



Wessex
Academic Health
Science Network



Supporting health, wealth and transformation across Wessex

Wessex Academic Health Science Network Annual Review

2016- 2017

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wessexahsn.org.uk



The Board



Fiona Driscoll
Chair, Wessex AHSN



Richard Samuel
Commissioning Member
Lead, Hampshire & Isle of Wight STP
Chief Officer at Fareham & Gosport
CCG and South Eastern Hampshire CCG



Tony Horne
University Member
Director of Strategic Health
Partnerships at the University
of Portsmouth



Fiona Dalton
Provider Member
Chief Executive Officer at University
Hospital Southampton NHS
Foundation Trust



Tim Thurston
Commissioning Member
Innovation Lead at West
Hampshire CCG



Phil Richardson
Commissioning Member
Director of Transformation at Dorset CCG
and STP Lead Director for Dorset STP



Bill Gillespie
Chief Executive, Wessex AHSN



Iain Cameron
University Member
Professor of Obstetrics & Gynaecology
and Dean of the Faculty of Medicine at
the University of Southampton



Karen Baker
(Served until March 2017)
Provider Member
Chief Executive Officer at Isle of
Wight NHS Trust



Alex Whitfield
(Served until March 2017)
Provider Member
Chief Operating Officer at Solent
NHS Trust



Tony Spotswood
(Served until March 2017)
Provider Member
Royal Bournemouth and Christchurch
Hospitals NHS Foundation Trust

Members and stakeholders

NHS Trust Members

Dorset County Hospital NHS Foundation Trust
Dorset Healthcare University NHS Foundation Trust
Hampshire Hospitals NHS Foundation Trust
Isle of Wight NHS Trust
Poole Hospital NHS Foundation Trust
Portsmouth Hospitals NHS Trust
Royal Bournemouth and Christchurch Hospitals NHS
Foundation Trust
Salisbury NHS Foundation Trust
Solent NHS Trust
Southern Health NHS Foundation Trust
Foundation Trust
University Hospital Southampton NHS
Foundation Trust

Member Universities

Bournemouth University
Southampton Solent University
University of Portsmouth
University of Southampton

Clinical Commissioning Group Members

Dorset CCG
Fareham and Gosport CCG
Isle of Wight CCG
North Hampshire CCG
North East Hampshire and Farnham CCG
Portsmouth CCG
South Eastern Hampshire CCG
Southampton City CCG
West Hampshire CCG
Wiltshire CCG

Stakeholders

Industry
Clinical Research Network
Health Education England (Wessex)
NIHR CLAHRC Wessex
NHS England Wessex Area Team
Strategic Clinical Networks
Local authorities
Third sector organisations

The Executive Team



Fiona Driscoll, Chair

Fiona specialises in designing transformation strategies and operational plans to deliver successful outcomes across the public, private and third sectors. In the public sector, her work includes advice and support to Ministers and senior civil servants on cross-cutting programmes on efficiency, delivery, policy reform and IT strategy.



Bill Gillespie, Chief Executive

Bill is an experienced health manager who has worked at board level in health organisations in the UK and overseas for the last 15 years. Since returning to the UK in 2014, Bill has fulfilled a number of consultancy roles including support to the London Health Commission, South West London and St George's Mental Health Trust, Katie Piper Foundation (health charity) and as Interim Regional Director of Specialised Commissioning for NHS England South, before starting with Wessex AHSN in January 2016.



Dave Meehan, Director for Partnerships and Deputy CEO

Dave has worked in the Wessex NHS for almost 40 years and held board positions for 20 years including Director and Managing Director of Clinical Services, Strategy, Service Improvement, Performance Management, Communications and Engagement.



Andy Burroughs, Director of Wealth and Enterprise

Andy has 25 years' experience in a variety of sales and marketing roles operating across the public and private sector, and most recently was Director of Business Development at Tamar Science Park in Plymouth. Before that he was Director of Business Development at Ipswich Hospital NHS Trust and spent 10 years at Microsoft.



David Kryl, Director of Insight

David's career has revolved around strategy, performance and project management in complex environments. David previously held a dual role as Head of Business Intelligence at the National Institute for Health Research and Research Leader in the RAND Europe Innovation and Technology Policy team. David has also contributed to building science capacity in developing countries both in the private sector, through a biotech start-up, and the United Nations.

At Wessex Academic Health Science Network (AHSN) we are clear about our mission

We connect NHS and academic organisations, local authorities, the third sector and industry. We help create the right conditions to facilitate change across whole health and social care economies, with a clear and consistent focus on citizens, service users and patients. Our twenty-five members work with each other, and with a broad range of stakeholders, to support the creation of wellbeing and wealth in Wessex through making innovation happen at speed and scale.

We are fully aligned with NHS England's refreshed Five Year Forward View, and are working ever-more closely with the three STPs within Wessex. We are, every day, strengthening our understanding and value in the health and social care system.

In health, as in other sectors, innovation and adoption at scale is increasingly driven by interdisciplinary research, synergies between industries, and a step-change in end-user (citizen, consumer, patient) engagement in the process. Seeing the wood from the trees, making connections, spotting opportunities, and understanding how to get traction requires a breadth of perspective and strong roots into, and across, that landscape.

AHSNs connect horizontally across research, industries, commissioners, providers and users; and network vertically between policy formulation, system design, operational coal-face and end-user experience. That role takes us across all parts of the NHS, into industry, local government and other public agencies, into universities, charities, start-ups, and into funders.

We work up and down the system: from the role of the GP receptionist in improvement and innovation; to dialogue with policy makers and regulators about refining system design to support adoption and spread of innovation.

Networks which are open to, and embrace, the diverse perspectives of these stakeholders will, in turn, help the systems and members whom they support, remain open to the adoption and spread of innovation.

That is what we, Wessex AHSN, aspire to. We hope you find this spirit reflected in our review of 2016/17; and in our reinvigorated business plan, which takes us to March 2018.



