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Company Directors

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Report prepared Red Kite Health Solutions on behalf of the South Powys Cluster for, Opportunistic practice AF project 2019-2020

Background

Atrial Fibrillation (AF) is an irregular and often rapid heart rate that can increase the risk of stroke, heart failure and other heart-related complications. AF may come and go (paroxysmal AF) or may be permanent (BHF, 2020). One of the major concerns of AF is the potential to develop blood clots within the upper chambers of the heart that can travel to other areas, blocking blood supply (ischemia).

Over a million people in the UK have a diagnosis of AF, with a risk factor for stroke 5x greater for those with the condition. The stroke organisation estimates there could be another half a million people in the UK currently living with undiagnosed AF (Stroke.org, 2017). With the right treatment, this risk can be greatly reduced. A diagnosis of AF must be made by a Doctor but a pulse check can detect issues with heart rate. Normal heart rates are steady and between 60-100 beats per minute but in AF, a pulse will have no pattern and beats may have different strengths.

Method

Through the aims of the stop-a-stroke campaign the cluster discussed the potential of a cluster-wide programme for the opportunistic capture of abnormal pulses for patients attending the surgery. As the chances of AF increase with age, the Influenza vaccination programme was deemed to be an opportunity to capture a large cohort of patients during attendance at the surgery.

The cluster agreed to take the pulses of patients attending their seasonal influenza appointment. Data would be captured through the introduction of the following codes into the EMIS Influenza clinical system templates, which would allow for the capture and review of results.

- O/E Pulse rhythm regular 2431
- O/E Irregular pulse 243-1 and 2435

A pathway protocol was created for patients who were recorded with an irregular pulse and no previous diagnosis of AF on their medical record. Patients' records were reviewed and those identified were worked up for further diagnostic tests and/or review from the GP. Patients diagnosed with AF would then be initiated on correct treatment.

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Considerations

- Patients attending elsewhere for Influenza vaccination were unable to have a pulse check (e.g. Community Pharmacy/ Occupational therapy)
- Patients in care homes and/or those that were carried out by District Nursing teams were not opportunistically tested
- Patients who had pulse checks added without the relevant codes would not be captured in the search criteria

Results

Individual practice reports were collated and analysed.

Across the cluster a total of 9,588 patients were recorded as having their pulse checked between, Sept 2019-March 2020.

Of the 9,588 patient checks,

Patients recorded with an irregular pulse reviewed	488
Patients placed on pathway for ECG/GP review	147
New diagnosis of AF	6
Patients currently under GP review	4

The introduction of the opportunistic pulse checks, identified 488 patients who were reviewed and followed up on the correct clinical pathway. 147 patients received an ECG, which resulted in 6 patients across the cluster receiving a new diagnosis of AF and started on correct therapy and treatment.

