

## June 2014

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### **Accordion:**

The East of England Pharmaceutical Alliance for Respiratory disease (EPA)

### **Public Executive Statement**

### **Joint Working Agreement Terms of Reference for The East of England**

### **Pharmaceutical Alliance for Respiratory disease (EPA)**

This project is comprised of an agreement between Industry Partners and East of England Respiratory Strategic Clinical Network to work as a cohesive unit in partnership with the respiratory Clinical Strategy leads from the East of England Respiratory Strategic Clinical Network within the respiratory disease area with a shared aim to improve the quality and effectiveness of care delivered to respiratory patients.

Novartis is one of 8 industry partners who have signed under the Terms of Reference for this Joint Working Project.

The working members will be known as the East of England Pharmaceutical Alliance for Respiratory disease (EPA) Joint Project Group.

There is pooling of expertise in this project and the terms of agreement are in place for a maximum of two years in accordance with the ABPI Code of Practice certification arrangements.

The length of arrangements, the potential implications for patients and the NHS, together with the perceived benefits for all parties, together with a mutually agreed exit strategy, will be clearly outlined and agreed between the parties before commencement of individual joint working projects.

Hull and East Yorkshire Hospitals NHS Trust as part of the clinical Network with York University

**Joint working partner(s):** Hull and East Yorkshire Hospitals NHS Trust as part of the clinical Network with York University and Novartis Pharmaceuticals

**Project name:** HMRN database audit on clinical management, resource utilisation and outcome in polycythaemia vera (PV)

**Project period:** 12 months

**Joint working project summary:**

Novartis to work in partnership with the NHS, Haematological Malignancy Research Network (HMRN) and York University to deliver an audit on PV which will address the data gaps for PV treatment and service and enable clinicians/the NHS to identify ways to improve care for these specific cohort of patients.

The data obtained may also be used to provide realistic health economic inputs for patient demographics, current treatment pathways and outcomes for future HTA submissions for NICE/SMC/AWSG appraisals.

**Expected patient outcomes for this project:**

A better understanding of the current management and outcomes for PV patients will enable clinicians/the NHS to assess and improve PV patient care.

The additional new data enabling realistic HTA submissions can help facilitate patient access to new innovative medicines.

**Start date and duration:** June 2014 – June 2015 - 12 months

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