NHS
The Newcastle upon Tyne Hospitals
NHS Foundation Trust

sanofi

Final project report

A Collaborative Working Project between Sanofi and the Newcastle upon Tyne Hospitals NHS Foundation Trust to review and improve the homecare prescription pathway within the Hospital Trust.

OUTCOMES ACHIEVED AND SUCCESSES:

The overall **aim** of the Newcastle upon Tyne Hospitals NHS Foundation Trust working in partnership with Sanofi was to improve the homecare prescription pathway within the Hospital Trust.

The **objectives** of the collaborative working project were to:

1. Map and review homecare prescription pathway and make recommendations for pathway improvements to the Steering Group. Develop and implement an Action Plan of the agreed pathway changes.

2. Develop a database to provide a central communication mechanism for prescription maintenance of homecare patients for all directorates across the Hospital Trust.

3. To develop a methodology to monitor the appropriateness of medicines pricing structure within the 3rd party Outpatients Pharmacy Department (OPD) on the shared CMM contracting system.

Due to significant capacity pressures and other priorities within the Trust the project ended early in March 2025 as it was no longer possible for Newcastle Hospitals Pharmacy Department to provide input into the project.

Whilst the project was not completed, below is a summary of the key outcomes that were achieved from the project.

Develop a methodology to monitor the appropriateness of medicines pricing structure within the 3rd party Outpatients Pharmacy Department (OPD) on the shared CMU contracting system.	
Objective not completed	• Set up working group with (Sanofi) Trade, Pricing and Patient support services to support Newcastle Hospitals with identify areas of improvement with CMU purchasing that will support the cost improvement plan. This included £600,000 saving that was identified from pricing errors due to purchase of drugs by list rather than PAS price due to incorrect contracting between organisations. This saving has made a significant contribution to the Trust's Cost Improvement Programme. A new contract from CMU came into force in June 2025 to use the programme called Extend to identify what procurement are doing in terms of ordering stock and compares prices against the contract. This helps to identify which products have been procured and ensures they are bought at the correct price. • The intention of the project was to develop a methodology that would approve standardisation, identify drug pricing areas and support off-contract claims to enable the Trust to recover the cost of drugs from commissioners. • Sanofi were able to adopt new ways of working that resulted in additional resource invested within the pricing team to develop new internal approach to track CMU contracts and track accuracy of sales data and improve the governance of contracts. • Working with Newcastle Hospitals Pharmacy department also allowed Sanofi to simplify the process for pricing agreements and ensure alignment of pricing across the NHS and outsourced 3rd party service providers that are contracted to service the NHS.

	Review of the homecare prescription pathway

Mapping out the service provision and pathway to identify pressure points and areas where improvements could be made	The pathway was mapped from primary care referral to the dermatology clinic through to treatment. The following opportunities to change and improve the existing pathway were identified and recommended to the Trust:
	
	• Lack of patient training for self-injection
	• E-prescribing using homecare portal to improve efficiency of registration and repeat prescribing process
	• Reallocation of workload across clinical and administrative staff:
	  ○ Repeat prescribing
	  ○ Homecare paperwork processing
	  ○ Follow-up reviews of homecare patients
	• Training of staff on the use of the database and training aids developed by Pharmacy
	
	Sanofi Trade and Patient Support Services worked collaboratively with homecare providers to co-create a Homecare Playbook to deliver value to the NHS and support adoption of homecare. The insights from the project have helped shape this.

