

Date: 21/07/2017

FREEDOM OF INFORMATION REQUEST FOI/013555 – Anti-coagulant

For a copy of the reports please contact dgft.foi@nhs.net quoting the reference number

I wish to make a series of separate requests under the Freedom of Information Act. The data required for the fulfilment of these requests are routinely collected and stored on the DAWN, INRStar and ProTime software programmes to support the provision of anticoagulation services. For convenience, I am including these separate requests in the same letter.

1. Please confirm or deny whether your NHS Trust collects data on the number of patients diagnosed with atrial fibrillation who are treated with warfarin by i) gender and ii) age group.

a. If confirmed, please provide the number of i) male and ii) female patients

b. If confirmed, please provide the number of patients aged i) below 45 years old ii) 45-54 years old, iii) 55-64 years old, iv) 65-74 years old, v) 75-84 years old and vi) 85 years old and above – **Please see attachment RAID Patient Summary By Diagnosis / Age / Gender**

2. Please confirm or deny whether your NHS Trust collects data on the time in therapeutic range (TTR) of patients diagnosed with atrial fibrillation who are treated with warfarin.

a. If confirmed, please provide details of the number of patients with a TTR (calculated over a maintenance period of at least 6 months while excluding those initiated within the last 6 weeks, as per NICE Clinical Guideline 180 (CG180)) of i) 64.9-55 per cent, ii) 54.9-45 per cent, iii) 44.9-35 per cent and iv) 34.9 per cent and below. **Please see attachment RAID Patient Summary -TTR Ranges and INR values**

3. Please confirm or deny whether your NHS Trust collects data on the International Normalised Ratio (INR) values of patients diagnosed with atrial fibrillation who are treated with warfarin.

a. If confirmed, please provide details of number of patients within the past six months recorded with i) two INR values higher than five, ii) one INR value higher than eight, or iii) two INR values less than 1.5. – **Please see attachment RAID Patient Summary -TTR Ranges and INR values**

4. Please confirm or deny whether your NHS Trust collects data on the frequency of blood tests for purposes of INR readings of patients diagnosed with atrial fibrillation.

a. If confirmed, please provide details of the average interval between blood tests for INR readings. – **Please see attachment RAID Patient Summary -TTR Ranges and INR values**

5. Please confirm or deny whether your NHS Trust collects data on the number of patients diagnosed with atrial fibrillation who are treated with warfarin and self-monitoring or self-managing their anticoagulation therapy.

a. If confirmed, please provide the number of patients diagnosed with atrial fibrillation who are treated with warfarin who are i) self-monitoring and receiving dosing instructions from a healthcare professional; and ii) self-managing their anticoagulation.

Response to question 5

We have 6 patients with AF who self-monitor, we have no patients that self-manage their anticoagulation

6. Please confirm or deny whether your NHS Trust has conducted a root cause analysis of adverse events related to anticoagulation treatment in atrial fibrillation patients.

a. If confirmed, please provide details of any root cause analysis of adverse events related to anticoagulation treatment in atrial fibrillation patients in the last 12 months.

Response to question 6 - No

7. Please confirm or deny whether your NHS Trust has written clinical protocols in place for reassessing patients diagnosed with atrial fibrillation who have poor warfarin anticoagulation control (as defined by NICE CG180) to determine why their TTR/INR are unstable.

a. If confirmed, please provide evidence of the protocol(s)

Response to question 7 -

We do not have a written protocol, however all patients regardless of indication for treatment who have unstable readings ongoing with no identified cause are discussed with consultant lead in anticoagulation and history reviewed or patient seen in consultant clinic.

8. Please confirm or deny whether your NHS Trust has information, education and support tools available for patients diagnosed with atrial fibrillation to help them understand their treatment options and support adherence.

a. If confirmed, please provide evidence of the information, education and support tools that you use.

Response to question 8

Patients who present to the ED and referred to Cardiology nurse on duty, are counselled regarding AF, signs and symptoms, possible causes and complications, various treatment options and life style modifications are discussed (alcohol, smoking, exercise). If appropriate anti coagulation therapy is commenced using the CHADS2Vasc2 scoring tool in conjunction with the HAS BLED tool. Patients receive written literature from the BHF. If commencing Rivaroxaban booklet given with alert card. If discharged from ED/EAU patients are referred to the Anti- coagulation department for further counselling. A large majority of patients choose to have an elective electrical cardioversion carried out at the appropriate time and are given written literature regarding this procedure. Routine bloods are done on admission. An echocardiogram is requested as IP/OP. All patients seen by the Cardiology Nurse specialist are given local contact telephone number to discuss any concerns