# **Executive Summary**

Ashford and St Peters NHS Foundation Trust and UCB Pharma Limited, Patient identification in fracture liaison services(FLS): supporting digital solutions with NHS clinical teams

### **Joint Working Project Executive Summary**

This summary has been written by UCB Pharma Ltd with consultation and approval from the Joint project working team.

The Ashford and St Peters NHS Foundation Trust and UCB Pharma Ltd, are embarking on a joint working project to ensure optimisation of FLS services to identify high risk patients, to prevent further fracture, assess, treat and monitor management of this cohort, facilitate easy access to the service from any clinician.

We could achieve the goal of finding the high-risk patients by deploying a digital FLS solution that transitions the current service from a reactive referral system to one that proactively identifies high risk patients.

Osteoporosis, literally "porous bone," is a disease characterised by weak bone. It is a major public health problem, affecting hundreds of millions of people worldwide, predominantly postmenopausal women. The main clinical consequence of the disease is bone fractures. In the UK in 2019 there were 527,000 new fragility fractures, 1,444 per day and 60 fractures an hour; by 2034 this is predicted to rise to 665,000 new fragility fractures per year. The cost of osteoporotic fractures in the UK accounted for approximately 2.4% of healthcare spending (i.e., £4.75billion out of £196.18 billion in 2019). These numbers indicate a substantial impact of fragility fractures on the healthcare budget  $^{1}$ 

In addition to pain and disability, some fractures are associated with premature mortality. <sub>1</sub>The impact of osteoporosis on individuals can be devastating. Fragility fractures can lead to loss of independence, mobility, and the capacity to carry out everyday tasks.<sup>2</sup>

The projects aim is to partner with UCB's digital solution provider to enable access to a patient management system and make it available to NHS FLS services. UCB agrees to provide the Trust with access to a digital FLS pathway solution, including all implementation of the module into existing systems and any follow-up optimisation needed. The FLS module shall be provided to UCB by Open medical.

Ashford and St Peters NHS Foundation Trust are adopting the FLS module to add to a suite of digital solutions that are existing or are to be planned to be implemented within their clinical systems. The primary objective of the project is to bring benefits to patients; the FLS service and improve patient outcomes through targeted identification of an at-risk population, support high quality assessment and management whilst adding aggregated patient data to nationally registered data set.

The key deliverables for the project:

- 1. An increased number of fracture patients identified for assessment
- 2. An improved time to diagnosis
- 3. A reduction in healthcare resource utilisation linked to diagnosis optimise workforce efficiency gain

- 4. Enhanced patient monitoring and treatment compliance
- 5. Real World Data (RWD) collection, increased understanding of fracture pathway

The resource commitments from the parties were similar. Financial commitment of £24,000 towards 12 months Pathpoint FLS Module from the Surrey Academic Health Care Partnership (energise funding) as part of Ashford and St Peters contribution; Match funding from UCB Pharma of £24,000 for another 12 months Pathpoint FLS module – total Pathpoint FLS module 24 months duration. Ashford and St Peters extra contribution of staff time allocated for development and implementation as well as extra clinic time for FLS £18,000. UCB staff contributed £9,800 to support the project's development and implementation. We believe this initiative aligns with the NHS 10-year plan by promoting prevention over sickness and advancing digital methods of working.

The project commences in July 2025 and is a 24-month commitment to the hospital Trust.

#### Intended benefit:

For the patient	Identification of those patients who have fractured and identified to
	services to assess for future fracture nationally is currently 36.5% <sup>3</sup>
	More high-risk patients identified for assessment
	<ul> <li>Increased number of and timely patient assessments completed</li> </ul>
	<ul> <li>Increased number of patients treated appropriately based on local, or national guidance</li> </ul>
	<ul> <li>Increased number of patients follow ups at 4 and 12 months, these are national care standards</li> </ul>
For the NHS	The financial and resource support given in this project gives the current
	Fracture Liaison service an opportunity to demonstrate:
	<ul> <li>Increased number of high-risk patients identified and assessed</li> </ul>
	Workforce efficiencies of FLS team
	Improved data collection and input into national crown audit
	Improved patient outcomes and identify unmet need
For UCB	Providing financial and resource support to the NHS Trusts in this project
	helps UCB understand further fragility fracture patient population.
	Better understanding of the challenges faced by the NHS in
	delivering high-quality patient services and care
	<ul> <li>Potential expansion of the relevant and eligible patient population as a result of the activity</li> </ul>
	It is expected to see an increase in the use of anti-osteoporotic
	medication in line with local and national guidelines and standards
	of care

It is anticipated that a report on the outcomes from this joint working project will be published July 2027

## For further information please contact:

Funmi Oluwa, Head of Market Access & External Engagement UCB Pharma Ltd

Email: Funmi.Oluwa@ucb.com

Tel: +44-17-5344 7116

Name Narender Nalajala Surrey IMSK

Name of NHS Trust: Ashford and St Peters NHS Foundation Trusts

Email narender.nalajala@nhs.net

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- 2. Royal Osteoporosis Society. APPG on osteoporosis and bone health. Available at: <a href="mailto:appg-on-osteoporosis-and-bone-health-fls-inquiry-inquiry-report-2021.pdf">appg-on-osteoporosis-and-bone-health-fls-inquiry-inquiry-report-2021.pdf</a> (windows.net) [accessed on 03.01.2025]
- Fracture Liaison Service Database
   https://www.fffap.org.uk/FLS/charts.nsf/benchmarks?readform&yr=2023&vw=&org1=
   [accessed on 03.02.2025]
   FLS-Reporting Benchmarks 2023 [accessed on 03.02.2025]

## Declaration

- 1. The project is in line with the ABPI code of practice
- 2. Does not constitute inducement to prescribe UCB Pharma products
- 3. The project has been approved by the NHS and UCB Pharma governance teams
- 4. The project will be published on the UCB Pharma transparency register.

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