CHD Competence Framework

Case Study – Angina patient pathway



Better Skills Better Jobs Better Health

Berkshire CHD Collaborative

The Berkshire CHD Collaborative is one of 30 programme teams across the country. It works with Trusts across Berkshire with a view to redesigning CHD services in order to bring improvements in experiences and outcomes for patients and their carers.

The situation

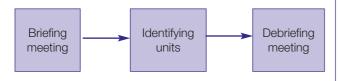
The Berkshire CHD Collaborative is always on the lookout for ways to improve the services provided by the CHD teams within the Berkshire area. They wanted to review the Angina Patient Pathway they developed two years ago to identify any changes and improvements to the service.

The aims

The aims were to

- review the Angina Patient Pathway
- develop a smooth referral and discharge route between primary and secondary care for stable angina patients
- develop a format whereby they could assess whether the nurses
 - did not have the competences and skills, but could be trained,
 - had skills but needed to improve their skills or needed retraining, or
 - had the required skills already and could carry out the discharge process efficiently.

The action



A meeting was held with representatives of the CHD services throughout Berkshire (Nurse Manager, GP, Consultant, Senior Matron,

Modern Matron) and Rekha Wadhwani, the *Skills for Health* technical consultant. The Angina Pathway was developed two years ago and as part of the pilot process it was decided to review it with the draft CHD framework to explore whether changes needed to be made.

The results

Places where the Pathway could be improved were identified. Areas where service to the patients could be improved were also identified, such as:

- including a leaflet and induction pack giving guidance on what can alert staff to possible heart disease
- improving the fax referral systems from the GP to the Rapid Access Chest Pain Clinic (RACPC)
- improving the process at the RACPC.

The future

The Service Improvement Programme would like to pursue the referral and discharge route from primary to secondary care in the future, when there is enthusiasm for this kind of service improvement.

Contact details

For further information on this case study, please contact:

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