

Joint Working Agreement Summary

1. Project Name:	Pro-Active Registry Management (PARM) Obesity Risk Stratification Project.
2. Organisations involved with this Joint Working Project are:	Burmantofts, Harehills and Richmond Hill Primary Care Network (BHR PCN) and Lilly UK.
3. The objectives for this project are:	<p>To support the NHS and clinicians to risk stratify adults living with obesity, Lilly is developing a non-promotional Pro-Active Registry Management PARM Obesity tool (PARM O). Once developed, it is hoped that PARM O will support primary care providers to better understand their adult patient population living with obesity.</p> <p>Lilly’s ambition is to make the PARM O tool available as a donation to the NHS nationally. As part of the development of the tool, Lilly is seeking NHS partners with which to co-design and test the prototype solution. This requires the involvement of several practices, to download a prototype of the tool and share feedback on its utility and functionality. Lilly and the NHS will together be designing the tool with the intention that it will support primary care to identify patient cohorts, supporting patients to be assigned to the most appropriate clinical pathway.</p> <p>The project aims to support implementation of locally designed pathways through use of PARM O prototype, as well as assessing their impact. The intention is that PARM O will provide primary care teams the ability to evaluate the impact of interventions by seeing the “before and after intervention” view of their patient cohorts.</p> <p>For instance, the intention is that PARM O will help quantify:</p> <ul style="list-style-type: none"> • Service delivery impact: number and type of weight management discussions or interventions conducted (in person vs digitally). • Service delivery impact assessment, looking at Impact on healthcare service resource utilisation and health metrics. • Reduction in waiting list/waiting time. <p>This project has two arms.</p> <p>A) Explore what the provision of Primary Care Weight Management (WM) services could look like and map out appropriate pathways. This includes looking at the current service provision and identifying where there are unmet needs, barriers to service provision and gaps in service for ‘future state’ pathways to be developed.</p> <p>B) Development of a PARM O tool to help support defining patient cohorts and support Health care professionals (HCPs) in being able to refer the patient to the most appropriate service pathway.</p> <p>BHR PCN will collaborate with Lilly to test and support the development of PARM O and community-based weight management services in primary care.</p> <p>The main project objectives are</p> <ul style="list-style-type: none"> • Map ‘As-is’ current service provision including barriers and gaps to service, with contributions from a broad range of HCPs across the PCN. • Map ‘To-be’ WM service pathways with appropriate wrap around support for adult patients to be treated closer to home. • To validate the PARM O tool and provide feedback to Lilly.

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4. Roles and Responsibilities, including any funding

Lilly UK.

- Joint development of all documentation required for a Joint Working Agreement (JWA) under Clause 20 of the ABPI Code of Practice 2024– Collaborative Working.
- Project Management support as required such as minute taking and dissemination, maintaining project logs, stakeholder engagement activities.
- Responsible for the organising of regular project group meeting and gate / stage reviews.
- Mapping of current clinical pathways ‘As-is’ and ‘To-be’ including onward referral criteria and new service provision considering barriers, challenges and gaps in service.
- Data analysis of current waiting times and demand of current service provision.
- Provision of PARM O prototype and relevant training.
- Review of materials developed under the course of the project and certification as required in line with the ABPI code of practice prior to their dissemination.
- Facilitation of any workshops required to implement the project namely stakeholder engagement meetings.
- The JWA executive summary will be publicly available on the Lilly UK corporate website before project is implemented.
- Joint dissemination and ownership of final results in the form of a certified report, including publication in relevant trade and / or clinical press within 6 months of project completion.
- Lilly to support in creating poster / presentation / publication of any benefits realised because of this joint working project and relevant certification of materials.
- All materials produced for this project must be certified by Lilly as per ABPI Code of Practice.
- Co-development of a plan for wider adoption of the new models of care both within the Integrated Care Board (ICB) and the wider NHS.
- Lilly will have no influence over any prescribing or clinical decisions.
- Lilly will not have access to any patient identifiable information at any point in the project. The PARM O tool does not extract any data from the practices participating in the testing and co-development of the tool. Data analysis occurs automatically within the Excel-based tool, without any data transfer or processing by Lilly or any third party.
- Produce and certify feedback survey to collate the feedback on the usability of PARM O and analyse the data provided and share the results.
- Disclosure of value is published annually on ‘Disclosure UK’ website.

