



National Audit of Cardiovascular Disease Prevention in Primary Care

UPCARE: 1.00 Programme name - please do not change this field.*	National Audit of Cardiovascular Disease Prevention in Primary Care
1.01 Abbreviation	CVD prevent
1.1 Contract status	Ongoing
1.2 Audit or non-audit	Audit
1.3 HQIP commissioned*	Yes
1.40 Programme unique identifier*	HQIP124
1.41 HQIP AD	JT
1.42 HQIP PM	CG
1.5 Lead organisation*	NHS Benchmarking Network
1.6 Programme homepage*	https://www.nhsbenchmarking.nhs.uk/cvdpreventlanding
1.7 Programme summary	The CVDPREVENT audit is part of a broader strategic objective outlined in the Long Term Plan to prevent 150,000 strokes, heart attacks and cases of dementia over the next ten years. Workstream 3 will prioritise working with system partners to drive CVD quality improvement at individual GP, PCN, CCG and STP/ICS level. Project outputs will support quality improvement in primary care for the prevention of CVD in England. Included in the deliverables are a selection of reports and dashboards to support organisations to identify variation, trends, and opportunities in the prevention and management of CVD conditions.
2.1 Organogram	https://s3.eu-west-2.amazonaws.com/nhsbn-static/CVDPREVENT/2026/National CVD Prevent Organogram v13.pdf
2.2 Organisations involved in delivering the programme	<p>NHS England</p> <ul style="list-style-type: none"> • Extraction of the data from GP systems. <p>Arden & Gem Commissioning Support Unit (AGEM CSU)</p> <ul style="list-style-type: none"> • Analysis of audit data including cleaning, aggregating and calculating indicators. <p>The Patients Association</p> <ul style="list-style-type: none"> • https://www.patients-association.org.uk/ • Facilitate patient involvement in the audit by organising and running a Patient Focus Group.
2.3 Governance arrangements	<p>CVDPREVENT Audit Steering Group chaired by Helen Williams NCD for CVD Prevention, NHSE</p> <p>Workstream 1: Lucy Verlander, Kathryn Salt, Jonathan Hope, Robert Danks</p> <p>Workstream 2 : Ashley Bolton, Head of Clinical Registries and Audits, AGEM</p> <p>Workstream 3: Jessica Walsh, Head of Clinical Audits, NHSBN; Alex Parry-Jones, Project Manager, NHSBN</p> <p>A data flow diagram showing the governance around the data can be found here: https://s3.eu-west-2.amazonaws.com/nhsbn-static/CVDPREVENT/2025/CVDPREVENT%20Data%20Flow%20with%20Legal%20Basis%20v4.0%2027.07.2023%20final.pdf</p>

2.4 Stakeholder engagement	<p>NHSE host, and NHSBN run, a Steering Group who meet 7 times per year to discuss the objectives of the project, the metrics that are included in the audit, the plan for dissemination and comms, risks to the project and the priorities for each line of work within it.</p> <p>The NHSBN team also engage with various stakeholders on an ad hoc basis. These stakeholders include charities, NHSE programme leaders, the National Diabetes Audit team and other condition specific stakeholders.</p> <p>Stakeholders are also kept up to date regularly through email communications, social media and via news pieces published on the CVDPREVENT webpage.</p>
2.5 Conflict of interest policy	<p>On appointment to the CVDPREVENT Steering Group members are asked to identify any actual or potential current conflicts of interest via a Declaration of Interests Form. A standing item for any new conflicts will be added to the agendas. NHSBN have a conflict of interests policy whereby identified conflicts are escalated to the Chair if necessary.</p>
3.1 Quality improvement goals	<p>The audit aims to improve care for people at risk of cardiovascular disease by looking at four key areas, identification, diagnosis, management and over treatment. By showing where systems can make improvements along the care pathway, the audit aims to contribute towards the NHS Long Term Plan goal to prevent 150,000 strokes, heart attacks and cases of dementia by 2029. Our indicators measure general practices against NICE guidelines, which set the standards for drug therapies and management guidelines.</p>
3.2 Quality improvement driver diagram	<p>https://s3.eu-west-2.amazonaws.com/nhsbn-static/CVDPREVENT/2021/simplified%20driver%20diagram%20used%20for%20website%20v4.pdf</p>
3.3a Methods for stimulating quality improvement*	<p>On-line Quality Improvement guides; Action plan template; Sharing good practice repository; Other (enter details in 3.3b below)</p>
3.3b Quality improvement supplemental information	<p>The team have created an online Data & Improvement Tool, which highlights the key areas for improvement within a certain ICS, PCN, practice etc. This will show organisations which indicators they need to make improvements in and the demographics of the people that should be focused on first. There is also an ability to compare areas so ICSs and regions can focus on those practice and PCNs that need to make larger improvements.</p> <p>As well as the Tool the team are running a Train the Trainer programme which trains up facilitators in ICSs to implement educational outreach sessions in their local practices. These are online sessions. The team plans to develop their online pages to include resources to support organisations to implement educational outreach.</p> <p>The team also publish Quality Improvement Data Packs for each ICB in England which highlights their data for four key indicators alongside top tips and resources to support improvement.</p> <p>https://www.cvdprevent.nhs.uk/quality-improvement</p>
4a. Please add the most recent date that you have reviewed and updated an online version of UPCARE Programme section on your project's website (click into the response to see pop-up guidance).	<p>04/11/2024</p>
4b. Please add a hyperlink to UPCARE Programme section on your website (click into the response to	<p>https://www.cvdprevent.nhs.uk/resources</p>

**see pop-up
guidance).***