

Joint Working EXECUTIVE SUMMARY

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Joint Working between AstraZeneca UK Ltd and Wolverhampton Unity West PCN

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Project title	LUCID Accelerate - Black Country ICB
Aims and Objectives	Aims: LUCID model implementation programme to identify chronic kidney disease (CKD) patients in primary care suitable for virtual management. Objectives: Risk stratify the CKD population of the 8 PCNs involved and subsequently improve clinical outcomes by bringing secondary care capability into primary care and implementing gold standard management. • Increase early identification of CKD patients suitable for virtual management. • Provide a community outreach service, enabling multidisciplinary team (MDT) at a PCN level, driving new models of care. • Improve the quality of care delivered to CKD patients by increasing the capability and confidence of primary care providers. Potential patients impacted 2,300
Anticipated benefits	CKD patients will benefit from gold standard care without attending a specialist setting with clear care plans allowing timely completion of actions. Patients will experience an improvement in quality of care. Appropriate initiation and optimisation of medicines by HCO in line with local and national guidelines. Reduction in non-elective admissions and readmissions through early tailored interventions. Reduction in inappropriate referrals to outpatients. Improved team working across primary and secondary care interface allowing more support to avoid unscheduled hospital episodes.
Timeline	The project will commence on the 01 May 2026 and will continue for a duration of 12 months.
Contributions	The project will include the pooling of skills, experience and resources from both parties. AstraZeneca contribute to this project the total value of £81,086.56 which includes the clinical capacity and evaluation. AstraZeneca employee time is included in this contribution in the form of project management and data generation support defined within the agreement.

	The NHS partner contribution to this project totals £81,062.52. This contribution reflects NHS resource allocation for patient identification and clinical capacity and project analysis. The NHS 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.
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