

**A Collaborative Working Project between Bristol-Myers Squibb Pharmaceutical Limited (“BMS”),
Shine Clinical (“Shine”) and Leeds Teaching Hospitals NHS Trust (“Leeds Trust”)**

Name of project	‘Enhancing Hypertrophic Cardiomyopathy (HCM) care in the Leeds Community’
Project Overview	<p>Leeds Teaching Hospitals NHS Trust (Leeds Trust), seek to work in partnership with Bristol-Myers Squibb (BMS) and Shine Clinical (Shine) to deliver a 12-month collaborative working project. The collaborative working agreement is between BMS, Leeds Trust and Shine to benefit patient care delivered by the trust in the community of Leeds. This partnership will be developed in accordance with the A.B.P.I Code of Practice 2024 [1].</p> <p>The project has the aim of optimising care for people with Hypertrophic Cardiomyopathy (HCM), an Inherited Cardiac Condition (ICC), by providing audit support which will be represented in a digital dashboard to help identify and manage patients with this long-term disease.</p> <p>Three key parties will take part in this collaborative working project: a. Leeds Teaching Hospital NHS Trust (a healthcare organisation (HCO) with a cardiology department and HCM consultant), b. Shine Clinical (an HCO with experience accessing patient medical records (PMR) and provide support with Clinical Pharmacist, technicians, and digital tools), and c. Bristol-Myers Squibb.</p> <p>Patients are currently seen under the ICC clinic at the trust, these patients are given follow up clinics at intervals, decided by their clinician at the time at their review. Patients can be lost to follow up or not attend appointments at clinically relevant intervals. This could represent a risk due to the nature of HCM being a dynamic disease which can lead to life limiting symptoms. Within BMS, the team has identified the potential impact of working collaboratively to help optimize the care for patients with HCM.</p> <p>The project will use cutting edge technologies and highly trained staff to examine the data of the trust, to identify all patients with HCM, including differentiating between obstructive and non-obstructive. Shine will then provide a clinical review of HCM patients. Shine will build a data application to enable the trust to make actionable decisions to improve patient care.</p> <p>Leeds Trust will utilize the data provided by Shine to review and prioritize patients. The dashboard provided by Shine will allow for easy identification of the HCM patients within the service to help improve patient care.</p>

	<p>The project aims to drive efficiencies within clinic attendance and planning for HCM patients.</p>
<p>Project Purpose/ Objectives</p>	<p>The overarching aim of the ‘Enhancing HCM care in the Leeds Community’ collaborative working project is to contribute towards the optimisation of HCM-related services, with the objective of facilitating proper identification of patients, utilising Shine’s data applications and clinicians, appropriate for review in a timely manner, through the implementation of a Collaborative Working Agreement between BMS, Leeds Trust (HCO) and Shine (HCO).</p> <ol style="list-style-type: none"> 1. To identify the HCM population under Leeds Trust care and the split between obstructive and non-obstructive HCM by searching the clinical system for specific data points and creating a dashboard with the data 2. To determine the effectiveness of Shine’s service in comparison to Leeds Trust current clinic records 3. To identify patients for review using the data points from objective 1 and clinical parameters agreed in initial meeting between Shine and Leeds Trust 4. To identify patients for echocardiography as per agreed parameters (from initial meeting between Shine and Leeds Trust) 5. To develop a ‘best practice’ example which supports future service development and specifications locally and for other ICC centres HCM services in the UK 6. To work collaboratively on anonymized data with potential subsequent publications and/or posters
<p>Patient, BMS, NHS benefits</p>	<p>The expected patient benefits:</p> <ul style="list-style-type: none"> • More patients receive evidence-based care and better experience of healthcare systems. • Less patients being lost to follow up. • Greater efficiencies in clinic management of patients with HCM through a combination of digital technologies and clinical pharmacy staff • Understanding of patient prevalence to allow for scale up of services to better serve the population once known. • Scalability of data to allow for better prevalence data that is currently available for the UK to allow for business case development, to improve current service provision. <p>Benefits for BMS:</p> <ul style="list-style-type: none"> • BMS would gain from the reputational gains associated with working in collaboration with Leeds Trust. • BMS would gain the opportunity to develop a potential example of innovative best practice. The project could be shared with other

	<p>localities across the NHS and our WW colleagues to show best practice and possible implementation in other areas.</p> <ul style="list-style-type: none"> • Expansion of an eligible patient population. <p>Benefits for the trust and wider NHS organisations:</p> <ul style="list-style-type: none"> • Understand the impact of having an up to date and accurate dashboard of HCM patients. • Understanding of the number of HCM patients under their care and how that corresponds to local population, to help with business cases and research. • Sustainable service improvements through the development of business case for continued service funding. 										
Stakeholders		<table border="1"> <thead> <tr> <th data-bbox="669 625 1045 676">Parties involved</th> <th data-bbox="1052 625 1432 676">Involvement</th> </tr> </thead> <tbody> <tr> <td data-bbox="669 676 1045 802">Bristol-Myers Squibb</td> <td data-bbox="1052 676 1432 802">Innovative Medicines Medical Team with support of Legal and Governance</td> </tr> <tr> <td data-bbox="669 802 1045 886">Leeds Teaching Hospitals NHS Trust</td> <td data-bbox="1052 802 1432 886">Healthcare Organisation and Data Controller</td> </tr> <tr> <td data-bbox="669 886 1045 957">Shine Clinical</td> <td data-bbox="1052 886 1432 957">Healthcare Organisation</td> </tr> </tbody> </table>	Parties involved	Involvement	Bristol-Myers Squibb	Innovative Medicines Medical Team with support of Legal and Governance	Leeds Teaching Hospitals NHS Trust	Healthcare Organisation and Data Controller	Shine Clinical	Healthcare Organisation	
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Timelines	<p><u>Duration of the project:</u> 12- months (2 months of service design, 8 months of therapy review service delivery and 2 months of report delivery, ongoing updates and dashboard set up for continuous use)</p>										
Agreed Arrangements:	<ul style="list-style-type: none"> - BMS to contribute with £100,000 to cover the provision of a therapy review service and £414.36 in hourly wages for project management, for a total of £100,414.36. - Leeds Trust to contribute with £40,820 in equivalent resources including a medical lead, specialist CNS, sonographer, and echoes. - Shine Clinical to contribute with £39,734 in equivalent resources including a pharmacy lead, software consultant and creation of dashboard. - Shine Clinical to be responsible for accessing Leeds Trust PMR and deliver therapy review service to identify symptomatic HCM patients for subsequent disease management by Leeds Trust. 										
References	<ol style="list-style-type: none"> 1. APBI. Code of Practice 2024; published October 2024. [online] Available at: https://www.abpi.org.uk/reputation/abpi-2024-code-of-practice/. [Accessed 7th November 2024]. 										