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EXECUTIVE SUMMARY

A Collaborative Working Project between Bristol-Myers Squibb Pharmaceutical Limited (*"BMS"*) and Guy's and St Thomas' Hospitals NHS Foundation Trust [GSTT], part of King's Health Partners (KHP)

Name of project:	**Improving care for patients with Hypertrophic Cardiomyopathy by embedding digital solutions and service development.**
Project Overview:	This collaborative working project will focus on people with Hypertrophic Cardiomyopathy [HCM], an Inherited Cardiac Condition [ICC], and left ventricular outflow tract obstruction [LVOTO] by embedding digital technologies and a Clinical Scientist-led LVOTO clinic, to streamline and improve the quality of care. This will comprise of efficient identification of people with HCM and LVOTO from unstructured healthcare records, through the use of Cogstack, an application framework that uses data mining technology to extract information [2]. It will be supported by greater bidirectional communication between the patient and GSTT's ICC service, through the use of Ortus-iHealth [3] which has been commissioned by NHS England (NHSE) as a pilot for digital cardiovascular care across London [4]. In addition, a Clinical Scientist led LVOTO clinic offers a streamlined approach to review and manage people with HCM and LVOTO freeing up time in Consultant clinics. This has the potential to create workforce efficiencies within the NHS as well as helping to manage the backlog of work worsened by the COVID-19 pandemic, which impacts both waiting lists and access to diagnostic tests. [5] Introducing digital solutions and using different models to deliver care are important elements of the NHS Delivery plan for tackling the COVID-19 backlog. [6] Any activities conducted as part of this Project will be conducted in a strictly non-promotional manner and will comply with the associated laws and regulations and the association of the British Pharmaceutical Industry (ABPI) code of practice. BMS personnel will not work directly with the public nor any public/charitable organisation. Outcomes must be published by all Parties as soon as possible and within 6 months of the Project completion date.
Project Purpose/ Objectives:	The overarching aim of the project is to optimise care for people with HCM and LVOTO within GSTT through implementation of digital technologies and a Clinical Scientist-led LVOTO clinic, and sharing best practice nationally with other ICC centres. The Project, therefore, represents an opportunity to evaluate digital technology initiatives and system models within the ICC clinic for HCM patients, that will provide future insights and learnings that can be evaluated and replicated at scale to improve healthcare outcomes for all with a particular focus on improving health inequalities.

Patient, BMS, NHS benefits	The expected patient benefits comprise: ▪ More patients receive evidence-based care and better experience of healthcare system. ▪ New service models and use of technology will help to reduce NHS backlog of work caused by the COVID-19 pandemic helping more patients gain access to specialist care. ▪ Asymptomatic patients continue to be reviewed as normal. Follow up of symptomatic HCM patients with LVOTO within a Clinical Scientist-led service will increase outpatient capacity, reduce need for consultant appointments and improve access to therapy optimisation as clinically appropriate in line with local and nationally accepted clinical guidelines. ▪ Greater efficiencies in managing patients with HCM and LVOTO through use of digital technologies (timely follow up, medicines optimisation, reduced out-patients appointments) with potential to scale across Kings Health Partners as well as at other national ICC centres. ▪ Help to address the current unmet need and reach more of the local population which in turn will help address health inequalities. ▪ Understanding of patient-based qualitative insights from an ICC perspective from diagnosis and treatment and entry into the future service pathway. These insights will inform a future exemplar of best practice across ICC centres in the UK. ▪ Sharing of business cases across different ICC centres will facilitate service improvement opportunities across the UK benefitting more people with HCM including those with LVOTO. Benefits for BMS: ▪ This collaboration between BMS and the Trust will endeavour to evaluate the implementation of a Clinical Scientist-led LVOTO service augmented by digital technologies and better understand any system challenges. ▪ BMS would gain from the reputational gains associated with working in collaboration with GSTT. ▪ BMS would gain the opportunity to develop a potential example of innovative best practice. The project could be shared with other localities across the NHS and our WW colleagues to show best practice and possible implementation in other areas. ▪ Expansion of an eligible patient population. Benefits for the trust and wider NHS organisation: ▪ Understanding the impact and effectiveness of implementing a Clinical Scientist-led LVOTO clinic augmented by digital technologies, allowing for improvement of pathways across HCM and other therapy areas ▪ Understanding of the experiential learnings of NHS clinical teams, of deploying the Clinical Scientist-led LVOTO clinic augmented by digital technologies, this could allow for adaptation across other therapy areas ▪ Understanding of the experience of the HCM patient from 'detection, diagnosis and treatment' at defined points within a new service model implementing digital technology, allowing for more efficient care for HCM patients ▪ Provide wider learnings to the local health and social care system and other ICC centres in relation to the development and implementation of a Clinical Scientist-led LVOTO clinic augmented by digital technologies. ▪ Sustainable service improvements through the development of business case for continued service funding
Stakeholders	Guys & St Thomas' NHS Foundation Trust Health Innovation Network South London South-East London ICS BMS

Timelines	Date of commencement – November 2023 Duration of the project – the duration of the project will be limited to 24 months
Agreed Arrangements:	Guys & St Thomas' NHS Trust (GSTT) will provide £79,410.32 of resourcing to support the project. Bristol Myers Squibb will provide £152,989.10 of financial investment into the project which will be paid in three instalments, and a further £7078.65 of resourcing to support the project management.

References:

1. APBI. *Code of Practice 2021*; published July 2021. [online] Available at: https://www.abpi.org.uk/our-ethics/abpi-2021-code-of-practice/. [Accessed 20th November 2023].
2. Cogstack. *About* [Online]. Available at: cogstack.org/about [Accessed 20th November 2023].
3. Ortus iHealth. *Connecting Patients and Clinicians* [Online]. Available at: ortus-ihealth.com [Accessed 20th November 2023].
4. Ortus iHealth. *London Cardiac Network Contract Annoucement* [Online]. Available at: ortus-ihealth.com/london-cardiac-network-contract-annoucement/ [Accessed 20th November 2023].
5. British Medical Association. *NHS backlog data analysis* [Online]. Available at: www.bma.org.uk/advice-and-support/nhs-delivery-and-workforce/pressures/nhs-backlog-data-analysis (bma.org.uk) [Accessed 20th November 2023].
6. NHS England. *Delivery plan for tackling the covid 19 backlog* [Online]. Available at: www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2022/02/C1466-delivery-plan-for-tackling-the-covid-19-backlog-of-elective-care (england.nhs.uk) [Accessed 20th November 2023].