

SEL Atopic Dermatitis Dupilumab Treatment Pathway, Outcomes and Monitoring Framework

Key Outcomes:

The following NHS Outcomes Framework 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 4.1. Importance of providing a positive experience of care for patients, service users and carers. Care is commissioned and delivered in line with NICE Quality standards for Patient Experience (<http://www.nice.org.uk/guidance/QS15>). To improve the quality of care for individual patients and their carers living with atopic dermatitis and ensure care is well co-ordinated around their needs through a robust care planning and shared goal setting approach.

Definitions

Adequate response - at least a 50% reduction in the Eczema Area and Severity Index score (EASI 50) **and** at least a 4-point reduction in the Dermatology Life Quality Index (DLQI) at 16 weeks from when treatment started, as outlined by the NICE technology appraisal.

Measures:

Intervention	Target	Measure	Data Source	Who measures	Frequency of reporting – in any financial year
Quality marker 1: Patients initiated on dupilumab using standard disease severity assessment tools (e.g. EASI	100% of patients initiated on dupilumab should meet NICE criteria at baseline (as outlined in SEL Atopic Dermatitis Dupilumab Treatment Pathway)	Denominator = the number of patients initiated on dupilumab during the audit period Numerator = the number of people in the denominator who meet NICE criteria at baseline*	Trusts	Trusts	Annual – end of financial year (31 st March)

South East London Integrated Medicines Optimisation Committee (SEL IMOC). A partnership between NHS organisations in South East London: South East London Clinical Commissioning Group (covering the boroughs of Bexley/Bromley/Greenwich/ Lambeth/Lewisham and Southwark) and GSTFT/KCH /SLaM/ Oxleas NHS Foundation Trusts and Lewisham & Greenwich NHS Trust

Approval date: July 2021

Review date: July 2022 (or sooner if indicated)

Not to be used for commercial or marketing purposes. Strictly for use within the NHS.

(eczema area and severity index)		*Baseline = any time prior to the initiation of dupilumab			
Quality Marker 2: Patients continued on dupilumab using standard disease severity assessment tools	>90% of all patients continuing on dupilumab should achieve and/or maintain an adequate response (as per NICE criteria)	Denominator = the number of people continuing dupilumab (beyond the first review date) Numerator = the number of people in the denominator who have achieved an adequate response Representative sample of patients annually To include any patient who has continued treatment beyond the first assessment as per NICE	Trusts	Trusts	Annual – end of financial year (31 st March)
Quality Marker 3: Ensure that people with atopic dermatitis have a positive experience of care	Conduct a snapshot survey of completed patient satisfaction questionnaires (each Trust to report back in relation to their local benchmark)	Submission of an anonymised high level summary of questionnaire results. Complete a brief action plan to encompass any learnings from the survey	Trusts	Trusts	Submission of questionnaire results annually – end of financial year (31 st March)

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