

Collaborative working project between Cardiff and Vale University Health board and Sanofi to support the development of improved severe asthma services.

End of Project Evaluation report

1.0 Project Rationale

The overall aim of the Cardiff and Vale University health board respiratory department working in partnership with Sanofi is to support a dedicated pathway facilitator role in undertaking a review of the severe asthma pathways within C&V UHB hospitals. They will focus on identification of the gaps and issues with the 'front door' management of severe asthma patients, follow-up after A&E attendance/ hospital admission and put in place systems and make recommendations to address the issues. It will also review the referral pathways for severe asthma patients from the primary referral sites into the severe asthma centre. In addition, this role will serve as a Biologics Nurse, expanding current biologics clinics to support the reduction in backlog in addition to SST testing for the department. A key outcome of the project will be to develop a business case (SBAR) to ensure that the proposed pathway changes are implemented and sustained and to make the business case for the continuation of additional biologics nurse capacity. This will ensure that the outcomes from the project are sustained in the longer term.

2.0 Project Outcomes and Benefits

Patients:

- Continuation in access to biologic medication for the treatment of severe asthma
- reduction in the waiting times to access services
- Improvements in the patient pathway to ensure that patients attending A&E or being admitted through hospital are appropriately followed up to optimise their treatment post exacerbation
- Improvement in patient experience

NHS:

- Increased HCP capacity
- Reduction in backlog/ wait times
- Supporting in achieving the Respiratory medicine post covid recovery goals
- Potential reduction in associated hospitalisations due to impact of worsening disease
- Improved patient pathway for both Front door access to severe asthma service and referral site access to severe asthma service
- Production of business case (SBAR) to sustain the pathway improvements in the longer term

Sanofi:

- A better understanding of the Severe asthma service and pathway across the Cardiff and Vale
- Greater understanding of the needs of the customer in Severe asthma
- Improved reputation within Cardiff and Vale UHB
- As Sanofi produce medicines within this disease area if overall patient care is optimised there may be an increase in the usage of these products in line with local guidelines

3.0 Project Approach/ Design

Was simple and reflected the NHS system requirements. It consisted of the following primary steps,

- Desktop data research focusing on current performance metrics.
- Working alongside project team to develop a focused job specification and support in SBAR document development.
- Individual discussions with wider project team and clinical leadership members in order to develop an in depth understanding of the related pathways, its issues, and potential solutions.
- Chair of regular project meetings to update on progress and highlight issues or items for immediate action. These meetings were also used to capture data relating to service impact of the new position.
- Production and presentation of Final project report and recommendations for next steps

4.0 Project Implementation

The Collaborative working project start date was delayed due to time pressures within the service and recruitment of the Biologics /patient navigator nurse role, commencing in early Q1 2023.

Followed a series of regular project team meetings (approx. monthly) detailing progress against objectives, issues, and updates.

Q3 2023 commenced a series of agreed stakeholder interviews describing the patient journey through the associated pathways in addition to issues, timelines, and potential solutions.

Q1 2024 saw the first draft of the project findings and completed pathway document with potential issues and solutions presented in Q2 2024.

End of project report was presented in late Q2 2024.

5.0 Project Outcomes and Benefits

Objective	Outputs and Outcomes
<i>Pathway Facilitator role to undertake a review of the severe asthma referral pathways within C&V UHB hospitals</i>	Pathway Facilitator role recruited and severe asthma referral pathways for both GP referral and A&E (front door) admission successfully mapped
<i>Focus on identification of the gaps and issues with the 'front door' management of severe asthma patients, follow-up after A&E attendance/hospital admission and put in place systems and make recommendations to address the issues</i>	Completed; - The 'front-door' pathway for patients with severe asthma has been mapped. The service is exploring follow up after ED attendance but concerns about ability of service to cope with potential demand - these patients do however need identification and if waiting lists grow this will further support business case. The project has enabled the Nurse lead to maintain Hot Clinic Review which has enabled the specialist nurse review of patients attending the Emergency Department and avoiding hospital admission).
<i>Review the referral pathways for severe asthma patients from the primary referral sites into the severe asthma centre (see Figure 1).</i>	The pathway for patients with severe asthma has been mapped and reviewed with input from the Clinical Lead, Respiratory Consultants, Clinical Nurse Specialists, and associated health care practitioners. This has identified multiple gaps and issues to be addressed within the pathway and potential solutions which have been prioritised to identify several service changes to be implemented. Gaps & Issues. <ul style="list-style-type: none"> • Expansion of biologics team – business case/secondment opportunity being explored to employ pharmacist to aid with biologic annual review and help support homecare queries - need to consider space for clinical review by pharmacist. Some of this is an administrative