Fiona Driscoll
Chair, Wessex AHSN



Bill Gillespie
Chief Executive, Wessex AHSN

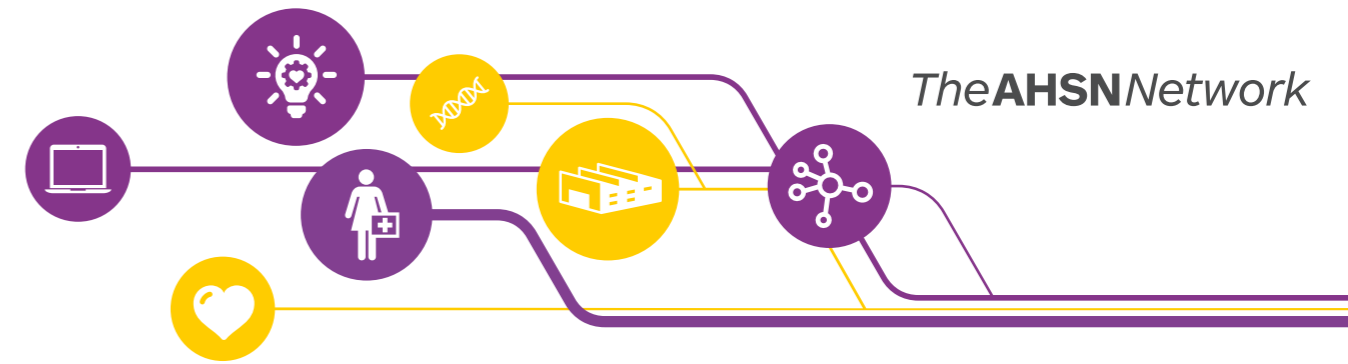


How we work with other AHSNs

These tables show where we have spread good practice to and where we have adopted good ideas from other AHSNs in England. All 15 AHSNs work closely to help share the good work happening in their areas across the whole of England, for patient and NHS benefit.

Workstream	Name of Innovation	Eastern AHSN	East Midlands AHSN	Greater Manchester AHSN	Health Innovation Network	Imperial College AHSN	Innovation Agency NWC	Kent Surrey Sussex AHSN
PSC	Meds Safety Cluster	Spread to	Spread to	Spread to	Spread to	Spread to	Spread to	Spread to
Alcohol	Know Your Numbers	Spread to	Spread to	Spread to	Spread to	Spread to	Spread to	Spread to
Alcohol	ARLD Big Data (CIS Data)	Spread to	Spread to	Spread to	Spread to	Spread to	Spread to	Spread to
Alcohol	ARLD Patient ID and Treatment	Spread to	Spread to	Spread to	Spread to	Spread to	Spread to	Spread to
Dementia	iSPACE							Spread to
Mental Health	SIM	Spread to	Spread to	Spread to	Spread to			Spread to
Atrial Fibrillation	Starting Anticoagulation with Jack	Spread to	Spread to	Spread to	Spread to	Spread to	Spread to	Spread to
Medicines Optimisation	Magnesium Sulphate		Spread to				Spread to	
Industry and Innovation	NquiringMinds							Spread to
Industry and Innovation	Attomaker Ltd							Spread to
Genomics	100k Genomes guide for cardiologists		Spread to					
Genomics	Café Scientifique for 100k Genomes							
Nutrition	OPEN Toolkit	Spread to	Spread to	Spread to	Spread to	Spread to	Spread to	Spread to

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PSC	Emergency Laparotomy Collaborative							Received from
PSC	Sepsis Cluster						Received from	
PSC	Discharge Cluster							
PSC	Emergency Department checklist							
PSC	South of England Mental Health Collaborative							
Alcohol	Alcohol Commissioning Document				Received from			
Industry and Innovation	Diasolve Limited							
Industry and Innovation	getUBetter							
Industry and Innovation	Rewired Health							
Industry and Innovation	Dr Boorer Target Health Solutions							
Industry and Innovation	Heartfelt Technologies							
Nutrition	Hydration toolkit							Received from



Workstream	Name of Innovation	North East North Cumbria AHSN	Oxford AHSN	South West AHSN	UCL Partners AHSN	West Midlands AHSN	West of England AHSN	Yorkshire and Humber
PSC	Meds Safety Cluster	Spread to	Spread to	Spread to	Spread to	Spread to	Spread to	Spread to
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Genomics	100k Genomes guide for cardiologists							
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Mapping our work to NHS England's Five Year Forward View

Key: Five Year Forward View priorities

● Health and wellbeing ● Care and quality ● Finance and efficiency

Dorset	Matching the Gaps		
Atrial Fibrillation		●	●
Data-driven, digitally-delivered personalised healthcare	●	●	●
Dementia	●	●	●
Extended primary care systems	●	●	●
Healthy ageing	●	●	●
Industry and Innovation	●	●	●
Medicines Optimisation	●	●	●
Mental Health	●	●	●
Nutrition in older people	●	●	●
Optimising intelligence		●	●
Patient Safety Collaborative		●	●
Personalised medicine and genomics	●	●	●
Reducing harm from Alcohol	●	●	●
Respiratory	●	●	●
Vanguard Evaluation and New Models of Care	●	●	●
Wessex International Healthcare Consortium			●

Mapping AHSN programmes to the local Sustainability and Transformation Partnerships (STPs)



Programme	Dorset					STP Hampshire and Isle of Wight			South Wiltshire				
	One acute network	Integrated community services	Prevention at scale	Digitally enabled	Leading and working differently	Addressing financial gap	Addressing care and quality gap	Addressing health and wellbeing gap	Transforming primary care	Focus on prevention and proactive care	Making best use of our estates and technology	Ensuring the sustainability of acute hospitals	Improved collaboration across hospital trusts
Atrial Fibrillation		●	●		●	●	●	●		●	●		
Data-driven, digitally-delivered personalised healthcare	●	●	●	●	●	●	●	●	●	●	●	●	●
Dementia		●	●		●	●	●		●	●			
Extended primary care systems		●			●	●	●		●	●	●	●	
Healthy ageing		●	●		●	●		●	●	●			
Industry and Innovation				●	●	●	●		●	●	●		
Medicines Optimisation		●	●		●	●	●	●	●	●	●	●	
Mental Health			●		●	●	●	●		●		●	
Nutrition in older people		●	●		●	●	●	●	●	●		●	
Optimising intelligence			●	●			●	●			●		
Patient Safety Collaborative					●		●			●		●	●
Personalised medicine and genomics	●		●		●	●	●	●		●		●	
Reducing harm from Alcohol			●			●	●	●		●			
Respiratory		●	●		●	●	●	●		●			●
Vanguard Evaluation and New Models of Care		●			●	●	●	●	●	●	●		
Wessex International Healthcare Consortium					●	●					●	●	



“Wessex AHSN is a key partner in the development and delivery of the Hampshire and Isle of Wight STP. The AHSN’s work is supporting the aims of the STP; which will ultimately shape, and improve, care and services for people in Hampshire and on the Isle of Wight. The AHSN is helping the NHS in our area design new ways of delivering services, helping people get the most from their medicines, and finding ways to bring digital innovation into NHS services; in addition to helping the NHS share and harness patient data, which will help deliver truly patient-centred care.”

