

## SEL psoriasis biologic drug treatment pathway, Outcomes and Monitoring Framework – July 2018

### Key Outcomes:

The following NHS Outcomes Framework 2015/16 indicators have been chosen as key outcome measures;

1. Domain 2. Enhancing the quality of life for people with long term conditions. High quality outcomes are commissioned and delivered in line with current best practice and high value (see related guidelines at <http://www.nice.org.uk/> and SEL dermatology pathway)
  
2. Domain 4. Ensuring that people have positive experience of care. Care is commissioned and delivered in line with NICE Quality standards for Patient Experience (<http://www.nice.org.uk/guidance/QS15>) and psoriasis (<https://www.nice.org.uk/guidance/cg153>). To improve the quality of care for individual patients and their carers living with psoriasis and ensure care is well co-ordinated around their needs through a robust care planning and shared goal setting approach.

### Definitions:

**Adequate response** - achievement of PASI 75 or PASI 50 (or other standard disease severity assessment tool) with 5-point reduction in DLQI within the outlined timeline for each drug

### Psoriasis Measures:

Intervention	Target	Measure	Data Source	Who measures	Frequency of reporting – in any financial year
Quality marker: Patient initiated on biologic therapy by standard disease severity assessment tool (e.g. for plaque psoriasis, PASI	100% of patients should have disease severity score recorded at biologic initiation  100% of patients should have disease severity score recorded within 4 months of biologic initiation	% of patients with disease severity score recorded at biologic initiation  % of patients with disease severity score recorded within 4 months of biologic initiation	Trusts	Trusts	Annual – end of financial year (31 <sup>st</sup> March)

(psoriasis area and severity index)	100% of patients at 4 month review should continue therapy only if disease shows an adequate response	% of patients at the 4 months review who continue therapy only if disease shows an adequate response			
Quality Marker:  Patient continued on biologic therapy by standard disease severity assessment tool	100% of patients continuing biologic therapy should have a recent (within last 12 months) disease severity score  >90% of all psoriasis patients who are continuing therapy will have adequate response	% of patients on continuing biologic therapy who have a recent (within last 12 months) disease severity score  % of all psoriasis patients who are on continuing biologic therapy who have an adequate response	Trusts	Trusts	Annual – end of financial year (31 <sup>st</sup> March)
Quality Marker:  6 monthly review  All patients on biologics should have access to a comprehensive 6 monthly review in line with NICE Quality standards.  Review of treatment in line with pathway by PASI score	95% of all patients continuing biologic therapy should have a comprehensive 6 monthly review which is co-ordinated by the dermatology service.  Number of patients continuing biologic therapy who are stopped or switch to alternative therapy	% of patients on continuing biologic therapy who have a comprehensive 6 monthly review which is coordinated by the dermatology service  Number & % of patients on continuing therapy who have adequate response who have their current treatment stopped and subsequent next treatment offered (none or give drug details)  Number & % of patients on continuing biologic therapy who have NOT had adequate response who have their current biologic treatment stopped and subsequent next treatment	Trusts	Trusts	Annual – end of financial year (31 <sup>st</sup> March)

		offered (none or give drug details)			
<p>Quality Marker:</p> <p>All patients commencing biologic therapy for psoriasis who fulfil the entry criteria should be given the opportunity to be registered with the British Association of Dermatologists Biologic Register (BADBIR)</p>	<p>100% patients who fulfil entry criteria should be given the opportunity to be registered with BADBIR</p>	<p>% of patients registered with BADBIR</p>	<p>Trusts</p>	<p>Trusts</p>	<p>Annual – end of financial year (31<sup>st</sup> March)</p>
<p>Ensure that people with psoriasis have a positive experience of care</p>	<p>Conduct a snapshot survey to collect at least 50 completed patient satisfaction questionnaires to encompass key elements of <a href="http://www.nice.org.uk/guidance/QS15">http://www.nice.org.uk/guidance/QS15</a> guidance including assessment of working days lost</p>	<p>Submission of an anonymised high level summary of questionnaire results. Complete a brief action plan to encompass any learnings from the survey</p>	<p>Patient satisfaction questionnaire to encompass key elements of <a href="http://www.nice.org.uk/guidance/QS15">http://www.nice.org.uk/guidance/QS15</a></p>	<p>Trusts</p>	<p>Submission of questionnaire results annually – end of financial year (31<sup>st</sup> March)</p> <p>Use the patient reported experience measure (PREM) Questionnaire for consistency across Trusts</p>
<p>Ensure the most long term cost effective biologic is used first line</p>	<p>At least 35% biologic naïve patients to be initiated on adalimumab</p>	<p>% of initiation prescriptions in biologic naïve patients for each biologic</p>	<p>Trusts</p>	<p>Trusts</p>	<p>Annual</p>

