

JOINT WORKING EXECUTIVE SUMMARY

A Joint Working project between East Leicestershire and Rutland GP Federation (ELR) and Lundbeck Limited.

Project Name: Ongoing management of stable schizophrenia patients on atypical long-acting injectables.

Joint Working Project Summary:

This project seeks to improve the care for people with schizophrenia through the design of a prevention led, seamless and integrated care service that focuses on treating stable patients on atypical long-acting injectable antipsychotics (aLAIs) in General Practice.

The project aims to support patients by allowing them to receive their aLAI in General Practice, providing a better experience of the healthcare system and care closer to their home, whilst also providing physical health checks and management of physical comorbidities to help improve outcomes for patients and ensure parity of esteem between physical and mental health.

The project is intended to be accessible to any patient with schizophrenia stable on an atypical LAI (defined as at least 6 months of treatment without relapse) and is not restricted to any single medication. The project should not affect prescribing decisions but will provide an alternative care setting (General Practice) in which patients with schizophrenia can receive their ongoing aLAI treatment and physical health checks.

The project is expected to deliver the following benefits to stakeholders:

Patients

- Care closer to home.
- Better experience of the healthcare system.
- Fewer hospital admissions.
- Access to Social Prescribing.
- Parity of esteem between physical and mental health through the delivery of ongoing mental and physical healthcare within a single care setting (General Practice).

NHS

- Services configured around patient needs.
- Improved health outcomes.
- Improved use of resources.
- Reductions in hospital admissions.
- Integration of physical and mental health.
- Strengthening the interface between primary care and specialist mental health services
- Creating capacity in secondary care to improve access to services for the most unwell
- In taking an MDT approach it will enable the development of personalised care and support plans for patients within this service

Lundbeck

- Improved implementation of existing medicines use policy and formulary relevant to Lundbeck's business portfolio.
- Ability to take and share learnings from the project to other regions of the UK to support improved patient care.
- Supporting Lundbeck's reputation as a specialist pharmaceutical company working in partnership with the NHS to improve the lives of patients affected by diseases of the Central Nervous System.

Outcomes will be measured by ELR GP Fed and LPT. Specific outcome measures and responsibility for recording and measuring the individual outcomes outlined above will be determined and agreed as part of the business case and service specification development.

Summary of contributions to the project:

The necessary input of resources for successful delivery of the project will be shared equitably between ELR and Lundbeck, in line with the requirements for Joint Working. Both parties will have a shared commitment to the successful delivery of the project in order to benefit patients. The required input of resources is outlined below:

- 4 days consultancy to develop the business case, sub-contract and associated documentation, and lead the negotiations (£7,200 funded by Lundbeck) and delivered by Scott McKenzie UK Limited
- Administrative support to set up and implement the service and put the appropriate systems in place for ELR to safely and successfully administer the service (0.4 FTE administrator provided by ELR)
- Project management support provided by Lundbeck (estimated at 0.05 FTE)

In accordance the ABPI Code of Practice for the Pharmaceutical Industry 2021, Lundbeck will publicly disclose any transfers of value associated with the project via the ABPI Disclosure UK database (<https://search.disclosureuk.org.uk/>).

The project will run for a minimum of 12 months from 1st December 2021.