	<p>burden. There is a need to secure long-term funding for biologics co-ordinator (current role being paid overtime to fulfil) to free up administration burden from clinical team members.</p> <ul style="list-style-type: none"> • Allied HCP's – need to develop full business case to increase access, particularly Speech and Language Therapy. Consultants unable to support with current job plan – ideally needs new appointment to expand this service. Business case being worked up by service leadership team. • Interface between primary/secondary care – community health pathways being introduced in Wales to clarify referral criteria and prior work up. Interested in investigating the addition of a primary care educator. Community spirometry hub will support diagnosis in primary care. Exploring active case finding in primary care and follow up after ED attendance but concerns about ability of service to cope with potential demand - these patients do however need identification and if waiting lists grow this will further support business case. • Ultimately the service is growing and waiting lists remain above the Referral to Treatment Times. There is a need to plan for ongoing growth and expansion of all parts of the service over the next 3 years - CNS, Consultant, administration, and allied HCPs. • Tracking patients through pathway within multiple internal systems equates to difficulties in tracking patient journey – this leads to unnecessary delays at all stages of the pathway. <p>Potential solutions.</p> <ul style="list-style-type: none"> • Implementing a biologics administrator within the service. • Development of business case for allied HCPs to increase service access to much needed associated specialists. • Development of high-quality referral system to included updated patient referral criteria. <p>Several improvements have already been implemented due to pathway review including:</p> <ul style="list-style-type: none"> • Planned expansion of pre-clinical diagnostic testing to improve accuracy of first clinical consultation – prior to project 2/3rds of patients did not receive pre-consultation diagnostic testing and required follow up appointments with the service. All patients now receive full diagnostic testing and capacity pressures have been reduced by removing unnecessary follow up appointments. • Expansion of the Biologics Nurse / Pathway Facilitator Team. • Development of a new all-encompassing severe asthma pathway service expansion business case. • Clinical Nurses conducting FENO testing. • Spirometry added to CNS clinic on Tuesday and Friday follow up clinics. <p>Support in development of service expansion business case and prioritisation.</p>
<p><i>Pathway Facilitator/Biologics Nurse to expand current biologics clinics to support the reduction in backlog in addition to SST testing for the department</i></p>	<p>The Pathway Facilitator/Biologics Nurse has enabled the service to ensure that appropriate severe asthma patients awaiting biologic treatment initiation have now been initiated on treatment. Prior to this patient were on hold. 13 pts were started on biologic therapy during the initial phase of the project and 138 additional clinical consultations took place.</p> <p>SST testing has been implemented within the department which has improved patient identification and treatment accuracy.</p> <p>The service has had a successful business case approved to secure on-going</p>

	funding for 1.5 WTE staff for the biologics service including 1.0 WTE Pathway Facilitator/Biologics Nurse and 0.5 WTE Biologics Nurse.
Develop a business case (SBAR) to ensure that the proposed pathway changes are implemented and sustained and to make the case for the continuation of additional biologics nurse capacity	The Severe Asthma Service submitted the SBAR business case application to the Health Board, and this was successful in obtaining the funding for 1 x WTE Nurse. This enabled the service to provide the appropriate level of specialist nursing support required to delivery to optimal pathway for patients with severe asthma and to ensure that the outcomes from this project are sustained in the longer term.

6.0 Project Team Feedback

Written Feedback was received from the following people on the outcomes of the collaborative working project and working with Sanofi has been received from:

