



Local Project Portfolio

For the quarter ending 31 March 2023



Local Project Portfolio

Programme	Programme Details	RAG	ICS
<p>Adopting Innovation and Managing Change in Healthcare Settings Programme – Local (Deploy)</p>	<p>Execution</p> <p>The Adopting Innovation and Managing Change in Healthcare Settings programme aims to improve the NHS workforce's understanding of innovation adoption and change management in healthcare settings. The programme is aligned with the commitment of Health Education England (HEE), NHS England, and Integrated Care Systems (ICSs) to create a skilled and adaptable workforce. By improving the change management capabilities of the region's workforce, the programme aims to create change agents from these NHS professionals who will serve as catalyst for innovation adoption.</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones)</p> <p>During this quarter, the programme's 14th Cohort, consisting of 22 NHS professionals, commenced in March 2023, aiming to introduce additional 22 new change projects into the healthcare system. Throughout this quarter, we have also provided support to NHS organisations in understanding innovation adoption and how it can be adopted within their settings. We worked closely with Berkshire Healthcare NHS Foundation Trust and its innovation team to shape their innovation module for their workforce.</p> <p>Furthermore, we are actively involved in supporting the AHSN Network's Innovation Adoption Champions programme, which strives to create a nationwide initiative to enhance innovation adoption and encourage a culture of innovation across the healthcare workforce. As a part of this initiative, the network is creating curated learning playlists, and we have shared information on the Adopting Innovation and Managing Change in Healthcare Settings programme to support this effort.</p> <p>In addition, our team has joined the AHSN network's Adoption and Spread Community of Practice, which is working towards developing a national innovation adoption capabilities programme to benefit the healthcare system. We will also be sharing insights and lessons learned from managing the programme to contribute to this effort.</p> <p>Unfortunately, the programme remains at risk due to the lack of secured funding.</p> <p>The program has already enhanced the skills of a substantial number of healthcare professionals, with 332 NHS professionals upskilled to date and 332 change projects introduced into the system. This year, the program has introduced 76 new change projects and also 76 new NHS professionals engaged with the programme, highlighting the significant impact and value of the initiative. This year, the programme has expanded its reach to the whole South East region. HEE Southeast has recognised the significance of developing change management and innovation adoption abilities of Allied Health Professionals (AHPs) to enhance their professional leadership and influence, and has provided funding to support the programme for Three cohorts of AHPs and other NHS staff across the South East in 2023.</p>	<p>Amber</p>	<p>BOB BLMK</p> <p>Frimley</p>
<p>AffeX-CT - Local (Discover)</p>	<p>Execution</p> <p>AffeX-CT developed by Afferent's is a non invasive device that uses the concept of transcutaneous autonomic neuromodulation via electrical stimulation through auricular innervation for use in the management of treatment-resistant hypertension and blood pressure reduction. Proof of Concept study showed significant reductions in 24-h ambulatory BP following a course of transcutaneous electrical stimulation of auricular sensory innervation treatment in patients with drug-resistant hypertension, and a reduction in the number, and doses, of anti-hypertensive medications taken in patients with uncontrolled arterial hypertension. Partner: Queen Mary, University of London.</p> <p>Oxford AHSN has collaborated on a research project funded by the National Institute of Health Research entitled "Evaluation the Safety, Acceptability and Efficacy of Autonomic Neuromodulation using transcutaneous vagal stimulation in uncontrolled hypertensive patients" (SCRATCHHTN)". The Work package for Oxford AHSN consists of Feasibility study and health economics analysis report.</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones)</p> <p>No planned activity for Oxford AHSN in Q4. NIHR extension has been applied to help with data collection. Waiting on the contract to be renewed with Oxford AHSN.</p> <p>During 23/24 we have completed a feasibility study, involving a range of stakeholders in the resistant hypertension pathway. All stakeholders were interviewed using a discussion guide prepared by the Oxford AHSN and a report highlighting key stakeholder insights, benefits, barriers to adoptions and usefulness of the proposed technology. Analysis of key human factor tools were generated to assess the acceptability of the non invasive device. The report was received well by Afferent. The stakeholders were interested in the proposed technology and wanted to see the clinical evidence around its usability in the real world. Currently, patients are being recruited to collect the real world data for health economics analysis to explore the cost benefit of introducing the non invasive device in the resistant hypertension pathway.</p>	<p>Green</p>	



