



South London
Cardiac Operational Delivery Network

Linking the system for a better future



2022/23
annual report

FROM THE CLINICAL DIRECTOR

Prof Gerry Carr-White
Consultant Cardiologist

Despite the challenges faced this year, our network has achieved significant impact in line with Getting it Right First Time (GIRFT), Cardiac Transformation Plan (CTP), and network objectives. Our success is rooted in the relationships we have cultivated across our colleagues, sites and care settings, plus our data-driven decision-making. Example achievements include:

- Identifying funding for cardiac rehab improvements (pg 7)
- Collaborating with ICB, public health, and primary care colleagues to address prevention (pg 10)
- Facilitating better, safer opportunities through networked 7-day working, joint network appointments, and inter hospital transfers (pg 17)
- Achieving substantial procurement savings, seeking to return them to clinical teams (pg 20)
- Connecting clinical experts in MDTs for faster, expert decision making (pg 18)
- Using data to inform all of our work, such as through our new cardiology dashboard and waiting lists (pg 14)
- Putting patients at the heart of all we do, ensuring our work aligns to their needs (pg 12)

We will continue to make improvements in the priority areas identified by our network members, whilst we also support our workforce through the challenging issues we will further face. By selecting areas of greatest impact, we can create a sustainable workforce whilst providing faster, safer, and better care for those we serve.

TABLE OF CONTENTS

ABOUT US

Aim

Timeline

AORTIC DISSECTION

CARDIAC REHABILITATION

CARDIAC SURGERY

CHEST PAIN

VALVE DISEASE

DATA

EDUCATION

INTER HOSPITAL TRANSFERS

MDTS

PREVENTION

PROCUREMENT

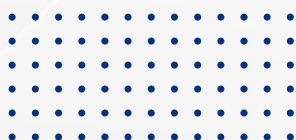
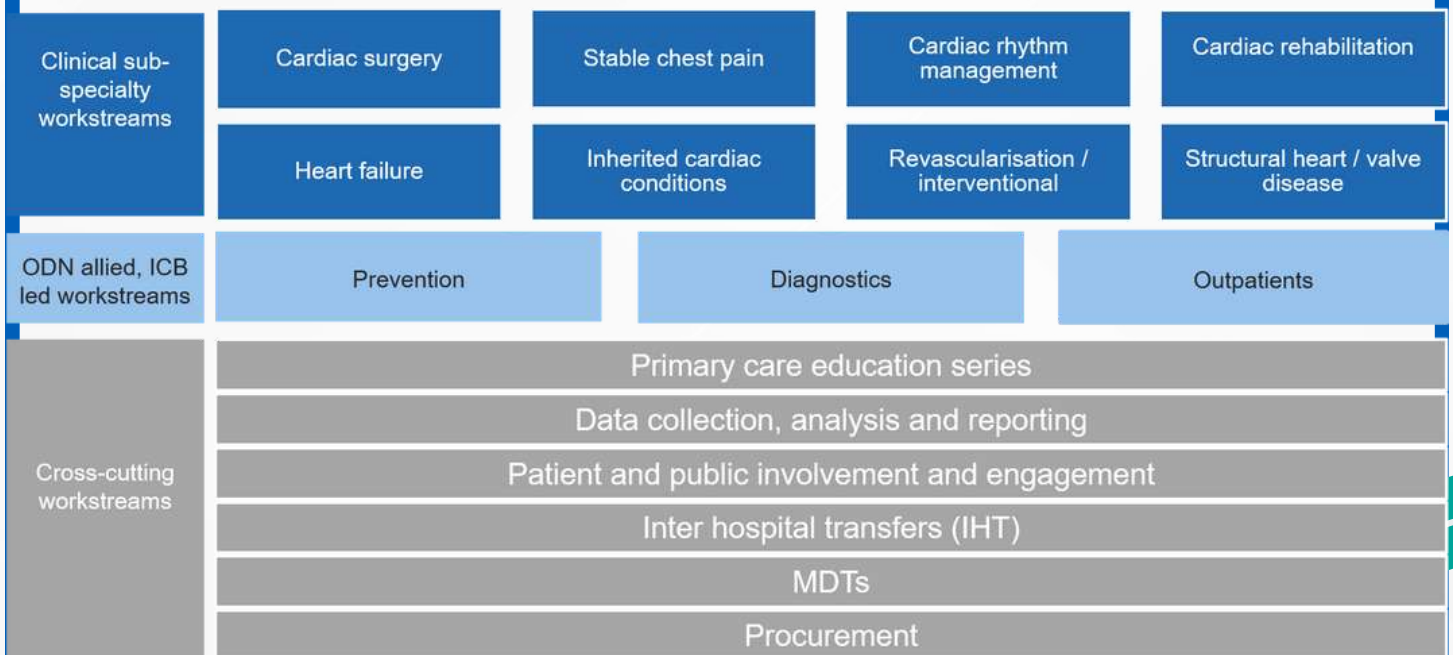
The Cardiac ODN has accomplished much more than what is listed here. We would be happy to provide you with more information upon request.