Richard Samuel, Hampshire and Isle of Wight STP Lead Officer



“The AHSN is developing support for the Dorset STP across its key delivery areas, especially Leading and Working Differently, Prevention at Scale and Integrated Community and Primary Care Services. The AHSN’s programmes highlight – among others - different ways of treating patients with dementia, undernutrition, reducing alcohol harm and respiratory conditions; and also explore digital health, sharing data and helping the NHS in Dorset to spot innovation for the benefit of local people. We look forward to an exciting, innovative and transformative 2017/18.”

Dr Phil Richardson, Dorset STP Lead Director and AHSN Board member

Digital Health programme: looking to healthcare of the future



What was delivered in 2016/17?

- Active and ongoing involvement in the Hampshire and Isle of Wight STP Digital Transformation Board, and an advisory role within the STP prevention workstream
- Delivery of Digital Workshop (STP leaders/University of Southampton) on self-management, and planning for further activities from the workshop
- Input into the Healthy Towns programme including planning and delivery of an innovation workshop
- Support to the digital care homes project with Southampton City CCG in conjunction with BUPA
- Continue support to SME network developments – health and care
- Sponsorship and delivery of the Southern Institute of Health Informatics conference
- Ongoing work with the National Institute for Health Research Collaboration for Leadership in Applied Health Research and Care (NIHR CLAHRC) in Wessex to support the take-up of GENIE, a digital tool to help patients tap into social networks
- Participation in the AHSN health innovation surgeries for Small and Medium-sized Enterprises (SMEs)
- Relationship building with big business to raise the profile of AHSN work and identify opportunities for joint working
- Review of digital input into undergraduate courses commissioned by Health Education England Wessex
- Review of Summary Care Record (SCR), and its use by pharmacists in an acute setting
- Established links with the national opt-out and consent model programme for data-sharing and the development of consultation capacity



Input into the Healthy Towns programme including planning and delivery of an innovation workshop



Continued support for SME network developments – health and care



Over 600
people viewing our digital health web pages and blog



Search wessexahsn.org.uk/video for big data film



How has the AHSN helped you in 2016/17?

The team in Wessex has supported us with fund raising, networking through attending events and direct introductions with key people in the NHS and beyond.

What are the greatest challenges for your work?

Moving from a prototype product to market, with evidence of efficacy for the NHS and patients.

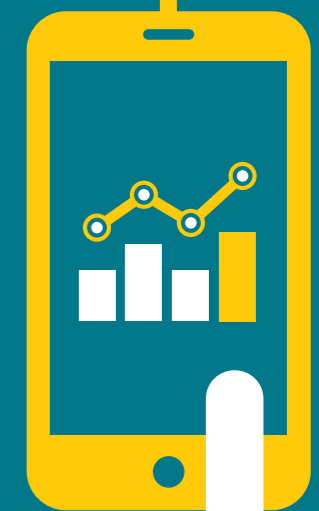
What are you most proud of?

Winning two SBRI phase one awards for our Lifelight technology, which we achieved with support from the AHSN.

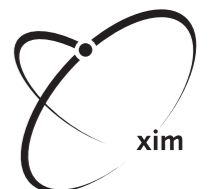
What's in store for 2017/18?

Our first sales of Lifelight, clinical trial results, Community European (CE) marking, and getting stuck into SBRI phase two projects. We're planning Wessex-wide trials of our technology (thanks to the AHSN) in partnership with University Hospitals Southampton NHS Foundation Trust, Portsmouth Hospitals NHS Trust and Dorset Clinical Commissioning Group.

Spotlight on:
Laurence Pearce,
CEO of xim Ltd –
a Wessex-based
healthcare innovation
company



You can follow Laurence on twitter:
@laurencepearce or find out more
about xim here: www.xim.ai



Mental Health: Wessex Treatment and Recovery In Psychosis (TRiumPH) – improving psychosis care through faster access to assessment and treatment

What was delivered in 2016/17?

- Development and implementation of a co-produced psychosis care pathway, within **four Early Intervention in Psychosis (EIP) Teams across Hampshire**, covering a population size of **approx. 1.3 million**
- Over 900 people** have entered the pathway since launch in 2015
- 60% people assessed within seven days and 82% people assessed within 14 days**, supporting earlier engagement, support and recovery
- Development and roll out of a comprehensive physical health assessment, supporting teams to reduce the 15-20 year mortality gap for those experiencing a severe mental illness
- Increasing numbers of staff trained in evidenced based interventions: CBT, family interventions, employment support and physical health
- Programme highly commended at the National Positive Practice in Mental Health Awards in October 2016

Wessex-wide developments:

- The AHSN has led on the development of a local Wessex-wide EIP Network to promote the spread of good practice, peer support and networking across the region
- All Wessex providers are consistently exceeding the national two week access standard for psychosis



60% of people
assessed within seven days and
82% of people
assessed within 14 days,
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Development and implementation of a co-produced psychosis care pathway, within **four Early Intervention in Psychosis Teams across Hampshire**, covering a population size of

approx 1.3 million



Dementia: supporting Wessex GP surgeries to improve dementia care

What was delivered in 2016/17?

- Completion of iSPACE in **54 surgeries**
- Implementation of iSPACE in **174 surgeries**
- Over 1,000 staff trained in 2016**
- 6% reduction in clinical consultations**
- 16% increase in diagnosis rates in surgeries implementing iSPACE**
- £34,400 savings per annum in 20 surgeries** due to reduction in consultations



1,000
staff trained in 2016



£34,000
savings per surgery,
per annum in 20 surgeries
due to reduction in
consultations

What's next for iSPACE?

- Successful handover to Wessex Clinical Commissioning Groups (CCGs) of iSPACE – success measured by take up from CCGs and provider trusts adopting iSPACE as part of standard practice
- To **spread to 40% of Wessex GP surgeries by the end of May 2017**
- Analysis of data from 40 participating surgeries and demonstrating measures of impact
- Analysis of three focus groups to measure the impact of adoption of iSPACE



174
Implementation of iSPACE
in 174 surgeries



54
Completion of iSPACE
in 54 surgeries



16%
increase in diagnosis rates
in surgeries implementing
iSPACE



Search wessexahsn.org.uk/videos for iSPACE dementia

Toolkit available and find out more:
All of the resources to make a GP surgery Dementia Friendly are all available on our website:
wessexahsn.org.uk/inspace



Wessex Patient Safety Collaborative: supporting safety for patients by improving capability for local NHS staff

What was delivered in 2016/17?

