support group received from the deep venous team and commitment for resource/ small amount of funding
- Support group proposal presented to the patient safety group and shared with GSTT information governance team
- Invitations and sign up resources drafted to send to previous and current patients

Primary care engagement

- Not current priority

Required support

- Support from Venous Lead/CNS and deep venous team

Focus over the next month

Best practice

- Clarification required on elements of exiting protocol and new chronic DVT pathway
- Arrange meeting with Boston Scientific to design new protocol
- Investigate internal GSTT sign-off process for new protocol
- Deep venous away day on 14th September to focus on: service decompression, strategic planning, and pathway/protocol sign off

Patient engagement follow-up

- Engage with other departments (haematology) to include appropriate references in shared leaflets (DVT)
- Finalise date for first patient support group and send invitations to patients both involved in focus group earlier in the year and current patients

Primary care engagement

- Pick up planning event for later in Summer/Autumn

Risks / issues

- Protocol – risk of too many voices involved in content, will need CNS to coordinate effectively on clinical side
- Patient group – if planning not complete/ first session doesn't happen before next project manager takes over