



# **BUSINESS PLAN** 2021-2022



European Union European Regional Development Fund



# The AHSN Network

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# Business Plan 2021-2022

# INTRODUCTION

After a year in which our business plan was put to one side as we reached out to support partners locally and nationally, we remain ready to adapt to whatever lies ahead.

Our work plan for the year reflects this flexibility and readiness to refocus, with new staff being recruited to deliver new and expanded programmes and an internal restructure which enables us to focus on both national and local priorities.

As one of fifteen academic health science networks (AHSNs) we are reviewing our strategy on collective work as The AHSN Network and anticipate some changes in how we lead national programmes and engage with key national stakeholders.

Our aim remains to deliver nationally prioritised programmes of innovation and improvement, while focussed on working closely with system leaders in the North West Coast, to help meet their most urgent priorities.

We are also focussed on making progress towards our pledges to improve the equality, diversity and inclusion of all our work.

#### **Our vision**

To transform lives through health and care innovation.

# Our goals

- Develop cultures that promote equity and allow innovation to thrive
- Stimulate economic growth and create jobs in the health and life sciences sector

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• Increase the spread and adoption of innovations through collaboration

#### **Our values**

- Caring
- Collaborative
- Courageous
- Innovative
- Engaging all voices



Academic Health Science Network or the North West Coast



# **PROGRAMMES AND OBJECTIVES**

Most of the programmes we deliver are national commissions from NHS England and Improvement (NHSE/I) which include supporting the Accelerated Access Collaborative and the Patient Safety Collaborative programme; and the Office of Life Sciences, or they are created locally responding to the needs of our local system partners.

The patient safety commission is tightly prescribed in terms of focus and deliverables. The OLS commission is tightly prescribed in terms of the capabilities that we must offer industry but gives us freedom to focus on sectors that reflect local life science-related industry strengths, local research strengths and local health and care system needs.

The NHSE/I commission is a hybrid with some of the resource earmarked for national programmes delivered by all fifteen AHSNs and some earmarked for local determination with our local system partners. Our local work is also supported by commissions from third parties.

# NATIONAL COMMISSIONS

#### **Patient Safety**

Building on the work of the last six years, the fifteen Patient Safety Collaboratives (PSCs) led by AHSNs will continue as the main delivery arm to support the delivery of the five national patient safety improvement programmes. An outline of the aims for each programme is provided below.

**Managing Deterioration**: Reduce deterioration associated harm by improving the prevention, identification, escalation and response to physical deterioration, through better system co-ordination and as part of safe and reliable pathways of care by March 2024.

**Maternity and Neonatal**: Contribute to the national ambition, set out in Better Births, to reduce the rates of maternal and neonatal deaths, still births and brain injuries that occur during or soon after birth by 50 per cent by 2025; contribute to the national ambition, set out in Safer Maternal Care, to reduce the national rate of preterm births from eight to six per cent; improve the safety and outcomes of maternal and neonatal care by reducing unwarranted variation and provide a high quality healthcare experience.

Adoption and Spread: Identify and support the spread and adoption of effective and safe evidence-based interventions and practice across England by March 2023.

**Medicines Safety**: Reduce medication-related harm in health and social care, focusing on high-risk drugs, situations, and vulnerable patients. The programme will contribute to the WHO Challenge (2017) to reduce severe avoidable medication related harm by 50 per cent over five years.

**Mental Health**: Improve safety and outcomes of mental health care by reducing unwarranted variation and providing a high-quality healthcare experience for all people across the system by March 2024. Our current commission is for October 2020 – March 2022, with the licence continuing until March 2025. Ongoing, there is a greater commissioning focus on the impact on patient outcomes.

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# Cardiovascular disease prevention

The NHS Long Term Plan identifies cardiovascular disease (CVD) as the single biggest area where lives can be saved by the NHS over the next ten years. The national lipid optimisation and familial hypercholesterolemia (FH) programme aims to reduce heart attacks and strokes by optimising the detection and management of at-risk patients and supporting the use of lipid lowering medicines. The programme will also improve the number of patients identified and treated for FH through genetic diagnosis.