- Increased traction across Wessex: higher number of events with more participants and networks and new penetration into maternity, primary care and emergency departments (ED)
- Engaged 150 staff in the physical deterioration collaborative, and delivered outreach sessions to approximately 130 primary, community and social care staff
- Suspicion of Sepsis data indicates a reduction in sepsis mortality across Wessex
- Emergency Laparotomy data shows a 19% decrease in crude mortality and a 25% decrease in 30 day-risk adjusted mortality, with a 22% increase in blood lactate [sepsis screening] and a 20% increase in post-op critical care
- Human Factors sessions delivered for 100 staff
- Development and testing of the Scale-Up Template and the Safe Practice Framework
- 320 CSIP members and a successful CSIP conference attended by 240 people
- Completed rollout of the LIFE QI System, the health and social care quality improvement platform



19%

decrease in crude mortality for patients undergoing emergency laparotomy



Engaged 150 staff

in the physical deterioration collaborative, and delivered outreach sessions to approximately 130 primary, community and social care staff



25%

decrease in 30 day-risk adjusted mortality for patients undergoing emergency laparotomy



320 CSIP members and a successful CSIP conference attended by

240 people



Spotlight on:
Georgette Houlbrook, patient representative for the Patient Safety Collaborative

How have you worked with the Patient Safety team this year?

Looking back it has been a busy year. I am a member of the Wessex Patient Safety Collaborative Steering Group and also the Medicine Optimisation Professional Advisory Group. This has led to being involved in a number of projects including involvement in the development of the ARISE model for patient engagement and information on self-administration of insulin whilst in hospital. I have attended a number of conferences and workshops such as the Wessex Quality & Improvement Conference and Polypharmacy. I was also a member of the faculty, supporting teams in Breakthrough Series 2.

Why is patients' safety important to you?

Every contact or planned contact that a health professional has with a patient, has to have in it an element of keeping a patient safe. Really the phrase is self-explanatory. The physical, mental and emotional safety and wellbeing of an individual is why health professionals are doing the work they do.

What do you think the greatest challenges are?

Time. I have seen how much enthusiasm and dedication there is in the teams that take part in the BTS events. However all of them are 'time poor' and it needs determination to push forward with the projects they undertake.

What do you think has been the biggest achievement this year?

From a personal point of view, I have been most excited by the work done on Polypharmacy. The AHSNs work to bring together all parties, and work towards providing the best possible information to patients, GPs and CCGs is showing results, which as a patient, I have experienced. This is exactly the sort of project that I envisioned we would undertake, and to see it moving forward (after an enormous amount of hard work!) is very satisfying.

Find out more:

E: patientsafety@wessexahsn.net

W: search wessexahsn.org.uk for 'patient safety'

T: (023) 8202 0844

Twitter: @wessexpsc | @tracypsc | @lesleypsc |

Facebook: #saferwessex | #CSIPWessex17

Wessex Primary Care Project: helping the GP surgery workforce

In the current context of increasing demand for appointments and a shortage of GPs and nurses, sponsored by Health Education England (HEE) Wessex and the Wessex Clinical Senate, this project has been identifying ways of improving the sustainability of general practice and improving access for patients. The team have looked at workforce, workflow and technological innovations being used in different practices, gathering evidence of effectiveness and will report their findings in the summer of 2017.

In April and May 2016, the team undertook a real-time survey* of GPs regarding how many patients could be seen by other professionals, distributed by Wessex Local Medical Committees (LMCs).

This showed local GPs believe that 35% of patients could be seen and appropriately managed by another healthcare professional (e.g. advanced nurse practitioner, advanced practice MSK physiotherapist, clinical pharmacist). From the results of the survey and related feedback, spreadsheet prototypes of two software tools have been developed:

- **The skills matrix** – which of the tasks in general practice can be undertaken by other healthcare professionals. Developed to move away from silo “this is the role I need in my team” thinking to “these are the skills I need in my team” it identifies which professional(s) can undertake a range of user-selected tasks. A similar tool could be developed for secondary care specialties.
- **The workforce tool** – using the survey results, together with practice demographics, to show how many appointments other professions could cover in place of the GP. It calculates the whole-time equivalent required of each staff group and the likely employment costs. This tool is completely scalable and can apply to anything from one general practice to a whole STP footprint. Again, the concept has potential to be used by specialties in secondary care.

A third tool has been developed following discussions with the LMC and the NHS England Local Area Team, who were finding some general practices were not succession-planning. This tool highlights requirements for replacing staff in two and five years.

All three tools are to be developed into a web-tool by a local SME and will be given – free of charge – to all Wessex practices and CCGs starting from June 2017.

A Lifeline for General Practice conference:

- Held jointly with HEE Wessex and Wessex Clinical Senate, this was our highly successful conference held in November 2016 – presenting examples of different ways of working in general practice from Wessex and beyond
- Delegates registered from one third of Wessex general practices and from all nine Wessex CCGs
- On the day, 55% of attendees were from general practice (practice managers, GPs, other clinical staff), 15% from CCGs and NHSE, and the remainder from Trusts, health education, the voluntary sector and the private sector
- Almost 50% of delegates provided feedback after the event and over 70% of those rated the day as ‘very good’ or ‘excellent’

* A paper discussing this survey can be found at University of Southampton eprints (id 399366.)



3 software tools have been developed



35% of patients could be seen and appropriately managed by another healthcare professional

Wessex International Healthcare Consortium (WIHC): brokering world-class health services across the world

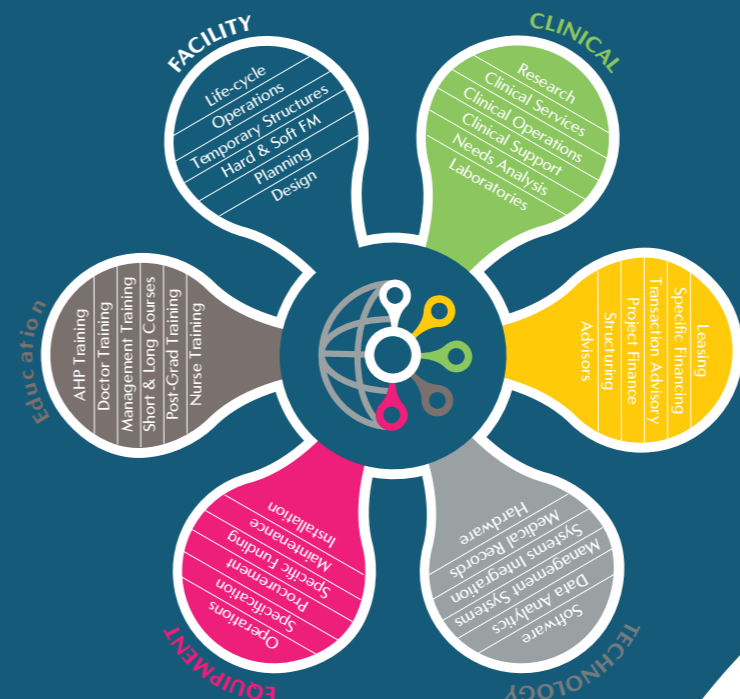
WIHC is the route for international organisations to engage with the Health and Life Sciences sector in the region, bringing together the NHS and universities working in partnership with Healthcare UK. We are raising the international profile of Wessex, identifying the biggest healthcare opportunities and helping our members convert these opportunities into commercial success. We have a range of world class offerings which we can offer to a global audience.

