

# South London Cardiovascular Networks

## Workstream updates | October 2021

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# Heart Failure update September 2021

Report from

Sally-Anne Holman

Manager

Alice Ward

## Progress

### South London Heart Failure Network

- South London Heart Failure Network meeting bi-monthly. Meeting held on 29th September. Sue Piper is take clinical lead for CPIP across South London footprint
- Croydon specific report finalised and engagement with borough transformation team ongoing. Team is taking issues to senior management at the trust
- Kingston borough agreed funding for 2 WTE 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
- HFNS mapping survey out for completion by end of September.

### 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

- Sue Piper to meet with all trusts to establish compliance with GIRFT and CPIP
- 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
- 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
- Analyse feedback from HFNS Survey

## Risks / issues

- Lack of clinical engagement in due to burnout and capacity
- 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 September 2021

Report from

Sally-Anne Holman

Manager

Alice Ward

## Progress

### South London EP Recovery

- Monitoring and reporting of EP waiting list data process in place
- Meeting established with SGH to discuss further regarding mutual support

### South London CRM Network

- First CRM Network meeting held and action plan established
- CPIP pathways identified and agreed
- Work programme drafted

### 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; including 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

### South London CRM Network

- Review secondary care AF pathway in light of newly revised NICE guidelines and CPIP
- Establish group to develop brady pacing pathway
- Draft letter to BHRS regarding physiologist workforce and training
- Map capacity across footprint to establish where additional services might be offered to enable treatment closer to patients' homes
- Check compliance with GIRFT and CPUIP requirements
- Develop a home visit policy for ICD deactivation

### South West London Cardiology Network

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

## Required support

## Risks / issues

- Lack of clarity on sign off process within new ICSSs for new pathways
- Lack of clarity around CPIP programme
- Clinician capacity to be involved in this work

# Chest Pain update

## September 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
- Spreadsheet updated to accommodate additional data collection
- South London Pathway and DoS agreed
- South London referral form nearly finalised

#### 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 GIRFT and CPIP requirements and reporting mechanisms and develop action plan
- Get feedback on referral form from primary care
- Embed RACPC referral pathway and DoS into all trusts' governance and eRS
- Finalise standardised referral form and disseminate to all CCG borough teams

#### 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

# Cardiology PIFU update September 2021

Report from

Sally-Anne Holman

Manager

Alice Ward

## Progress

### Pan London Cardiology PIFU

- Cardiology PIFU pilot went live on 1<sup>st</sup> 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

## 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

## Required support

## Risks / issues

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

# Improving Referrals update September 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
- RAS implemented at SGH for heart failure, RACPC and ICC

### 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

## Required support

## 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
- Revise open access echo form in line with CDH requirement.
- See primary care feedback and finalise form

## Risks / issues

- Lack of capacity for a project which is not essential
- Feasibility of gaining agreement across four trusts
- Lack of clarity around sign-off process within ICSSs

# ICC Workstream Update

## October 2021

Report from

Kathryn Harrop

Manager

Andrea Marlow

### Progress

- ICC Education Programme: Co-chairs from different trusts assigned for all sessions, panel discussion topics agreed. Course to begin January 26<sup>th</sup>.
- Website: Updated with content on speakers, course details, areas for course participants, agreed to have links to external sites with information.
- ODN Meeting: Strong representation at ICC ODN meeting on 9 September, with good discussion on education programme structure.
- GMSA: Working group agreed to look at defining a new area of work around how to pull together pathways that involve DGHs and primary care.
- SLICC: Planning began for how to re-start SLICC meetings in spring 2022, likely to remain virtual at first.

### Focus over the next month

- MDTs: Meet with clinicians to discuss how MDTs have been, collate feedback in a summary to include how to improve MDTs.
- NL ODN: Meeting with North London ODN w.c. 27/09 to discuss how to set up an ICC workstream there.
- Paediatric transition: Meeting in November to discuss paediatric transition across South London.
- Sign-ups: Create Eventbrite link for sign-up to course, certificates etc.
- GE-notes: Kate Tatten-Brown, geneticist at SGUH, to attend next meeting.

### Required support

- Advertising the ICC programme.
- Governance group for website.

### Risks / issues

- Ensuring all charities are involved in curating content.
- Next wave of COVID.

