

Freedom of Information (Scotland) Act 2002

DATE RECEIVED	25/04/2022	SUBJECT	Heart Failure Service		
PASSED TO	Specialist Nurses	DATE PASSED	25/04/2022	RESPOND BY	16/05/2022
CATEGORY	Private	FoI NUMBER	2022-147		

Question/s to be Answered

We are conducting a project which involves mapping heart failure services across the NHS and this request for information regarding the services provided by your organisation is an important part of this.

I would be grateful if you could please answer the following questions.

1. What is the name of your Heart Failure Service? **Heart Failure Service**
2. Population served by the Heart Failure Service? **23,000 population**
3. What is the service setting?
 - a) Acute hospital – **HF service is secondary care based – outreaching into Primary Care as per patient need**
 - b) Community hospital
 - c) Integrated care
 - d) Primary care

4. Approximate case load of Heart Failure patients seen per week?
4 x Consultant led Clinics (reduced clinics when on-call) + additional Cardioversion/TOE list monthly (4 x patients)
5 x Clinical Nurse Specialist (CNS) Clinics per week

Approximately 20-25 patents with HF are seen by the CNS weekly – plus community visits (2- 3 pts) – again this will vary week to week.

Please note that patients attending these general cardiac clinics will have various cardiac diagnosis/management plans – it is estimated that approximately half of patients attending these clinics have a diagnosis of HF – again this will vary week on week.

5. Number of follow ups in 2021/22? **(Please note - not all follow up appts are for HF patients)**

Consultant: Follow Up clinic appointments – 438 patients
Ambulatory Unit (SDEC) – 156 patients

CNS:
Clinic appointments: 717 patients
Telephone Consultants 875
Ward Visits 229
Community Visits 21

6. Which population's do you provide the following services for and are you commissioned for these services?
 - a) Heart Failure with preserved ejection fraction (HFpEF) – **Diagnosis + Management plan established in secondary care setting – patients mainly monitored within the in Primary care setting thereafter**

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b) Heart Failure with reduced ejection fraction (HFrEF) - **Mainly secondary care managed**

7. Staff dedicated to Heart Failure:

a) Number of Heart Failure consultants (pa's) – **Consultant details as noted**

b) Number of Heart Failure nurses (WTE) – **2.0 wte CNS in post – approximately 1.0 wte CNS time dedicated to HF services**

c) Number of Heart Failure Pharmacists (WTE) – **none – liaise with dept as per patient need**

8. Which of these (a to g) does your NHS organisation have?

a) Access to open access ECHO - **Yes**

b) Access to Cardiac rehab? - **Yes**

c) HF Multi Disciplinary Team (MDT) – **Team discussions as per patient need**

d) Cardiologist Non HF specialist – **Consultant – General Physician/Cardiologist Role**

e) Cardiologist HF specialist – **as above**

f) Cardiology Pharmacist - **No**

g) GPwER (previously called GPwSI) - **No**

9. Which of the following (h to n) service models do you provide?

h) Acute inpatient - **Yes**

i) HF outpatient - **Yes**

j) Hospital based ambulatory heart failure unit - **Yes**

k) Community based ambulatory heart failure unit - **No**

l) Home based service / care - **Yes**

m) Community based clinic - **No**

n) Heart Failure virtual ward - **No**

10. Do you believe that the current service specification adequately reflects the range and volume of activity your service provides? (Yes / No)

We are currently reviewing our local Cardiology Service to ensure the needs of (a) our patients are met/shared care pathways etc.