Collaborative Working Agreement Summary

1. Project Name:	From presentation to diagnosis. Characteristics of an optimal pathway for patients with memory issues in primary care.
2. Organisations involved with this Collaborative Working Project are:	Eli Lilly and Company Limited (Lilly) Essex Partnership University NHS Hospital Trust (EPUT) & UCL Partners Limited (UCLP)
3. The objectives for this project are:	Understanding the characteristics of an 'optimal' pathway in terms of time to diagnosis as well patient preference, efficiency and speed of diagnosis. **Primary Project Aim:** This project aims to retrospectively map and understand the variations in clinical journeys of 150 patients from initial presentation in primary care through to diagnosis for patients undergoing memory assessment. A retrospective audit will be conducted to: - Examine the pathways of patients who have completed the memory assessment process, identifying key stages and decision points to reach a dementia diagnosis or discharge - Review cases where patients were referred to specialist services with a suspected dementia diagnosis but were later found not to have an underlying Alzheimer's Disease (AD) aetiology, including an analysis of initial screening tools, methods, and the healthcare professionals involved **Secondary Outcomes:** **Pathway Mapping and Variation Analysis** - Document existing pathways from referral to diagnosis - Map variations due to referral quality, referral criteria, and referring healthcare professionals (HCPs) - Examine differences in service involvement, such as Multi-Disciplinary Teams (MDTs), imaging, memory services, and GP-based diagnoses **Efficiency & Bottleneck Identification** - Identify critical time points and bottlenecks that delay diagnosis - Pinpoint steps that contribute to inefficient or inappropriate patient journeys (e.g. unnecessary referrals or scans) - Determine characteristics of the most efficient and effective pathways for both patients and the NHS **Pathway Improvement Opportunities** - Analyse the use, impact and variation of screening tools - Assess HCP skill make-up and identify upskilling needs - Evaluate the impact of ethnicity and other demographics on pathway performance

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	Data & Insight Generation • Develop a comprehensive data capture framework to systematically track patient journeys and key decision points • Use findings to inform future improvements in guidance, Standard Operating Procedures (SOPs), and service models, aiming to enhance diagnostic efficiency and patient experience
4. Roles and Responsibilities, including any funding	**Lilly** • Lead the development of project set up documents required by the Association of the British Pharmaceutical industry (ABPI) and the certification of these documents • Co-development of all core project delivery documents such as project plans and registers • Lilly will be responsible for the contracting and management of a specialist 3rd party to provide data analysis, insight development and visualisation support • Provide project management support by a qualified project manager including project documentation maintenance, interim data analysis to trigger gate reviews, scheduling regular project meetings and gate reviews • Provide a certified briefing guide to any Lilly person with a promotional role on their non-promotional role within this project • Meeting facilitation of steering committee and / or workshops if and when required • All materials developed under this project will require review and approval by Lilly before use, this includes and information for patients, media and social media. A minimum of 2 weeks is needed for review of materials • Data capture sheet development • Support data analysis (patient confidentiality will be maintained at all times) • Healthcare Professional (HCP) questionnaire / survey development support and analysis of responses • Critical path mapping and visualisation: lead on the creation of an infographic and visual representations of the mapped pathways • Co-lead development of insight reports • Publication of certified final results in relevant press, on the Lilly UK corporate site and as a case study on the ABPI case study repository so that other NHS organisations can benefit from learnings of the project • Lilly will never be in receipt of any identifiable patient data. Lilly will only receive information at an aggregate, anonymised level pertaining to successful project delivery • Strategic oversight and support for the project • Development of tools to support similar initiatives in other health care organisations (if applicable) **EPUT** • Co-development of Project Initiation Document

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- EPUT Governance and contracting
- Lead creation of project steering group and source membership from key stakeholders
- Stakeholder engagement and management
- Support data collection planning and lead data provision and collection
- Collation and structuring of non-identifiable metadata from patient record to supplement dataset
- Have necessary data sharing in place to share data with UCLP and any Lilly contracted 3rd party for data analysis production of insights reports and maps (ensuring patient anonymity)
- HCP survey co-development, piloting and dissemination
- Dissemination of insights for future service planning recommendations
- Support publication of project outcomes
- Provide clinical input and expertise
- Optimisation of care pathways to ensure early diagnosis and timely access to appropriate interventions, including medicines, and multidisciplinary services, in alignment with clinical practice and recognised national and local guidelines

UCLP
- Co-development of Project Initiation Document
- UCLP Governance and contracting
- Stakeholder management support
- Lead mapping of data collection planning
- Support / facilitation of stakeholder events and workshops as required
- Lead on inputting anonymised data into the data capture sheet ahead of analysis
- Data analysis of pathway data provided by EPUT
- Lead on data collection protocol and collection plan development
- Co-lead development of insight reports
- HCP interview results analysis
- Consider where innovation could be leveraged to solve blockers within the pathway
- Project management including development and maintenance of core project plans and registers required to deliver the project
- Support publication of project outcomes
- Support preparation of data sharing agreements and data protection impact assessments

Project Finances
- Total Project staffing costs = £47,412
- Lilly staffing costs = £9,428
- EPUT staffing costs = £11,527
- UCLP staffing costs = £26,412
- Lilly cash funding = £14,278 paid at project start to EPUT

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5. The expected benefits for the partner organisation(s) on delivery of this project are:	**EPUT** ● Increased efficiency and resource optimisation: identifying and eliminating unnecessary steps, appointments, and scans will free up valuable clinical time and resources, leading to more efficient service delivery ● Improved referral quality: Insights into GP referral practices will facilitate better communication and education for primary care, leading to higher quality referrals ● Improved staff morale: streamlined processes and reduced frustration for staff dealing with inefficient pathways ● Data-driven decision making: The project will provide robust data and insights to support evidence-based decision-making for future service improvements ● Support education and training needs: insights will help the Trust understand where training is needed both in house and with key partners ● Understand service gaps **UCLP** ● Strengthened partnerships: deepening collaboration with Lilly and EPUT ● Knowledge generation: gaining valuable insights into dementia care pathways, which can be disseminated and applied to other healthcare challenges ● Potential for scalability: the findings and methodologies developed could be scaled and applied to other regions or disease pathways ● Enhanced reputation in innovation: reinforcing UCLPs' position as a leader in healthcare innovation and pathway optimisation ● Contribution to national health priorities: directly contributing to national efforts to improve dementia diagnosis and care
6. The expected benefits for Lilly UK on delivery of this are:	Lilly is committed to improving healthcare for patients and supports improvement projects across the UK. See Our Partnerships page on the Lilly UK corporate website for more information. This project will support understanding of how to ensure patients who may have undiagnosed AD access the correct care more quickly. The insights, as well as the outputs developed by this project may be shared by Lilly with other NHS organisations. Understanding the Alzheimer's Disease (AD) patient pathway can help optimise it, leading to better care for patients. By improving the pathway, more patients can receive the approved treatments they are eligible for, and they can get these treatments more quickly. As a pharmaceutical manufacturer of medicine in this therapy area, optimising care pathways may indirectly support the prescribing of Lilly medicines for eligible patients, if in line with recognised national and local guidelines and where clinically appropriate.