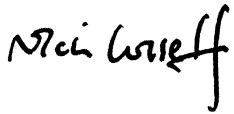


<p>THE NHS IN NORTH CENTRAL LONDON</p>	<p>BOROUGHES: BARNET, CAMDEN, ENFIELD, HARINGEY, ISLINGTON WARDS: ALL</p>
<p>REPORT TITLE: A New Model for Arterial Vascular Surgery Services</p>	
<p>REPORT OF:</p> <p>Nick Losseff Consultant Neurologist and Clinical Director, NHS North central London Senior Responsible Officer, QIPP, NHS North Central London.</p>	
<p>FOR SUBMISSION TO: North Central London Joint Health Overview & Scrutiny Committee</p>	<p>DATE: 21st January 2011</p>
<p>SUMMARY OF REPORT:</p> <p>This report provides an update on work being undertaken in the NHS in North Central London in response to the recently-published Cardiovascular Strategy for London.</p> <p>CONTACT OFFICER: Sylvia Kennedy Director of Clinical Strategy NHS North Central London Telephone 0203 317 2794 Email sylvia.kennedy@islingtonpct.nhs.uk</p>	
<p>RECOMMENDATIONS:</p> <p>The Committee is asked to note the content of this report and the appendices, and to raise any concerns or queries and to give their views on the work to improve local cardiovascular services, in line with the Cardiovascular Strategy for London.</p>	
<p>SIGNED:</p> <p></p> <p>Dr Nick Losseff Clinical Director, NHS North Central London DATE: 14 January 2011</p>	

A New Model for Arterial Vascular Surgery Services

Strategy for London

The NHS has recently published a “Cardiovascular Strategy for London”. This follows the completion of a public consultation on the clinical case for change, in which the strategy received a significant level of support with 83% of respondents in agreement with the proposals.

London NHS sectors, including ours in North Central London, are now in the process of examining how the strategy pertaining to Vascular Surgery can be implemented. The intention is that there should be five specialist vascular centres in London.

Vascular services in North Central London

Within North Central London there are currently three significant providers of arterial vascular surgery, based at Barnet Hospital, the Royal Free Hospital and University College Hospital. However, none of these centres is delivering the volume of work needed to establish a critical mass of patients or clinical expertise considered necessary to further improve patient outcomes. Indeed, given current activity levels, only one centre in North Central London is required to meet the needs of our population.

We have no doubt that moving forward to one specialist vascular centre, working in conjunction with a vascular network across North Central London, will present significant challenges and will require a high degree of co-operative working between service providers.

The absolute procedural numbers are small and the benefits to patients of establishing a single service are significant. These benefits should mirror what has already been achieved in other specialities, for example stroke and coronary heart disease.

Therefore, it is our intention to commission a service for North Central London residents as closely aligned to the consulted cardiovascular strategy as possible, and this service development is a high priority within our QIPP (Quality Innovation Productivity and Prevention) plan for the coming year.

We have proposed a co-operative solution be developed by the three service providers in the first instance (see Appendix One). Such an approach would remove the need for an independent designation process to be run.

At the same time, we are developing a designation process through which we could fairly establish which provider could lead the vascular service of the future, should a co-operative proposal not be forthcoming.

We had asked for this co-operative solution to be presented by mid January. At the time of writing this paper, a solution had not been reached. However, Dr Nick Losseff will update Committee Members at the meeting on 21 January.

We are aware that, at a clinical level, a group of North Central London vascular surgeons already meets to discuss provision, and we have offered to host further talks with the view of establishing a co-operative solution if this is required.

Implementation of the change in our sector will be supported by the North Central Cardiac and Stroke Network.

Engagement

We recognise that it is important to keep our partners fully briefed on service developments like this. All Primary Care Trusts in North Central London have now sent a letter and summary document (attached as Appendices Two and Three) detailing the essential components of the proposed network and vascular service in London to the relevant councillors within their borough. We will continue to engage relevant stakeholders as the new model is developed.