ABOUT US

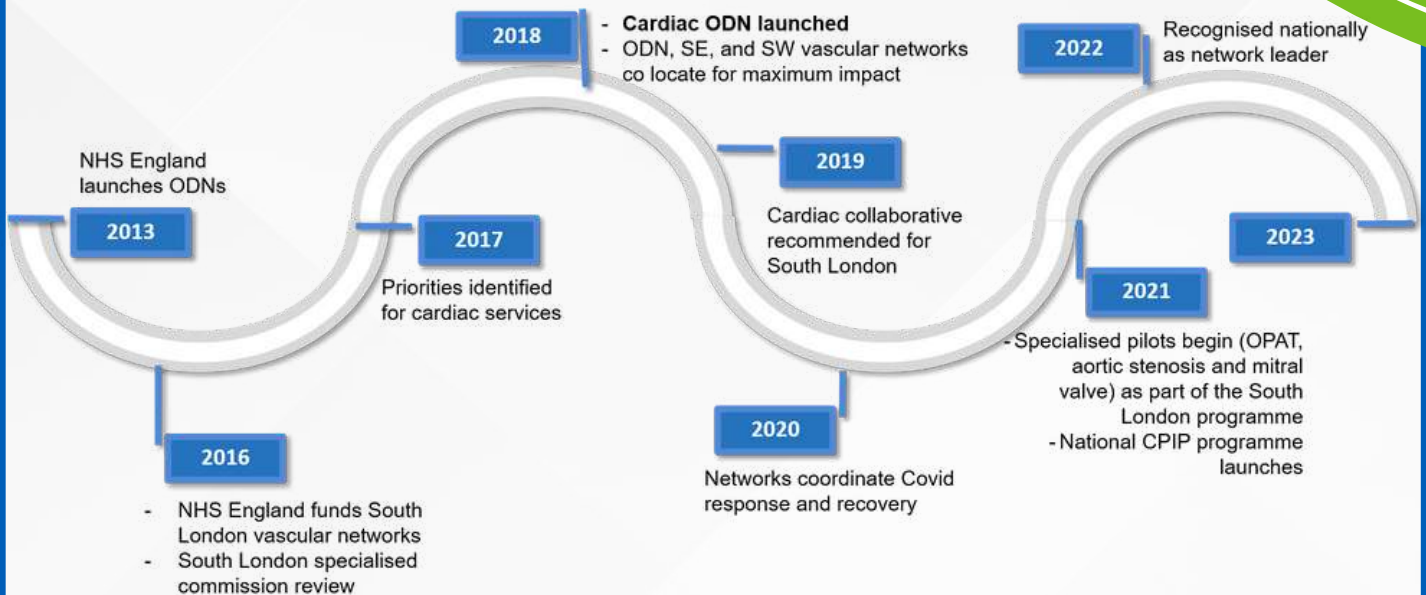
The South London Cardiovascular Networks include the Cardiac Operational Delivery Network (ODN), the South East Vascular Network, and the South West Vascular Network.

Together, they create a comprehensive, harmonised approach to improvements in quality outcomes, patient experience, and value for money for their population.

