University Hospitals Bristol and Weston NHS Foundation Trust

sanofi

Collaborative Working Project executive summary

Project title	A Collaborative Working Agreement between Sanofi and the Dermatology Department within University Hospitals Bristol and Weston (UHBW) to review and improve the patient journey and experience for patients receiving biologic treatment.
Partner organisation/s	University Hospitals Bristol and Weston NHS Foundation Trust, Trust Headquarters, Marlborough Street, Bristol, BS1 3NU. Sanofi, 410 Thames Valley Drive, Reading, Berks, RG6 1PT
Project rationale	The dermatology department ("Department") at the Trust provides a tertiary service for the whole of the Bristol and surrounding areas with a core population of over 500,000 patients. The Department take referrals from areas such as Bristol, North Bristol, Bath, South Gloucestershire, North Somerset and Taunton. The Trust is part of the Bristol, North Somerset and South Gloucestershire (BNSSG) ICS and its dermatology services are primarily commissioned by the BNSSG ICB. The Trust's dermatology patients are currently waiting on average 48 weeks from referral to 1st appointment. The wait to be seen for biologic treatment is currently less than 6 months but this is significantly impacting on new patients starting biologic treatment. Having the Clinical Administrator post will help the Department to work and deliver the Biologics Service more safely and effectively by having robust information gathered about patients and important tests thereby enabling monitoring and clinical review to be done on time. Sanofi has agreed to support the Trust by funding the Clinical Administrator post for 12 months. It will also provide the Trust with project management support to co-ordinate and contribute to the completion of the Project objectives, will assist (where appropriate) with the implementation of any changes to the current pathway resulting from the Project and will support with the Trust with the evaluation of the impact of the Project and any changes made.

	The **aim** of the project is to improve the patient journey and experience for patients ("**Patients**") receiving Biologic Services from the Trust. The Parties are participating in the Project with a view to the Trust achieving the objective of developing and, where it is feasible to do so, implementing new and/or improved administrative processes intended to enable the Trust to better manage and co-ordinate Patients and Biologic Services. In pursuit of the aim and objectives, the Project will comprise the following: a. the creation of 1.0 WTE Band 4 clinical administrator post dedicated to supporting the Project ("Clinical Administrator"). b. recruitment and appointment of an individual(s) to the Clinical Administrator post. c. creating, maintaining and managing a biologics and systemics monitoring database ("Database") designed to ensure a high quality and accurate database in dermatology, to improve the tracking and monitoring of patients on biologics and systemic immunosuppressants and improve co-ordination of pathway for biologics for patients with inflammatory skin disease. d. designing and, where possible, embedding a process for tracking blood monitoring results and upcoming follow-up reviews. e. mapping and reviewing the biologics pathway to identify gaps and issues to be addressed by the Trust in order to improve the pathway. f. undertaking a population health analysis of adults treated with biologics for atopic dermatitis to identify areas of variation and health inequality in access to biologic treatment. g. undertaking a review of capacity and demand within the Biologics Service and review how workforce is utilised to support delivery of the Biologics Service. and, towards the end of the Project and as sufficient information is available: h. undertaking a review of options to improve the pathway will be presented to and considered by the Project Steering Group and an action plan developed to implement agreed changes. i. evaluating the implementation of the Clinical Administrator post and considering the value and feasibility of consider extending that role beyond the duration of the Project. Having a clinical administrator will help the service to work more safely and effectively by having robust information

	gathered about patients and important tests thereby enabling monitoring and clinical review to be done on time. The lack of a robust system to monitor blood test results is a patient safety issue and features on the Divisional risk register. Sanofi will provide funding for an initial 12 months for the Clinical Administrator post. Sanofi will also provide Project Management support to co-ordinate and contribute to the completion of the project objectives and will assist with the implementation of the changes to the current pathway as agreed by the Project Steering Group and will support with the evaluation of the impact of the changes made.
Project period	Start - Estimated Q1 2025 (January to March) End - Estimated Q2 2026 (April to June)
Project objectives	The collaborative working project will deliver the following benefits for Patients, the NHS and Sanofi: **Patients:** • Improve patient experience of the Biologics Service through improved service co-ordination. • Implementation of a robust process for monitoring the blood test results of Patients on biologics and systemic immunosuppressants for inflammatory skin disease. • Direct communication with Patients about their blood test booking and results via text message **The Trust:** • Identification of the gaps and issues within the Biologics Service and identification of proposed changes to improve the service. • Review of capacity and demand for the Biologics Service to inform the development of the Biologics Service to support the follow-up and on-going management of Patients. • Implementation and support of a robust process for monitoring the blood test results of Patients on biologics and systemic immunosuppressants for inflammatory skin disease, thereby addressing this area of significant clinical risk. • Identification of variation in the prescribing of biologics for adults by undertaking a population health analysis of the Trust and other NHS Trusts who refer complex case to the Trust.

	Sanofi: • Greater clarity of the pressure points and priorities for the dermatology service enabling us to explore the most effective ways to support the Trust and other NHS bodies with similar issues in the future. • As Sanofi produce medicines within the Atopic Dermatitis disease area if overall patient care is optimised there may be an increase in the usage of these products in line with national and local guidelines. The project will be delivered by the pooling resources of approximately £71,300. (Sanofi £41,100, NHS £30,200)
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