Local Project Portfolio

Programme	Programme Details	RAG	ICS
-----------	-------------------	-----	-----

<p>Albus Home - Local (Discover)</p>	<p>Execution</p> <p>Albus Home monitoring device is developed by BreatheOx, a medical technology spinout company from the University of Oxford that has developed a small non-contact table-top device that monitors respiratory symptoms and environmental metrics without the patients having to do or wear anything. Early recognition and management of deterioration in asthma control can prevent attacks and emergencies. Partners: Imperial College London, Asthma UK, Birmingham Women’s and Children’s NHS Foundation Trust.</p> <p>Oxford AHSN is working on this project to validate the clinical utility of a non-contact tabletop monitoring device for the prediction and prevention of asthma attacks in children and to understand the potential utility, benefits, and barriers to adoption of the asthma monitoring device.</p> <p>The Work package for Oxford AHSN consists of Feasibility study and health economics analysis report</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones)</p> <p>No planned activity for Oxford AHSN in Q4. NIHR extension has been applied to help with data collection. Waiting on the contract to be renewed with Oxford AHSN.</p> <p>In 22/23 a feasibility study was completed, involving a range of stakeholders responsible for management of severe asthma in children. All stakeholders were interviewed using a discussion guide prepared by the Oxford AHSN and a report highlighting key stakeholder insights, benefits, barriers to adoptions and perceived usefulness of the home monitoring device. Key human factor tools were analysed and generated to report on their acceptability. The report was received well by BreatheOx. The stakeholders were interested in the proposed technology and wanted to see the clinical evidence around its usability of home monitoring device for the prediction and prevention of asthma attacks in children. Currently, patients are being recruited to collect the observational study data for early health economics analysis to explore the cost benefit of introducing a non-contact tabletop monitoring device for the prediction and prevention of asthma attacks in children.</p> <p>A case study has been published.</p>	<p>Green</p>	
--------------------------------------	---	--------------	--

<p>Anxiety and Depression (IAPT) Network – Local (Deploy)</p>	<p>Execution</p> <p>This network of NHS delivered psychological talking therapies strives to continuously improve patient outcomes and service delivery through new, innovative, and evidence-based approaches, working very closely with its active Patient Forum. Recovery and reliable improvement rates remain above the national average as planned. Access trajectories challenging due to staff shortages.</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones)</p> <p>Increasing access to psychological therapies for older adults – during Q4 we continued to facilitate sharing sessions between IAPT older people leads where they can discuss good practice of increasing uptake by older people. Now that the Anxiety and Depression Network has closed, the Older people leads in Talking Therapy services, within Berkshire, Buckinghamshire, Oxfordshire and Milton Keynes will continue to work together to ensure that older people have appropriate access to and uptake of Psychological Therapy services.</p> <p>Paddle - see below in separate section.</p> <p>The Staying well protocol (to prevent relapse) which was developed by the Anxiety and Depression network and which is now implemented throughout Berkshire, Buckinghamshire, Milton Keynes and Oxfordshire, is now being rolled out nationally - a national webinar was held in March to raise awareness with Talking Therapy services - 108 people attended the webinar.</p> <p>The Anxiety and Depression Network ceased to exist as an entity within the AHSN as at 31 March 2023. Some elements, such as the evaluation of the PDPOP (Personality Disorder Positives Outcomes Programme), which offers primary care teams training and development in the management of PDs, will continue to be conducted within the Oxford AHSN structure and led by Hayley Trueman and Matt Williams. Others, such as the IAPT material, has been passed to Professor David Clark who has offered to post all materials on a special page on the OxCADAT Resources website for all IAPT services to download them if they wish to.</p>	<p>Amber</p>	<p>BOB BLMK Frimley</p>
---	--	--------------	-----------------------------



