

Joint Working Agreement - Executive Summary

1. Project Name:	Slough PCN Insulin Mentorship for clinical pharmacists
2. Organisations involved with this Joint Working Project are:	Farnham Road Practice, Slough
3. The objectives for this project are:	<p>The pharmacists are now managing oral medication clinics to support the GP's. Stage two of their objectives will be to independently manage Insulin initiation and optimisation clinics.</p> <p>Main objectives are:</p> <ul style="list-style-type: none"> • To provide insulin clinics in a local setting with a clinical pharmacist • To provide mentorship with a Band 8 DSN nurse consultant to assess and support the confidence of two clinical pharmacists to manage insulin initiation and optimisation clinics. • To revisit and refresh their knowledge of insulin training from TOPICAL 2. • To proactively audit their practice data to identify patients suitable for insulin initiation. • Provide an initial 'safe classroom environment' to discuss case studies, insulin selection and patient dialogue with the mentorship nurse. • Arrange clinics and re-call of patients suitable for insulin • Clinical pharmacists to start Insulin with patients observed by the DSN.
4. Roles and Responsibilities, including any funding	<p>Roles and Responsibilities of Lilly UK:</p> <ul style="list-style-type: none"> • Provide national data sets to baseline and measure NDA and QOF using publically available sources and Vantage data set at agreed time points through the project. • Finance the nurse consultant, band 8 role to observe the clinics • Facilitate the requirements of the band 8 nurse consultant using six sigma tools and skills, to observe the clinical pharmacists and thereby ensuring a governance structure is in place with the lead practice for indemnity insurance. • Support a final report for the practice to assess the benefit of using clinical pharmacists as an alternative model alongside usual care ie. Local DSN service • Support a business case to build in a sustainable model for mentorship with the project lead. <p>At no point during the project will Lilly have access to any patient identifiable data.</p> <p>Roles and Responsibilities of Partner Organisation:</p> <ul style="list-style-type: none"> • Clinical pharmacists to arrange diabetes clinics with the nurse consultant and the project lead Dr Nithya Nabda to retain sole responsibility for all

Joint Working Agreement - Executive Summary

	<p>prescribing decisions and ongoing care of their patients. To utilise the skills of the nurse consultant for classroom training and observation only.</p> <ul style="list-style-type: none"> • To build a business case for future funding required for mentorship based on the potential savings achieved from the new service model. <p>Given the resource and workforce capacity issues within the local DSN service and Slough PCN, there are currently no funds allocated to provide diabetes mentorship. The DSN identified to mentor the clinical pharmacists is from a neighbouring CCG.</p> <p>Funding for the nurse consultant band 8 is based on agenda for change rate of £44,606 per annum @ £105/hr. Ref 3. https://nursingnotes.co.uk/agenda-for-change-pay-scales-2019-2020/</p> <p>£735 to be paid by Lilly on 10th Oct, 24th Oct, 28th Nov, 9th Jan and 16th Jan Total Mentorship cost £3,675</p> <p>Each clinical pharmacist is allocated six training days from the PCN for TOPICAL training. The release of pharmacists from clinical work load is provided without backfill to the GP surgery. Future sustainability for mentorship will be built into a business case for the consideration of East Berkshire CCG as a result of start up funds provided by Lilly.</p>
5. The expected benefits for patients on delivery of this project are:	<ul style="list-style-type: none"> • Care closer to home, reduced waiting times for first and follow up appointments, faster access to medication and control of condition. • A more holistic approach to care with the ability to assess other issues for the patient e.g. polypharmacy or hypo risk medications • Internal referral for other co-morbidities related to diabetes e.g. Blood pressure or cholesterol management.
6. The expected benefits for the partner organisation(s) on delivery of this project are:	<ul style="list-style-type: none"> • A new and enhanced model of care to provide an alternative and complimentary pathway to the existing DSN service. • Improved access to existing DSN service for complex patients. • GPs can focus their skills where they are most needed, for example on diagnosing and treating patients with more complex conditions. This helps GPs to manage the demands on their time. • Reduced paperwork for the organization by keeping the patient in house. • Ability to address the wider components of a patients needs and comorbidities rather than a referral for single assessment of disease.

Joint Working Agreement - Executive Summary

7. The expected benefits for Lilly UK on delivery of this are:

- Appropriate use of diabetes medications (which may include Lilly diabetes medicines) strictly adhering to local formulary guidelines currently in place – right patient, right place, right time
- Opportunity to understand patient flow throughout the type 2 patient pathway across Slough PCN.
- Opportunity to demonstrate partnership working with the NHS
 - Publication of the project outcomes would demonstrate Lilly’s integrity and commitment to the NICE and NHS England guidance of putting the patient at the centre of treatment decisions, and alignment to current national diabetes strategy