

11th January 2021

Members of the Vascular Society of Great Britain and Ireland

Preserving Vascular Services; Covid-19 Update January 2022

I write as the services we provide to our patients are under increasing pressure as a result of rising Covid-19 cases and hospital admissions. The current wave of infection is also having a significant impact on NHS staff with many Trusts reporting staff sickness rates of 10-15%, which is also has inevitable consequences for patient care.

Over the last couple of weeks we have discussed the rapidly changing Covid-19 situation at both the Vascular Society Executive and the Vascular CRG. Despite the challenges many vascular units are managing to maintain elective and time critical vascular operating with access to critical care facilities.

The Vascular Society supports member's efforts to preserve services for our patients and recommends that where possible timeline targets for threshold AAAs, symptomatic carotids and critical limb threatening ischaemia patients, that have been set out in the Provision of Vascular Services 2021 and PAD-QIF are maintained.

More specifically threshold AAAs should undergo repair within 8-weeks, symptomatic carotid patients should undergo intervention within 14 days (ideally 7-days) of initial symptom and CLTI patients revascularisation within 5-days for emergency admissions and 14-days for those managed on an outpatient pathway.

We therefore recommend that all threshold AAAs be listed as Priority 2 (most will have already waited 4 weeks after threshold scan for cross-sectional imaging, outpatient review and MDT discussion), symptomatic carotids as Priority 1b or 2 and CLTI patients as P1b or P2.

If vascular units are unable to consistently meet these targets the Clinical Lead should be aware the escalation pathways available through their own hospital and regionally for mutual aid and where appropriate transfer of patients requiring urgent care if local capacity is not available.

The VS is here to support and advise members and we would be very grateful if Clinical Leads could feedback to secretary@vascularsociety.org.uk or president@vascularsociety.org.uk if a unit is unable to maintain services.

We also are keen support the continuation of less urgent vascular surgical services, such as treatments for varicose veins, if they can be provided through safe green pathways.

Finally we recognise that all clinical staff have had an incredibly difficult two years, but despite all the challenges have prioritised the care of our patients. Early indications in London suggest Covid-19 case numbers are starting to fall and hopefully we will be in a better position to support our staff and treat our patients by the spring.

Best wishes

A handwritten signature in black ink, appearing to read 'J Boyle', written in a cursive style.

Mr Jonathan Boyle
President VSGBI