



## **All Party Parliamentary Group on Vascular Disease**

**To raise awareness of vascular disease and to encourage actions to promote a greater priority for its prevention and treatment; to encourage research into the causes of vascular disease; to advance excellence and innovation in vascular health; and to inform parliamentarians of the work of medical professionals and those who provide support services for patients and their relatives.**

**Minutes of the Winter meeting at 4pm on 20<sup>th</sup> January in The Boothroyd Room, Portcullis House**

### **PRESENT**

**MEMBERS** - Neil Carmichael MP (Chair), Sir Peter Bottomley MP (Vice-Chair), Lord Colwyn

**OTHERS** - Dare Seriki, Fergus Jepson, Professor Jonathan Valabhji, Trevor Cleveland, Martin Fox, Richard Jones, Cliff Shearman, Stephen D'Souza, Nikki Joule, Colin Bicknell, Duncan Ettles, Raman Uberoi, Suzanne Hughes, Sue Ward, George Kassianos, Helen Sanderson, Leanne Atkins, Gail Curran, Aisling Roberts, Simon Hardy, Mike Edmonds, Simon Hardy, Paul Srodon, Stella Vig, Richard Lane, Sarah Cooper, Ros Meek, Sharron Tansay, David Feldman

**SECRETARIAT** - Paul Bristow, James Gittings, Melissa Barnett

**APOLOGIES FOR ABSENCE** - Andrew Lansley MP, Brian Donohoe MP, Graham Brady MP, Mark Lazarowicz, Derek Twigg MP, Jane Ellison MP, Andrew Gwynne MP, Lord Ribeiro, Hywel Williams MP, Adrian Sanders MP, Bob Russell MP, Mike Crockart MP, Graham Evans MP, Robert Walter MP, Paul Beresford MP, Anne McGuire MP, Debbie Abrahams MP, David Anderson MP, Iain McKenzie MP, Robin Walker MP, Stephen Dorrell MP, Ben Wallace MP, Jim Hood MP, Anne Begg MP, Caroline Lucas MP, Alan Beith MP, George Freeman MP, Chi Onwurah MP, Steve Brine MP, Liz Kendall MP, Elfyn Llwyd MP, Sammy Millar, Jon Moss, Philip Davey, Candy Jeffries, George Hamilton, Ray Cuschieri, Huon Gray, Jai Patel, Steve McNeice, Sam Gallop, Steven Yeats, Robin Ireland, Paul Bachoo,

Tim Lees, Ian Loftus, Janet Ratcliffe, Gerard Goh, Jonothan Earnshaw, Ian Franklin, Rebecca Wilkinson, Iain Robertson, Jeanette Oliver, David Dawson

**1. INTRODUCTION FROM NEIL CARMICHAEL MP (Chair)**

- Neil Carmichael introduced the key speakers

**2. DR FERGUS JEPSON - Consultant in Rehabilitation Medicine, Lancashire Teaching Hospitals**

- Dr Jepson discussed the variations in amputation, and the reasons behind these variations.
- There was a key idea that there was a difference in outcomes depending on the patients' health and how they present and then different policies with dealing with these patients in different areas.
- Dr Jepson concluded that more research was needed.

**3. DR DARE SERIKI - consultant vascular radiologist**

- Dr Seriki presented on a project that he is currently working on, STAMP - Stop Unnecessary Amputations
- This project focuses on current pathways in referral to investigation and operation time; however it involves putting a timeline on these pathways as there are currently no national guidelines for the time taken for investigation or treatment of CLI.

**4. AGM of the Vascular APPG**

- The AGM of the group was held and it was agreed that Neil Carmichael MP would remain chair of the group, with Chi Onwurah MP and Peter Bottomley MP remaining vice-chairs.

**5. SECRETARIAT OF THE VASCULAR APPG**

- James Gittings from the Secretariat of the group gave a brief presentation on the current recommendations in the latest report of the group, and asked for feedback on these.

**6. Discussion on recommendations of the Vascular APPG's report**

- George Kassianos stressed the importance of early prevention and identification.