Quantifying work resource involved along the homecare prescription pathway	Following an interview with Paul Blackwell, Pharmacy Homecare Technician it was flagged that they are struggling with administration staff as they went down from 5 to 1 person covering the majority of administration. A Gantt chart was provided to support the Trust to quantify the amount of time spent of administration tasks by the team.
Implement HealthNet initiatives – developing a Trust contact with HealthNet	Process mapping of the current homecare pathway identified a series of challenges and potential solutions for improvement to address these challenges including: • Administrative burden: • Volume of documentation • Requirement for wet signatures for prescriptions • Reliance on document collation and send this by post to Healthnet • Team working across different sites. A meeting was organised with HealthNet to enable them to share information with the Trust on their homecare portal and e-prescribing as potential solutions to help address the challenges within the current homecare pathway.
	Develop a database to provide a central communication mechanism for prescription maintenance of homecare patients for all directorates across the Hospital Trust.
Database Development	Initial discussions took place to explore the development of a database for homecare patients across the Trust, but this was not progressed further due to the project finishing early.
TIMESCALES:	Project commenced in Q4 2023. Project completed in Q1 2025. Project ended early due to staff retirement, staff shortages and significant capacity challenges within the Pharmacy Department within the Trust which meant they were no longer able to contribute to the project.

SERVICE IMPACT OF THE PROJECT:	The biggest impact from the project was the identification of areas of improvement with CMU purchasing which included £600,000 saving that was identified from pricing errors and this saving has made a significant contribution to the Trust's Cost Improvement Programme. The project has also mapped the current homecare pathway and identified challenges and potential solutions to improve the pathway.
RESOURCES REQUIRED AND SOURCES:	The resources utilised in the project were lower than planned at the outset (£67,564). Due to 50% of the project being completed and the Administrator not being employed and the database not being developed the revised costs of the project were: • NHS contribution = £5,190 of indirect costs • Sanofi contribution = £2,345 on indirect costs • Total contribution = £7,535 Due to the amendment of the project the Direct Funding for the Band 4 Administrator was not utilised (£31,538)
STAKEHOLDER OPINION AND SUPPORT AND PATIENT VIEWS IF APPLICABLE:	**<u>Feedback from staff at</u> Newcastle upon Tyne Hospitals NHS Foundation Trust:** **Deputy Director of Pharmacy** "It has been wonderful working alongside Lisa-Marie and Sanofi on this project. Her support and guidance have provided accountability and a different perspective to the project. Within a short period of time, we were able to set up a new service which has had huge benefits to patients - right care at the right time. Thank you to Lisa-Marie for an exceptional level of support." **Matthew Lowery – Interim Deputy Director of Pharmacy:** I can confirm that, regrettably, we are not able to continue with the collaborative project. This is due to extreme work pressures in several areas in the pharmacy meaning that I and other members of the team simply don't have the time to do the project justice. I wish to take the opportunity to thank you and Kelly for your efforts (and that of the broader Sanofi team). I hope that, in the future, we can collaborate to benefit of both organisations.
EVALUATION AND AUDIT: WHAT RESULTS DID THE PROJECT ACHIEVED	The project has delivered the following benefits for patients and the NHS. **Patients: The outputs from Objective 1. Prescription pathway if implemented will:** • Improve patient experience of the service by reducing patient wait times for prescription issues and avoiding stops and holds in their medication treatment • Reduction in delay for patients for follow-up and review of their treatment thereby having a potential to reduce complications for patients associated with their treatment. **NHS: The outputs from Objective 1. Prescription pathway if implemented and Objective 3. CMU Methodology will:** • Identification of the gaps and issues within homecare services and production of an options appraisal to improve the service.

	• Identify interventions that can support the optimum management of patients on homecare and co-ordinating processes to commence and continue patients on medications in a timely manner. • Improve the identification of drug pricing errors enabling the Trust to recover cost for drugs from commissioners • Reduce the administration burden on clinical and non-clinical staff in having to deal with issues with the current processes for prescription issuing and tracking which impacts on staff resource. **Sanofi: The outputs from Objective 1. Prescription pathway if implemented will:** • Provide greater clarity of the issues relating to homecare provision and prescription issuing, tracking, and monitoring • Improved corporate reputation within Newcastle Hospitals NHS Foundation Trust by supporting them to improve the quality of care for patients • Reduce delay in prescription issuing for patients on homecare this has the potential to reduce stops and holds on treatments. • Opportunity to share best practice and learning from this project with other hospitals who have identified issues with homecare prescription processes. • As Sanofi produce medicines if overall patient care is optimised for patients on homecare there may be an increase in the usage of these products in line with national and local guidelines.