What was delivered in 2016/17?

- Member organisations across all four of the AHSN’s counties are engaged
- Whole of Wessex geography represented on the WIHC Advisory Board
- WIHC is a founding member of the UK International Health Management Association (UKIHMA)
- Strategic partnership with Healthcare UK and Department for International Trade
- Networks developing in international target markets
- WIHC has responded to over twenty international opportunities on behalf of members
- Collaboration with the UK Association of Southeast Asian Nations (ASEAN) Business Council and Chinese British Business Council (CBBC)

Networks

developing in international target markets



Find out more: wihc.co.uk
and check out our prospectus online
@WessexIHC



Industry and Innovation: better outcomes for patients, value for the NHS, economic growth, jobs and profitable local companies

What was delivered in 2016/17?

- Health Innovation Programme (three-day course for Wessex start-ups)**
 In 2016, 11 Wessex health innovators attended and received support, two of which were invited to apply for free support in the University of Southampton's Science Park Catalyst Centre. In 2017, 14 Wessex start-up companies attended, from which six were invited to apply to the Catalyst Centre, signifying an increase in the quality of the start-up businesses. One of the 2015 attendees - My mHealth - has gone on to become an NHS England National Innovation Accelerator Fellow, and is now benefiting from the national Innovation and Technology Tariff.

In 2016-17, we helped 11 organisations apply for business development grants. Six of these applications were successful, securing total awards of



£1.9M



- Since starting in August 2016, we have seen and advised 23 Wessex start-up companies at Health Innovation Surgeries, including those developing innovative wearable technology, self-care apps and new products for the frontline NHS, all with follow-on actions for support.
- Funding Support Service (find grants, check and send)** – In 2016, we produced and published 23 Money Minutes Podcasts to bring grant opportunities to local businesses. Collectively these have been listened to 22,000 times.
- Innovation Forum** – We've held two Innovation Forums in which start-ups can talk directly to potential end-users from the NHS and universities. The feedback from those events was very positive, including requests to go on tour across the Wessex patch; dates for Southampton, Dorset and Portsmouth are now confirmed.



23 Money Minutes Podcasts have been listened to

22,000 times

Investor Showcase (getting investment to innovators)

Wessex has led a consortium of three other AHSNs and the SETSquared Partnership to organise this event during March 2017. We received 46 applications, of which 16 were selected and coached. Over 80 investors attended, and the meeting was opened by Dr Luisa Stewart from the Office for Life Sciences, on behalf of Nicola Blackwood, Secretary of State for Innovation and Public Health. We expect investments arising from this meeting to be confirmed six to nine months after the event. All companies have confirmed they are in discussion with investors following the event.

Exhibition opportunities

We have supported 10 separate companies to exhibit at four major events, reaching collective audiences of over 10,000 people and directly resulting in confirmed contracts.



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10,000 people

Awards Support Service

This is a new service we started in late 2016. We have supported two companies to apply, and be successfully shortlisted, for national awards, and intend to do more in 2017.

In 2016/17 we have arranged face-to-face feedback on five innovations (Nexa, SmartMDS, DexoTechnologies, EasyVideo, Orthimo) with clinicians. We also supported Nexa to apply for their first supply framework. They are now 'on the shelf' and can be purchased by hospitals across the north, east and London.

We have also supported one innovator - Paul Jennings at Serenity Integrated Monitoring (SIM) - to successfully apply for the National Innovation Accelerator programme. We have supported multiple SBRI (national funding for innovations) applications, two of which have been successful. Four of the 17 (total) NIA fellows are also beneficiaries of the Innovation and Technology Tariff, and have strong Wessex links.



Spotlight on:
Justin Hall, Vice President and General Manager EMEA, NeoTract®

How has the AHSN helped you in 2016/17?

The team at Wessex AHSN were instrumental in raising awareness of NeoTract's innovation early on, and through to today. At the very beginning of our journey, and following initial discussions, we were offered a place at NHS Expo in 2016, which proved to be pivotal to raising awareness among key stakeholders in the NHS. Since this first date, the team at the AHSN have been a true partner in an advisory and collaborative sense, as we continue to build the proof and value proposition for the NHS.

What are the greatest challenges for your work?

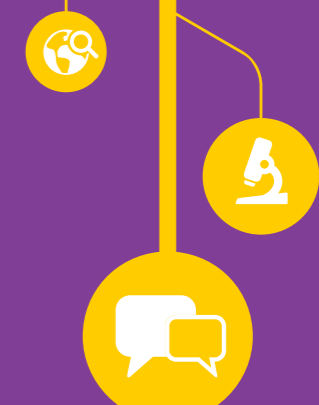
The greatest challenges in our work are to get our innovation properly funded, help commissioners understand the true patient and economic benefits vs current surgical methods, and ensure patients get access to our treatment as soon as possible across the whole of the UK and Europe.

What are you most proud of?

Being mentioned as a case study in the Accelerated Access Review, and most recently, being awarded an Innovation and Technology Tariff. We have been able to synthesize excellent economic and clinical data, with the support of MedTech Strategies, to produce compelling evidence for the NHS, NICE, the AHSN Network, and clinicians to make informed decisions about the impact of adoption of UroLift.

What's in store for 2017/18?

It's all systems go for NeoTract and UroLift as we scale our UK business following the award of tariff from April 2017. We are currently expanding our team in the UK and across Europe as the demand for the product rapidly increases. It is our intention to deepen our relationship within the 15 AHSNs so that we can truly diffuse the product, and that all eligible patients can be treated.



Find out more about UroLift on the AHSN Atlas of Solutions: atlas.ahsnnetwork.com under 'Wessex'



The Centre for Implementation Science (CIS)

Based at the University of Southampton, the CIS brings together cross-disciplinary skills and expertise from the four Wessex universities to support the AHSN and its quality improvement programmes.

