



# Vascular Services Review

## Proposed changes to specialist Vascular Service provision in Cumbria, Lancashire, Bolton and Wigan

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and Lancashire



# Vascular Services Review

### What will it mean for vascular patients?

- Better prevention of disease
- Improved access to specialist skills
- Improved survival after limb amputation or aneurysm repair
- Improved outcomes
- A strengthening of existing clinical expertise at interventional centres





# Vascular Services Review

## Why a service review?

- High mortality rates in UK and locally
- Vascular reviews underway in most areas of England
- Too many small centres without 24/7 facilities and low numbers of patients procedures
- Quality driven review – not financially driven
- AAA screening programme starting this autumn across Cumbria and Lancashire and without the review patients will have to go to Newcastle or Manchester for treatment for aneurysm repair



# Vascular Services Review

- Currently many of our hospitals carry out specialist vascular procedures, some with quite low numbers of operations
- Patients treated in hospitals that perform fewer such operations are at greater risk of poor outcomes
- There is the potential to improve outcomes by grouping clinical expertise in specialist interventional centres supported by a vascular clinical network





# Vascular Services Review

## Vascular Clinical Advisory Group

Proposed a new model to

- Create a network of vascular specialists
- Ensure wherever possible services are provided locally (outpatients, day cases, laboratory tests)
- Ensure specialist work is undertaken in nominated specialist intervention centres with 24/7 facilities



# Vascular Services Review

## Expert advice

- National lead for Vascular services has reviewed model and specification and praised it
- VSGB&I provided expert advisors to help with procurement exercise
- Consideration given to unique nature of Cumbrian geography and population







# Vascular Services Review

Rationale for specialist centres – ideal is:

- 1 million population covered
- 95% of patients should be triaged, referred and have arrived at the intervention centre within two hours of arrival at first hospital (VSGB&I 2012)
- Specification referred to 90 minutes guideline

Proposal

- 3 hospitals providing specialist interventional vascular services
- 1 in Carlisle
- Royal Preston and Royal Blackburn in Lancashire



# Vascular Services Review

Service delivery

- All hospitals presently providing vascular services will continue to provide outpatients and day surgery
- Patients attending hospitals not designated as intervention centres will transfer for inpatient surgery (elective and emergencies)
- This already happens at Barrow and Whitehaven
- Whitehaven patients will continue to transfer to Carlisle





# Vascular Services Review

- Barrow patients will transfer to Preston – presently on 2 days they transfer to Blackpool and on 5 days to Lancaster
- Incidence of aortic aneurysm emergencies in Barrow area is estimated at 2 cases per annum
- Vascular services at Lancaster are not being removed completely
- Vascular surgeons will still have presence on site during the day – operational protocols to be worked up prior to implementation of changes



# Vascular Services Review

## Communication & Engagement

- OSC attended previously
- Regular (monthly) briefings to all media, and to stakeholders inc. LINKs
- Targeted engagement and communication:
  - GPs, Hospitals, Councillors, MPs, VCFS
- Response to queries
- GP survey
- Patient/Public survey
- Interviews with patients





# Vascular Services Review

## Patient and Public Survey

- 503 responses
- Majority (80%) are patients/service users
- What is important to respondents:
  - Getting the best possible treatment (96%)
  - Ensuring my safety is paramount (95%)
  - How experienced the surgeon is (91%)
  - The quickness of the procedure (75%)



# Vascular Services Review

## Patient and Public Survey

- 75% would **be able** to travel further than their local hospital for specialist vascular care
- 65% would **be willing** to travel further for specialist vascular care
- The majority of respondents have indicated that while **convenience** of vascular services is important, **improved outcomes and safety** are vastly more important





Questions?

