

Joint Working Agreement - Executive Summary

h1. Project Name:	<p>Pro-active diabetes register management to support diabetes Paula Carr fund to improve the HbA1c treatment target for patients with Type 2 Diabetes Mellitus.</p> <p>Start Date: 23rd July 2019</p>
2. Organisations involved with this Joint Working Project are:	<p>Medway Clinical Commissioning Group (CCG),</p>
3. The objectives for this project are:	<p>Main objectives are:</p> <ul style="list-style-type: none"> • Improvement in glycaemic control of patients with type 2 diabetes achieving an HbA1c of 75mmol/mol or less. • Implementation of innovative primary care analytics (ECLIPSE & PARM tool) • Medicines optimisation • Improve GP and practice nurse confidence in managing diabetes conditions • Increase pro-active management and case finding for diabetes at the practice <p>It is also planned that the project outcomes will be shared via publication in a suitable clinical journal or trade press.</p>
4. Roles and Responsibilities, including any funding	<p>Lilly UK:</p> <p>The role of Lilly UK within the project is to provide a Key Account Manager (KAM) to support project management. The KAM role will co-ordinate activity and communication between the IT administration role, the clinical pharmacist/DSN and the locality diabetes leads.</p> <p>The proactive case finding tools loaded by the IT administrator will allow a baseline of patients to be identified for the proposed intervention of a clinical pharmacist or DSN.</p> <p>This information will be used to support capacity planning, and allow the clinical pharmacist or DSN to allocate resources.</p> <p>Lilly KAM</p> <ul style="list-style-type: none"> • Project management including <ul style="list-style-type: none"> ○ Development and maintenance of project plan, communication plan and risk register. ○ Co-ordination of IT administrator, clinical pharmacist/DSN and diabetes leads in the locality.

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	<ul style="list-style-type: none"> Facilitating the diabetes team meetings and Tri-annual Project meetings as part of the project working group. <p>At no point during the project will Lilly have access to any patient identifiable data.</p> <p>Medway CCG:</p> <ul style="list-style-type: none"> Project Support and Clinical Governance Digital Capability via locality IT administrator for Gillingham and Rainham. Providing Eclipse, a medicines management tool which produces patient level prescribing data and history Funding for meeting room hire for lead team update meetings for the duration of the project <p>Financial Arrangements:</p> <p>Lilly UK to financial support for locality IT administration role (Band 5)</p> <p>Role</p> <p style="padding-left: 40px;">Band 5, Agenda for change scale of pay Practice work 2 hours per surgery = 60 practice visits Based on access to 2 practices per day this activity would take 30 days.</p> <p style="padding-left: 40px;">Training and Bi-monthly meetings = 10 hours 130 Hours work for Band 5 IT Administration role Agenda for change, Band 5, £23,023 30 days Activity, £2,000</p> <p>Medway CCG</p> <p style="padding-left: 40px;">Eclipse contract funded by Medway CCG 30 days activity of Clinical pharmacist or DSN role Band 7 33,222-£43,041; funded by the Paula Carr Trust.</p>
<p>5. The expected benefits for patients on delivery of this project are:</p>	<ul style="list-style-type: none"> Medicines optimisation to improve blood glucose control leading to a delay in the onset of complications which can impact patient quality of life Care delivered closer to home through an increased management of diabetes by a clinical pharmacist or DSN. Increase in patient satisfaction with the community diabetes service
<p>6. The expected benefits for the partner organisation(s) on delivery of this project</p>	<ul style="list-style-type: none"> Medicines optimisation may lead to an increase or decrease in prescribing costs. The primary aim being improved quality of care (reduction in HbA1c).

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<p>are:</p>	<ul style="list-style-type: none">• Appropriate use of secondary care services by proactive identification of patients requiring insulin initiation.• Improved patient engagement.• Improved efficiency within the service.• Improved confidence of GPs and practice nurses managing patients with diabetes.• Highlighting areas of best practice to share with colleagues locally and nationally. <p>Leave a framework legacy to help achieve the National Diabetes Audit (NDA) transformation fund targets.</p>
<p>7. The expected benefits for Lilly UK on delivery of this are:</p>	<ul style="list-style-type: none">• Appropriate use of diabetes medications (which includes 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 Medway CCG.• 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