

PROJECT NAME:

Renal Cell Carcinoma Service Redesign Project between UHB NHS Trust, Queen Elizabeth Hospital site, Birmingham and Ipsen.

TIME FRAME: April 2019 - March 2021

JOINT WORKING PROJECT SUMMARY:

The aim of this project was to develop a pharmacist led care pathway for renal cell carcinoma (RCC) patients on oral VEGF inhibitors, whereby pharmacists reviewed patients on treatment. This reduced waiting times and workload in consultant outpatient clinics, resulting in a more efficient service that improved patient experience.

The project had 4 phases:

1. Baseline analysis of the current pathway in terms of patient numbers, patients on treatment and identifying workload that could be transferred to a pharmacist.
2. Design a pathway that incorporated current pharmacy education prior to treatment as well as ongoing management of patients receiving oral VEGF inhibitors in advanced RCC.
3. Implement the new pathway with the potential for a pharmacy telephone assessment clinic to reduce the number of outpatient appointments.
4. Review of the pathway and business case submission.

OUTCOMES ACHIEVED BY THIS PROJECT:

- Delivery of an evidence based patient pathway.
- 196 clinic appointments throughout 2020 managed by the pharmacist, freeing up Consultant's time to cover additional patient workload.
- High patient and clinician satisfaction with the clinic service.
 - 100% of patients surveyed satisfied with the service.
 - Clinician and Pharmacist feedback was positive as recommendations were taken on board and actioned in order to increase patient numbers. The benefits of a pharmacist specialising in renal cancer include pharmacy team education and a point of contact for prescribers, and these were proven through delivery of the project.
- The business case to continue having a pharmacist in renal cell clinics was approved as part of a wider project to deliver 10 clinics/week across 5 pharmacists.

BENEFITS FOR PATIENTS ACHIEVED BY THE PROJECT:

- Rapport established with patients as a result of having a consistent point of contact, allowing easier identification of changes in clinical status.
- Early intervention on drug interactions through first cycle counselling.
- Telephone clinics providing closer to home service for patients, which was especially necessary during COVID-19 pandemic.
- Increased pharmacist flexibility allowing some patients to have blood tests closer to home.
- 100% of patients surveyed satisfied with the service.

BENEFITS FOR THE NHS ACHIEVED BY THE PROJECT:

- More efficient use of medical teams, utilising pharmacist resource to deliver patient care, allowing consultants to see more complex cases reducing pressure on the department.
- Reduction in waiting times through additional resource supporting the delivery of key cancer targets.
- Allowed the trust to scope future roles with the potential to extrapolate to other therapy areas.
- Delivered on key Carter report findings by making more efficient use of NHS resources.
- Supported key NHS drivers, such as Care Closer to Home, through telephone consultations.
- Raise profile of QEHB as a Centre of Excellence.

BENEFITS FOR IPSEN ACHIEVED BY THE PROJECT

- Patients received treatments in line with clinical guidance which may have included Ipsen products when appropriate.
- Opportunity to work with QEHB through a joint working initiative which built relationships and reputation.
- Collaborated on a significant service development project aligning to Ipsen's strategic pillar of becoming a partner of choice.
- Demonstrated Ipsen's commitment to Oncology.
- UHB QEHB site acting as a beacon centre for other NHS Trusts.

PROJECT COMPLETED 31ST MARCH 2021