ODN WORKSTREAMS



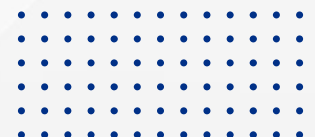
AIM AND TIMELINE

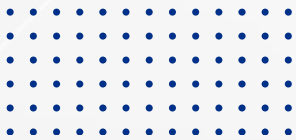
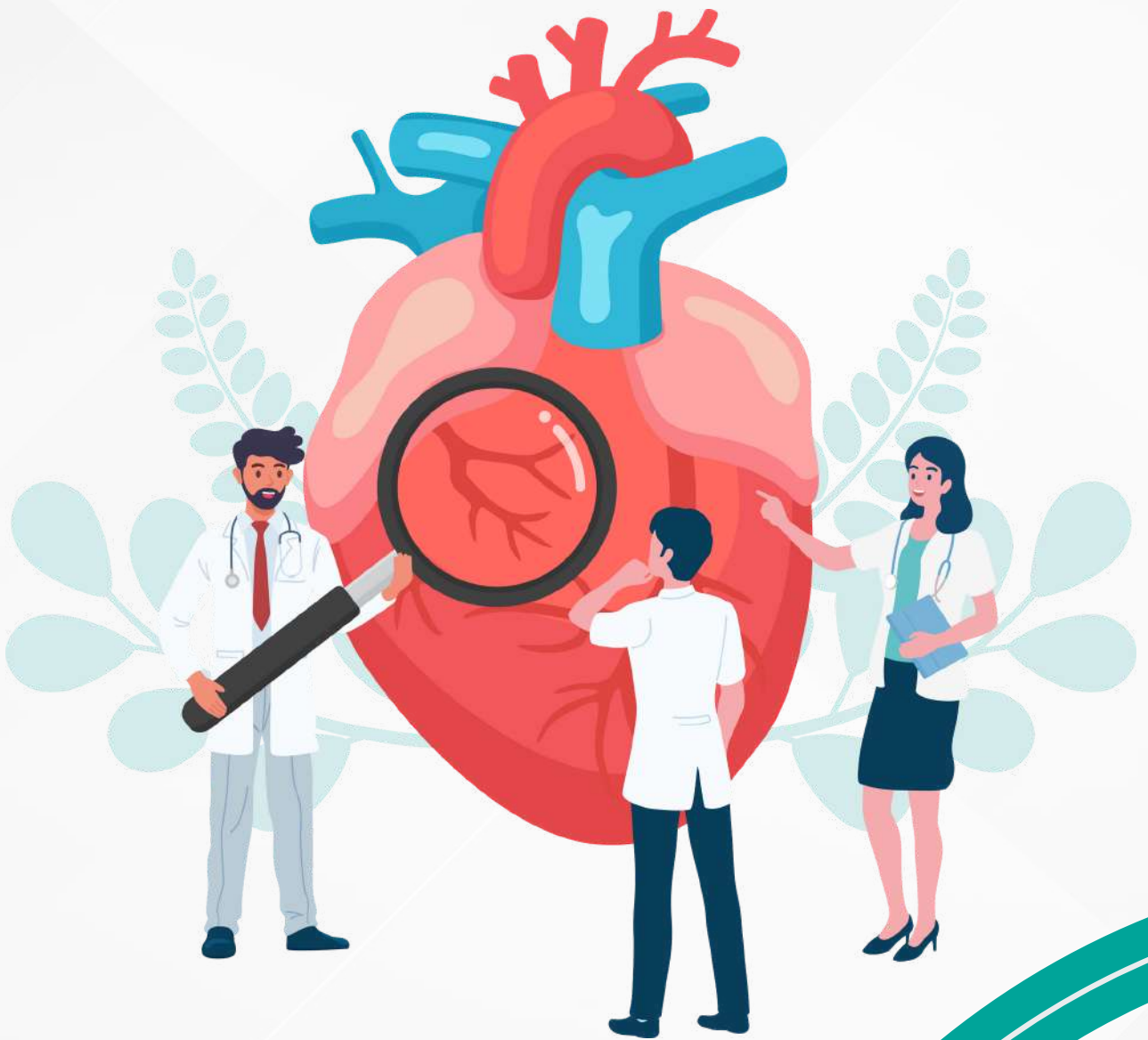


