

## PE1056/B

Mr Richard Hough  
Assistant Clerk to the Public Petitions  
Committee  
Public Petitions Committee  
Scottish Parliament  
TG.01  
Edinburgh  
EH99 1SP

Date: 4 December 2007  
Enquiries to: Sharae Glendinning  
Direct Line: 0131 623 4298  
Email: sharae.glendinning@nhs.net

Dear Mr Hough

### **Petition PE1056**

Thank you for your letter of 4 October 2007. NHS Quality Improvement Scotland's response to the points raised in the above petition is as follows:

#### **1. Mandatory assessment tools for diagnosis of DVT**

##### **Evidence based guidance to NHSScotland**

SIGN's very first clinical guideline published in 1995, dealt with prophylaxis of deep vein thrombosis (DVT). Management of DVT, including options for diagnosis, was discussed in SIGN 36 – antithrombotic therapy. The prophylaxis guideline was completely updated in 2002, and its scope was widened to include information about the association between DVT, long haul flights and thrombophilias including the Factor V Leiden gene mutation. In 2005 SIGN undertook an exercise to scope out new literature on prophylaxis of DVT. As a consequence of this, a need was identified for a guideline that specifically addressed the management of DVT as well as prophylaxis. A proposal for a new guideline on the management and prophylaxis of DVT was developed and has now passed through the SIGN topic selection process.

SIGN is currently selecting a clinical chair to lead the guideline development group, and hopes to start work on the new guideline in the next few months. The timescale for guideline development is approximately 26 months.

##### **Stocktake of current practice**

In the light of the Scottish Public Services Ombudsman's findings into the death of Katie McPherson, NHS QIS decided to undertake a stocktake of guidance and audit activities relating to

venous thrombosis prevention and treatment in NHSScotland acute services. The objectives of the exercise were:

- To collate relevant guidance to NHSScotland from national organisations (NHS QIS including SIGN, NHS Health, NHS Education, NICE, Royal Colleges, professional organisations and others)
- To identify work relating to thrombosis prevention and treatment in NHSScotland, including local protocol or guideline development, any resulting audit work and any locally produced patient information materials
- To produce an overview for publication on the NHS QIS website.

This work was commissioned from the TREATS research group which has undertaken systematic reviews in this area.

NHS QIS accepts that this work has taken longer than anticipated, as commented on by Mr McPherson in his oral presentation of the petition. This is for a number of reasons, but most importantly because it was necessary to go back to some Boards twice as it was felt to be important to ensure that the information was comprehensive.

The report makes three recommendations for NHSScotland:

- Patients in whom clinically suspected DVT is deemed to be of low probability should be given information leaflets advising them to seek medical advice if symptoms or signs increase.
- Coordinated local audit and educational initiatives should be performed by NHS Boards to ensure regular review and update of protocols.
- NHS Quality Improvement Scotland should consider development of national standards (including local specialty-specific protocols, care and national audits) for prevention and management of DVT, based on recommendations from the revision of current SIGN guidelines

The report will be circulated to all NHS Boards shortly with a covering letter from CMO and the Chair of NHS QIS. The letter will request that NHS Boards should address the requirement for written policies for prevention and management of DVT and patient information as a matter of urgency and that a response on how they are taking this forward should be sent to NHS QIS within two months.

## **2. To ensure commonality of patient guidance regarding DVT**

The stocktake found few examples of patient information materials. NHS QIS fully supports the need for consistent patient information materials to be used across NHSScotland. The covering letter to accompany the stocktake will endorse this.

## **3. Introduction of a new born screening programme for Factor V gene**

This is a matter for consideration by the UK National Screening Committee.

I hope that this information is helpful to the Petitions Committee.

Yours sincerely,

**David R Steel**  
**Chief Executive**