BHR PCN.

- Understand and manage governance process for entering into a JWA with the pharmaceutical industry.

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	<ul style="list-style-type: none"> Identification of pilot GP practices, and the engagement of their primary care teams who will lead on the project. Any clinical decisions made during this project should be in line with existing local and/or national clinical guidelines. Install and test PARM O prototype in dedicated practices across the PCN Provide feedback to Lilly of the usability and functionality of the PARM O prototype. This will be in the form of a questionnaire (developed and certified by Lilly) as well as the attendance of a stakeholder workshop. Share learnings across the wider ICB to support other practices in implementing the PARM O tool (once the final iteration is ready and approved to be provided as a Donation funded by Lilly to the NHS) Stakeholder engagement and management across BHR PCN's. Provision of anonymised, aggregate data to Lilly as required for the purposes of this project. Provision of relevant HCPs, management personnel and administration staff to run and attend project workshops. Co-development of a plan for wider adoption of the new models of care both within the ICB and the wider NHS Co-development of Health Care Professionals (HCP) and patient experience questionnaires if required. Joint dissemination and ownership of final results in the form of a certified report, including publication in relevant trade and / or clinical press within 6 months of project completion. 'Pilot' new service models of care using PARM O to support with risk stratifying patients to the right patient pathway and share findings. <p>Funding arrangements Total Project Costs £220,925 Lilly contracted staff and PARM O tool costs £20,925 Lilly cash funding to BHR PCN £100,000 payable at project start. BHR PCN Contracted Staff costs £100,000.</p>
5 The expected benefits for the patient on delivery of this project are:	<ul style="list-style-type: none"> Increased referral of eligible adult patients to the most appropriate weight management pathway. Care delivered closer to home through an increased management of Obesity by primary care teams. Reduction of waiting times to start/referred to an appropriate weight management program/ service provision.
6. The expected benefits for the partner organisation(s) on delivery of this project are:	<ul style="list-style-type: none"> Incorporating the PARM O tool into clinical practice, following validation through this project, will allow HCP's to better understand their population in relation to WM. This will allow referral of patients to the most appropriate pathways in line with National Institute of Health and Care Excellence (NICE) guidelines. Providing HCPs the ability to capture baseline and post-intervention metrics to assess the impact of new models of care for obesity. Mapping out current and future pathways for WM provision will bring together numerous stakeholders across the PCN to align their thinking of what future pathway provision could look like and agree on how this can be realised so that they can have a system wide approach to the management of obesity in line with NICE guidelines.

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

- This project will enable Lilly to develop and validate PARM O which will be provided as a donation to other NHS Organisations at a national level.
- Should Lilly decide to replicate this project in other NHS organisations, subject to separate approval, it will further reinforce Lilly's reputation to be a valued partner to the NHS in innovation and may strengthen the Lilly brand reputation. Publication of this project will further demonstrate Lilly to be a partner in innovation with the NHS.
- This project will give valuable insights into different models of community care for adult patients living with obesity that Lilly may use as the basis of further Joint Working projects, or Donations of Service aimed at optimising obesity care.
- Lilly will have no influence over any clinical and/or prescribing decisions made during this project and any prescribing of medicines is expected to be in line with existing local or national guidelines. As a pharmaceutical manufacturer of an obesity medicine, an indirect result of optimising care pathways may be that Lilly sees a potential increase in the prescribing of Lilly medicines for eligible patients where clinically appropriate.