Fulfilling the NHS Triple Aim: Our mission since 2018

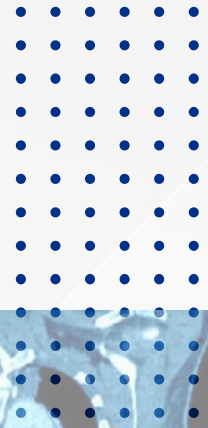
The Cardiac ODN, was established in 2018 after a review of specialised services in South London. Since that time, we have remained steadfast in our commitment to achieve the triple aim:

- Enhance population health
- Improve quality outcomes
- Increase system value





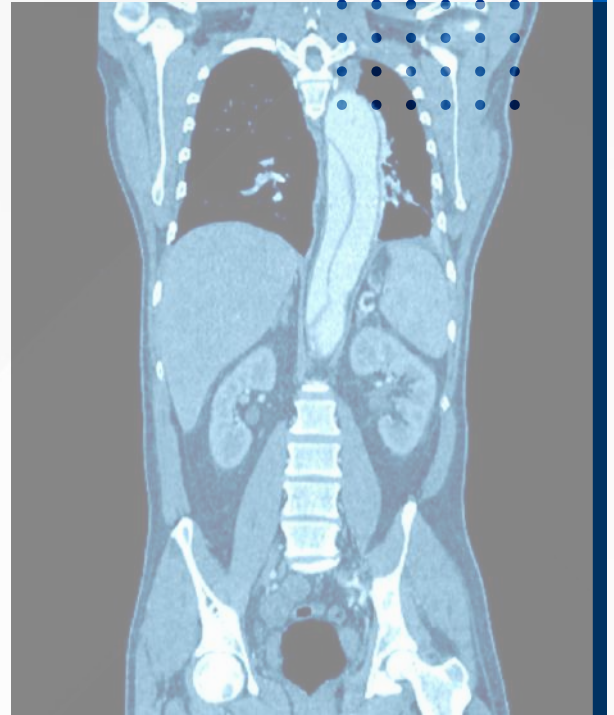
AORTIC DISSECTION



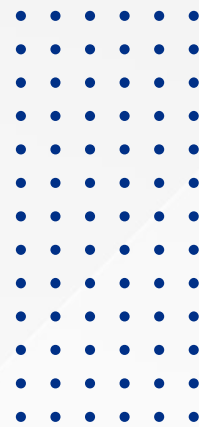
Creating a capital-wide pathway

A large scale, pan London stakeholder event focussed on acute aortic dissection (AAD) resulted in consensus for a capital-wide pathway, aligned with the NHS England AAD toolkit.

This collaboration represents a breakthrough in this area, uniting seven NHS trusts, across 10 specialties, plus charities [Aortic Dissection Awareness UK](#) and the [Aortic Dissection Charitable Trust](#), and -- most importantly -- patients, who kindly provided their expertise and experience.



CARDIAC REHABILITATION



Removing obstacles, increasing uptake

Cardiac rehabilitation is a comprehensive programme for patients, to include an individualised exercise plan along with counselling on management and reduction of risk factors for cardiovascular disease. It has been shown to improve mortality in patients with heart failure and coronary artery disease, as well as reduce risk factors for cardiovascular disease and improve quality of life.

Yet even with such proven benefits, there have been challenges in uptake of cardiac rehab by patients. To combat this, the ODN worked to develop and implement an app that would provide these patients with a digital, at home, low intensity programme. Funding was obtained through an innovation fund via NHS England.

Patients were involved in the design and procurement processes, where we looked to understand blockers to uptake and ways to overcome these. The selected solution was piloted at St Thomas' Hospital, and this comprehensive offering now includes: on demand, tailored exercises; information on cardiac conditions, follow up, and care; nutritional guides and meal plans; and mental health support.

The service is now offered to all cardiac rehab candidates at GSTT. It has increased engagement with these patients, as well as diversified the service, making it available to others who previously may have declined the offering.

Patients can achieve:

- **18% improvement in acute and chronic pain**
- **32% reduction in depressive symptoms**
- **31% reduction in anxiety symptoms**
- **6.5% weight loss**

CARDIAC REHABILITATION

Reducing variation in South London services

Creating high quality care that is consistent across South London is vital to ensuring all patients have access to the care that they require. A mapping exercise of current provision of SL cardiac rehabilitation found variances in staffing and service levels. By successfully obtaining funding via a bidding process, the network was able to put equitably allocate additional staffing resources, as well as a pilot a digital, tailored exercise programme (see above).

