



YORKSHIRE & HUMBER

ACADEMIC HEALTH SCIENCE NETWORK



Interim Impact Report

2018-2019

Contents

Introduction

Section 1 – NHS England: National Programmes

Section 2 – NHS England: Innovation & Technology Tariff/Payment

Section 3 – Ancillary Programmes

Section 4 – Local Programmes for Service Transformation

Section 5 – Financial Summary

Introduction

The last 12 months have been incredibly busy and productive for Yorkshire and Humber AHSN. This report sets out the progress we've made on the programmes of work we are commissioned to deliver by NHS England. I'd like to highlight just a few of our achievements and some of the most significant developments in this introduction.

The organisation has undergone a major transformation this year. We've scaled up our operations to be in the best possible position to support our NHS member organisations whilst also ensuring that we deliver our commissioned programmes of work to spread and drive adoption of proven innovations across our region.

We've put a lot of effort into building strong relationships with senior stakeholders at each of the two Integrated Care Systems and single Sustainability and Transformation Partnership in our region. As a result, we've had particularly constructive discussions that have helped us to identify the needs of each system and to understand where our existing programmes of work can support them as well as looking for new solutions that can help them face their challenges.

Our original 2018-20 business plan has evolved as a result of our ongoing work and dialogue with both our national commissioners and our regional member organisations. The five themes we originally defined in April 2018 have been re-organised into nine themes that are enabling us to exploit more effectively the synergies between the programmes they contain and to reflect the challenges set out in the NHS Long Term Plan and the needs of our NHS member organisations.

Achieving the adoption and spread of proven innovations is at the heart of all our work and so we're very pleased to be hitting our targets for our nationally commissioned programmes. For example:

- Despite some significant challenges at the beginning of the year, we have beaten our target and implemented the PINCER programme in 136 GP Practices in our region.
- Our Transfer of Care Around Medicines (TCAM) programme has fulfilled over 4,800 patient referrals from hospitals to community pharmacies.
- We've enjoyed excellent success in identifying where Innovation Technology Tariff and Innovation Technology Payment products meet local NHS needs and in getting them adopted. Heartflow is one of the ITP products that we've helped to establish a foothold in the region this year. We now have three sites in the region using this technology.
- We've supported the adoption of 13,500 units of SecurAcath, reducing the use of catheters and saving on procurement time and money, in 11 hospitals across our region.

Most of our remaining nationally commissioned programmes are either on target, or on track to hit targets in year two. Where programmes are below target thresholds, we have identified plans to address the issues we're facing and, for the most part, we're confident that we will deliver the spread and adoption required.

We've also continued to drive forward our local programmes of work:

- We're immensely proud that our Faecal Calprotectin Pathway is on course to spread across the whole of the Humber Coast and Vale Sustainability and Transformation Partnership very soon. It has already been adopted by the majority of Clinical Commissioning Groups in our region and has now been taken up by many other sites across England.

- We've established a Healthy Hearts programme for the West Yorkshire and Harrogate Health and Care Partnership. The programme, which aims to reduce the number of people experiencing heart disease by 10% across the region by 2021, draws on learning from Bradford's successful Healthy Hearts campaign. It's successfully up and running and is now being funded by the local system.
- We are finalising the creation of an Innovation Hub for South Yorkshire and Bassetlaw Integrated Care System. This is being established to help the system to identify their un-met needs and match them to innovative solutions, define and deliver three exemplar innovation projects and support improved communication and working relationships with industry. Once established the hub will be funded locally.
- We've continued to implement our programmes of work around Frailty. Our Falls in Care Homes project, delivered in conjunction with NHS England and the other three northern AHSN, is ongoing. We've also begun to develop a programme of work around Bone Health in conjunction with the Northern Health Science Alliance and the northern AHSNs.
- Some of our work with industry partners has received national recognition. At the HJS Partnership Awards in March three of our partnerships were shortlisted, one being highly commended and another, Doc Abode, winning the Workforce Innovation category. DocAbode, is a digital platform that gives NHS health care providers access to a more flexible workforce for arranging emergency patient home visits.

We also take very seriously our role to ensure that the AHSN Network continues to operate coherently with members of our senior management team acting as Chief Officer Co-lead for Communications, Operations Group Lead, Vice-Chair of the Commercial Directors Forum, Polypharmacy Lead and International Lead.

