

NHS DORSET CLINICAL COMMISSIONING GROUP
PRIMARY CARE COMMISSIONING COMMITTEE
ACADEMIC HEALTH SCIENCE NETWORKS (AHSN) ANTICOAGULANT BID

Date of the meeting	06/12/2017
Author	S Shead, Director of Nursing and Quality Dr C Wakeham, Clinical Lead
Purpose of Report	The purpose of this report is to inform the Committee of an award of funding from the Wessex Academic Health Science Networks (AHSN) to undertake a project which aims to increase the knowledge and skills of General Practitioners and Practice Pharmacists to enable them to initiate and manage anticoagulation in Atrial Fibrillation (AF) effectively and in line with evidence based practice, and to increase anticoagulation prescribing to protect patients with AF from stroke.
Recommendation	The Committee is asked to approve the acceptance of funding from the AHSN and to support the following recommendations: <ul style="list-style-type: none"> • The Steering Group to work with the AHSN to ensure the project adds best value and outcomes to Dorset patients by targeting the areas of most need. • Ensure the project is continually reviewed and evaluated to assess any influence from the pharmaceutical company, identify time commitment from staff and to monitor outcomes and value. • Work with the AHSN to ensure that any future such proposals are developed in a more structured way, with engagement of relevant groups, and formerly approved prior to submission.
Stakeholder Engagement	The opinions of the Medicines Optimisation Group (MOG), including patient and GPs has been sought.
Previous GB / Committee/s, Dates	The project was presented to the CCG Directors on 17/10/17

7.1

Monitoring and Assurance Summary

This report links to the following Strategic Principles	<ul style="list-style-type: none"> • Services designed around people • Preventing ill health and reducing inequalities • Sustainable healthcare services • Care closer to home 		
	Yes [e.g. ✓]	Any action required?	
		Yes Detail in report	No
All three Domains of Quality (Safety, Quality, Patient Experience)	✓		✓
Board Assurance Framework Risk Register	✓		✓
Budgetary Impact	✓		✓
Legal/Regulatory	✓		✓
People/Staff	✓		✓
Financial/Value for Money/Sustainability	✓		✓
Information Management & Technology	✓		✓
Equality Impact Assessment	✓		✓
Freedom of Information	✓		✓
I confirm that I have considered the implications of this report on each of the matters above, as indicated	✓		

Initials: SS

1. Introduction

- 1.1 The identification and effective treatment of people with Atrial Fibrillation (AF) is a national priority and the CCG has had work programmes in place to support this area of clinical need for several years.
- 1.2 Given the age profile of the Dorset population, we have higher numbers at risk. However, there is still significant variation in prevalence and anticoagulation rates between practices.
- 1.3 As a consequence; half of patients presenting with a stroke, previously known to be in AF, are not anticoagulated.
- 1.4 Recently the Wessex Academic Health Sciences Network (AHSN) has been working with the CCG on this area.
- 1.5 As a result, the CCG was asked (albeit at very short notice) to collaborate on an application for funding being offered by the pharmaceutical company Pfizer to carry out a project to improve adequate anticoagulation within Primary Care.
- 1.6 As there was insufficient time to seek formal approval within the timeframe for the bid, it was submitted on the basis that the money would only be accepted if approval was subsequently granted.
- 1.7 The CCG was notified that the bid had been successful on 26 September 2017.
- 1.8 Directors reviewed the bid and the process on 17 October 2017 and approved in principle, subject to formal approval by the Primary Care Commissioning Committee (PCCC).

2. Report

- 2.1 The CCG Medicines team first became aware of a “Pfizer” bid on 23 August, as CCG sign off was received for a deadline for submission of 25 August.
- 2.2 The proposal was to bid for money that Pfizer has allocated to AHSNs for anticoagulation projects. The full written bid as submitted by the AHSN is attached as Appendix 1. The objectives of the proposal are:
 - To increase the knowledge and skills of GPs and Practice Pharmacists in anticoagulation and patient centred decision making for AF management;
 - To identify and review patients who are diagnosed with AF but either not on anticoagulation, are sub optimally treated or receiving anti-platelets alone, and develop patient centred treatment plans to reduce their risk of stroke.

2.3 The CCG has made several attempts to address the risk posed by AF to the population of Dorset:

- The medicines team and the Medicines Optimisation Group (MOG) GP members have drafted and implemented anticoagulant medicines advice and guidance and formulary entries in line with the NICE TA status of the drugs;
- Implementation of Grasp AF tools and other audits have been undertaken across the CCG to assure of the appropriate anticoagulation;
- And the pulse check programme in flu clinics that has increased the number of people diagnosed with AF.

