

Joint Working Agreement - Executive Summary

1. Project Name:	New Models of Complex Adjuvant Care in Patients with early Breast Cancer
2. Organisations involved with this Joint Working Project are:	Lilly UK and The Christie NHS Foundation Trust
3. The objectives for this project are:	<p>Novel adjuvant breast cancer therapies increase demands on amount and intensity of clinical resource required to manage patients in the longer term. The ‘standard plan’ following chemotherapy and / or surgery of hormone therapy and mammograms rarely requires any clinical review or intervention. However, new adjuvant therapies require monitoring of bloods and toxicities (especially given the higher side effect burden in younger patients) as well as medicines optimisation and repeat prescribing. As the number of novel therapies in the adjuvant space increases, so will the pressure on oncology services.</p> <p>This project aims to implement a new, future proof service for breast cancer patients on adjuvant therapy, able to cope with the increasing resource demand that new and future adjuvant treatments for complex breast cancer patients will likely place on services.</p> <p>The new model of care is to be developed following extensive appraisal of the different delivery options available at each step of the clinical pathway, including digital health and new technology solutions.</p> <p>Options for blood testing, toxicity scoring, clinical review and prescribing will be mapped, modelled, and evaluated using a lean six sigma approach, with considerations given to both patient and health care professional preference as well as cost and efficiency.</p> <p>The complex adjuvant care service will be piloted following the above scoping and planning (estimated April 2022) and will run for a 12-month period under this project with interim results collected at 3 and 6 months allowing for continuous improvement. Following a successful pilot, a business case will be made for the piloted service to become standard clinical practice no longer part-funded by Lilly.</p> <p>It is believed that the outputs and learnings from this project will be beneficial to other NHS organisations with breast cancer services facing the same challenges, and efforts will be made under this project to disseminate results, share best practice, and publish outcomes.</p> <p>This project may also serve as a blueprint to future service design in other therapy settings which are also facing resource challenges.</p>
4. Roles and Responsibilities, including any funding	Lilly UK <ul style="list-style-type: none"> ● Joint development (with The Christie) of the Project Initiation Document.

Joint Working Agreement - Executive Summary

- Certification of all documents required for a Collaborative Working (Joint Working) Agreement, under Clause 20 of the ABPI Code of Practice 2021 – Collaborative Working.
- Project Management support as required following a Prince 2 approach, including Stakeholder engagement planning, managing timescales and costs, communication planning and maintaining project documents.
- Co-development (with The Christie) of core project documents such as plans and registers.
- Quality Improvement & process efficiency consultancy using Lean Six Sigma methodology
- Facilitation of workshops as required.
- Data analysis of service evaluation metrics
- Part funding of additional resource requirements for delivery of the project such as a project manager, HCP to lead clinical management element of project and medical writer.
- Joint dissemination of results including publication in relevant trade and / or clinical press. Publication on Lilly UK corporate website and in the ABPI repository
- Joint commitment with The Christie to demonstrate any benefits realised during this project to the NHS on a wider scale.

*At no point will Lilly UK have access to any patient identifiable data

The Christie NHS Foundation Trust

- Joint development of project initiation documentation
- Understanding and navigation of Trust process for entering into a collaborative Agreement with Lilly UK
- Identification of suitably qualified project manager to oversee project delivery (part funded by Lilly)
- Management of interdependencies between other relevant projects, namely home blood monitoring.
- Provision of relevant HCPs to participate in workshops
- Development of 'best practice guide' (title TBC) following options appraisal outputs.
- Pilot and implementation of new clinical pathway. Responsibility for all clinical decisions and adverse event reporting.
- Data analysis at stage reviews and project end.
- Lead change management within the Trust and wider NHS
- Jointly (with Lilly UK) publish results of the project in relevant clinical and trade press.

Project Costs:

Total Est £212,805.47

		Resource	Cash
Lilly 50%	£106,402.74	£19,566.99	£83,487.99
Christie 50%	£106,402.74	£86,835.75	£22,914.76

Joint Working Agreement - Executive Summary

5. The expected benefits for patients on delivery of this project are:	<ul style="list-style-type: none">• Help facilitate management in line with treatment standards.• Digital interventions may result in a reduced need for ‘in-person’ hospital appointments for clinically well patients.
6. The expected benefits for the partner organisation(s) on delivery of this project are:	<ul style="list-style-type: none">• Re-design of patient management pathway leading to sustainable service• Improved service to become ‘business as usual’
7. The expected benefits for Lilly UK on delivery of this are:	<p>This project would provide understanding of an optimal adjuvant treatment pathways which could be shared with other NHS organisations to support future Lilly drug launches in the UK.</p> <p>Publication of results in collaboration with a leading change centre such as The Christie may benefit Lilly’s Oncology brand reputation.</p>