This is just a small selection of the successes that we've achieved this year. None of them would have happened without the collaboration and support of our NHS and Industry partners and our hard-working staff.

We're looking forward to the next 12 months and continuing to deliver on the key objectives of our commissioners.

Richard Stubbs

A handwritten signature in black ink, appearing to read 'RDS', with a long horizontal stroke extending to the right.

Chief Executive Officer

1. NHS England: National Programmes

Our overall end-of year performance shows that we have hit or exceeded our year one targets for the majority of NHS England's seven funded national programmes.

Local partnerships with organisations in the region have been critical to ensure we have made the most of relationships with NHS providers, commissioners and clinicians. Examples include working with our Improvement Academy on PRaCePT and Emergency Laparotomy and with Public Health England (PHE) and the Department for Work and Pensions (DWP) on ESCAPE-Pain.

Atrial Fibrillation

Year-end patient benefit (number of patients diagnosed with Atrial Fibrillation) = TBC

2018-19 Target = 2,100

Achievement = TBC

During 2018-19 we have continued to provide hands-on support to GP Practices across Yorkshire and the Humber to improve their ability to detect people who have Atrial Fibrillation and protect them through anticoagulation drugs. We have issued over 500 mobile ECG devices to facilitate testing across the region and have implemented the programme in 22 Clinical Commissioning Groups (CCGs) and are continuing to explore ways in which we can work with them to deliver the programme on an even greater scale. The national Quality Outcomes Framework data needed to report on our targets for this programme is not available until October 2019. In the interim we regularly audit our activity with GP practices and CCGs to monitor our progress and have been able to capture local data for the West Yorkshire and Harrogate Health and Care Partnership which is indicating very positive results to date.

Emergency Laparotomy

Year-end patient benefit (number of Emergency Laparotomy procedures carried out) = TBC

2018-19 Target = 813

Achievement = TBC

We are on target with our plan. Face to face collaborative meetings were held in January and 10 Trusts out of 13 sent their teams. We demonstrated the Emergency Laparotomy Collaborative dashboard at these meetings to show its capability and we have been actively working with Trusts to improve its usability. We expect that the introduction of the best practice tariff in April 2019 will help teams to focus on their improvements and drive an increase in pace for this programme. However, there is still some work to do to get more Trusts signed up. There is a national dashboard in the process of being designed and we will be working closely with Trusts to decide how this will be utilised.

ESCAPE-Pain

Year-end patient benefit (number of patients participating in the programme) = 144

2018-19 Target = 330

Achievement = 44%

It has taken some time to build system wide stakeholder buy-in to increase uptake and implementation of the ESCAPE-pain programme. Year-end figures show that 144 patients have undertaken the programme against a target of 330, but we are confident that the groundwork done this year will see significant increases in 2019-20. We have nine sites currently running the programme with another 10 due to commence shortly and we have systems in place to track the number of patients coming through each site and provide an early warning of any sub-optimal performance. We are continuing to explore additional expressions of interest for sites to adopt the programme across the region.

PINCER

Year-end patient benefit (number of GP Practices who have completed the programme) = 136

2018-19 Target = 111

Achievement = 123%

We worked effectively with the supplier (PRIMIS) to overcome some early challenges. As a result, the 2018-19 target of 111 practices was exceeded with 136 practices uploading their data. We continue to support both Clinical Commissioning Groups and practices to get their Data Protection Agreements signed and their data uploaded. More practices, who completed the work in Quarter 4 but did not upload their data in time for the year-end figures, are expected to show in the next round of reporting and we are confident of reaching our year two target.

PReCePT

Year-end patient benefit (number of babies given MgSO4) = 65

2018-19 Target = 29

Achievement = 130%

PReCePT was another programme that took some time to build momentum but, after a slow start, we have seen activity start to ramp up in the back half of the year. The latest data indicates an improved outlook. We are supporting the implementation of our spread plan units. Report data and PReCePT implementation materials have been provided to each participating maternity team. Two out of three regional Local Maternity Systems have held launch events and in the 3rd area direct contact has been made with the units involved and support is being provided.