## IHT update September 2021

Report from

**Bethan O'Donnell**

Manager

**Kate Jones**

### Progress

- Weekly IHT capacity planning meetings in diary with clinical leads and bed managers to manage capacity across the network
- A hold has been put on Saturday lists, due to issues in relation to bank rates across the network
- Sub group was set up to discuss housekeeping of the IHT lists. Leads from each Trust removed patients from the list who were there incorrectly, giving a more accurate and 'live' view of the IHT list. This group is due to meet again the coming weeks

### Required support

- Dan Kyle, Informatics Project Manager

### Focus over the next month

- To develop and improve comms with referring hospitals e.g. 'minimum data entry requirements' for each IHT referral/procedure to ensure leads from each Trust are not having to spend time chasing missing information from referrers
- To gain virtual sign off and also implement the escalation pathway
- To increase attendance at the weekly IHT capacity planning meetings to ensure discussions are meaningful and useful, with representation from each Trust

### Risks / issues

- Lack of attendance/engagement from some Trusts at the weekly IHT capacity planning meeting
- Delayed sign off of escalation pathway – we are now going to try for virtual sign off in order to implement asap

## Aortic Stenosis update September 2021

Report from

Bethan O'Donnell

Manager

Kate Jones

### Progress

- Continued meetings with each Trust to discuss implementation of pathway

### Focus over the next month

- Still awaiting data re referral volumes from RBH
- Improve engagement with RBH at local meetings
- Implement pathway at KCH first
- Look at developing AS community work KHP funding application with Phil

### Required support

- No additional support required

### Risks / issues

- Attendance at local meetings dropping off – therefore need to re-engage with key stakeholders to improve this

## Collaborative Procurement update August 2021

Report from	Alice Ward
Manager	Stef Wright

Progress	Focus over the next month
<ul style="list-style-type: none"> <li>- GO awards winners for PCI!</li> <li>- PCI project shortlisted for HSJ award, Provider Collaboration of the Year</li> <li>- Redistribution letter from CFOs sent to clinical teams</li> <li>- Q1 CRM contract monitoring meetings held.               <ul style="list-style-type: none"> <li>- Overall performance meeting targets.</li> <li>- Croydon won't access savings from Abbott due to underspend from cath lab closures.</li> </ul> </li> <li>- PCI contract monitoring – some issues to iron out with use of synergy stent rather than promus</li> <li>- Meeting held with London Heads of Procurement to discuss next area for collaboration</li> </ul>	<ul style="list-style-type: none"> <li>- HST to review spend data for valve, EP and peripheral vascular to inform decision on next clinical area to work on</li> <li>- Stef returning on 4 October and will be PM for this workstream</li> <li>- PCI council to meet in October for annual review and to review Boston stent usage</li> </ul>
Required support	Risks / issues
<ul style="list-style-type: none"> <li>• None at this stage</li> </ul>	<ul style="list-style-type: none"> <li>• Compliance at Croydon due to cath lab closures</li> <li>• GSTT CRM large underspend compared to expected volumes</li> <li>• Use of synergy stent at SGH</li> <li>• Clinical engagement could be difficult for future initiatives</li> </ul>

# CHD Network update September 2021

Report from

Joe Eurell

Manager

Sally Watts

## Progress

### Communication

- Merged network branding (name/logo) agreed
- Funding and developer for website agreed
- Gradual increase in newsletter subscriber base

### PPV

- CHD Patient Photoshoot
- 98 patients and family members attending supporting EDI
- Expanding Working Group via RBH PPV and Brompton Fountain

### Network Clinics

- Resumption of F2F delivery in further ACHD network centres
- Series of update meetings with L2/L3 centres held
- Additional clinics agreed and held in certain Paediatric centres

## Required support

- N/A

## Focus over the next month

### Education and Training

- Educational Framework to be agreed between nursing team
- Syllabus for 2022-23 to be developed
- Paediatric echo training course begins

### Governance

- Review structure of merged network and resource required to deliver this
- Management team hierarchy and personnel
- Network Board and suitable Working Groups

### Network Board

- GSTT Evelina London – 4<sup>th</sup> October
- RBH – 11<sup>th</sup> October

### Annual Review

- Meeting to take place 24<sup>th</sup> November
- Dedicated ACHD, Paediatric and Joint sessions
- Confirming agenda and guest speakers

## Risks / issues

- Access to non-invasive investigations
- Honorary contract fees