

Description of Intervention

Cardiovascular disease (CVD) is one of the leading causes of premature death in England¹ and accounts for 1.6 million disability adjusted life years.² The NHS Long Term Plan³ identifies CVD as a clinical priority. People living in the most deprived areas are almost four times more likely to die prematurely from CVD when compared to those in the least deprived areas.⁴

Hypertension is the biggest risk factor for CVD⁵ with an estimated 5.5 million people have undiagnosed hypertension nationally.⁶ Stroke is the 4th largest cause of death in the UK.⁷ Atrial Fibrillation (AF) is the greatest single risk factor for suffering a deadly or debilitating stroke.⁸ It is believed at around 1.4M⁵ people in the UK suffer with AF,⁹ with treatment reducing the risk by up to two thirds.¹⁰ Optical practices offer first contact care and see 'well' patients. Since 2015 Dudley Practices have offered CVD checks as part of their Healthy Living Optical Practices (HLOP) programme. This was initially a pilot service but has since been commissioned. The pilot was successful with over 300 patients offered NHS health checks as well as referral for smoking cessation, alcohol advice and over 12,000 brief intervention discussions. CVD Prevention in optical practices builds upon the principles of Optometry First with first contact care. It embraces 'making every contact count' and demonstrates a cohesive holistic approach to patient care.

Several LOCs have supported the development and implementation of local pilots to provide opportunistic BP and AF screening in optical practice, to complement but not compete with existing provision delivered in general practice and pharmacy.

Current Proof of Concepts

London

Started BP Pilot in Autumn 2023 in 2 areas, Bexley and Hackney. These areas were selected to target areas likely to see the greatest impact. Selection was based upon population risk and also considered indices of deprivation.

Initially rolled out with 5 practices in the first phase increasing to 12, in the coming weeks. AF delivery will be included in the later practice implementation.

Humber North Yorkshire (HNY)

Between September 2022 and September 2023, 36 optical practices and 126 community pharmacists have signed up to the scheme. In this time, optical practices have seen 278 patients.

- 48% have been referred onto community pharmacies for further follow-up
- 36% have been offered lifestyle advice to reduce their risk of hypertension
- 6% have been referred urgently to their GP or to emergency services
- Less than 3% were referred to their GP for non-urgent follow up

AF Pilot Cheshire / Cheshire and Merseyside BP/AF

9% of people screened were referred for further tests at their GP following suspect AF screening result.

Following the success of the AF pilot, BP and AF screening was offered to 76 refugees and asylum seekers over 5 days in September 2022, with 21 patients recording high or very high BP. The homeless sight testing programme has identified the need for the patient population to be included in CVD screening. Cheshire and Merseyside LOCSU have embarked upon a short BP/AF pilot in November 2023 targeting areas of deprivation and the homeless population to support a reduction in health inequalities.

Key Learnings for LOCs

- Ensure the training for optical practice teams is appropriate to encourage engagement
- Co-develop with Pharmacy and GP colleagues to ensure patient care is joined up
- Consider areas for delivery to maximise impact

Key lessons for ICS leadership teams: Different model of care required to tackle the mounting CVD issue by utilising optical practices and their workforce.

Outcomes

- Patients seen in the service would not have attended BP screening elsewhere

Px experience: Very positive patient feedback with early indication that the service is reaching a new cohort. Patients in HNY report they wouldn't have had a BP check elsewhere if not offered in optical practices. Cheshire asymptomatic AF patient screened in practice report 'they would never have gone to the GP' (if not for the screening service).

Other Key Contacts

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¹ [NHS England » Cardiovascular disease \(CVD\) prevention recovery](#)

² [B0953-nhs-community-pharmacy-hypertension-case-advanced-service-specification-v1.pdf \(england.nhs.uk\)](#)

³ [NHS Long Term Plan](#)

⁴ [Chapter 5: inequalities in health – GOV.UK \(www.gov.uk\)](#)

⁵ [Complications and prognosis | Background information | Hypertension | CKS | NICE](#)

⁶ [CVD prevention: detecting and treating hypertension \(nice.org.uk\)](#)

⁷ [Stroke – Neurological condition \(brainresearchuk.org.uk\)](#)

⁸ [Risk factors | Background information | Stroke and TIA | CKS | NICE](#)

⁹ [Prevalence | Background information | Atrial fibrillation | CKS | NICE](#)

¹⁰ [Anticoagulants | Prescribing information | Atrial fibrillation | CKS | NICE](#)