Transfer of Care Around Medicines (TCAM)

Year-end patient benefit (number of referrals completed using TCAM) = 4,806

2018-19 Target = 272

Achievement = 1,767%

We have significantly overachieved on our year one completed referrals targets but are doing more to spread the programme to additional Trusts. This is where we intend to focus our efforts going forward. We are working with Trusts at an early stage to encourage them to include TCAM as part of their business planning processes and support the completion of internal business cases as soon as possible. We are also providing Quality Improvement support to those trusts who have already adopted TCAM in order to improve the referral rate and drive additional value.

Serenity Integrated Mentoring

Year-end patient benefit (number of participants) = 5

2018-19 Target = 157

Achievement = 3%

Serenity Integrated Mentoring has proven to be our greatest implementation challenge – as it has been for most of the AHSNs in the Network – but we are continuing to look at ways of increasing interest and support from the police forces in our region. A review of where we have been able to make progress, in Doncaster, shows good data on the impact of the programme with reductions in s136 attendances and A&E attendance. We have work underway with Crisis Care Concordats to provide support to the project.

2. NHS England: Innovation and Technology Tariff / Payment

We have formed excellent working relationships with the Innovation Technology Tariff (ITT) and Innovation Technology Payment (ITP) companies, developing a sound understanding of their products and the benefits they offer. This has enabled us to successfully act as their champions with the NHS organisations in our region, but we have also challenged them when we believe they are not acting in the best interests of our members. The impact of these excellent working relationships can be seen in the progress we have made in spreading the majority of the ITT/ITP innovations.

Endocuff

Year-end patient benefit (number of Endocuffs sold) = 6,760

2018-19 Target = 1,790

Achievement = 378%

We have exceeded our year-end target for the number of devices procured across nine live sites. Towards the end of the year we were able to start working with adopter sites to seek feedback. Anecdotal feedback suggests that polyp detection rates are not being improved as a result of using the device. This is being explored with the new supplier.

Episcissors

Year-end patient benefit (number of guided mediolateral episiotomy scissors used) = 3,845

2018-19 Target = 1,629

Achievement = 236%

At the end of the year we have exceeded our target for the number of devices used and have eight active sites. The lack of a single use device continues to limit adoption in additional sites, but we do expect uptake to continue increasing in 2019-20, and we are supporting Trusts to make claims under the continued ITT/ITP funding.

Heartflow

Year-end patient benefit (number of Heartflow scans appropriately used) = 68

2018-19 Target = 126

Achievement = 54%

Three Trusts in our region met the eligibility criteria for this product based on the number CT scans they carry out every year. At the end of the year we have achieved our overall spread target, with all three sites live (Hull, Leeds, Sheffield) and using Heartflow. Due to the relatively late adoption in two sites we are behind our target for the number of scans undertaken using the product. However, we are now observing ever-increasing uptake.

MyCOPD

Year-end patient benefit (number of web-based applications used) = TBC

2018-19 Target = TBC

Achievement = TBC

Over the year we supported Clinical Commissioning Groups who successfully secured license allocations to develop their implementation and license distribution plans. This was done via three regional workshops to provide knowledge and lessons sharing, as well as direct support. However, ongoing challenges with Information Governance between CCGs and the supplier is currently delaying progress. We hope the release of NHS England's IG checklist will reduce the possibility of any further issues or delays.

Non-Injectable Arterial Connector

Year-end patient benefit (number of needle free arterial connecting systems sold) = 11,037

2018-19 Target = 2,744

Achievement = 402%

Although we have exceeded our target for the number of devices procured, we have limited adoption rates across the region (only three sites), with high purchase volumes in one site driving the majority of our progress. This current reliance on three sites means that, in 2019-20, we will be looking to increase adoption across other sites in the region.

Plus Sutures

Year-end patient benefit (number of hospitals using Plus Sutures) = 0

2018-19 Target = 4

Achievement = 0%

Very little progress has been made with this during 2018-19. This is primarily due to historical decisions taken across the region to use alternative suppliers to Ethicon, locking them into contracts. However, we have continued to discuss and support the potential of a bespoke evaluation in a niche area which has a high SSI rate. We hope to start this early in 2019-20.

