National Initiative Case Study: Bradford CCGs cut AF related stroke rate by 15%

Introduction

The National Anticoagulation Initiative aims to reduce stroke rates in at-risk patients with Atrial Fibrillation (AF), by promoting appropriate, safe and locally available oral anticoagulation. The scalable initiative, led by Professor Sir Muir Gray, has been working with influential thought leaders since 2012 to discuss treatment, best practice and benchmarking, with the aim of taking this forward into more populations nationwide. A team working across Bradford Clinical Commissioning Groups is one of the first to share their best practice.

Background

Greg Fell, Dr Matt Fay and their team estimate they have cut the AF stroke rate by 15% in one year across their population, by creating an enhanced model of care for anticoagulation across primary and secondary care. Greg explains: "AF substantially increases the risk of stroke and we wanted to address this. We developed a model of improving AF care in primary care, by encouraging openness and transparency of data".

Establishing the project

Greg led the team, along with Dr Matt Fay, to encourage 56 out of 80 practices across the Bradford population to take up active participation in the project. Covering a population of around 330,000, including both hospitals in the area, the participants aimed to improve time in therapeutic range (TTR) in secondary care-based warfarin clinics. The population had around 6,500 patients on the AF register, with approximately 2,500 of these patients on anticoagulation. Greg explains: "We recognised that significantly more patients should be on anticoagulation, as about 50% of identified patients that needed intervention did not receive it. Warfarin is - and remains - very effective in reducing the risk of stroke, but it is not without risk and needs to be used carefully."

Setting benchmarks

"We carefully picked our quality indicators in order to measure how well each of our practices would do against these," explains Greg. "We set each practice an achievable benchmark of care and set out how to achieve targets; for example advising how many patients to review, what work needed to be carried out etc. We made a wide range of tools, pathways and search tools available to support the practices. The team provided web materials and also carried out practice visits with quality managers in order to create 'Knowledge Transfer Associates' to help facilitate discussion with practices and help spread good ideas."

"We carried out an audit using TPP's SystmOne search functionality and used their interface with INRstar's anticoagulation clinical decision-support system. We applied ten evidence based strategies to the participating practices to encourage improvement and we created bespoke support and advice to practice and more widely, including Q&A sessions, "Expert" events and training. The intention was to review every patient's anticoagulation with a CHADS2 score of 1 or above who were NOT receiving anticoagulation and reconsider treatment, and our ultimate aim was to ensure that at least 70% of patients with AF and a CHADS2 score of 1 or above received Warfarin."

Impressive results

"The achievements are impressive," explains Greg. "We added an additional 714 patients onto warfarin across the population, which represents a 31% relative improvement. Further and more detailed analysis will be carried out, but in simple terms we have estimated we have managed to avert 29 strokes and 17 deaths across the population and therefore cut the AF stroke rate by 15%. In terms of costs, and based on assumptions made using NICE guidance, we estimate that we averted a cost to the NHS of £377,000; while making a total net saving of £104,212 across the population.

Futures

The National Anticoagulation Initiative hopes to replicate the team's impressive results across the country. Greg explains: "We found the project worked really well, but we needed to find the means by which primary care could really engage, and which was cheap and simple to run. It does rely on enthusiastic individuals with a common goal, but there was consistently positive feedback from practices throughout and those that didn't initially participate are now requesting to do so".