- *Staffing* – Working across South London sites (Central London Community Healthcare, Hounslow and Richmond Community Healthcare, and Croydon University, St George's, Lewisham, and Princess Royal University hospitals) the network was able to equitably provide support for cardiac rehab services through additional nursing and physiotherapy teammates.
- *Venues* – With the successful funding bid, the network extended support to King's College Hospital and Oxleas NHS Foundation Trust for much needed appropriate clinical venues.
- *Greater access, addressing diversity* – The team will next look to secure funding in the next year to penetrate further into communities of interest through in-depth patient engagement for greater understanding of barriers and ways to overcome these. Plans also include translation of patient leaflets into the top five non English languages, as well as working with the South West London team to develop and share supplemental videos aimed at targeted groups.

CARDIAC SURGERY

Implementing a remote monitoring system for patients awaiting cardiac surgery

There were more than 8,000 patients awaiting cardiac surgery in London, increasing their risk of morbidity and mortality. Through an NHSX elective recovery fund, the South London Cardiac ODN worked to procure and implement for remote monitoring of these patients in a one year pilot. Not only would this digital solution reduce deterioration of patients on the waiting list through real time monitoring, it would also help to inform clinical decision through an online portal review, plus provide direct patient to clinician contact.

The ODN led the project across eight London cardiac sites. Strong clinical collaboration leveraged through the Clinical Council model, involving all sites and clinicians in the decision making process. Patients participated in the design and tender requirements to ensure it met their needs. A key factor in the selected software was the potential for scalability to other pathways, such as hypertension, early discharge and aortic dissection.

Nearly 300 patients had their care escalated, with nearly 200 avoided admissions – saving the system an estimated £1.6 million. A thorough evaluation will be conducted via an independent assessor, with the report published in 2023/24.

The Ortus platform has expanded to an inherited cardiac conditions (ICC) pilot, for better real time monitoring of this new cohort of patients.



Award winner
(Shortlisted)

- NHS Parliamentary Award - *Excellence in healthcare*
- HSJ Digital Award - *Supporting elective recovery*

“I think this type of communication is brilliant! You are able to get in touch so easily, without hassle, and you know that there is someone there at all times to support you.”

- **300 patients had care escalated**
- **200 avoided admissions**
- **£1.6 million savings for system**

CHEST PAIN

Refreshing and re-energising the workflow

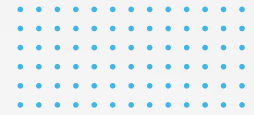
One of the unique characteristics of networks is their ability to flex with stakeholder and system needs. The ODN's chest pain working group had achieved consensus on its secondary care pathway, which passed to the London Medical Committee for ratification.

With that work concluded under the leadership of Sanjay Kumar (Croydon), the working group was refreshed, appointing Rupert Williams (Kingston) and Zeehshan Khawaja (Lewisham) as new clinical leads.

A stakeholder event brought together key players to review and agree priorities to address:

- Approving the RACPC referral guidance and form and sharing across South London
- Agree a standardised South London IHT checklist
- Creation of an IHT training video based on the updated South London IHT checklist

VALVE DISEASE



We found that about 1 in 10 patients who had their heart checked were found to have a previously undetected heart condition and they can now receive treatment.



Checking hearts in Peckham

A heart awareness event brought together the South East London ICS, local council, Healthwatch, and the network with national charity, Heart Valve Voice, in Peckham. The project sees the Heart Valve Voice team travelling across the UK offering free stethoscope checks to over 50s and raising awareness of heart valve disease.

People boarded the *Your Heart Matters* bus where clinical teams from King's College Hospital offered free stethoscope checks to those over 50 for abnormalities requiring follow up. People were also offered flu and Covid vaccines, as well as a blood pressure check.

Of the 322 hearts checked, 52 people were found to have a heart murmur or requiring further tests, and two people were sent directly to A&E. Those who were found positive received information to take to their GP to have them refer the patient in to the heart valve service for further investigation.



