



Stormy Roads Ahead

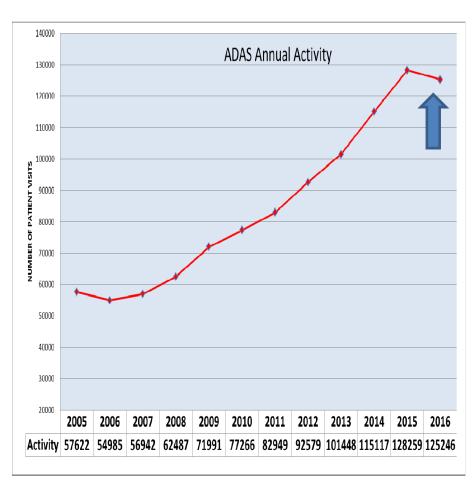
DAWN Of the DOACS

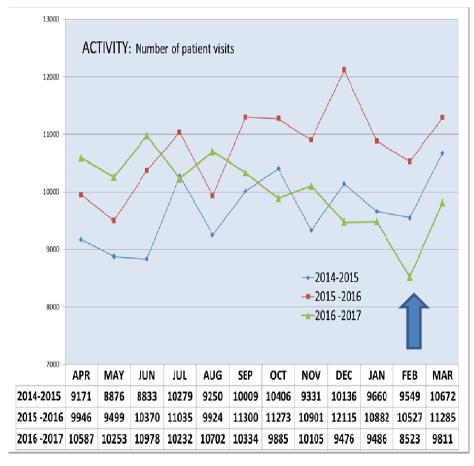
Sean O'Brien Bev Straker-Bennett Senior Anticoagulation Practitioners





Effects of DOAC prescribing on activity levels in our warfarin monitoring service









Who is managing the DOACS Initiation/Education/Switches

What are the risks to patients?

ADAS

GP

CARDIOLOGY





Worrying Scenarios

- Patient admitted to CAT unit at BVH as her INR was >10.
- Discharged a day later with an INR of 7.3 following vitamin K
- ADAS had no update referral / no follow up check / no E discharge letter to GP
- ADAS performed a visit 3 days later (thanks to Jedi force!!) INR still >3

- Patient had been sent home and started on Apixaban on discharge with an INR of 7.3!!
- No follow up in place, no education NO IDEA!!





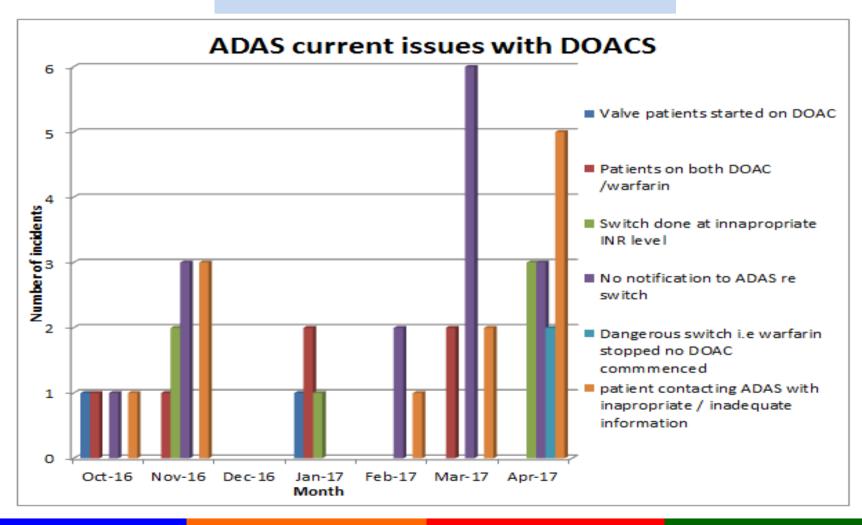
Worrying Scenarios

- Clinic patient attended confused about her anticoagulation.
- Started on rivaroxaban 3 days previously.
- INR performed just for safety and a closing INR for records
- INR was >8
- Patient previously on 3mg warfarin daily and had been Rx'd 15mg rivaroxaban.
- She had taken 15mg of Warfarin and Rivaroxaban
- Oral Vit K administered
- Consulted with GP re stopping and restarting Riva when INR<2
- She and her carer had not received any information the drug switch or counselling on DOAC





DOAC Incidents







Current DOAC concerns

- Variation in initiation between medics both primary and secondary care.
- Inconsistent levels of education provided to patients.
- Patients presenting at ADAS clinics asking for advice.
- Patients prescribed a DOAC with contraindications.
- Patients have been taking both warfarin and a DOAC.
- Switches done without renal bloods or INR checks. NICE guidance not followed.
- Switches done when INR is above recommended level, introducing bleeding risks.
- Patients on the wrong doses of DOACs with no follow up checks.
- GP's / nurses phoning ADAS for DOAC advice and switch assistance.