What was delivered in 2016/17?

- Identified endoscopy activity, capacity and demand across Wessex, in collaboration with NHS Wessex Clinical Network, all local NHS trusts and Clinical Commissioning Groups (CCGs) in Wessex.
- Redesigned cancer pathways and health services redesign at NHS Frimley Health Foundation Trust, with Dorset County Hospital NHS Foundation Trust and Royal Bournemouth and Christchurch Hospitals NHS Foundation Trust in preparation.
- Started work on modelling cancer diagnostic pathway, and analysis of activity, capacity and demand across **five main clinical pathways** (Urology, Gynaecology, Lung, Upper and Lower Gastrointestinal), in collaboration with NHS Wessex Cancer Alliance, and all NHS trusts, and CCGs in Wessex.
- Shared our work on endoscopy service capacity modelling with NHS England
- Research grants and contracts totalling £78,500** received to advance the Wessex Cancer Diagnostics Demand and Capacity Project.
- Joint venture between Wessex Collaboration for Leadership in Applied Health Research and Care (NIHR CLAHRC), University of Southampton Centre for Operational Research, Management Sciences and Information Systems (CORMSIS) and CIS to develop skills in data analytics, simulation and modelling in the NHS
- £2,000 awarded** from the Southampton Data Science EPSRC Institutional Sponsorship programme
- Created an interactive online data visualisation of cancer waiting times
- Published **COPD and ASTHMA online Dashboards**
- Shared findings through academic channels such as the Journal of Criminological Research, Policy and Practice, and Open Medicine Journal
- Presented our projects at four major conferences**
- Successfully completed two evaluation reports for the North East Hampshire and Farnham Vanguard: Healthy, Happy at Home



£2,000 awarded from the Southampton Data Science EPSRC Institutional Sponsorship programme



Research grants and contracts **totalling £78,500** Received to advance the Wessex Cancer Diagnostics Demand and Capacity Project



4 presented our projects at four major conferences

Vanguard Evaluation and Replication of New Models of Care

Wessex AHSN and the Centre for Implementation Science is working as the independent evaluator for NHS England's New Models of Care programmes. With this work, we are helping to determine how well the new ways of working are supporting patients, and how this good work can be applied in other areas of Wessex and beyond.

What was delivered in 2016/17?

- Appointed as independent evaluator to two Vanguards; Happy, Healthy, at Home (North East Hampshire and Farnham) and My Life a Full Life (Isle of Wight)
- Comprehensive 'deep dive' evaluations of 10 New Care Models (NCM) completed in 2016/2017; seven for Happy, Healthy, at Home (North East Hampshire and Farnham Vanguard) and four for West Hampshire CCG
- Evaluation symposium held with Happy, Healthy, at Home to share evaluation findings; 90 attendees from Wessex and beyond
- Two impact statements of evaluation findings published and disseminated widely on Care Navigators and Recovery College



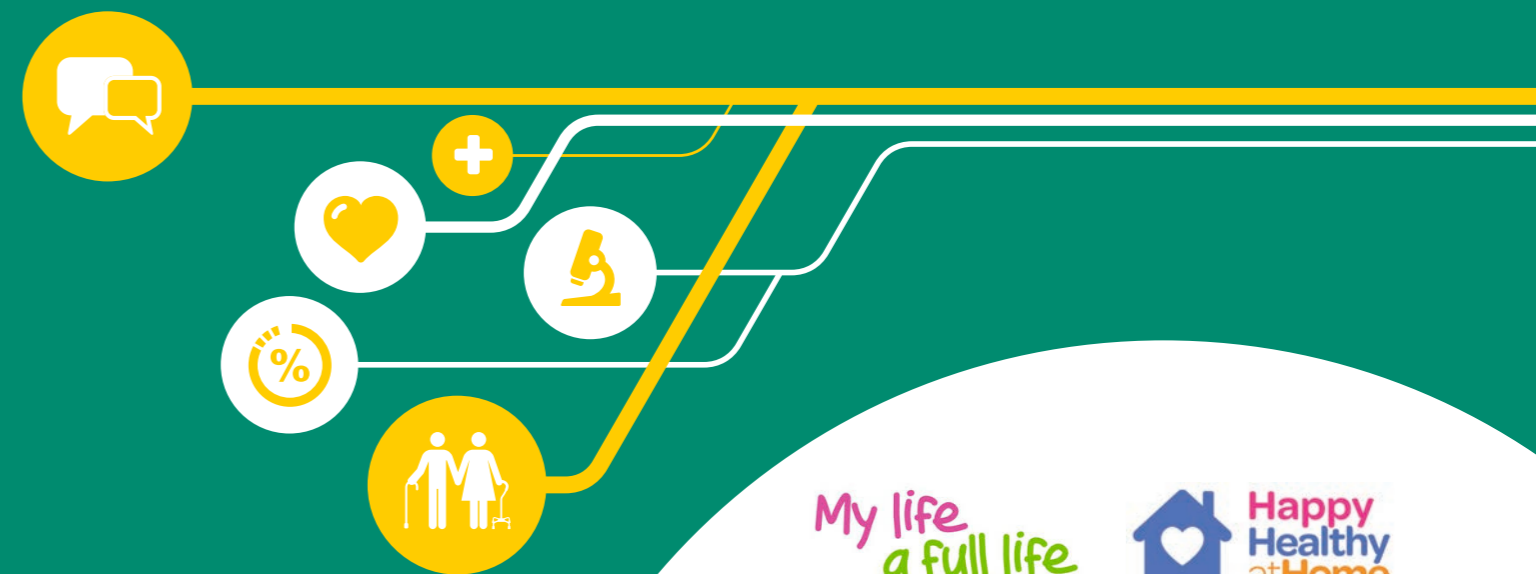
20
Evaluations
(Complete or planned)



1
Symposium Event with
90 attendees



11
Flashcards
(Complete or planned)



Nutrition: tackling undernutrition in older people across Wessex



What was delivered in 2016/17?

2,000 older people, still living independently, screened for undernutrition, and given an individualised care plan or directed to advice or services.

