Acute Coronary Syndrome Integrated Care Pathway (ACS ICP) Project

Background:
- Difficulty in identifying all ACS patients
- Variability in transitions of care along the patient pathway
- Limited visibility of all ACS patients, especially NSTEMI patients
- Only 53% of all eligible patients are receiving cardiac rehab

Outcomes:
- Embedded a system for continuously, reporting and improving clinical quality performance for our ACS patients.
- Developed an ACS proforma capturing the patient pathway.
- Created a meaningful and useful ACS specific discharge summary for GPs developed and routinely used.
- ACS ePathway to go live in November leading to fewer variations in practice based care

Methodology / Tools Used:
- Locally adapted, proven Clinical Quality Improvement Methodology, aimed at delivering integrated, evidenced based care to all ACS patients. Our approach included:
  - Agree evidence based platform: align clinical team to deliver best practice clinical care
  - Clinical pathway and workflow redesign
  - Clinical Quality Metrics: develop and deploy tools to demonstrate improvements
  - Established pathway Leadership Team for sustainability

Key Staff:
- Professor Kausik Ray
- Kay Townsend
- Zoe Astroulakis
- Hanney Gonna
- Helen McHugh
- Caroline Sutherland
- Elaine Hayward
- Jo Lowery
- Nicola Hilton
- Raj Sharma