

A DECLARATION OF JOINT WORKING

BETWEEN

AN AGREEMENT FOR JOINT WORKING BETWEEN

*Health Innovation Manchester, Citylabs 1.0, Nelson Street, Manchester, M13 9NQ*

AND

AstraZeneca UK, Horizon Place, 600 Capability Green, Luton, Bedfordshire LU1 3LU

relating to

*Sandardised Asthma Revue through Reduction in over-use of Saba and appropriate step down in over-treated patients in Greater Manchester - The STARRS-GM Project*

Health Innovation Manchester and AstraZeneca are engaged in a Joint Working project called 'The STARRS-GM Project'

This project will run from December 2021 to December 2022 and both parties have contributed resources for this initiative.

The Joint Working Project will focus on improving asthma care within Greater Manchester, with the following objectives:

- To improve asthma outcomes within Greater Manchester, through a reduction in SABA use in those patients who are over-reliant on their SABA inhaler
- To proactively identify asthma patients who may be inappropriately prescribed high dose inhaled corticosteroid therapy.
- To determine the roll of LungHealth guided consultation software in relation to the implementation of asthma guidelines versus standard care
- To pro-actively identify and review 'high risk' patients as defined by the NRAD criteria to optimise asthma management
- To utilise FeNO testing to appropriately identify at risk patients and support appropriate interventions, including referral to severe asthma clinics, where appropriate. These patients may also be supported with weekly consultant led MDT meetings.
- To Engage community pharmacy to support patient engagement with GM-STARRS project and help drive sustained impact through pharmacy patient intervention. Any treatment changes as part of this project will be made by clinicians in accordance with national and local guidance.

It is expected that the proactive identification of patients who are at risk of asthma, or patients with uncontrolled asthma, who are reviewed through proactive audit, will result in a greater number of guideline-driven interventions when compared to standard care.

In line with NRAD and other Asthma audit tools it is expected that a reduction in over-reliance to SABA medication will improve asthma outcomes.

In addition, validating this integrated new model of care would allow HIM to consider further investment and roll-out across the ten localities and represent a scalable solution for effective patient management in the absence of respiratory nurse specialists being present in every GP practice.