Spread of good work from earlier projects:

- Agreement to roll out the Dorset malnutrition programme, piloted in Purbeck, to all of Dorset (including Poole and Bournemouth)
- Southern Health Managing Malnutrition in the Community project – started in March 2017
- Funding by The Burdett Trust (£140k) for INSCOPPe normalisation process theory (NPT) research project to support the Southern Health project (above) - to be managed by Bournemouth University. Project started in January 2017

Raising awareness of undernutrition in older people:

- Evaluation of use of modified 'MUST' structured questions and Paperweight armband by the voluntary sector (Age Concern Hampshire; Dorset Partnership for Older People Project (POPP))
- Publication of OPEN Nutrition Toolkit to support nutritional care across Wessex and wider. Interest from other AHSNs in the toolkit
- Tool development to support use of structured questions and signposting by care workers based on Patients Association Nutrition Checklist – to be evaluated in 2017/18
- Over 250 people have either attended training or awareness sessions on undernutrition in 2016/17
- Two posters shortlisted at national BAPEN conference for best poster prize
- Three articles in practice nursing journals outlining the work of the programme
- Successful conference with 120 attendees held in November 2016



2,000 people screened for undernutrition across the programme

Over **250** people have either attended training or awareness sessions on undernutrition in 2016/17

Successful conference with **120** attendees, held in November 2016



Find out more, and download the nutrition toolkit at: wessexahsn.org.uk/OPEN-toolkit



Reducing Harm from Alcohol: helping Wessex know its numbers



What was delivered in 2016/17?

- Completion of the work with Soberistas, resulting in two peer articles in high impact journals; and helping Soberistas grow to 38,000 members. Soberistas is an online support network for people dealing with alcohol addiction
- Launch of regional alcohol admission data (Alcohol-related harm data) assisting commissioners with easy-to-use data to help improve services
- Benchmarking acute admission liver disease (25,000 admissions) data packs (Wessex wide and trust specific) finalised and shared with local lead clinicians, acute trust CEOs and CCGs in August. The Wessex-wide data pack has also been shared with the other AHSNs. Data pack being expanded to include data from three remaining acute trusts in Wessex
- Published Alcohol-related Liver Disease (ARLD) Identification and Treatment Toolkit on our website
- Baseline ARLD audit completed at hospitals in Winchester, Basingstoke, Southampton, Isle of Wight; currently being completed in Portsmouth, Salisbury and Bournemouth. Frimley Park and Dorset have also agreed to participate
- Hampshire Hospitals, as the pilot site, is using local Alcohol Treatment Pathways and completed a follow on audit to help find those patients at-risk of liver disease caused by alcohol. This has shown an increase in the number of patients screened, and therefore an increase in the number of patients accessing treatment
- Drink Informed Kit finalised and provided sent to hospital alcohol services and key community services across Wessex
- Successful workshop with clinicians, commissioners and public health from across Wessex where plans were developed and committed to to spread and develop local alcohol treatment pathways



38,000 members of Soberistas



Savings up to **£13.3m**

Estimated that if alcohol-related disease patients identified one year earlier, potential cost avoidance across Wessex of £10m per annum, or £13.3m per annum if identified two years earlier



Wessex Genomic Medicines Centre (GMC): Delivering the 100,000 genomes project across Wessex



What was delivered in 2016/17?

Wessex GMC has now recruited over 1,800 patients into the national 100,000 Genomes Project; a major drive to try and tackle rare disease and cancer through studying people's genes.

The majority of these are through University Hospital Southampton NHS Foundation Trust (UHS); the following trusts have also joined the project, as Local Delivery Partners, to help reach more patients:

- Portsmouth Hospitals NHS Trust
- Royal Bournemouth and Christchurch Hospitals NHS Foundation Trust
- Hampshire Hospitals NHS Foundation Trust
- Solent NHS Trust
- Southern Health NHS Foundation Trust



1,800 patients into the 100,000 genomes project

Recruitment rates will increase as our partner trusts ramp up to their full capacity. We have supported UHS to produce engagement materials such as posters, banners, and 'How To' guides for clinicians. These have been used at exhibitions and events regionally and nationally.

The AHSN identified, planned, and delivered an opportunity for in-depth public education on the project through the Café Scientifique network:



across 90-minute dedicated events



reaching 330 people



in six of our towns and cities



Search wessexahsn.org.uk/videos for 100000 genomes

To find out more about the Wessex NHS Genomics Medicine Centre, or to take part in the 100,000 Genomes Project then please use the contact details below:
 Rare disease participant - genomicsrd@uhs.nhs.uk
 Cancer patient - genomicsc@uhs.nhs.uk
 National Information Line - 0800 3898221
 @WessexGMC #Genomes100K



Respiratory: improving lung health across Wessex

Led by the Research and Innovation division at Portsmouth Hospitals NHS Trust, we worked closely with the MISSION quality improvement programme and the Wessex Asthma Network to enhance care for patients with respiratory disease.

What was delivered in 2016/17?

- Successfully planning and beginning to deliver an ambitious new way of treating patients with respiratory problems
- Achieving support from local primary care participants and vanguard partners
- Creating champions for the model and maximising opportunities for future spread
- Securing additional investment and support from technology partners and pharma
- Achieving national recognition for improving care - e.g. HSJ award
- Securing additional support for spread from The Health Foundation

Since 2013:



Improved early diagnosis of respiratory disease for over

1,000 patients



1,000 patients identified and reviewed by specialist team



Improved patient quality of life as measured by QALYs for over

3,000 patients

What's planned for 2017/18?

- Around 1,000 patients identified and reviewed by specialist team
- Measurable savings in healthcare utilisation identified
- Measurable improvements in quality and experience of care
- Uptake of the model by at least two localities in Wessex

Winner!

of the Primary Care Innovation category at the HSJ Awards 2016 and of the Improving safety in Medicines Management category at the Patient Safety Awards 2016



Visit: wessexahsn.org.uk/videos where you can view our new MISSION video



Medicines Optimisation (MO): helping people get the most from their medicines

What was delivered in 2016/17?

- Led and delivered the first nationally available Polypharmacy (many medicines) Prescribing Comparators in England, working with the NHS Business Services Authority, NHS Digital, Royal Pharmaceutical Society and the national AHSN MO network
- Developed the 'Guide to Implementation of Self Administration of Insulin' which is endorsed by Diabetes UK and has been presented at the Patient Safety First conference
- Helped to shape the Medicines Optimisation plans that are now included within the Hampshire and Isle of Wight Sustainability and Transformation Partnership (STP)
- Provided PINCER and PRIMIS training (software to help GPs improve medication safety) to 115 primary care staff; and supported 206 practices to use the PINCER medication safety audit tool
- Facilitated collaboration and partnership between the pharmaceutical industry and Hampshire and IoW STP
- Clinical handover to community pharmacy (an enhanced medication pathway) now active in three local hospital trusts, in early planning stages in a further three, and at discussion stage in two trusts
- An electronic Repeat Dispensing (eRD) pilot in five GP practices yielded powerful data to drive change. This has led to broader CCG engagement and an increase in uptake of eRD. Plans in place to work closely with four further CCGs

What's planned for 2017/18?



