

Your Local Warfarin Clinic

Information for patients



This leaflet includes information about some improvements to your local warfarin clinic (also known as the Leeds Anticoagulant Service).

You may have already been involved in providing feedback about your service and how you would like it to be delivered. This leaflet builds on this and explains how we are working to improve the service, how it will be delivered and from which clinics.

Why we need to change

Our vision is to create a modern, efficient, more responsive, and clinically safe service that is fit for purpose today and in the future.

The Leeds Anticoagulant Service was set up in 1996 to treat around 4500 patients with a warfarin dosing and monitoring facility. Since then the number of people needing the service has more than doubled in size and yet the way we deliver it, and the community and hospitals clinics we operate from, have remained largely unchanged.

There have also been changes to NICE (National Institute for Clinical Excellence) guidance recommending anticoagulation for the majority of patients with a diagnosis of Atrial Fibrillation (AF) to reduce stroke. As a result, more patients will require the service which could see the number of tests increase from around 2,700 to over 4,000 per week. This means it is becoming difficult for us to provide the service for the patients who need it.

We undertook a review of the service and found that if we are truly committed to creating a modern, efficient, and clinically safe service we need to change the way it is delivered. This means bringing it up-to-date, reflecting some of the clinical developments that have taken place in recent years and also being able to increase the number of people we treat.

Speaking to patients about the service

There are around 10,000 people in Leeds who take the anticoagulant drug warfarin and use the Leeds Anticoagulant Service. In 2013/14, to help us understand what those patients think of the service, we used a survey to gather their views and experiences, and those of the wider public.

The survey was shared widely with:

- anticoagulant patients in community and hospital clinics
- clinical commissioning groups' patient, public and voluntary sector networks; and;
- GP practices in Leeds.

In this survey we asked questions to help us find out your views on how we could deliver the service. This included how quickly you got your results, how your blood was taken, your views on the use of different drugs, and where and how you access the service.

In total 263 people contributed to the engagement and a summary of what you told us is shown on the next page.

What you said	What we have done		
There was a high level of satisfaction with the existing service and you want any changes that are made to maintain this level of satisfaction.	Patient satisfaction is already being collected in the test areas for the new service and this is proving to be very positive. We will continue to monitor this as part of our service delivery.		
You want some level of choice in decisions about your care. This might include transferring to a new drug for reasons other than 'clinical benefit', whether bloods are taken by needle or finger prick testing, and choice about how to receive your test results.	 We will always aim to offer patients choice where appropriate. Finger prick testing will allow instant results, dosing and care to be provided in the clinic. Bloods taken by needle would be processed by a laboratory and may take 48 hours to be returned. We would then need to contact patients to discuss any issues. 		
You want reassurance about the accuracy of finger prick testing.	We conducted our own formal evaluation of the Coaguchek machines (used for finger prick testing) against gold standard technology in 2012. This evaluation found the machines compared very well against laboratory technology. They are widely used across the country.		
Some patients want opportunities to self-manage their anticoagulant medication and testing.	We are currently working on piloting a patient self- testing scheme which will allow patients with their own machines to use this technology. If the pilot is successful, we hope to expand the scheme to more patients and include self- management.		
Some patients said they wanted their results by text and email.	We are already trialling this with some of our patients. Patients who want to receive their results by email must download some decryption software on their computer and/or mobile device so that we can ensure patient confidentiality is maintained. Feedback has been positive and it is something we plan to offer to other patients in the near future. We are also looking into the feasibility of SMS messaging.		

You want the anticoagulant clinics to have good parking and/or be on a good bus route and be within a five mile radius of where you live.	We have reviewed all the clinics that we currently use to decide whether they are fit for purpose, clinically, in terms of the facilities that they offer to patients, such as space, car parking and being on a good bus route, and whether they are within a five mile radius of patients' homes. We have taken all this into account when deciding which clinics we will use to deliver the new service (see the table below).
Locating anticoagulant clinics with other services where possible.	We will try and do this wherever possible.
 Some patients want appointments to be provided: at different times of the day but with more appointments in the morning on different days of the week but with more appointments early in the week on Saturdays but not Sundays after 9:30 for those with a bus pass as drop-ins where possible. 	Where possible, we will have morning and afternoon services in many of the clinics and we will offer evening and weekend services from at least one of our hospitals sites. Patients will be given a choice of the clinic they wish to attend.

How the service works now

The current service model uses community clinics on a morning staffed by two to three phlebotomists, taking bloods from 100-150 patients. These samples are sent to other sites for testing and we aim to return the results to our patients within 24 hours.

The increase in the amount of tests we are carrying out means that we don't always get results back to our patients within 24 hours.

Patients with excessively high results at risk of bleeding have significant delays, and need to travel between locations to get medicine to manage the risks of bleeding and follow up. They currently have to go to an oncology day ward for treatment, which is not ideal.

Patients with mobility issues needing home visits also face significant delays between testing, receiving the results and prescribing a new dose. This is due to delays in transport and processing times. We are also limited to the number of home visits we can provide each week.

