

Buckinghamshire Healthcare NHS Trust, Mandeville Rd, Aylesbury HP21 8AL

Project Name: Buckinghamshire Healthcare - Medical Day Unit Model of Care for Lipid Lowering Population Health Programme

Project Summary:

Buckinghamshire Healthcare NHS Trust (BHT) (the “CW Partner”), in collaboration with the Buckinghamshire, Oxfordshire and Berkshire West Integrated Care System (“BOB ICS”), have identified barriers in system-wide adoption of population health lipid management approaches where methods of therapy initiation have previously been associated with a specific or singular healthcare sector. Specifically, the CW partner has identified barriers to the primary care execution of activities historically delivered within the secondary care setting, e.g., delivery of injectable therapies or the execution of patient injection training for suitable products, and the ability to deliver these at scale and pace. The result of this activity imbalance has resulted in the contribution of treatment and review backlogs at the CW Partner.

The CW partner has sought to alleviate challenges in patient identification and workforce capacity to expedite patient management and ASCVD risk reduction by the development of a new ASCVD lipids strategy.

This project aims to embed a new approach to lipid management by the implementation and utilisation of a population health search tool to facilitate identification, cohorting, and subsequent implementation of patient review and patient management via a Medical Day Unit Model of Care.

Project Aims:

- Demonstrate the impact of the utilisation of the Population Health Search tool technology solution (Graphnet) to enable secondary care organisations to identify, triage and manage patients with primary care records.
- Establish and evaluate a novel approach to patient review to reduce the burden on secondary care clinicians, utilising a previously defined BHT ASCVD Protocol Proforma.
- Reduce the backlog of referrals into secondary care.
- Establish a Medical Day Unit model for the adoption of therapy initiations historically delivered by the secondary care lipid service.
- Demonstrate a new model of integrated care within the Integrated Care system to improve speed and efficiency of patient treatment via a population health approach.

In order to achieve this the Project aims to:

- Increase capability of the lipid service to identify and stratify the patients with ASCVD via the commissioning and utilisation of a population healthcare tool for optimising CVD prevention. This tool will enable the identification and stratification of Buckinghamshire patients based on previous ASCVD conditions, medication use, blood tests (including LDL-C and total cholesterol) and deprivation scoring. This will be based upon the shared care record.
- Identify ASCVD patients with sub-optimal treatment, who are not achieving a target LDL-C as per local guidance.

- Embed a sustainable model of patient review to support increased efficiency and capacity in ASCVD reviews via individual and personalised patient interactions; offering counselling on potential treatment options, lifestyle advice and adjustments. Long term continuity of this review model will be achieved by the addition of additional capacity to support referrals from primary care.
- Develop and evaluate a model to enable administration of subcutaneous therapies in both outpatient and community settings. Potential treatments for post- event ASCVD patients with an elevated LDL-C within the BOB ICS lipid guideline includes subcutaneous therapies. This project will develop a safe and effective model for the administration or delivery of injection training required, as per license based, upon treatment utilised (as appropriate) for these therapies.

Planned Milestones:

1. Graphnet Search Tool contract signed
2. Confirmation of recruitment of additional roles as defined in the contribution section
3. Confirmation of clinical and operational pathway, policy and protocol creation, and readiness to begin the clinical activity (CW Partner shall ensure that the clinical staff covered by the Novartis Financial Contribution are appointed, trained and ready to begin clinical activity). Graphnet configuration complete and completion of initial cohorting processes
4. Collection of baseline data, in line with the Project Outcome Measures. Complete Graphnet Clinical Audit of population (Cohorting) and initiation of clinical activity
5. Collection & submission of 3 months clinical activity data. Project Review meeting to discuss project progress
6. Collection & submission of 6 months clinical activity data. Project Review meeting to discuss project progress
7. Collection of data pertaining to incident ASCVD population identified via Primary Care. CW Partner and Novartis to conduct a joint review of any further requirement for additional virtual medical appointments and accessibility to medical day unit
8. Collection & submission of 9 months clinical activity data. Project Review meeting to discuss project progress
9. Collection & submission of 12 months clinical activity data. Project Review meeting to discuss project progress
10. Collection of cohort annual LDL-C measurements obtained within eligible proportion of the cohort
11. Development of an options paper (precursor to business case) to continue the service offered by this project
12. Analysis of CWP data, submission of Final Project Report, submission of Outcomes Summary

Expected Benefits:

Anticipated benefits for patients:

- Faster access to all lipid lowering therapies in line NICE recommended therapies across the locality.
- Reduced requirement for face-to-face medical engagement.
- Reduction in requirement for primary care involvement.
- Optimisation of a patient's LDL-C is associated with a significant reduction in future cardiovascular events and may be associated reduction in morbidity/mortality.
- Reduction in the impact of health inequality in patient access to ASCVD treatment

Anticipated benefits for partner organisation:

- Development of a cardiovascular population health tool will support future approaches in long term

conditions management thus reducing health inequalities and reducing emergency attendances.

- Demonstrate the impact of system wide visibility of patient characteristics.
- Improvement to lipid lowering pathways with reform of pathway management streamlining the role of lipid specialists.
- Demonstration of the benefits of population healthcare for the Buckinghamshire population, supporting further population healthcare work in other specialties.
- Increase national awareness of Buckinghamshire's work in population healthcare and preventative health.

Anticipated Benefits for Novartis:

- Demonstration of benefits of population health searches in detection of patients who could benefit from NICE approved therapies.
- Demonstration of collaborative working across a place-based system to rollout novel therapies.
- This project will support Novartis' reputation and vision to make an impact in patients' life by enhancing productivity and efficiency within the NHS.
- Ethical, professional, and transparent relationship between Novartis and the NHS.
- Better understanding of overall customers' and patients' needs
- Optimal use of NICE approved medicines (including Novartis medicines) in appropriate patients.

Start Date & Duration: September 2023 for 18 months

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