- **322 hearts checked**
- **52 people found to have a heart murmur**
- **2 sent to A&E**

VALVE DISEASE

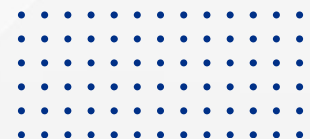


Understanding Black African and Caribbean views of valve disease

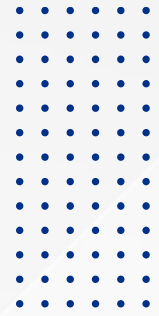
Through national benchmarking of transcatheter aortic valve implantation (TAVI) intervention rates, a minimally invasive procedure treating valve disease, the network identified significant variation in access in parts of South East London. When reviewing demographic factors we calculated the TAVI intervention rate in the White population is eight times higher than in the Black population, even when controlling for other factors such as age.

The network commissioned Mabadiliko to deliver a study to understand perceptions of heart valve disease and transcatheter aortic valve implantation (TAVI) in Black African and Caribbean communities in South East London.

Twenty key themes emerged across seven constructs, demonstrating both opportunities for change and challenges faced. These include levels of trust with NHS services, specific perceptions of healthcare professionals and the system as a whole, opportunity costs and decision making. Recommendations are included and are organised in three broad categories: individual and community factors; relationships with healthcare providers; and relationships across wider health services.



VALVE DISEASE

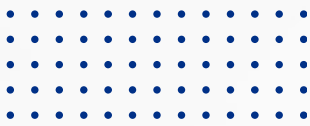


Addressing health inequalities in heart valve disease

Extensive engagement of Black African and Caribbean communities to understand behaviours and barriers to care resulted in an eye-opening report with 20 recommendations for improvements (above).

To take forward the recommendations, the network established a Valve Inequity Steering Group, led by Professor Phil MacCarthy (King's College Hospital). The group focussed on phase 2 of the pilot: establishing community based diagnostic clinics, based at the Waldron Health Centre in Lewisham.

These clinics launched in April 2023 and offer capacity to extend across the borough, working with the SEL ICB and North Lewisham PCN health inequity fellows. Alongside this, the group is reviewing data on aortic valve disease to understand racial and gender-based differences in presenting symptoms and outcomes, with the aim of using these learnings to develop guidance for clinicians to improve detection, diagnosis and management.



DATA



Demand and capacity oversight

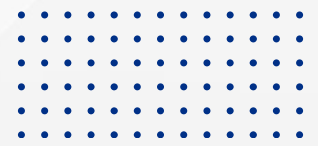
In reviewing the weekly inter hospital transfer data report which analyses transfers and waiting lists for cardiac surgery, cardiology, and angio / PCI, the network team noted that waiting times were remaining at a high level.

Taking action, the team rounded up operations managers and specialist nurses (acute coronary syndrome, or ACS) to see what could be done. They reviewed the data, transfer cases, and capacity to move patients across the network for faster care.

The weekly data review call has proven so successful, it continues, and has now extended to colleagues at Royal Brompton and Harefield, who are taking patients from the South London list.

Capital-wide data analytics

To support decision making across the London system, the network developed a pan London cardiology data pack. Collected and produced weekly, the data is a collaborative effort between network and trust informatics and service manager colleagues. It reviews activity, waiting lists, and clearance rates across five key services: angio / PCI, ablation, devices, TAVI and other structural interventions, creating a strategic, comprehensive view for the capital's sites.



EDUCATION

Widespread knowledge transfer

The network has an extensive offering of education and knowledge transfer opportunities, including specialist forums for those in secondary and tertiary care (Heart failure nurses forum, Arrhythmia nurses forum), as well as primary care colleagues (*Cardiology in primary care, Vascular in primary care*).

Our primary care series covers expert speakers covering a variety of topics: chest pain, heart failure, atrial fibrillation, valve disease, diabetic foot, aortic aneurysms, to name just a few.

Our nurse forums provide peer to peer networking and support, plus talks on relevant issues related to practice, pathways and guidelines.

These events are usually recorded and shared via our [YouTube channel](#) so that others may benefit, even if unable to attend in person.



EDUCATION



SLICC and CLICC

The Inherited cardiac conditions (ICC) workstream has developed several educational offerings, both within and beyond the speciality.

The South London ICC (SLICC) conferences are hosted by network members on a rotational basis. Twice a year, these in person events allow networking across colleagues, plus play a vital role in sharing innovations, research and updates in ICC care.