#### CVD and respiratory local programmes

CVD prevention is a priority in Cheshire and Merseyside and we have established a joint post with the Champs public health collaborative. We are part of a CVD implementation group and are delivering quality improvement programmes in tackling atrial fibrillation and hypertension. A range of initiatives are underway which include BP @Home and LTC (long term conditions) @Home, providing tech in people's homes to monitor conditions and respond quickly to any changes.

A respiratory quality improvement collaborative will be organised to support colleagues with pulmonary rehabilitation and asthma programmes.

#### National partnership working between the NIHR Applied Research Collaboratives (ARCs) and AHSNs focusing on 'beneficial changes' arising from the pandemic

Across England the fifteen ARCs and AHSNs are working in partnership to review areas of beneficial change arising from COVID with the aim of identify gaps in evidence, future potential research questions and insight to support wider adoption of changes with a robust evidence base. In the North West Coast, our ARC will be focussing on developing implementation evidence behind the pulse oximetry @Home rollout. We will also be evaluating the application and effectiveness of two neonatal/maternity systems – Badgernet EPR and NEST @Home, for neonatal supported early discharge.

# NATIONALLY PRIORITISED INNOVATIONS

The Accelerated Access Collaborative (AAC), hosted by NHS England, brings together industry, government, regulators, patients, and the NHS to remove barriers and accelerate the introduction of ground-breaking new treatments and diagnostics which can transform care. We act as a delivery partner for the AAC, supporting the spread and implementation of innovations prioritised by the AAC.

The AAC has two key workstreams:

The Rapid Uptake Products (RUPs) programme has been designed to support stronger adoption and spread of proven innovations. It identifies and supports products with NICE approval that support the NHS Long Term Plan's key clinical priorities but have lower than expected uptake to date.

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For 2021/22, we will support the delivery of all three RUPs and our chief executive Dr Phil Jennings is the lead for the national AHSN Network on the RUPs programme.

**MedTech Funding Mandate** A(MTFM) is a policy launched by NHS England to signal and support impactful technologies for widespread adoption and support.

During early 2021/22, our work will focus on two areas; we will engage our local health systems to promote the new policy and pave the way for future innovations joining the policy. We will support the adoption of the first set of MTFM technologies. As further technologies are named to be part of the policy in 2022/23, our efforts will shift to supporting the adoption planning across the North West Coast.

The NHS Innovation Accelerator (NIA) supports the uptake and spread of proven, impactful innovations across the NHS, benefitting patients, populations, and NHS staff. It is funded jointly by the fifteen AHSNs and NHSE/I and managed by UCLPartners.

Each year themed applications are invited for innovations that are desirable and/or can satisfy an unmet need in healthcare. At any one time, each AHSN is expected to actively provide support for around 36 Fellows (12 per year) and their innovations, dependent on the needs of their local healthcare systems.

We have a successful track record in supporting NIA fellows and innovators to apply for NIA fellowships. In our region, the latest Fellows to join the Accelerator are Heather Cook with Brain in Hand and Lee Omar with Safe Steps, joining Dave Burrows of Damibu and Liz Ashall Payne of ORCHA.

# WORKFORCE

There are around 1.4 million people working in the NHS in England. These figures include staff in ambulance, community, mental health, and hospital services as well as clinical commissioning groups and central bodies like NHS England and Improvement, making it the largest employer in England.

In July 2020, NHS England and Improvement published the NHS People Promise and a 2020/21 People Plan, setting out how to address workforce pressures.

This AHSN Network national programme aims to support regional spread of innovations that consider new ways of working and delivering care, while focusing on activities that support the wellbeing of staff.

#### Innovations which increase productivity

We are looking to support our local systems with innovations that create efficiencies in complex processes, release time in busy schedules and facilitate working together, to improve the experience of working in the NHS for everyone. We are also supporting care home staff to increase efficiency by delivering training in using Restore2, a tool to help identify and manage deterioration.

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# Psychology trainee role

A new trainee associate psychology psychology (TAPP) role was successfully created in the North West Coast through a pilot project led by the Innovation Agency and funded by Health Education England. This resulted in 50 fully funded roles in primary and secondary care.