NICE / NRLS Recommendations

- Anticoagulant Safety NPSA alert 18 (update 2016) DOACS.
- Ensure staff are properly trained.
- Review / update written procedures and clinical protocols to ensure they reflect safe practice.
- Audit (BCSH / NPSA / NICE guidelines)
- Ensure patients prescribed anticoagulants receive appropriate information.
- Safe practice for prescribers co-prescribing one or more clinically significant interacting medicines for patients already on oral anticoagulants.
- Amend local policies to standardise the range of anticoagulant products used, incorporating characteristics which promote safer use.
- Promote the use of written safe practice procedures for the administration of anticoagulants in social care settings.



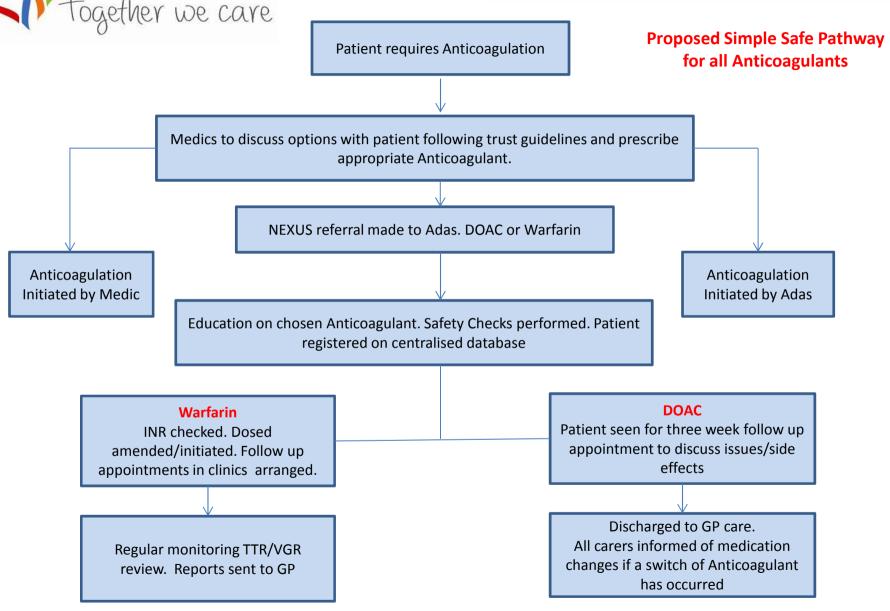


ADAS Proposed DOAC pathway

- Current DOAC concerns / incidents presenting
- NLRS / NICE guidelines
- ADAS proposed solution



NHS Foundation Trust







Benefits for Secondary and Primary care

- Centralisation of all anticoagulant referrals providing a universal database.
- Auditable, consistent, comprehensive education for all patients/carers.
- Less medic time / confusion on who is educating patients.
- Switches can be facilitated appropriately/safely, and communicated to all interested parties.
- Software driven secondary safety check to ensure:
 - -Appropriate reason for initiation
 - -Correct dosage prescribed
 - -Co-prescribed medicines are not contra indicated
 - -Appropriate bloodwork is performed
 - -Patient / carers are educated
- 3 week review
- Compliance with for NRLS / NICE recommendations.





ADAS Actions

- Discussions with Haematology Consultants
- Presented to CCG medicines management teams / commissioners
 Issues / proposed new DOAC pathways and benefits
- Monitoring of incidents over a 6 month period
- Risk assessment scored at 15 Put on Trust risk register
- Presentation to the Quality Panel and Trust Policy Board
- Revision of CCG Service Spec





ADAS Action Plan

- Training Plan for dept.
- Installation of Dawn DOAC modules
- Designing DOAC E referrals
- Staff training
- DOAC education sessions designed
- GOING LIVE JAN 2018

TO BE CONTINUED......