

NHS Foundation Trust

An Evaluation of the Effectiveness of Knowsley Community Cardiovascular Services (2010 – 2017)

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BACKGROUND

In the years 2007-11, the disparity between life expectancy in Knowsley and England was shown to be 2.49 years for males and 1.91 years for females, with widespread variance across the borough closely linked with deprivation [1]. One the main contributors to this health inequality in Knowsley is the significantly raised prevalence of Cardiovascular Disease (CVD).

STEERING GROUP REPRESENTATIATION



• Public Health

Researcher

• Knowledge

Exchange

Research

Manager

• Health Services

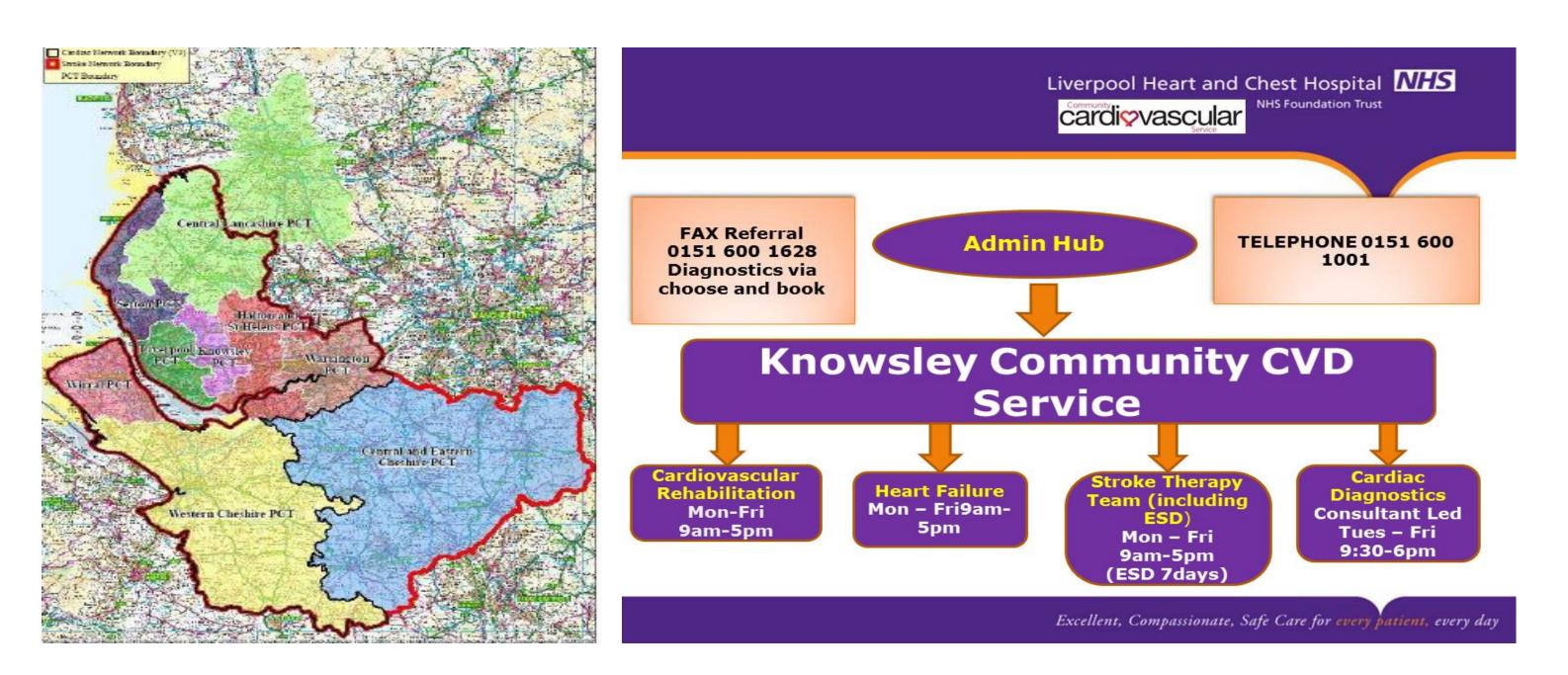
Researcher

Theme

The burden of CVD is widely shown to be related to the level of poverty (deprivation) within an area. CVD contributed to 25% of all deaths in the years 2010-12 [2] within the Borough of Knowsley which was shown to have the 27th highest premature CVD mortality rate within England.