We have secured funding from Health Education England for a second phase and in the coming year another cohort of trainees will be recruited, boosting numbers working in psychology services and widening the NHS career entry route for psychology graduates.

# **MENTAL HEALTH**

# **Eating disorders**

The FREED (First episode Rapid Early intervention for Eating Disorders) model has been developed by South London and Maudsley NHS Foundation Trust and King's College London. It is an innovative, evidence-based, specialist care package for 16 to 25-year-olds with a first episode eating disorder of less than three years' duration. It aims to reduce the duration of untreated eating disorders in young people, reduce waiting times and day/inpatient admissions and improve clinical outcomes.

We will support the adoption of spread of this programme.

# **Attention Deficit Hyperactivity Disorder (ADHD)**

In the UK, children can wait on average eighteen months from their first appointment to receiving a formal ADHD diagnosis and the annual cost of ADHD assessments to the NHS is estimated at around £23m.

The Focus ADHD intervention uses technology created by health technology company Qbtech Ltd. The technology, QbTest, measures a patient's attention, impulsivity, and motor activity all at the same time. These indicators are core symptoms of ADHD and accurate measurement adds objectivity to support timely diagnosis. The intervention has shown a reduction in time to diagnosis by 153 days (median).

#### Forthcoming new national programmes

Our NHSE/I commission requires the 15 AHSNs to develop three further national programmes in 2021/22. The AHSN Network, the umbrella body for the 15, will be seeking to identify potential programmes in quarter two of 2021/22 with a view to detailed design beginning in quarters three and four.







# ENTERPRISE AND ECONOMIC GROWTH

The Office for Life Sciences (OLS) commissions AHSNs to work with the health and life sciences sector, supporting economic growth for the UK while delivering on patient outcomes and bringing value to the NHS.

Specifically, we are asked to provide four core functions as below.

# 1. Understanding the need and communicating demand

We provide a horizon-scanning and options appraisal offer to our NHS bodies ensuring, as they look to transform their systems, that we can connect them with innovations which are already in place in other pockets of the NHS; or which are at a late stage in development and may be seeking real word evaluation partners.

# 2. Support and signposting for innovators

We support innovators from commercial, clinical, academic or other backgrounds to accelerate the development of their solution in order that it reaches patients faster and meets the needs of the NHS.

# 3. Gathering Real World Evidence

Many innovators invest significant time and resource demonstrating that their product 'works' and then find that its level of evidence is insufficient for buyers or key decision makers, who need to also know whether the product is 'worth it'. We broker partnerships between commissioners and providers to undertake 'real world' testing to create evidence to support adoption and spread.

# 4. Spread and adoption

The final core function commissioned by the OLS focuses on ensuring the spread and adoption of innovations into new settings and sites. In many cases this work is done through matrix working with AHSN teams supporting the nationally prioritised innovations such as Rapid Uptake Products and Med Tech Funding Mandate and via our clinical themed programmes.

Through our Enterprise and Growth Team we offer dedicated support for local SMEs through our Health Matters programmes, delivered in three areas, Cheshire and Warrington; Liverpool City Region; and Lancashire.

Our team excels in this area and during 2020-21 the Innovation Agency Enterprise and Growth Team helped to bring in £35.3m of investment; create 112 jobs in the region; and support a total of 389 companies, compared with 345 the previous year.





# International collaborations

We have an international team working with partners in other countries to support the spread of pioneering new technologies and innovations, primarily through the EIT Health Bridgehead programme and through collaborations to attract inward investment.

#### **Innovation Pipeline**

All 15 AHSNs have developed a pipeline of innovation, working with universities, NHS and agencies such as the NIHR ARC NWC and CRN NWC to map innovations from the idea stage through stages including a panel assessment; evaluation; testing against other solutions and assessing market need; and supporting their adoption and spread.

These regional pipelines of innovation will be federated into a single national pipeline to enhance our ability to support scaling of adoption nationally. Work began on this last year and will continue over the next 12 months.

# **Liverpool City Region Ventures**

Our Director of Enterprise and Growth has been leading a programme of work to develop an incubator, Liverpool City Region Ventures, to support innovators from the area's NHS trusts, universities and business sector. This will be launched in autumn 2021, with the director Lorna Green on secondment to build the team and develop the operating model.