Securacath

Year-end patient benefit (number of Securacaths sold) = 13,550

2018-19 Target = 5,469

Achievement = 248%

We have exceeded our overall target for SecurAcath, with 284% of our spread target being met across the region. We have strong uptake in cancer units, which is supporting spread in other areas of hospitals.

Urolift

Year-end patient benefit (number of day case procedures using Urolift) = 155

2018-19 Target = 155

Achievement = 100%

At the end of the year we have met our overall target, with 155 Urolift procedures being conducted across six live sites. Future adoption efforts are focused on the South Yorkshire and Bassetlaw Integrated Care System. Our business case with them has been supported by the medical directors from across the region, and advanced conversations are now taking place regarding adoption. We hope these four additional sites to go live during 2019-20.

3. Ancillary Programmes

We continue to provide quality support to the ancillary programmes. This includes specific and bespoke support for those innovations that meet local needs in our region.

NHS Innovation Accelerator

The NHS Innovation Accelerator (NIA) supports the faster uptake and spread of high impact, evidence-based innovations across England's NHS, benefitting patients, populations and NHS staff. To date the NIA has successfully supported 36 Fellows representing 37 innovations. Over the past 12 months we have worked with a range of NIA Fellows to facilitate the adoption and spread of their innovations in our region.

- **DrDoctor**
We secured Doncaster to be one of only two sites in the country to implement a live site trial and deployment of DrDoctor. Information Governance is currently being finalised and we expect the trial to launch early in 2019-20.
- **Healthy.io**
This year we contracted the York Health Economics Consortium to undertake a health economic evaluation of Healthy.io's Dip.io urinalysis app. The evaluation focused on the implementation of Dip.io into a number of GP Practices in Hull, where it has been utilised for the remote testing of ACR levels in diabetic patients.
- **IEG4**
We supported IEG4 with the development of a business case for implementation with a large CCG in our region. We helped with brokering and facilitation of meetings with the CCG and their associated Local Authority to develop a full options appraisal and cost/benefit analysis. We also supported IEG4 in their successful application to join the NHS Innovation Accelerator programme in 2019.
- **Lantum**
We have supported the implementation of Lantum into five geographical areas this year. We hope to have two more organisations adopt the product early in 2019-20. Additionally, Lantum were provided with a platform to speak at one of our regional events that was held specifically to showcase innovations in workforce scheduling.
- **Oviva**
We helped to introduce Oviva to Hull University Hospitals Trust to partner with them on a diabetes remission trial.
- **Waitless**
We have brokered a number of conversations with organisations in the region with the aim of implementing Waitless at a system-wide level. We hope to be able to take these further on 2019-20.

SBRI Healthcare

The Small Business Research Initiative for Healthcare (SBRI Healthcare) is an NHS England initiative, championed by the 15 AHSNs across England. Yorkshire & Humber AHSN is represented on and provides support to the SBRI Board.

This year we provided support to DocAbode throughout the delivery of their SBRI phase two work. This included assistance with financial modelling and an application to HSI's Partnership Awards for the Workforce Innovation Category, which was successful.

Test Beds

The only test bed in our region (Sheffield City Region Test Bed) came to an end this year. We supported the applications of several NHS organisations from our region to Wave 2 of NHS England's Test Bed programme. Whilst none of these applications were successful, introductions were made to commercial partners with solutions that complement their proposed project. In at least one case, an NHS applicant is now delivering a trial in conjunction with one of the companies who they were introduced to during the Test Bed application process.

Research

Building on established relationships with the four NIHR Medtech Co-operatives in our region, we have supported workshops to identify unmet needs and to inform future research priorities. A workshop on Long Term Neurological Conditions was held with NIHR Devices for Dignity, and a workshop on the development pipeline was held with the NIHR Children and Young People's Medtech Co-operative. Further workshops will be organised in the coming year with the NIHR Leeds In-vitro Diagnostics MedTech Cooperative, and with the NIHR Surgical Medtech Cooperative.

We also continue to support and contribute to the Clinical Research Network's 'Vision 2020' programme of events in our region.

Clinical Entrepreneur Programme

We have supported the Clinical Entrepreneur programme by supporting the recruitment process, publicising the programme, providing advice and support for applications and sitting on panels as well as supporting clinical entrepreneurs develop their knowledge base and skills.

