JOINT WORKING EXECUTIVE SUMMARY

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Joint Working between AstraZeneca UK Ltd and Barts Health Trust
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Project title	Point of Care Testing in CKD
Aims and Objectives	PATHFINDER renal module development and implementation to screen and diagnose chronic kidney disease (CKD) patients in primary care and optimise on guideline directed medical therapy (GDMT) to be incorporated into the cardio-kidney-metabolic (CKM) Independent Prescriber (IP) Pathfinder Programme Develop the CKD module for the Pathfinder program, pilot in 6 North East London (NEL) independent community pharmacies and then expand across 70+ pharmacies to drive uACR testing; Increase early identification of CKD in high-risk patients by making uACR testing routine in community pharmacy Provide an accessible community service, enabling access to point of care (POC) testing and treatment closer to home, driving new models of care Improve the quality of care delivered to patients by reducing healthcare inequalities and empowering patients (Sustainable service)
Anticipated benefits	**Patient Benefits:** • Earlier identification and diagnosis of CKD, enabling timely intervention before disease progression. • Access to in the moment diagnostic care, intervention and education, reducing the need to transport themselves to multiple places. **NHS Benefits** • Increases case finding and earlier diagnosis of CKD, reducing unwarranted variation in care and improving implementation of guideline-directed treatment. • Establishes a scalable community pharmacy pathway that supports primary care capacity, improves care coordination and has the potential to reduce avoidable hospital activity. **AstraZeneca Benefits** This project is in line with AstraZeneca's medical mission to reduce death and progression to end-stage kidney disease (ESKD) in CKD. To develop a CKD pathway to be used alongside the current Lipid, HTN and Diabetes Pathfinder model in order to commission and scale. A Programme that improves cardiovascular disease (CVD) outcomes for patients and demonstrates value to the NHS.

Timeline	The project will commence on the 6 November 2026 and will continue for a duration of 17 months.
References	1. https://www.nhs.uk/conditions/kidney-disease/diagnosis/ 2. https://www.researchgate.net/figure/National-CKD-urine-ACR-achievement-by-year-Created-from-NHS-Digital-QOF-Indicators-No*fig1*383152091 3. https://londonkidneynetwork.nhs.uk/working-collaboratively/ 4. https://pharmaceutical-journal.com/article/news/community-pharmacy-cholesterol-testing-pilot-expands-across-east-london
Contributions	The project will include the pooling of skills, experience and resources from both parties. AstraZeneca will provide funding for project manager and community pharmacy time for consultations and AZ employee time for project management and input on CKD pathways, management, and training at a total cost of £126,647.74 Barts Health Trust is contributing consultant input, tests, evaluation, surveys, etc. at a total cost of £90,887.76 . Barts Health Trust contribution does not include transfer of monies; it is based on cost of resource allocation. Full details of contributions are included in the agreed Joint working agreement with the NHS