ICC services have traditionally been concentrated within tertiary care, but the shift towards networks of care and mainstreaming of genetic testing means that increasingly many ICC patients will be managed in secondary care settings.

The Core Learning in ICC (CLICC) programme aims to develop our current ICC workforce and to inspire the next generation of ICC specialists through half day sessions incorporating pithy, expert talks plus panel and MDT discussions.

CLICC results

- **2,600 registrants**
- **900+ certificates issued**
- **7,000+ YouTube views**
- **Global reach (including the US, India, Canada, Philippines, Pakistan, and Europe!)**

INTER HOSPITAL TRANSFERS

South London-wide treat and return pathway

The network supported St George's Hospital (SGH) to implement a treat and return inter hospital transfer (IHT) pathway for patients requiring angio / PCI procedures. Previously, there were efficiency bottlenecks, as SGH struggled to recover bed space for these patients, meaning patients had to be admitted as inpatients. Originally started as a pilot for patients referred from Epsom and St Helier and Kingston hospitals, it moved to business as usual for all referring centres from March 2023.

Recent data shows that the median transfer to procedure time at St George's has reduced by two days as a result of the treat and return pathway.

This now provides a unified pathway for all South London tertiary sites, with corresponding savings and improved bed capacity. For patients, this means that they receive the carer they need quicker (reduced waiting times), as well as providing their further support at their local hospital, closer to home.



The median transfer to procedure time at St George's has reduced by 2 days as a result of the treat and return pathway

MDTS

Quick access to expert decision making

Our daily virtual South London joint cardiology-cardiac (JCC) service is hosted by St Thomas', King's College and St George's hospitals.

The JCCs improve quality, optimise clinical time, and ensure that our patients receive fast, equitable access to specialist cardiac decision making and care. All clinical colleagues are welcome to join and participate (South London, Kent, Surrey, and Sussex).

A wide range of speciality MDTs take place for cardiac and cardiology referrals across the region, too.

MDT coordinator post

A new clinical post was created by the network through a collaborative process and shared funding across South London tertiary sites.

The role involves coordinating and triaging daily joint cardiac-cardiology multi disciplinary team meetings. This is a critical function that streamlines care for patients across multiple experts, reducing duplication and increasing efficiency through the application of clinical insight.



PREVENTION



Designing hypertension services with patients

South East London ICB allocated funding to a collaborative initiative aimed at reducing hypertension inequalities and increasing community engagement. The initiative involves the ICB, the network, Clinical Effectiveness South East London, South London HIN, and King's Health Partners.

Two approaches were used:

- Collaboration between CESEL and primary care networks to visit practices, identify action plans, and provide support for hypertension improvements.
- In-depth community engagement to co-design culturally sensitive scripts and models of care for community hypertension testing.

Through [Mabadiliko](#), a CIC with remarkable inroads to our target audience, extensive engagement work was done to co-design the community blood pressure testing protocol. This protocol was trialled at four events, where nearly 175 people had their blood pressure checked using the new protocol. Most readings were in the normal range, but there were several people in the "amber" (elevated) range who then received lifestyle and follow-up advice.

The next phase will explore options to build upon these successes and to potentially roll out to other clinical areas, such as atrial fibrillation.

Sites and people tested using patient-designed protocol

- South Lewisham Group Practice surgery waiting room (30 people)
- Grove Park Carnival (80 people)
- Glass Mill Leisure Centre (40 people)
- Vale Medical Centre surgery waiting room (15 people)

PROCUREMENT



**Saving the system nearly
£10 MILLION
through its strategic procurement
programme, led by the
Clinical Council.**



Ongoing savings through compliance monitoring and support

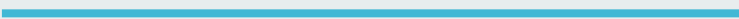
Through its strategic procurement exercises, the network has already saved the system £6 million in 2022/23. Key to this is managing ongoing compliance of the aggregate purchasing and contracts to ensure optimal benefits. This year, the network supported trusts to improve compliance with the drug eluting stent contracts by 17 per cent – for a savings of £250k across the network.

The team also worked on the contract extension of the cardiac rhythm management (CRM) procurement deal, where the initial two year savings were calculated at £3.2 million, with the extension unlocking further savings through Q1 2024/25.





South London
Cardiac Operational Delivery Network



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