

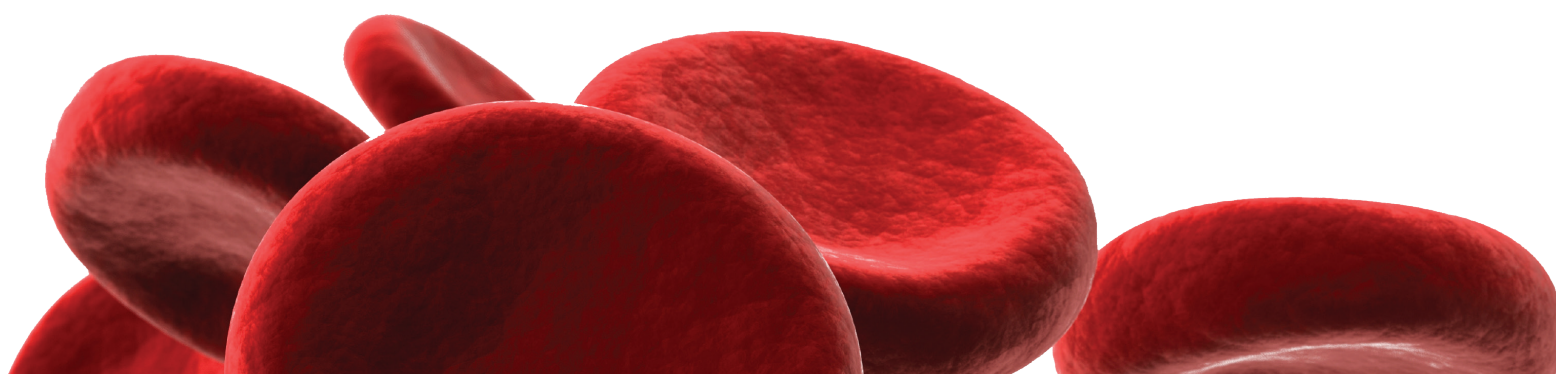
Improving anticoagulation in patients with atrial fibrillation

West Hampshire CCG achieves reduction in strokes using the GRASP-AF quality improvement tool*. The GRASP-AF quality improvement tool is developed by PRIMIS and delivered in conjunction with NHS England

"The fact that this project has led to an actual reduction in the number of patients having a stroke is really impressive. The availability of the PRIMIS quality improvement tools, combined with a rigorous project methodology and clinical champions contributed to the success of this project."

Neil Hardy

Associate Director - Medicines Management
West Hampshire Clinical Commissioning Group



Practices also used the Warfarin Patient Safety quality improvement tool[†] in Phase II of the project to optimise treatment of patients who were poorly controlled on warfarin. This activity complemented the work done with the GRASP-AF tool and was additionally supported by both BI and PRIMIS.

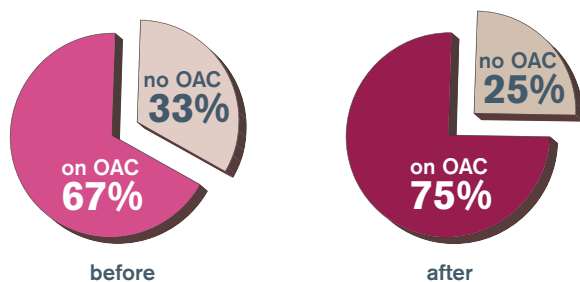
To complement the Medicine Optimisation initiative, the CCG also introduced the NICE-endorsed 'WatchBP Home A' device to all 51 practices. This was to identify another key patient cohort: the estimated 2,000 people in West Hampshire with undiagnosed asymptomatic AF.

Results

The very successful project saw improvements across a number of key measures (Sep 2014 to Sep 2016):

- 2,000 additional patients are now receiving OAC therapy and fewer high-risk patients are prescribed antiplatelet monotherapy
- total number of high risk patients on OAC rose from 67% to 75%; an 8% increase compared to Sep 2014 (Fig 1)
- there were 39 fewer predicted strokes in the high risk group of patients

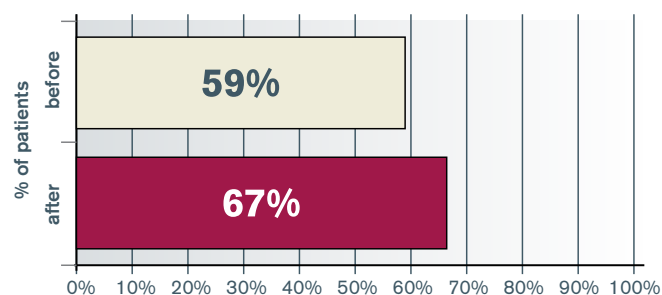
Fig 1. Percentage of high risk patients receiving OAC - data results before and after running the GRASP-AF quality improvement tool



Phase II of the project also resulted in important benefits, including:

- 3,000 patients that were poorly controlled on warfarin were reviewed to move them on to more appropriate medication
- an 8% increase in the CCG average for people well controlled on warfarin (TTR>65%) (Fig 2)

Fig 2. Percentage of patients well controlled on warfarin - data results before and after running the Warfarin Patient Safety quality improvement tool



Overall, these initiatives resulted in 52 fewer strokes in West Hampshire in 2016 (compared with the previous year). The project is now included in the NICE Shared Learning database and was highly commended at the NICE Shared Learning Awards 2016.

Conclusions

The GRASP-AF and Warfarin Patient Safety quality improvement tools^{††} have contributed significantly to West Hampshire CCG's plan to improve AF management and reduce strokes. The CCG is continuing to work with both quality improvement tools and practices will re-run the audits on a regular basis to support ongoing improvement in OAC management.

About the GRASP-AF quality improvement tool

GRASP-AF is part of the suite of GRASP quality improvement tools delivered in partnership with NHS England.

GRASP-AF is a free, easy-to-use tool that assists GP practices to interrogate their clinical data enabling them to improve the management and care of patients with AF and to reduce their risk of stroke through appropriate intervention with anticoagulation. The tool also assists with case finding activity, helping practices to establish more accurate prevalence rates within the practice population.

Find out more about the GRASP-AF quality improvement tool

www.nottingham.ac.uk/primis/grasp-af

How to obtain the GRASP-AF quality improvement tool

Use of the GRASP-AF tool is FREE to practices in England registered with the PRIMIS Hub online membership service.

Basic membership is FREE of charge and includes access to the GRASP suite and CHART and CHART Online software tools.

Sign up for FREE basic PRIMIS Hub membership at:

www.nottingham.ac.uk/primis/joinus

* Practices outside England please contact enquiries@primis.nottingham.ac.uk

References

- Hart, R.G., L.A. Pearce, and M.I. Aguilar, Meta-analysis: Antithrombotic Therapy to Prevent Stroke in Patients Who Have Nonvalvular Atrial Fibrillation. *Annals of Internal Medicine*, 2007. 146(12): p. 857-867.
- Mant, J., et al., Warfarin versus aspirin for stroke prevention in an elderly community population with atrial fibrillation (the Birmingham Atrial Fibrillation Treatment of the Aged Study, BAFTA): a randomised controlled trial. *The Lancet*. 370(9586): p. 493-503.
- AFA Association, Grasp the initiative: action plan. 2014.

Footnotes

[†] The GRASP-AF quality improvement tool is developed by PRIMIS and delivered in conjunction with NHS England.

^{††} The development of the Warfarin Patient Safety quality improvement tool has been funded by Boehringer Ingelheim. Boehringer Ingelheim has undertaken a medico legal review but PRIMIS has retained editorial and intellectual property rights for this tool.