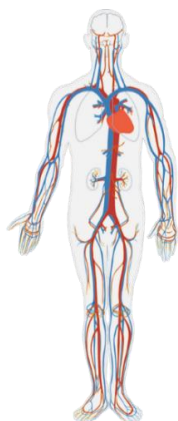


# Vascular Services Programme

## Programme Briefing and Key Messages

### Issue 1: January 2019

Welcome to the first edition of the Vascular Services Programme briefing which aims to keep stakeholders informed and up to date about the work of the Vascular Programme Board by regularly providing Key Messages and requesting your comments and views.



#### **Background**

The current vascular service structure emerged in 2013 following the Cardiac and Stroke Network review of vascular services which started in 2011, 'Improving Vascular Services: A Case for Centralisation of Vascular Services in Lancashire and Cumbria'. Since then, [Getting It Right First Time \(GIRFT\)](#) reports both nationally (2018) and locally have made a number of recommendations and the new draft NHS England Vascular Specification was published in 2017. As a result, there is a renewed national focus on Vascular services. Providers and Commissioners from [Healthier Lancashire and South Cumbria](#) - which is the [Integrated Care System \(ICS\)](#) - came together in July 2018 to discuss the current delivery of vascular services including performance against recommendations and clinical standards.

Some of the issues that were identified included:

- the population size served by East Lancashire Hospitals Trust (ELHT) does not meet minimum requirements
- treatment waiting times are longer at Lancashire Teaching Hospitals Trust (LTHT)
- demand is increasing at LTHT but is relatively stable at ELHT
- ELHT is just achieving minimum surgery volumes

#### **The Vascular Programme Board**

In response to the findings, a Vascular Programme Board was established in October 2018 to agree and implement a model of care that will make vascular services safe and sustainable, reduce variation in access for the population of Lancashire and South Cumbria and be consistent with national guidance and best practice. The Board is chaired by an independent clinical lead and is made up of representatives from:

- each of the Hospital Trusts in Lancashire and South Cumbria (excluding Southport and Ormskirk Hospital Trust) from a variety of disciplines including anaesthetists, business managers, clinical nurse specialist, interventional radiologists, medical directors, vascular surgeons
- Wrightington, Wigan and Leigh NHS Foundation Trust
- patients who have used vascular services
- a GP
- the Specialist Mobility Rehabilitation Centre
- North West Ambulance Service
- commissioning organisations
- Getting It Right First Time (GIRFT)
- Right Care
- the Integrated Care System's Programme Management Team

The first tasks for the Programme Board were to discuss the existing services and the strengths and issues that exist within them and to develop a project plan to map out the required actions and associated timescales. Some of the highlights to date are described on the next page....

## **Key Messages from the Vascular Programme Board**

### **- Patient representatives**

The Vascular Programme Board benefits from the input of three people who have patient experience of using vascular services. One of the patient representatives shared some “Think Aorta” promotional material and signposted the group to related websites:

<https://thinkaorta.org/>

<http://www.aorticdissection.co.uk/>

<https://www.facebook.com/aorta.uk/>

The importance of involving and listening to the patient’s family and/or carers has also been emphasised as they have in-depth knowledge of the patient that the medical team can use and they may need support too.

### **- Design principles**

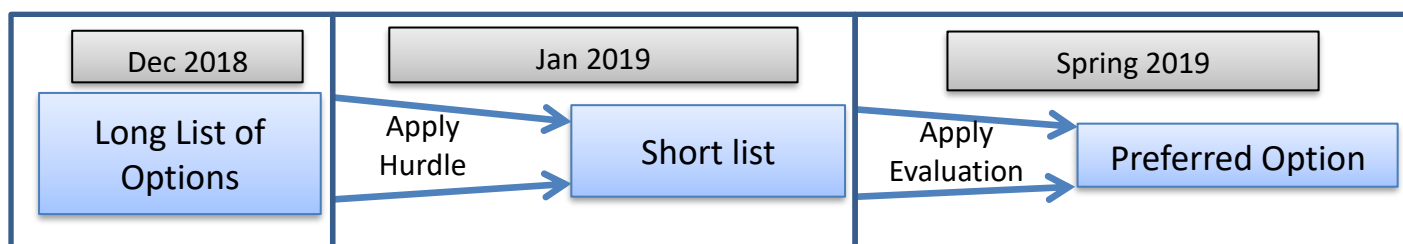
The Programme Board created some “design principles” to support the development of a preferred service model for providing vascular services. For further information on these, please click [here](#).

### **- Creating a long list of options for delivering vascular services**

Members of the Programme Board have shared their suggestions for:

- options to deliver vascular services across Lancashire and South Cumbria
- hurdle criteria – criteria that must be met in order for an option to be shortlisted for further consideration
- service evaluation criteria – criteria that enable a fuller assessment of the shortlisted options

The service suggestions were reviewed at the December 2018 meeting and attendees developed and agreed a long list of service delivery options for consideration, and a list of hurdle and evaluation criteria to apply to these options. Attendees at the January 2019 meeting applied the hurdle criteria to the long list of service delivery options. This exercise resulted in a shorter list of options for service delivery, which will now be worked up in more detail in preparation for applying the evaluation criteria.



A meeting is taking place with vascular clinical teams on 14/02/19 to provide an update on the programme’s progress to date, including the shortlisted service delivery options, and to receive feedback.

### **- Data requirements for the programme**

The Board have agreed to establish a data sub group to co-ordinate and produce robust and accurate data to support progression of the programme. A clinician, a data manager and an operational representative from ELHT and LHT will be identified to progress this work on behalf of the network.

### **Next meeting of the Vascular Programme Board**

The next meeting of the Vascular Programme Board is due to take place on 26<sup>th</sup> February 2019 and the second edition of this Key Messages document will be shared following this.

#### **Questions and Queries**

This briefing is for use within your own organisation and across your local system, for discussion and information. Please feel free to include it on meeting agendas and circulation lists as you see fit.

If you have any questions or queries, please contact [sharonwalkden@nhs.net](mailto:sharonwalkden@nhs.net) and we will endeavour to respond as soon as possible.