



## Joint Working Executive Summary

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<b>Project title</b>	IMP Healthcare (Lincolnshire GP Federation) AF Screening and Diagnosis and Treatment Programme
<b>Project partners</b>	IMP Healthcare Limited Bayer plc
<b>Project summary</b>	<p>To implement the screening and diagnosis of AF patients from a population of 50,000 people across West Lincolnshire using portable ECG devices, 12 lead ECG and 3 day continuous ECG monitoring to confirm diagnosis. This pilot programme will allow evaluation of the process with a view to wider roll-out.</p> <p>The project is designed to have three separate elements of care developed to provide a prevention-led, seamless and integrated pathway of care for the screening, diagnosis and treatment of arrhythmia and atrial fibrillation.</p> <p>The aim is to speed up the time from identification of AF to appropriate anticoagulation from three months to a matter of days.</p>
<b>Expected benefits to patients, the NHS and Bayer</b>	<p><b>Benefits to Patients:</b></p> <ul style="list-style-type: none"><li>Public Health data suggest a number of patients remain undiagnosed across the GP Federation geography. This project offers the opportunity for those patients to be diagnosed and reviewed to ensure they receive the correct treatment according to agreed protocols and the best opportunity to avoid having a stroke</li></ul> <p><b>Benefits to the NHS:</b></p> <ul style="list-style-type: none"><li>Prevention of unnecessary hospital admissions/referrals by providing a complete service of screening, diagnosis and treatment from primary care</li><li>Delivery of an innovative, high quality and standardised service which eliminates unwarranted variation between practices</li><li>Moving from a sickness-led, siloed service to delivering prevention-led, seamless, integrated care in line with the 5YFV and STP plans</li><li>Sharing of best practice to other areas of England</li></ul> <p><b>Benefits to Bayer:</b></p> <ul style="list-style-type: none"><li>An increase in the number of AF patients diagnosed and treated, some of whom will be suitable for treatment with a DOAC, of which rivaroxaban is one choice</li></ul>

	<ul style="list-style-type: none"><li>• The opportunity to work with a GP Federation to pilot a truly primary care led, standardised service</li><li>• The outputs from this project can then be used to work with other GP Federations across England to enable commissioning of further primary care led screening, diagnosis and treatment services</li></ul>
<b>Start date</b>	November 2017

Date of Preparation (reapproval): June 2019

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