Based on your feedback, a number of improvements to the service have been agreed and are outlined below.

How the new service will work

There will be two types of service.

A 'Hub Service' based at St James's Hospital (Beckett Wing) for patients who have just started taking warfarin, just been discharged from hospital or those that need a clinical review of their medication. This clinic is available on Monday (am), Tuesday (pm), Wednesday (pm), Thursday (am) and Friday (am).

'Spoke Clinics' which are located closer to people's home or work at different sites across the City and are appropriate for patients who are established on warfarin. In future, some of these will also be able to offer appointments for starting on anticoagulation

There will be a qualified health care professional on all sites when you have your test who will deal with any questions or concerns you may have.

The expected total time you will spend in the clinic will, in most cases, be less than 20 minutes. This time will include having your blood taken, receiving your results and setting your next appointment time.

A finger prick sample, requiring a smaller amount of blood, will be taken for your test rather than taking blood with a needle from your vein.

You will receive your results faster - in most cases around 5-10 minutes after you have given your blood sample.

Any changes needed in your treatment or if your results are out of range, can be dealt with immediately by a health care professional.

We want your appointment to be as convenient as possible. You will be able to choose which clinic you attend and appointments will be available at different locations between 9am and 4pm and during the evenings and weekend.

How it is already working for patients

We have already started to deliver this new service from some of our Clinics and patients have been extremely positive about the improvements. Some of the feedback we have received is outlined below.

"I felt very welcome and it was so good to have a tiny jab instead of a needle. All staff were kind"

"A much improved service, the staff are so friendly and helpful"

"The staff were exceptionally caring. They treated me as an individual and were very good at explaining what was happening. I didn't feel like a number on a computer screen"

"The taking of blood is a lot better"

Where are the clinics?

We have discussed the vision for a new and improved service based on your views with our clinicians and partners. We have also looked at buildings that we currently operate our clinics from and the associated costs.

We know that where you access the service from is extremely important to you, and that it should, where possible, be no more than five miles from your home, have the appropriate facilities including car parking and be on a good bus route.

We have taken all this into account and below are the details of the clinics we are planning to provide and where they are.

Name of Hospital/ health centre	Clinic Times	Public transport	Parking	Start date	
Leeds General Infirmary, Great George Street LS1 3EX	Tbc, but will include an evening/ weekend clinic	City Centre	Yes	Tbc	
St James's University Hospital, Beckett Wing, Beckett Street Leeds LS9 7TF	Weds (am)	No. 16, 42, 49, 50, 50A	Yes	Open	
Chapel Allerton Hospital, Chapeltown Road LS7 4SA	Weds (pm) Fri (pm)	No. 2, 3, 3A	Yes	April 2016	
Seacroft Hospital, York Road LS14 6UH	Weds all day Fri all day	No. 56, 64, 770, 771	Yes	Open	
Wharfedale Hospital Newhall Carr Road, Otley LS21 2LY	Thu all day	No. 940	Yes	Open	
Armley Moor Health Centre, 95 Town Street, Armley LS12 3HD	Tue all day	No. 16	Yes	July 2016	
Beeston Parkside, 311 Dewsbury Road LS11 5LQ	Thu (pm)	No. 203	Yes	July 2016	
Bramley 255 Town Street, LS13 3EJ	Tue all day	No. 16	Yes	July 2016	
Garforth	Garforth Health Centre is closed and the Warfarin Clinic has moved to Kippax. Alternative premises in Garforth are being explored.				

Holt Park Health Centre, Holt Road LS16 7QD	Mon (pm)	No. 1, 6	Some parking close to the Centre	July 2016	
Kippax Gibson Lane LS25 7JN	Mon all day	No. 166	Yes	Open	
Meanwood Health Centre 548 Meanwood Road LS6 4JN	Tue (am) Thu (am)	No. 6, 51, 52	Yes	July 2016	
Morley Health Centre Corporation Street LS27 9NB	Mon (am) Fri (am)	No. 51, 52, 220	Yes	July 2016	
Pudsey Health Centre, 18 Mulberry Street LS28 7XP	Mon (am)	No. 4A, 14, 16, 60	Free parking at nearby leisure centre	July 2016	
Rothwell Health Centre Stonebrigg Lane LS26 0UE	Fri (am)	No. 9, 153, 444	Yes	July 2016	
Wetherby	Details of clinic arrangements to be confirmed. In the meantime, current arrangements continue.				
Yeadon Health Centre, 17 South View Road, Yeadon LS19 7PS	Thu (am)	No. 33A, 97, 966	Yes	July 2016	

What happens now?

These changes will be happening during 2016. Some of the services are already in place and it may be that you will not need to change anything. However, you may need to think about which clinic is most convenient for you to attend and discuss this with a member of the service. When the clinic you want to attend opens, we will ensure you receive at least three weeks' notice and you are booked into this clinic for your next appointment.

Any questions?

If you have any questions about the information in this leaflet please either speak to a member of the service or contact the Patient Advice and Liaison Service at Leeds Teaching Hospitals NHS Trust on 0113 206 6261.



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