The extent of this disease burden was concomitant with the highest 10% of 326 local authority areas. The population of Knowsley generally has poorer health than the national average (8th most deprived nationally), with higher rates of respiratory disease (lung diseases), diabetes, heart disease and cancer [1-3] respectively.

SERVICE OVERVIEW



 Consultant lead 	
 Head of Clinical 	
Trials	
 Senior Clinical 	
Information	
analyst	
 Community 	
Service Lead	

- Service element leads
- Knowsley
 Clinical
 Commissioning
 - Group
 - Knowsley GPs
 - Liverpool
 Commissioning
 Group
 - Knowsley
 Public Health
 Consultant
- Public Advisor
- Patient
 Parecentation
- Representative
- Patient
- Ambassador (Liverpool Heart and
- Chest Hospital)

EVALUATION DESIGN

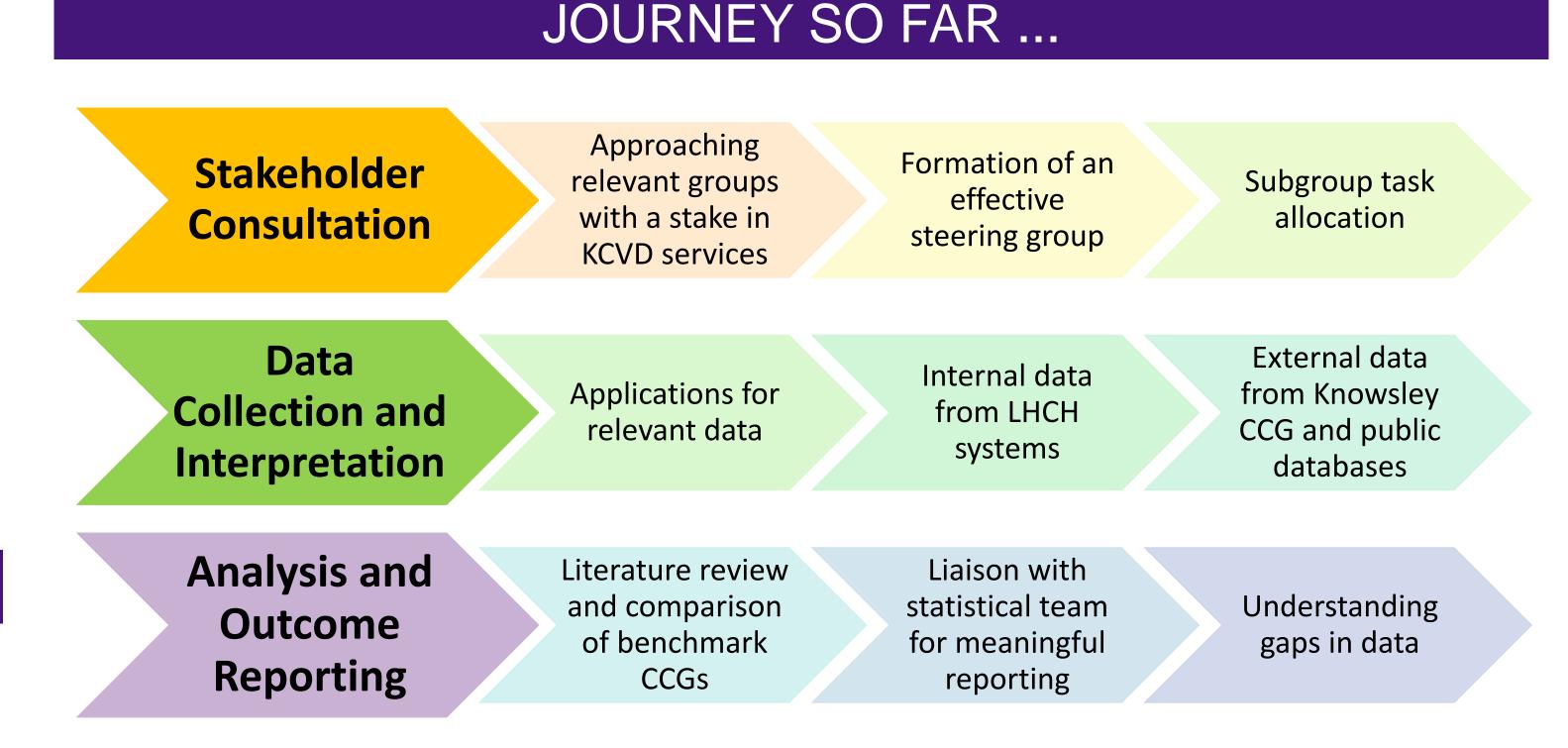
- The overall design of the evaluation project is based on participatory, action-based inquiry methods.
- The evaluation will utilise both quantitative and qualitative methods to answer the key evaluation questions and assess the initiative's effectiveness in meeting its objectives.
- The evaluation will include both formative and summative components focusing on process evaluation, stakeholder opinions and feedback together with patient outcomes analysis.
- We aim to work together with patients and public representatives to assess whether the initiative is delivering better patient outcomes and experience.
 We will be addressing the health inequalities agenda set out in its commissioning brief.