<p>To ensure the best value from medicines – uptake of biosimilar medicines in line with the agreed pathway</p>	<p>All patients considered for biosimilar medication</p> <p>All new patients initiated on biosimilar medication where licensed and commercially available</p> <p>80% or greater of dispensed doses for infliximab are for the biosimilar brand</p> <p>80% or greater of dispensed doses for etanercept are for the biosimilar brand</p>	<p>% total number of dispensed doses (i.e. total number of biosimilar dose units (x), total number of doses, any brand (y))</p> <p>KPI figure = <math>(x/y) \times 100\%</math></p> <p>Exception reporting – number of patients reviewed to switch to biosimilar but remain on originator product</p> <p>100% of initiation prescriptions for biosimilar medication where available</p>	<p>Trusts</p>	<p>Trusts</p>	<p>Quarterly</p> <p>Q1: by 31<sup>st</sup> July</p> <p>Q2: by 31<sup>st</sup> October</p> <p>Q3: by 31<sup>st</sup> January</p> <p>Q4: by 30<sup>th</sup> April</p>
<p>Measure impact of the pathway on overall service commissioning costs to ensure value for money</p>	<p>High Cost Drugs use (biologics) by CCG in SEL</p>	<p>Quarterly breakdown of biologics use and cost by indication for psoriasis by Trust, by CCG in SEL</p> <p>London – uptake of biosimilar medicines by Trust</p>	<p>Acute activity</p> <p>LPP</p>	<p>South Coast CSU</p> <p>LPP</p>	<p>Quarterly</p> <p>Q1: by 31<sup>st</sup> July</p> <p>Q2: by 31<sup>st</sup> October</p> <p>Q3: by 31<sup>st</sup> January</p> <p>Q4: by 30<sup>th</sup> April</p>
<p>Measure safety and efficacy of dose escalations</p>	<p>100% patients on escalated will be reviewed in dermatology clinic within 6 months</p> <p>&gt;90% patients continuing dose escalation therapy at 6 months will have had an adequate response</p>	<p>% of patients on continuing biologic therapy who have a comprehensive 6 monthly review which is coordinated by the dermatology service</p> <p>% of all psoriasis patients who are on continuing biologic therapy who have an adequate response</p>	<p>Trusts</p>	<p>Trusts</p>	<p>Annual – end of financial year (31<sup>st</sup> March)</p>

		Number of patients on escalated dosing as defined in the pathway			
Measure safety and efficacy of use of biologics in psoriasis at high impact site as defined in the pathway	<p>100% patients with high impact site psoriasis on biologic therapy will be reviewed in dermatology clinic within 6 months</p> <p>&gt;90% patients continuing biologic therapy for high impact site psoriasis at 6 months will have had an adequate response</p>	<p>% of patients on continuing biologic therapy who have a comprehensive 6 monthly review which is coordinated by the dermatology service</p> <p>% of all psoriasis patients who are on continuing biologic therapy who have an adequate response</p> <p>Number of patients on biologic for high impact site psoriasis as defined in the pathway</p>	Trusts	Trusts	Annual – end of financial year (31 <sup>st</sup> March)