- Cliff Shearman thought that the group should try to focus on adding value to current guidelines.
- Richard Lane spoke from a patient perspective about the issues of breaking up successful teams, such as Kings Diabetic Foot Team.
- Martin Fox focused on the importance of early diagnosis.
- Mike Edmonds and Matt Thompson discussed the current commissioning model in place for vascular disease.
- There was further debate about changing some of the specific draft recommendations made.
- Neil Carmichael MP thanked those for contributing to the discussion and debate about the recommendations

#### **7. DR TREVOR CLEVELAND - representative of the British Society of Interventional Radiology**

- Dr Cleveland raised a number of points that he had picked up on in the meeting and from the recommendations in the report. He began by focusing on the issues surrounding interventional radiologists in regards to numbers and also organising those interventional radiologists in the best way possible.
- He focused on how hugely complex Peripheral Vascular Disease is and the complex pathways involved.
- Dr Cleveland focused on the problems around urgent imaging and intervention, and intervening more quickly.
- Dr Cleveland focused on some potential benefits from centralisation, and how this might prevent some fragmentations and involve interventional radiologists further in multi-disciplinary teams.

#### **8. PROFESSOR JONATHAN VALABHJI - National Clinical Director for Obesity and Diabetes**

- Professor Valabhji discussed his current role as National Clinical Director and the work that he had been involved in and is carrying out around diabetic foot disease and the impact of the vascular surgery service reconfiguration.
- Professor Valabhji clarified that the diabetic foot and diabetes were unlikely to be commissioned through the NHS England specialised commissioning portfolio, as most of vascular surgery is, as there will always be too great a burden of disease.
- Professor Valabhji stressed the importance of Consultant Diabetologists and Consultant Vascular Surgeons working together to optimise the care for those with diabetic foot disease.
- Professor Valabhji outlined some of the published data that suggested high volume vascular surgery centres for lower limb arterial work were associated

with better outcomes in terms of both lower mortality and lower rates of major amputation.

- Jonathan Valabhji suggested that the best option with regard vascular surgery service reconfiguration was to work within the reconfiguration framework and seek assurances for people with diabetic foot disease in need of vascular surgical intervention, which he outlined.
- These assurances include good working relationships between the hub and the spoke, rapid transfer of inpatients from spoke to hub when required, as well as arrangement for effective repatriation when necessary, vascular surgeon outpatient and inpatient sessional commitments at the spoke aligned to locality-based needs, consideration given to the need for additional diabetic foot multidisciplinary team inpatient and outpatient capacity at the hub. Also the need for information for patients about access to services and what care to expect from where, provision of inpatient haemodialysis where necessary, the need to minimise inequalities of access between spoke and hub sites, and suggested quarterly network governance meetings.
- Finally he stated that there are significant over-arching issues and other difficult issues to consider, such as whether there should be some aligned reconfiguration of multidisciplinary diabetic foot teams, and what the solution should be when vascular surgery hubs and major diabetic foot centres, such as the King's multidisciplinary foot clinic, are not co-located.

## 9. DISCUSSION SESSION

- Mike Edmonds stated the issue between differences of diabetic foot and non-diabetic critical limb ischemia.
- Cliff Shearman highlighted the importance of focusing on improving outcomes and looking to the future. Service delivery will change and we need to make services the best they can be.
- The point was made that spokes need to feel part of the network.
- Martin Fox highlighted the need for early diagnosis, and also other outcomes such as cardiovascular outcomes.
- Jonathan Valabhji stated that there are currently pilots, organised with NHS Improving Quality, considering cardiovascular outcomes for those with diabetic foot disease, and potential service improvement interventions that could improve these.

Neil Carmichael MP thanked the speakers and also those present for the interesting discussion and issues raised.

There being no further business the meeting then terminated.

Feedback on the minutes - please send to Melissa Barnett at  
[vascularappg@pbpoliticalconsulting.com](mailto:vascularappg@pbpoliticalconsulting.com)