All 8

Wessex hospital trusts to provide enhanced support to patients on discharge



90%

of GP practices to utilise PINCER medication safety audits



40%

of all prescription items, provided as repeat dispensing to save time and money



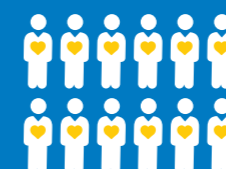
All 9

CCGs will have plans in place and work commenced to address polypharmacy



£3m

Savings to health and social care costs



285

Fewer strokes



50

Community Pharmacists trained



78%

of practices uploading the GRASP AF Tool



Watch the video and find out more at: wessexahsn.org.uk/jack

Atrial Fibrillation (AF): reducing stroke across Wessex



What was delivered in 2016/17?

- Development of 'Starting Anticoagulation with Jack' video in collaboration with Royal Pharmaceutical Society (RPS), Bayer Healthcare (pharmaceuticals), Hampshire Hospitals NHS Foundation Trust, and voluntary organisations. This was launched in March 2017 and is already being used by other AHSNs, and partners such as the Royal Pharmaceutical Society both in the UK and abroad
- New Medicines Service (NMS) Referral Card evaluation project in progress. **Training delivered to 50 Community Pharmacists**
- In West Hampshire CCG, NMS anticoagulation referral is highest in the region at 22%
- National profile in AF community of practice, leading the detection workstream
- Wessex is the second highest user of the GRASP AF tool (helps review AF patients' treatment) in England, with **78% practices uploading the programme**
- Lower than national average percentage of patients having a stroke where AF was known but anticoagulation not prescribed at 49% (national average 51%) (2015/16 data)
- **Detection rates increased by an average of 6.57% in 2015/16** from 1.82% in 2014/15

Detection rates increased by an average of **6.57%** in 2015/16

Serenity Integrated Mentoring (SIM): a major breakthrough in the management of high intensity mental health crisis



53%

reduction in the overall number of people going into crisis requiring police intervention in areas where SIM is working

“One of those rare complete ‘no brainers’ as far as the CCG is concerned”

GP Board Member and Clinical Lead for Immediate Care NHS Mid Essex Clinical Commissioning Group (CCG)



What was delivered in 2016/17?

- 53% reduction in the overall number of people going into crisis requiring police intervention in areas where SIM is working
- Twice as effective as Street Triage teams in reducing Section 136 (mental health) detentions
- Winner of the HRH Prince of Wales Award for Integrated Care (Nursing Times Awards 2016)
- Shortlisted in four categories at the HSJ Value Awards 2017, and two categories at the Patient Safety Awards 2017
- Chosen by NHS England as one of eight innovations ready for national scaling - NHS Innovation Accelerator – with Sergeant Paul Jennings as one of 2016/17’s national fellows
- SIM is currently being set up in four other NHS trusts in England
- Development of a High Intensity Portal to link all high intensity teams with standardised training and case management
- Two teams being set up in the USA and Holland
- SIM model meets all key strategic objectives of the NHS England Five Year Forward View for Mental Health 2016, and the Mental Health Crisis Care Concordat 2014

What’s planned for 2017/18?

- Further expand the network of NHS mental health trusts professionalising and using high intensity mentoring
- Launch and roll out www.highintensitynetwork.org
- Further develop the number of international teams

Find out more about SIM, and watch videos about the project on the Wessex AHSN website by searching ‘SIM’ at wessexahsn.org.uk
Follow the team on:
@SIMIntensive



Spotlight on:
Sgt. Paul Jennings,
National Innovation Accelerator (NIA) Fellow 16/17, and project lead for SIM.

How has the AHSN helped you in 2016/17?

The AHSN has helped me enormously with all types of support: academic networking, business planning, project management, finding funding, communications and marketing, speaking at conferences and with applying for fellowships and awards. They have been remarkable.

What are the greatest challenges for your work?

The greatest challenge has been the sheer amount of work there is to scale a project across the NHS. There are only two people in my team, and we are both part-time!

What are you most proud of?

Winning the Nursing Times Award in 2016, and for being the only Mental Health innovation on this year’s NHS Innovation Accelerator programme.

What’s in store for 2017/18?

Hopefully even more interest from even more NHS Trusts as we develop the High Intensity Network nationally.

You can follow Paul on twitter too:
@MHinnovator

Winner!

of the HRH Prince of Wales Award for Integrated Care (Nursing Times Awards 2016)



HRH Prince of Wales Award for Integrated Approaches to Care



Highly Commended

NHS Innovation Accelerator Programme 2016

The AHSN Network

UCL Partners
Academic Health Science Partnership

wessexahsn.org.uk

The AHSN national footprint



About the AHSNs

AHSNs are flexible regional organisations.

We have a small staff base but use our extended networks across regions to achieve great impacts for our partners. Our impact rests in our ability to bring people, resources and organisations together quickly, delivering benefits that could not be achieved without these connections.

Each AHSN works within its own geographical area to develop projects and programmes which reflect the diversity of our local populations and healthcare challenges. However, we all share the following priorities:

- Promoting economic growth:** fostering opportunities for industry to work effectively with the NHS
- Diffusing innovation:** creating the right environment, and supporting collaboration across boundaries, to adopt and spread innovation at pace and scale
- Improving patient safety:** using our knowledge, expertise and networks to bring together patients, healthcare staff and partners to determine priorities and develop and implement solutions
- Optimising medicine use:** ensuring that medication is used to its maximum benefit – improving safety and making efficient use of NHS resources
- Improving quality and reducing variation:** by spreading best practice, we increase productivity and reduce variation, which should improve patient outcomes
- Putting research into practice:** our strong links with academia mean we are uniquely placed to support the translation of research into clinical practice

Collaborating on national programmes: our unified programmes focus on delivery of the SBRI Healthcare initiative supporting small-and-medium enterprises, the NHS Innovation Accelerator, Patient Safety Collaboratives and medicines optimisation.

Our licence from NHS England sets our four broad objectives:


- Focus on the needs of patients and local populations
- Build a culture of partnership and collaboration
- Speed up adoption of innovation into practice to improve clinical outcomes and patient experience
- Create wealth through co-development, testing, evaluation and early adoption

More information about AHSNs can be found at ahsnnetwork.com. You can also see case studies of our work at: atlas.ahsnnetwork.com



Wessex
Academic Health
Science Network



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wessexahsn.org.uk