2.4 However, there have only been marginal improvements and significant variation between practices remains. Take-up of these initiatives has been patchy and change in clinical practice slow.

2.5 The availability of newer oral anti-coagulation drugs (direct oral anti-coagulants or DOACs) has increased the interest in this area.

2.6 In cost terms the CCG is exactly mid-chart on the uptake of this group of drugs which presently cost the CCG £5million per year.

2.7 The full bid was submitted by the AHSN on 25 August and was considered by an expert panel on 21 September, prior to which the CCG received the following assurance from Vicki Rowse, Senior Programme Manager, Medicines Optimisation and Atrial Fibrillation at the AHSN

“If we are successful the money will come to Wessex AHSN who will be responsible for sourcing and paying the staff and co-ordinating reporting etc. There will be no direct contact between anyone working on the project in Dorset and Pfizer”.

2.8 The CCG was notified by the AHSN on 26 September that the bid had been successful, the award being for just under £100K with the following message from Pfizer to the AHSN:

“On behalf of the Network of Academic Health Science Networks (AHSNs), Pfizer, and Bristol-Myers Squibb, I want to thank you for submitting a proposal in response to our recent Request for Proposals (RFP) entitled “Improving the Identification and Management of Patients with Atrial Fibrillation (AF) in Order to Reduce Stroke Risk and Venous Thromboembolism (VTE)”. We received a number of high quality proposals and the selection process was competitive. A panel of experienced experts recently reviewed all the proposals and made recommendations for funding.

I am pleased to inform you that your proposal was recommended for funding by the review panel. Feedback forms with the scores and comments from the review panel will be sent out to all applicants within the next 3-4 weeks.

7.1

Funding is contingent on completion of a review in compliance with the Foreign Corrupt Practices Act (FCPA) and the UK Bribery Act, which will be conducted by Pfizer”.

- 2.9 The bid was formally taken to the MOG on 26 September and to the Chief Pharmacists in Dorset on the 29 September.
- 2.10 The comments and opinions from each of these groups were varied and included the following:
- A request for a member of the MOG to be on the project board;
 - Secondary care to be involved;
 - Request for assurance that pharma companies do not have an influence on prescribing;
 - An understanding that GPs clinical judgement should be maintained;
 - A request to see outcomes and what value the project adds;
 - Assurance that the project would not be a repetition of work already done by GPs and to target the project to areas where work is not already underway;
 - Concern about time commitment from staff;
 - Would have liked to have been engaged and consulted prior to the bid being made.
- 2.11 Directors considered these opinions and also reviewed the acceptance of funding from a pharmaceutical company in the context of compliance with the CCG’s Policy on Working with the Pharmaceutical Industry and the CCG’s Policy on Standards of Business Conduct.
- 2.12 The proposal was considered to be compliant with these policies as assurance has been provided by the AHSN that the pharmaceutical companies will not have any direct contact with the project and funding has been agreed with the AHSN at a national level. This is in line with the CCG’s statement within the policy that ‘Positive interaction with the pharmaceutical industry for the benefit of patients is encouraged’.
- 2.13 There is, however, a requirement to ensure that the project is properly governed and evaluated to ensure it continues to comply with good governance and is adding value.
- 2.14 The Senior Programme Manager at the AHSN will convene a steering group to oversee the project and the Dorset Anticoagulation Working Group will contribute to this. We have already identified a GP clinical lead, Pharmacist and secondary care clinician to be part of this group. A member of MOG also needs to be identified to join the Group.

3. Recommendations

3.1 The Committee is asked to approve the acceptance of the funding and the proposal, with the following recommendations:

- The Steering Group to work with the AHSN to ensure the project adds best value and outcomes to Dorset patients by targeting the areas of most need;
- Ensure the project is continually reviewed and evaluated to assess any inappropriate influence from the pharmaceutical company, identify time commitment from staff and to monitor outcomes and value;
- Work with the AHSN to ensure that any future such proposals are developed in a more structured way, with engagement of relevant groups, and formerly approved prior to submission.

Author's name and Title: Sally Shead and Craig Wakeham

Date: October 2017

Telephone Number: 01305 368070

APPENDICES	
Appendix 1	AHSN Application