

A system approach to cardiovascular disease and inequalities: a summary

The Oxfordshire Prevention Framework developed last year identified the top causes of premature death and illness in Oxfordshire. One of the top causes identified was cardiovascular disease (CVD). This has become a key focus of work in order to improve health outcomes in Oxfordshire.

This plan aims to improve cardiovascular disease (CVD) outcomes in Oxfordshire, and in particular focusing on hypertension, atrial fibrillation and high cholesterol. This ties in with national targets set by NHS England and Improvement and Rightcare. For example, Rightcare has set aggressive 10 year targets for hypertension identification and management. Our work on hypertension under this program is aimed to address this target, aiming for incremental improvement to meet the 10 year goal.

Areas of deprivation will be given particular focus as people in these areas have poorer outcomes from CVD when compared to more affluent areas, showing individuals experience fewer years of good health, a lower life expectancy and higher emergency admission rates from CVD.

There is a strong prevention focus of this work at an individual, primary care and population health level. For example, 'upstream' measures include healthy place shaping, resumption of the NHS Health Checks Programme and the launch of the Oxfordshire Tobacco Control Strategy 2020-2025. More 'downstream' measures include new projects for home monitoring of blood pressure and AF detection. It will also build on existing programs of work.

This is a 'whole system approach' with each part of the system recognising where it can add value. It builds on the work of the Oxfordshire Prevention Framework, the identification of 'Prevention Champions' from across NHS, local government and third sector organisations and the recent Joint Strategic Needs Assessment. The work will also link closely with the Thames Valley CVD Clinical Group's work as well as the upcoming CVD Primary Care Network contract specifications.

Outcomes will be measured through a range metrics including participation of practices in the program and quality of life and clinical outcome measures. The outcome measures need to be developed further to reflect the whole system approach.

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