4. Local Programmes for Service Transformation

The Yorkshire & Humber AHSN Business Plan 2018-20 set out five broad areas of activity. This has evolved as a result of our ongoing work and dialogue with both our national commissioners and our regional member organisations. The five themes we originally defined in April 2018 have been re-organised into nine themes that are enabling us to exploit more effectively the synergies between the programmes they contain and to reflect the challenges set out in the NHS Long Term Plan and the needs of our NHS member organisations.

Our commissioned programmes aim to meet the needs of our members and population and have been identified with our partners. Funding comes from specific independent commissions or from our deferred income.

1. Cardiovascular

We established a Healthy Hearts programme for the West Yorkshire and Harrogate Health and Care Partnership. The programme aims to reduce the number of people experiencing heart disease by 10% across the region by 2021 and draws on learning from Bradford's successful Healthy Hearts campaign. It's successfully up and running and is now being funded locally and delivered by the Yorkshire & Humber AHSN.

We have a joint working agreement with Sanofi to deliver a Familial Hypocholesterolaemia project which aims to identify patients within Primary Care who are at high risk of having this condition. Local guidelines are used to ensure identified patients are referred to the appropriate service and receive treatment and genetic testing as required. The project is focused on delivery in two areas in Sheffield and North East Lincolnshire and will be developed further in the coming year.

2. Enterprise and Relationships

Programmes of work in this theme are funded by other national commissioners

3. Health Tech Delivery

We are finalising the creation of an Innovation Hub for South Yorkshire and Bassetlaw Integrated Care System. This is being established to help the system to identify their un-met needs and match them to innovative solutions, define and deliver three exemplar innovation projects and support improved communication and working relationships with industry. Once established the hub will be funded locally.

4. Medicines Optimisation

We have supported the 'Me and My Medicines' campaign in our region through a series of awareness and engagement activities. This project has been led by patients and supported by clinical staff to help people raise concerns and use their medicines better through improved conversations and engagement.

We are now developing a project to undertake some local pilot implementations and work collaboratively with other AHSN's pilot sites to collate data and outcomes. 'Me and My Medicines' has also been included as part of the developing Polypharmacy strategy which is being considered as a potential national priority for 2020-21.

5. Mental Health

Our Mental Health Physical Health programme supports clinicians in conducting physical health checks on patients with severe mental illness. The programme is progressing well and we are considering how we extend its reach beyond primary care.

6. Patient Safety

Our Falls in Care Homes programme is a joint project with NHS England and the other three northern AHSNs. We are leading on the programme on behalf of the northern AHSNs and work is advancing with no issues. This programme is funded from a combination of our reserves, NHS England and Public Health England.

7. Population Health

We are developing a Bone Health programme to support our work on Frailty. This work is being done in conjunction with the Northern Health Science Alliance and the other three northern AHSNs.

8. Quality Improvement

Our Faecal Calprotectin Pathway programme continues to go from strength to strength and is on course to spread across the whole of the Humber Coast and Vale Sustainability and Transformation Partnership very soon. It has already been adopted by the majority of Clinical Commissioning Groups in our region and has now been taken up by many other sites across England.

9. Workforce

We provide ongoing support to DocAbode to assist them with their financial modelling. DocAbode is a digital platform that gives NHS health care providers access to a more flexible workforce for arranging emergency patient home visits.

5. Financial Summary

Total income in the financial year ending 31 March 2019 was £5.099m. Of this income, 59% was derived from NHS England funding of £3.017m.

Overall expenditure in the financial year ending 31 March 2016 was £4.558m. During the financial year £2.464m was spent across the NHS England programmes including staffing costs.

Other expenditure has been incurred during the period of £0.774m, which included establishment and marketing costs.

The Yorkshire and Humber AHSN has approximately £0.540m to carry forward to 2019-20, of which £0.070m relates directly to NHS England. This was agreed in advance and has been allocated to the 2019-20 budget.

Summary Finance Report 18/19

Income for 2018/19	£
NHS England	3,017,629
Other Income	2,081,468
Total income	5,099,097

Expenditure

NHS England	2,463,820
Other Programme expenditure	1,320,802
Other expenditure	774,013
Total expenditure	4,558,635
Surplus before tax	540,462

NB Figures are unaudited at the time of production of the report.