

Cardiology services

Self-assessment checklist for NHS boards



Prepared for the Auditor General for Scotland
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Auditor General for Scotland

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Self-assessment checklist for NHS boards

This checklist sets out some of the high-level practical issues around Cardiology services raised in this report. NHS boards should assess themselves against each statement and consider which statement most accurately reflects their current situation. This approach will enable boards to identify what actions need to be taken forward.

The last column in the checklist can be used to record sources of evidence, supplementary comments to support your assessment or to highlight areas of interest.

Self-assessment checklist for NHS boards

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	Assessment of current position					Comments
	No – action needed	No – but action in hand	Yes – in place but needs improving	Yes – in place and working well	Not applicable	
<p>We are ensuring that all staff providing care to heart disease patients are aware of the main issues raised by patients.</p> <p>We are working with Chest Heart and Stroke Scotland, British Heart Foundation, other relevant groups and patients to address these locally.</p>						
<p>We have joined-up patient systems within our board and with other NHS boards to allow us to monitor overall waiting times across the complex pathway for Cardiology patients.</p>						
<p>We are working with regional planning groups to ensure our strategic plans to develop and monitor Cardiology services meet patients’ needs and address gaps in services.</p>						
<p>We ensure that patients with all types of heart disease who would benefit from cardiac rehabilitation are being referred and we are collecting information on the types of patients being referred.</p> <p>We have implemented Healthcare Improvement Scotland’s recommendations on improving services for patients with heart failure.</p> <p>We ensure that heart disease patients at risk of stroke are prescribed appropriate drugs as recommended by Healthcare Improvement Scotland.</p>						

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<p>We are measuring performance against targets for primary PCI and thrombolysis treatment for patients who have had a heart attack, including measuring the percentage of patients with a severe heart attack who receive primary PCI and thrombolysis treatment.</p>						
<p>We have reviewed the rates of the main Cardiology procedures to look at variation:</p> <ul style="list-style-type: none"> • by different groups, particularly for people in deprived areas • compared with other NHS boards • compared with other countries in the UK and Europe. <p>We have used this information to ascertain whether variation is warranted or if action needs to be taken to ensure patients are receiving the most appropriate treatment.</p>						
<p>We refer patients to regional and national services for the most appropriate treatment if it is not available locally.</p>						
<p>We are collecting information on the cost, impact and cost effectiveness of measures to help prevent heart disease.</p> <p>We are using available evidence on the impact and cost effectiveness of measures to prevent heart disease and identify priorities for our spending to help improve outcomes and address inequalities, particularly in deprived areas.</p>						

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<p>We have reviewed the costs and benefits of providing less expensive and non-invasive tests for heart disease instead of angiography where appropriate, including stress echocardiogram, cardiac MRI and CT coronary angiography.</p>						
<p>We have examined variation in Cardiology services to ensure we are providing services in the most efficient way and that we have identified scope for improving efficiency in the following:</p> <ul style="list-style-type: none"> • length of stay by heart condition and by Cardiology procedure • day case rates for Cardiology procedures • prescribing of generic and branded statins • procurement of hospital drugs, stents, pacemakers, defibrillators and associated electrical leads. 						
<p>We have reviewed how we provide outpatient clinics and have identified ways to:</p> <ul style="list-style-type: none"> • avoid unnecessary hospital appointments • reduce the number of patients failing to attend appointments <p>We share good practice in improving efficiency across Scotland and implement good practice from other areas where appropriate.</p>						

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<p>We have consistent and accurate activity, workforce, cost and quality information on Cardiology services to allow us to monitor our performance and to identify potential improvements in value for money.</p> <p>We report this information to ISD Scotland and others as appropriate to allow comparison of services and performance across NHS boards.</p> <p>We are working with ISD Scotland to ensure that day case activity is being recorded consistently to allow comparison of day case rates across Scotland.</p>						

Cardiology services

Self-assessment checklist for NHS bodies

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