

*By Email [petitions@scottish.parliament.uk](mailto:petitions@scottish.parliament.uk)*

Date 17 August 2015  
Your Ref  
Our Ref TPD/DF/EW

Ms Sigrid Robinson  
Assistant Clerk  
Public Petitions Committee  
Room T3.40  
The Scottish Parliament  
Edinburgh EH99 1SP

Dear Ms Robinson

## CONSIDERATION OF PETITION PE1566

Calling on the Scottish Parliament to urge the Scottish Government to implement a National Service Delivery Model to ensure that all NHS boards have the resources to assess warfarin patients who request (i.e. self-present) for self-testing and/or self-management their condition.

Thank you for your letter of 24 June on the above. The responses to the questions are set out below.

- (i) Does your NHS Board have a protocol, e.g. a service delivery model or similar policy, on self-testing and self-management for warfarin patients?

NHS Lothian does not currently have a service delivery model or policy on self-testing and self-management for warfarin patients. Historically the local anticoagulant service has been maintained in primary care by general practitioners supported by an enhanced service delivery agreement. General practitioners in some areas of Lothian (East and some GP surgeries in Midlothian) have moved forwards to introduce point of care testing within their surgeries supported by computer assisted dosing algorithms, and this model for service delivery is currently being considered throughout the rest of Lothian.

- (ii) What guidance and training does your NHS Board provide to its NHS staff on self-testing and self-management for warfarin patients and is its implementation monitored?

NHS Lothian currently has one thrombosis nurse practitioner, who has been trained over the past year and works alongside the two consultant haematologists who take an interest in thrombosis and haemostasis at the Royal Infirmary. This individual is not trained to provide education for other NHS staff in Lothian on self-testing and self-management for warfarin patients, nor would be able within the current job description to take this remit on. A few patients have attended the thrombosis (haematology) clinic who have been trained in self-testing in England and other regions of Scotland, and the thrombosis nurse has become involved in the external quality assessment of the patient's point of care device on a quarterly basis by comparing the patient's INR with a hospital based INR (quality assured through the NEQAS scheme), in accordance with the current guidance from the British Committee for Standards in Haematology.<sup>1</sup>

- (iii) What is your NHS Board doing to promote self-testing and self-management amongst its warfarin patients? If it does not promote self-testing and self-management, please explain the reasoning behind this decision.

NHS Lothian is in the process of re-establishing the Point of Care (POC) Testing Committee. This committee previously met to consider POC issues within secondary care, but it is widely recognised that issues within primary care require to be incorporated into this committee's remit. A business case earlier this year was successful in providing funding for a Band 7 Biomedical Scientist to take on the role of POC manager for the laboratories in NHS Lothian. The first remit of this individual is to co-ordinate the governance of all POC devices within secondary care in NHS Lothian; thereafter it is hoped that the POC manager will become involved with the quality assurance issues required by primary care using NPT devices in the community, and advising on the devices available for POC and procurement. It is presently an aspirational goal that this individual might become involved with service delivery for self-testing and self-management in the future but not targeted specifically in the current job description.

- (iv) What protocol, guidance or measures are in place in paediatric hospitals or paediatric care facilities in your area to provide support for warfarin patients who move from paediatric to adult services? Is there any oversight of this process, especially in circumstances where an individual is moving between different NHS Board areas, and what training or guidance is provided to staff on this issue?

Few patients are commenced on warfarin at the Royal Hospital for Sick Children, Edinburgh as cardiac surgery is performed at the children's hospital in Glasgow. Patients on long term warfarin are provided with Roche CoaguChek monitors for near patient testing for which the training and management was based at Yorkhill and this service will continue

from the newly built children's hospital in Glasgow. Very few paediatric patients require long term warfarin outwith the cardiac setting and these cases have been managed on an individual basis with use of near patient testing where appropriate, and with transitioning to the adult haematology service by written communication and discussion.

- (v) How many warfarin patients are there within your authority and, of those, how many self-test and/or self-monitor?

There are 9,718 patients on warfarin treatment in NHS Lothian, based on the period April 2014 to March 2015. NHS Lothian does not have data on how many patients self-test or self-monitor.

Yours sincerely

**TIM DAVISON**  
Chief Executive  
NHS Lothian

#### Reference

1. Jennings, I., Kitchen, D., Keeling, D., Fitzmaurice, D., Heneghan, C. and the BCSH Committee (2014), Patient self-testing and self-management of oral anticoagulation with vitamin K antagonists: guidance from the British Committee for Standards in Haematology. *British Journal of Haematology*, 167: 600–607. doi: 10.1111/bjh.13070