

EXECUTIVE SUMMARY

A Collaborative Working Project between Bristol-Myers Squibb Pharmaceutical Limited ("*BMS*"), Guys' & St Thomas' NHS Trust and University Hospitals Birmingham NHS Foundation Trust

Name of Project:	Title: Implementing guideline-based pathway redesign for Hypertrophic Cardiomyopathy patients in collaboration with Guys' & St Thomas' NHS Trust (Royal Brompton) and University Hospitals Birmingham NHS Foundation Trust (Queen Elizabeth)
Project Overview:	This Project seeks to address the need for a retrospective implementation audit identifying pathway challenges and opportunities specific to the implementation of recent 2023 ESC Guidelines for the Management of Cardiomyopathies: Hypertrophic Cardiomyopathy with a focus on managing symptoms and complications including left ventricular outflow tract obstruction (LVOTO) to inform a sustainable pathway redesign to manage HCM patients' long-term care in a shared-care format. The service optimisation will focus on patients with LVOTO, though learnings are expected to translate to sustainable management for all HCM patients. This will involve the set-up of two integrated multidisciplinary teams (MDT) in both Healthcare Organisations. The teams will consist of cardiology experts, imaging specialists (cardiologists or sonographers), genetics experts and a clinical nurse specialist at a minimum. The Project aims to conduct a baseline audit of current implementation of the new guidelines supporting a pathway redesign in the first phase (months 1-6), with benchmarks for optimal values so comparisons can be made on performance. In the second phase of the Project (months 6-12), the healthcare organisations will share learnings from the Project with regional NHS trusts and explore shared model of care within the region. The insights and outcomes obtained by the Project will inform a business case for the two Healthcare Organisations (third phase, months 12-18) to inform future service sustainability and build a best practice example that drives efficiencies with referral, diagnosis, management and follow up of HCM patients. Outputs will include service specification standard operating procedures (SOPs), hosting of MDT meetings with hub and spoke trusts, and writeup of best practices from the two pilot sites within the healthcare organisations to potentially socialise in the form of a peer-reviewed publication to other trusts who would like to implement a similar service, addressing variations in service delivery regionally across the UK.
Project Objectives:	The overarching aim of this Project is to optimise care for people with HCM including those with LVOTO, by implementing a guideline-based redesign of the care pathway for these patients within two major ICC centres: Royal Brompton (Guys' and St Thomas' Trust) & Queen Elizabeth Hospitals (University Hospital Birmingham Foundation Trust) with potential to share learnings across the regions. 1. To audit the current implementation of ESC 2023 Hypertrophic Cardiomyopathy and NICE guidelines in a real-world setting within the intra- and inter-institutional pathways that currently exist in UK centres. 2. To support implementation of guideline-based MDT care by redesigning HCM services within two major ICC centres. 3. To understand the ecosystem interactions of major ICC centres (tertiary care) with neighbouring trusts and explore hub and spoke model of care for patient follow up. 4. To develop and socialise quality improvement project focussed on guideline implementation nationally with potential publications and/or posters.
Patient/NHS/ BMS benefits:	For patients • More patients receive evidence/guideline-based care and better experience of healthcare systems. • Patient access to all available treatment options within a defined model of care. • Sharing of business cases across different ICC centres will facilitate service improvement opportunities across the UK benefitting more patients with HCM including those with LVOTO. For the two Healthcare Organisations: • Sustainable service improvements through the development of business case for continued service funding. • Greater efficiencies in clinic management of patients with HCM through MDT integrated & guideline-based pathway redesign. • Improving healthcare outcomes for the communities they serve, benefitting HCM patients by increasing efficiencies of reviews and piloting new models of care. For BMS: • BMS would gain from the reputational gains associated with working in collaboration two major ICC centres. • 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.
Stakeholders:	Guys' & St Thomas' NHS Trust; University Hospitals Birmingham NHS Foundation Trust; BMS
Agreed arrangements	BMS will provide funding of £128,000 and a resource-based contribution of £31,077. This provides a £159,077 total investment towards the project. Guys' & St Thomas' NHS Trust will provide £178,475 as a resource-based contribution towards the project. University Hospitals Birmingham NHS Foundation Trust will provide £180,124 as a resource-based contribution towards the project.
Timelines:	The project will commence from August 2024 and last for 18 months which includes a 6 month evaluation period.