### **Outcomes Summary**

https://www.theattcnetwork.co.uk/news/future-proofing-the-uk-car-t-patient-referral-pathway

### **Background**

Chimeric Antigen Receptor T-Cell (CAR-T) therapy has been available in England for five years for patients with some types of blood cancer, after the NHS in England became the first public health system in Europe to make the therapy available. In 2019 CAR-T was also made available in Scotland, ensuring eligible patients in every devolved nation in the UK had access to CAR-T. It is now available to some adults with Diffuse Large B-Cell Lymphoma (DLBCL), Mantle Cell Lymphoma (MCL) and children, young people and adults with Acute Lymphoblastic Leukaemia (ALL).

Significant progress has been made in the last five years in expanding patient access to CAR-T: centre expansion means it is now available across sixteen adult specialist sites in the UK as of October 2023; patient referrals have increased; and CAR-T is now approved via routine commissioning for some blood cancer patients. Whilst progress has been made in scaling up the delivery of CAR-T, the referral pathway for patients remains the same now as it was in 2018, with referrals reliant on local and/or regional networks feeding into national panels to confirm eligibility.

### Project

As part of a collaborative working project, CGT Catapult entered a collaboration with Autolus Limited (Autolus), Gilead Sciences Ltd (Gilead) and Janssen-Cilag Limited (Janssen) who provided funds and input to two project delivery sites – The Christie NHS Foundation Trust (The Christie) and NHS Blood and Transplant (NHSBT). The project was to identify and analyse current CAR-T patient referral pathways in the UK and define future best practice.

The key aims/objectives of the project were to:

• Review patient referral pathways for access to standard of care and clinical trial CAR-T treatment options

• Acquire a picture of the current and future landscape by critically analysing bottlenecks, best practice, and preferences of key opinion leaders across North West and South West referral centres (England) and UK wide CAR-T treatment centres

• Produce an outline business case for change of delivery at CAR-T treatment centres

#### **Summary of findings**

Based on the findings from this engagement, the report details a series of recommendations linked to the following predominant four themes that arose from it:

#### 1. Streamlining patient identification and referral

Formalised referral processes should be established from secondary care to CAR-T treatment centres, to support streamlined patient referrals across the UK, with mechanisms to ensure referrals are received at the earliest time to minimise delay

## 2. Addressing inequalities in access to CAR-T

Work should be carried out to identify causes of variation in access to CAR-T, with targeted measures then implemented to support access for underrepresented demographics

# 3. Overcoming barriers in capacity and infrastructure

A review of the capacity and infrastructure across the system required to deliver CAR-T should be carried out, both now and in anticipation of future demands, to ensure the system is ready for expected increases in CAR-T patient numbers and approved indications

# 4. Delivering reforms aimed at workforce training and communication

Reforms aimed at delivering improvements in training and communication within the CAR-T workforce should be implemented, to increase awareness of CAR-T and the patient referral pathway

CP-444694 – April 2024