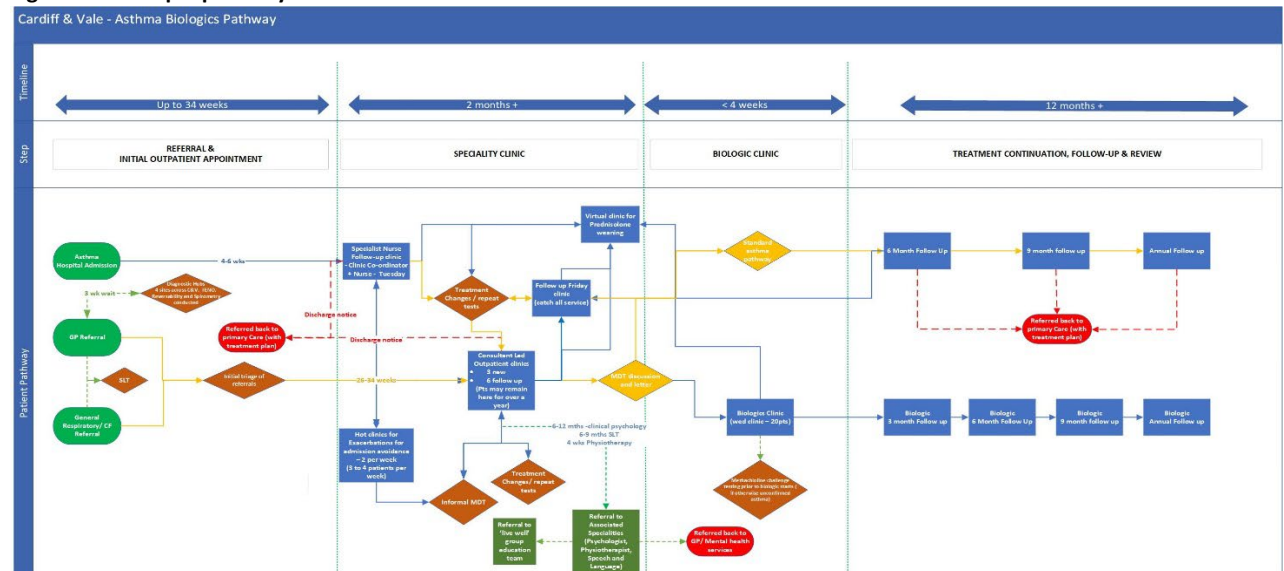
Dr Katie Pink, Consultant Clinical lead, Severe Asthma Service, Cardiff & Vale Health Board:

The collaborative working project with Sanofi has been useful. Firstly, the funding of a biologic's nurse/ pathway facilitator enabled the service to continue to start new biologics for eligible patients. The health board was then able to find ongoing funding for 1.5 WTE band 6 support to continue this service. The severe asthma service in Cardiff and Vale is still a young and growing service and the Pathway Facilitator has enabled all team members the opportunity to reflect on the pressures and gaps in the service. This has been particularly useful in enabling a better managerial understanding of the multiple individual roles needed to provide a service asthma service and to support the development of a business case for ongoing investment.

Claire Linbourn, Deputy Service Manager, Integrated Medicine, Severe Asthma Service, Cardiff & Vale Health Board:

Working with Sanofi has been worthwhile, it has allowed us to obtain a full overview of our Asthma Service and highlight areas of both strengths and weaknesses. As a result, we have made efficiencies and now have areas to focus on going forward. Pete made the process straightforward and approached all meetings with a friendly face, it has been a pleasure working with him.

Figure 1 – Example pathway



7.0 Challenges and Issues

The lack of in-depth recorded data and a single IT system for recording and tracking patients across the locality meant highlighting some potential issues difficult to quantify.

Capacity pressures on staff lead to an inability to access certain members of the project team.

The absence of specialised commissioning in severe asthma management across Wales means additional services are incorporated into existing works which leads to increased pressure in certain areas of the system and a lack in available allied healthcare professional time.

8.0 Lessons learned.

This type of project requires dedicated project management support.

All members of the project team gave generously of their time to achieve the outcomes detailed within this project.

As the project expanded a sole source of inputs and methodology for storing data may have led to fewer 'version control' issues that proved time consuming to rectify.

The benefit of a project of this type is not only in the improvements made to the existing service but developing solutions to the newly identified problems described in the end of project report. NHS cuts and future staffing pressures may make these difficult to realise in the short to medium term.

9.0 Conclusion

The Collaborative working project between Cardiff and Vale University health Board severe asthma service and Sanofi has delivered on all its initial objectives. This has resulted in no loss in quality or activity within the service despite an ever-increasing patient need.

This project was the first of its type for Sanofi within Wales and something that all parties should be rightfully proud of however the ideal outcome would include progress made against other priority issues identified as part of the project scope – these would ultimately lead to further service improvements.