# LOCAL PROGRAMMES

#### Supporting our local systems

Our team includes colleagues who are embedded in the two integrated care systems in the North West Coast and they are supporting the development of the ICSs and places. This includes supporting 'adopt and adapt' programmes to identify and implement innovations that support these programmes. The programmes focus on endoscopy; virtual outpatient consultations; cancer; and elective waiting lists.

# **Digital transformation**

After successfully supporting the rollout of Oximetry @Home in the last year, our team are helping to build on this work with the subsequent Proactive Care @Home and virtual wards, introducing tech to people's homes and providing remote support, to improve care and reduce hospital admissions.

Digital transformation is continuing in care homes and regulated care and in adult social care; our digital team are part of this work and facilitating cross-sector collaborations.

# Staff wellbeing digital hub development

We are supporting the Cheshire and Merseyside People Board to manage a programme to develop enhanced wellbeing services to all NHS and social care staff in Cheshire and Merseyside, by creating a platform offering digital resources and signposting staff to available services.

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# **CROSS CUTTING CAPABILITY**

# **Innovation Agency Coaching Academy**

Our Coaching Academy delivers a variety of learning experiences for individuals and teams aimed at building a healthy culture for innovation.

There are programmes for culture change and for spread and adoption of innovations; and coaching for system leadership and workforce development.

At a system level, the Coaching Academy programmes seek to shift mindsets, build capacity for transformation, and support implementation. The aim is to improve workforce resilience and wellbeing, build talent and find the potential in all people.

The team has a track record for delivery and the necessary capabilities to deliver high quality, accredited coach training and education courses. They are in high demand to support our systems and regularly receive commissions to work collaboratively, for instance on leadership development at an integrated care system level; on remodelling care pathways; and on developing innovation strategy.

Commissioned programmes to be delivered 2021 to 2022 include new pathway modelling, for pulmonary rehabilitation and for adult ADHD; improvement collaboratives, including a trailblazer Proactive@Home programme; and communities of practice such as Q members and Innovation Scouts.

#### Patient and public involvement (PPI)

The main focus of our patient and public involvement work is involving people in our patient safety programmes; supporting collaborations with innovators and small businesses; and providing feedback on innovations.

During 2020 our two Public Involvement and Engagement Senates, for Cheshire and Merseyside and Lancashire and South Cumbria, met together via Zoom and meetings will continue online, though some physical meetings are also planned.

A new group was formed last year, the Patient Safety Involvement and Engagement Senate which will review our work to deliver the National Patient Safety Improvement Programmes in the North West Coast.

We will continue to offer public and patient feedback on new products, reviewing them, helping to co-produce solutions and finding volunteers for trials, as part of our economic growth work.

There are now more than 70 volunteer Atrial Fibrillation Ambassadors who carry out pulse tests in order to spot people at risk of stroke. These will be joined by Heart Heroes – volunteers who will test blood pressure and pulses and offer advice on cholesterol as part of our work to prevent cardiovascular disease.







# **Communications and events**

A busy calendar of events will be delivered to support all our programmes of work and it is envisaged that these will continue to be online to the end of 2021.

The annual NHS in the North Excellence in Supply Awards will be held online in September 2021, organised by the Innovation Agency and sponsored by all four AHSNs in the North – Yorkshire and Humber; North East and North Cumbria; and Health Innovation Manchester.

Our annual North West Coast Research and Innovation Awards were not held last year and it is planned to hold this event again in early 2022. This is organised jointly with NIHR ARC NWC and NIHR CRN NWC.

Communications are mainly digital, with online publications and newsletters; videos and podcasts; and regular interaction on Twitter and LinkedIn.

#### **CONTACT US**

Innovation Agency Vanguard House Sci-Tech Daresbury Halton WA4 4AB

Offices: Liverpool Science Park / Preston Business Centre / Sci Tech Daresbury

Info@innovationagencynwc.nhs.uk



0151 254 3400

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On LinkedIn, YouTube, all mainstream podcast channels and Twitter @innovationnwc





