The Clatterbridge Cancer Centre NHS Foundation Trust (CCC), 65 Pembroke Place, Liverpool L7 8YA ("CCC" or the "CW Partner")

Project Name: Clatterbridge Systemic Anti-Cancer Therapy (SACT) Education and Toxicity Management Nurse

Project Summary:

The Collaborative Working Project (CWP) aims to free up capacity within the breast cancer pathway with the addition of a dedicated new role (the "**Systemic Anti-Cancer Therapy Clinical Nurse Specialist (SACT CNS)**") providing pre-treatment education and optimisation, and support for the management, pre-assessment, review, education, and follow-up of metastatic breast cancer (mBC) patients who are eligible for Systemic Anti-Cancer Therapy ("**SACT**") therapies. There is a national attention on the stability of breast oncology services and an urgent need to pilot new workforce options and ways of working to manage increasing demand. Demand is increasing at an unprecedented rate within breast oncology services at the Clatterbridge Cancer Centre NHS Foundation Trust (CCC).

Specifically, by using established Process Mapping methodologies[1] to integrate the new workforce role into all aspects of the service, the CWP aims to:

- Improve patient outcomes and experience by having a dedicated single point of patient contact to educate patients in relation to the available SACT options in the UK and conduct the relevant monitoring required e.g., blood glucose, electrocardiogram (ECG) monitoring, respiratory monitoring, cardiac function. At present, SACT therapies which require these monitorings could potentially be delayed because of the service implications.
- Provide a single point of contact to the wider clinical team to educate and provide ongoing advice and guidance so that all National Institute for Health and Care Excellence (NICE) approved treatment options are available to the patient
- Decrease the clinic burden on the current workforce and increase their satisfaction, reducing the risk of workforce burnout
- Optimise the proportion of duties performed by each healthcare professional (HCP) that are most appropriate to their skillset
- Gather relevant service metrics to develop a business case for the ongoing employment of the new workforce role beyond the scope of this project
- Reduce unplanned medical reviews and admissions

[1.]The Reimagining Care Pathways service offer delivered by Novartis and utilising the 'Process mapping – a conventional model' and 'Stakeholder Analysis' guides from the NHS England Online library of Quality,Service Improvement and Redesign tools https://www.england.nhs.uk/sustainableimprovement/qsir-programme/qsir-tools/ (Accessed 30-Jun-2023).

Planned Milestones:

Milestone Description

1 Kick off meeting.

  Confirmation of the employment of SACT CNS; on-boarding and familiarisation.

2 Implement in-patient strategies/protocols and procedures governing the clinical operations of the Breast Cancer Service. Begin clinical operations according to the developed protocols, monitor and collect data.

3 Novartis Solutions Implementation Manage (SIM)[2] to conduct Reimagining Care Pathways.

4 Carry out 6 months of clinical operations according to the developed protocols, CCC to monitor and collect data, provide anonymised report containing such data to Novartis.

5 Carry out 12 months of clinical operations according to the developed protocols, CCC to monitor and collect data, provide anonymised report containing such data to Novartis.

6 Carry out 18 months of clinical operations according to the developed protocols, CCC to monitor and collect data, provide anonymised report containing such data to Novartis.

7 Develop business case to support future funding by the CCC to continue with the service. Submit final report to Novartis.

  Publish outcomes in line with the Association of the British Pharmaceutical Industry (ABPI) guidelines.

[2] The Solutions Implementation Manager role for Novartis is a non-promotional role leading on the development of collaborative working projects in accordance with the ABPI Code of Practice

Expected Benefits:

Anticipated Benefits to Patients:

- Increased access to equitable, consistent, and standardised care
- Improved patient experience and a more robust informed consent process i.e., truly informed so that patients understand their options and next steps
- Increased access to education on mBC and treatments to improve adherence and consequently improve patients' outcomes, supported by a personalised care plan
- Reduce patient waits in the clinic given extra capacity created by new workforce role
- Reduce unplanned medical reviews and admissions

Anticipated Benefits to the Organisation:

- Increase the overall quality of care and improve equity of access to specialist care for patients with mBC requiring treatment initiation, evaluation, and monitoring
- Provision of subject matter expertise to educate other members of the clinical team on treatment options
- Provide a single point of contact for patients, thereby reducing the potential for unplanned calls being received by the wider clinical team
- Free up consultant capacity for clinical activities that are unique to their skillset
- Reduce use of emergency triage line and unplanned admissions
- CWP would highlight CCC as an exemplar in understanding and optimising the utilisation of healthcare resources in a clinical setting, specifically the diagnosis treatment and management of mBC

Anticipated Benefit to Novartis:

- Better understanding of overall HCP and patient needs
- Optimal use of medicines in line with local/national guidance (including Novartis medicines) in appropriate patients.
- Ethical, professional, and transparent relationship between Novartis and the Healthcare Organisation

Start Date & Duration: July-2023 for 24 months

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