

North West London Cardiac Network (NWLCN)

The NWLCN covers a resident population of circa 1.85million. Although 95% of the NW London population are treated within the network, there are significant flows from outside of the sector (40% of all work flowing from outside the network into 2 of the tertiary sites and 75% into the remaining 2). This key factor needed to be considered in terms of capacity and performance.

In 2004, waiting times for inter-hospital cardiology transfers were commonly between 6-8 weeks with waiting times for cardiac surgical intervention even higher. This was supported by SHA analysis showing NW London to be a significant outlier nationally. Whilst identifying areas of good practice, analysis by the Network indicated problems at all levels of the patient pathway from identification, risk stratification and referral through to waiting list management and commissioning.

Summary: Key areas ensuring success

1. Network led the work with strong Strategic Health Authority support.
2. Early engagement between the Network and Trust CEO's with CEO's identifying a senior clinician and manager to lead for their individual organisations.
3. Agreement reached with stakeholders on key areas: a) recognition that change to existing practice required, b) recognition that Trusts needed to work more collaboratively together and c) NW London approach needed to deal with both inter-hospital transfers and primary PCI.
4. 48-hour target from referral to transfer agreed and continues as current benchmark
5. Treat and return established across all organisations with tertiary centres providing training to provider centre staff to facilitate roll-out.
6. Network wide approach to implementation of primary PCI. 24/7 service established for all NW London residents by October 2005, enabling more beds for NSTEMI admissions through reduced LoS for STEMI's.
7. Appointment of NW London Scheduler to monitor utilisation of capacity in tertiary centres, demand from referring centres, produce waiting time data and to intervene to move patients to alternative providers where waiting times excessive.
8. Introduction of standardised referral form and risk stratification tool based upon TIMI scoring system for NSTEMI
9. Introduction of a web-based inter-hospital transfer system linking to all centres via NHS net. Allows centres to view who is waiting at the DGH and the number waiting for admission to tertiary centre. Enables centres to refer elsewhere and to compare waiting times across each. Facilitates clinical and non-clinical audit. All 11 NW London centres connected along with 4 referring centres external to NW London. Additional roll-out planned for all other non-NW London referring centres with they system being further developed to facilitate surgical referrals.