In 2010, following extensive and innovative service redesign, the Practice Based Commissioning Groups commissioned the Liverpool Heart and Chest Hospital to provide a single cohesive borough-wide Consultant-led Community CVD service as a local 'one-stop-shop' service providing diagnostics, treatment and management of CVD. The service model aimed to significantly improve local access, reduce CVD-related deaths and costs, and improve quality (patients' experience) in addition to facilitating greater equity of access via improvements in the speed of care delivery. It was anticipated that having services in accessible locations, closer to home should reduce non-attendance (DNA) rates and increase completion rates for rehabilitation.

AIMS & OBJECTIVES

The purpose of the evaluation is to specifically review CVD pathways within Knowsley in order to support future service redesign, commissioning, and transferability of the community initiative.

The aims of the evaluation are to establish the impact of the initiative on:



NEXT STEPS

 The steering group expressed concerns regarding huge caveats in including premature mortality in the aims of the evaluation as we are highly unlikely to be able to show this in a statistically robust way. We are exploring better ways to answer this question
 The initial search in archives did not yield data with sufficient detail to answer the relevant questions, we await completion of a further data collection exercise from Knowsley CCG and other sources.
 There is an element of stakeholder satisfaction within the evaluation, we await responses from the surveyed parties.
 The clinical coding of the Knowsley Community Service CVD database has shown some gaps that need investigating to determine if the information is available from other sources.

Access to local specialist services for patients and carers across all deprivation levels especially the hard to reach communities.

Patient and service outcomes including rates of emergency hospital admissions and readmissions, ambulance call-outs, secondary care activities, hospital length of stay.

Premature mortality rates associated with CVD.

Knowsley Public Health Annual Report Statistical Compendium 2012-2013. <u>https://www.knowsley.gov.uk/pdf/publich-health-statistical compendium-2014-15.pd</u>
 Knowsley Public Health Annual Report Statistical Compendium 2013/14. <u>http://www.knowsley.gov.uk/PDF/knowsley-public-health-statistical-compendium-2013-14.pdf</u>
 Knowsley Public Health Annual Report 2014/15. <u>https://www.knowsley.gov.uk/pdf/public-health-annual-report-2014-15.pdf</u>

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