

SCHEDULE 2 – THE SERVICES

A. Service Specifications

Service Specification No.	03_CVDS_0007 v2
Service	Echocardiology Service
Commissioner Lead	Primary and Community Care
Provider Lead	Dorset HealthCare
Period	From 01/04/2023 <i>(v1 01/04/2013 – 31/03/2023)</i>
Date of Review	<i>This service specification should be reviewed every 2 years unless new guidance or legislation dictates a review any sooner</i>

1. Population Needs

1.1 National/local context and evidence base

An echocardiogram is a type of imaging that can be used to diagnose and monitor various heart conditions. It can also analyse the flow of blood through the heart and its surrounding structures.

An echocardiogram can help detect damage from a myocardial infarction, heart failure, cardiomyopathy, endocarditis, heart valve disease, and congenital heart disease.

In 2018/2019, pre-covid pandemic showed 1,315,853 echocardiograms being completed, a 5% increase from the previous year. Numbers dropped significantly during the pandemic but are expected to rise overall, particularly with the growing and aging population with cardiovascular disease.

Extensive guidance on cardiac echocardiograms can be found here:

<https://www.bsecho.org/Public/Public/Education/Protocols-and-guidelines.aspx>

Specific guidance of patients with Heart Failure

<https://www.nice.org.uk/guidance/qs9/chapter/quality-statement-1-diagnosis-by-a-specialist>

Specific guidance of patient with Heart Valve disease

<https://www.nice.org.uk/guidance/ng208/chapter/recommendations>

2. Outcomes

2.1 NHS Outcomes Framework Domains & Indicators

Domain 1	Preventing people from dying prematurely	✓
Domain 2	Enhancing quality of life for people with long-term conditions	✓
Domain 3	Helping people to recover from episodes of ill-health or following injury	✓
Domain 4	Ensuring people have a positive experience of care	✓

Domain 5	Treating and caring for people in safe environment and protecting them from avoidable harm	✓
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2.2 Local defined outcomes

Dorset Healthcare University NHS Foundation Trust supports the need to develop improved access to diagnostic tests as part of the 18 week RTT process. This ensures, where possible, patients are able to access appropriate diagnostic tests as early as possible in their pathway to inform commencement of treatment.

The need to develop diagnostic services is supported by the Royal College of Radiologists and Royal College of General Practitioners as part of a service strategy to improve access to tests and ensure these tests are delivered at the right stage of the patient care pathway.

Diagnostic access is an integral part of many treatment pathways and is a key performance indicator for the delivery of referral to treatment delivery times and stage of treatment milestones.

Some patients will be able to access diagnostics in the community as part of their primary care treatment. Others may need access to diagnostics as part of Consultant led care.

Echocardiology has become a common diagnostic test in cardiac care. It aids diagnosis allowing patients to then receive treatment which may include medical or surgical care, inpatient or outpatient care.

Expected Outcomes

- Accurate and timely echocardiogram results
- Accurate and timely reporting systems
- Safe data handling in line with DHUFT policy
- Reductions in inappropriate referrals to secondary care

3. Scope

3.1 Aims and objectives of service

The objectives of the service are:

- to provide safe, high quality, cost effective non-invasive cardiac diagnostic information
- to promote patient independence through evidence-based practice including health promotion programmes / promoting ongoing health education including keeping individuals mobile and independent
- to develop and inform local care pathways and protocols, ensuring an integrated and effective approach to cardiology issues
- to provide a responsive service achieving national and local waiting time targets
- to reduce 'inappropriate' referrals to secondary care
- to plan service improvements in collaboration with patients, their carers and other appropriate health and social care professionals
- To ensure patients receive the right test at the right time and in the most clinically appropriate setting
- To ensure diagnostic tests are of high quality, with timely access and reporting
- To develop local service provision as part of a diagnostic commissioning plan which aims to improve access and choice for patients
- To enable the early identification of patients with heart failure and subsequent management of these patients within primary care

- To reduce demand and waiting times for secondary care echocardiography services to assist the achievement of 18 week pathways
- To provide a community echo service which is closer to home for patients
- To improve the quality of GP referral and management of cardiology within primary care

3.2 Service description/care pathway

The service will:

- ensure that all referrals are dealt with in a quick efficient manner with an assessment date being offered for patients within national No Delays (RTT) targets
- offer a choice of appointments wherever possible
- demonstrate that clinical activities undertaken will be evidence based and delivered according to local and national clinical guidance including NICE
- provide education and advice to GPs, practice nurses, health visitors, Sure Start staff and district nurses
- provide any interpreting and communication support services necessary, either by direct provision or by contract with a third party, in order to:
- minimise clinical risk arising from inaccurate communication
- support equitable access to healthcare for people for whom English is not the first language
- support the effectiveness of services in reducing health inequalities.

Service Quality

- processes in place for promoting high standards to include:
- appointing appropriately qualified and experienced clinicians
- training, supervision and appraisal of all staff
- all staff have a personal CPD programme
- all staff are supervised by an appropriate mentor
- an annual appraisal PDR process in place
- clinical audit
- incident reporting: the service works to the standard Dorset HealthCare University Foundation Trust system
- monitoring and learning lessons from complaints / patient experience

In cases of new suspected heart failure, referral to the Rapid Access Heart Failure Clinic should be considered for consultant review / diagnosis as per the relevant [NICE Guidance](#).

The service will be provided by an accredited provider offering echocardiology assessment, for patients with suspected cardiac conditions referred by local GPs including:

Patients with suspected cardiac failure, adults with an asymptomatic heart murmur for routine investigation and adult patients with atrial fibrillation

Patients under 18 years of age access the cardiac services through Poole or Royal Bournemouth Hospitals

The service is for people aged 18 and above.

Consideration should be given to the epidemiology of the conditions the patient has, or is being treated/assessed for and steps should be in place to ensure that areas of risk are managed due to ethnicity and health inequalities. This could include opportunistic screening for associated diseases they may be at risk from.

Care Pathway – Dorset HealthCare University Foundation Trust Echocardiology Referral Guidelines

3.3 Population Covered

As per guidance 3.4

3.4 Any acceptance and exclusion criteria.

Echocardiology Referral Guidelines
General Practitioners Referrals to the service

3.5 Interdependence with other services/providers

Whole system relationships -
Poole GPs
Poole Hospital/University Hospital Dorset
Cardiology Services to provide some specialist advice where appropriate
Commissioning Services/NHS Dorset

4. Applicable Service Standards

4.1 Applicable national standards (eg NICE)

Heart Failure <https://www.nice.org.uk/guidance/qs9/chapter/quality-statement-1-diagnosis-by-a-specialist>

Heart Valve Disease
<https://www.nice.org.uk/guidance/ng208/chapter/recommendations>

4.2 Applicable standards set out in Guidance and/or issued by a competent body (eg Royal Colleges)

British Society of Echocardiography
<https://www.bsecho.org/Public/Public/Education/Protocols-and-guidelines.aspx>

5. Applicable quality requirements and CQUIN goals

5.1 Applicable quality requirements (See Schedule 4A-C)

Less than 1% of patients should wait six weeks or more for a diagnostic test (of total patients)

6. Location of Provider Premises

The Provider's Premises are located at:
Locations and any subsequent changes to be agreed with Commissioner prior to the onset of service

7. Applicable Personalised Care Requirements

7.1 Applicable requirements, by reference to Schedule 2M where appropriate