

PE1566/O

**PUBLIC PETITION [PE1566](#) : Response from NHS Lanarkshire**

- (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?

**There is no specific service delivery model on self-testing or self-management for warfarin patients in NHS Lanarkshire.**

- (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 Lanarkshire does not have a specific training programme or guidance to NHS staff regarding self-testing and self-management for warfarin patients.**

- (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 Lanarkshire does not actively promote self-testing and self-management for patients on warfarin.**

**There was a major change in the service towards the end of 2013 to improve safety of warfarin with INR control being transferred from primary to secondary care. This is with the exception of the rural part of South Lanarkshire where monitoring is done by primary care.**

**The service now has a lead consultant and a lead nurse. There are a number of anticoagulant clinics based both in acute hospitals and health centres. They are run by nurses and are one-stop with near-patient INR testing using Coagucheck machines. Dosing is done on the Dawn computerised assisted dosing system, which also includes a national benchmarking exercise on INR control for all participating centres. The service also participates in the NEQAS programme to ensure accuracy of INR results.**

**Around the same time at the changeover, new guidelines for AF patients were introduced with a significant increase in number of referrals to the anticoagulant service. The challenge and priority has since been to accommodate this extra demand safely and within the limit of available resources. Efforts have therefore been concentrated**

**on maintaining the service, rather than developing the self-testing/self-management programme.**

- (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?

**Paediatric patients on warfarin are monitored at tertiary centre i.e Royal Hospital for Sick Children in Glasgow because of expertise required. For those requiring long-term warfarin, care is transferred to the NHS Lanarkshire Anticoagulant service after age 18. They are given the option of either continuing with self-testing or attending the regular one-stop anticoagulant clinic. For those opting for self-testing, the same protocol as in RHSC is used. Number is very low and cases tend to be discussed individually.**

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

**There are 8574 patients attending the NHS Lanarkshire Anticoagulant Service. A smaller group is monitored by primary care in the rural part of South Lanarkshire (Biggar, Douglas, Carnwarth and Forth). Only 3 patients attending the Anticoagulant clinic do self-testing and were previously paediatric patients transferred to adult service. There are a number of patients, who may have bought INR testing machine at their own expense but this has not been endorsed by the Anticoagulant clinic. NHS Lanarkshire does not have data on how many patients self-test or self-monitor.**