

**PCT CVD LEADS  
MINUTES  
29 SEPTEMBER 2011**

**Present:** Kathy Blacker (KB), Carol Ann McElhone (CAM), Sue Melling (SM), Elaine Nixon (EN), Mary Lyons (ML), Kath Lunn (KL)

**Apologies:** Paula Black, Sakthi Karunanithi, Jane Riley, Jeannie Hayhurst, Lauren Butler

**1. Apologies for absence**

As above.

**2. Approval of Minutes**

The minutes of the last meeting were agreed as an accurate record.

**3. Matters Arising**

Any matters arising have been picked up on the agenda.

**4. Cardiac Strategy Commissioning Transition Plan**

KB advised that Commissioners across Cumbria and Lancashire have been in discussions around putting a transition plan in place to look at work not yet implemented, with the focus being on the next 18 months and who might have the responsibility for implementation of those recommendations. The plan also looks at the roles of specialist commissioners, the two clusters and PCTS. All areas have contributed to the plan and it has been taken to the Network Board. A few comments have been made around health checks and the lack of clarity. ML confirmed this will go to local authority by 2013 but the issue is whether or not the local authority will be commissioning anything directly, so her understanding is that it will be commissioned through the Commissioning Board. ML thinks this will happen when Public Health Lancashire is formed. Jim Gardner would like this program to be brought together on a Lancashire wide basis.

KB talked through the plan and said the recommendations are implementing priorities and processing through the network board and CCG. She added how we need to find a way of CCG and cluster representation on the board. Ros is for Cumbria and Lancs and we have written to Amanda Doyle as chair of the CCG.

**ACTION** - Next steps is to take to NHS Cumbria and NHS Central Lancs for approval.

**5. PPCI**

CAM reported that the service commenced at the beginning of June. A meeting will be held with Lancashire Cardiac Centre to look at how to evaluate and show what the outcomes are and how to run an MDT for feedback to the DCH's. Work is also being undertaken to develop a network wide protocol.

ML asked CAM if was possible for the evaluation to show the proportion going into cardiac rehab. CAM confirmed this can be done.

CAM added how Cumbria has extended the trial period with NWS (South Cumbria only). Data will be shared showing each PCT and their call to reperfusion time (this should be less than 150 minutes).

KB talked about issues around drug therapy post procedures which have gone through CCG and Medicine Management. There have been lots of debates and the current position is that Blackpool will prescribe 30 days and then it will go to clopidogral.

#### **6. Vascular Review**

A meeting will be held next week to explain the commissioning process for vascular review – NHS Blackpool is leading on the procurement. The meeting will explain the process and timescales and the likely advice is that OSC's will be asked to decide at what point a consultation is required. It is hoped the changes will be implemented in April 2012.

#### **7. Hypertension**

KB read out an email from Blackburn with Darwen NHS. **ACTION** – CAM to set up a conference call to discuss a network plan.

#### **8. Telestroke Update**

KB reported that Telestroke went live on 27 July 2011. All participating trusts are now fully operational and there was an official media launch which received positive feedback. A case study was shown on the front page of the BBC website. **ACTION** – KB to send SM the link.

KB gave an update on figures for the past 2 months: 60 advice calls, 58 Telestroke assessments and 24 thrombolised. An evaluation report will be produced in due course.

#### **9. Stoke data – Network Sentinel Report**

KB said this is for information only and shows performance by organisation.

#### **10. ACHD Update**

KB explained how this is quite complicated and there have been lots of discussions and issues around the fact that surgery and cardiology are in two different cities. The intention of the North West is to make sure that our house is in order in terms of service provision, as the focus is expected to shift to ACHD once the National review of paediatric cardiac surgery (Safe and Sustainable) is complete.

There are big issues with transition planning and people are waiting for assessments and follow up at Liverpool Heart and Chest. Lots of protocols are being developed.

#### **11. AQUA Stroke Performance**

KB displayed the AQUA Stroke Data for October 2010-March 2011. The data will be published quarterly.

#### **12. World Stroke Day**

World Stroke Day is on 29 October 2011 and KB is currently in the process of co-ordinating activity around this e.g. Adverts in local newspapers, patient stories etc. The DOH is funding a new campaign in Feb/March which will be TV, radio and ethnic minority/BME radio ads.

An ethnic minority campaign is currently taking place across the North West (Public Health Greater Manchester)

Please email KB with any more ideas.

#### **13. Group membership and Terms of Reference**

KB circulated the TORs and asked the group to have a think and provide their thoughts.

#### **14. Date and Time of Next Meeting**

5<sup>th</sup> January 2012 2pm-4pm

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