Local Project Portfolio

Programme	Programme Details	RAG	ICS
<p>Anxiety and Depression NetworkK (IAPT) local projects. patient outcomes (LP7 project) and workforce (blended role project and IAPT Staff Wellbeing Strategy project</p>	<p>Execution</p> <p>The network will continue data collection of pilots as part of other projects including the 'Latent Profile 7 project' which is looking where a cohort of patients with similar characteristics who have historically not done very well in Talking Therapies are offered an enhanced treatment package, and 'Blended working' regarding efforts to reduce the number of patients who have to be stepped up to High Intensity treatment where dual trained staff could draw on their training in both Low Intensity and High Intensity training to get patients to recovery and prevent the need for stepping up to step 3. This would improve the patient experience as well as reduce pressure on High Intensity staff caseloads. The Network was commissioned to produce a strategy for IAPT staff wellbeing</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones)</p> <p>A Model IAPT Staff well-being strategy was developed jointly by all four Thames Valley IAPT services within the Oxford AHSN region and supported by the AHSN's Anxiety and Depression Network. During Q4 the strategy document was placed on the AHDS's website.</p> <p>Oxfordshire, Buckinghamshire, Berkshire and Hertfordshire</p> <p>Talking Therapies services in the AHSN region are participating in the blended role project, where staff who are dual trained as both High Intensity Therapists and Psychological Wellbeing Practitioners offer a flexible form of intervention, drawing on both low and high intensity treatment strategies. Staff have been recruited to see identified patients and they are supported with monthly supervision sessions by Dr David Clark. The project will run for another 3 months during which patient experience will be evaluated alongside therapist experience, operational factors (such as number of sessions, ease/ difficulty of scheduling in sessions,(financial aspects) and patient outcomes.</p>	<p>Amber</p>	
<p>Bone Health – Regional (Deploy)</p>	<p>Execution</p> <p>This project is a collaboration between the University of Oxford, PRIMIS and the Oxford AHSN. The project is working with GP practices, initially as a pilot within Oxfordshire, to improve the management of patients with osteoporosis who are at high risk of sustaining a fragility fracture. The project has developed a case-finding tool to ensure high-risk patients are identified and managed in accordance with NICE guidelines and optimised on treatment, thereby reducing the risk of further fragility fractures.</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones)</p> <p>Results from final reports were analysed and reviewed with the clinical champion. A project close report has been developed, which will be available for dissemination in early Q1 2023/24. Initial practice results were circulated to the individual participating practices, and the final paper will be shared with them in Q1.</p> <p>The findings will be presented at a BOB osteoporosis management webinar in April.</p> <p>Work is ongoing with PRIMIS to develop the search tool in other primary care systems, e.g. TPP SystemOne.</p> <p>The results demonstrated the positive impact of the project. The key findings are:</p> <ul style="list-style-type: none"> - 283 patients screened during the project - improved diagnosis coding for osteoporosis and QOF fragility fracture coding - an additional 252 patients on anti-osteoporosis medication at the end of the project - a projected 13 fragility fractures have been avoided within the next 2 years, with an estimated hospital cost saving of £97,274 over 2 years - Project report finalised in March 2023 and has been shared with the BOB ICB meds optimisation team, and will be shared with other relevant stakeholders. <p>Plans for 2023/24 include engagement with key stakeholders to discuss plans for wider roll out.</p>	<p>Green</p>	<p>BOB</p>



Local Project Portfolio

Programme	Programme Details	RAG	ICS
BPE patient information videos	<p>Execution</p> <p>Development of suite of patient information videos on Benign Prostatic Enlargement. Working with clinical leads from OUH and Frimley Health to create 11 patient vidoes covering all aspects of the condition from anatomy, through lifestyle changes, medication and surgical options.</p> <p>Working with PPIEE team from NHSE/I and Health Innovation Manchester (lead for MTFM BPE products) to ensure appropriate and widespread dissemination of vidoes once completed.</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones)</p> <p>Work continued on developing the remaining storyboards and videos, with the 6th video being finalised and signed off by the clinical lead. Feedback from public/patient partners was received on storyboards 7, 8 and 9, following which amendments were made and sent to the clinical lead for review prior to the videos being created. The final two storyboards have been drafted and were sent for public partner feedback at the end of the quarter.</p> <p>Engagement with NHSE/I continued during Q4 and the CIWI team began engagement with local key communities to seek feedback on the videos.</p> <p>It is anticipated the suite of patient information videos will be completed by the end of Q1 2023/24.</p>	Green	BOB
Brainomix AI Stroke Imaging Technology Evaluation (Regional)	<p>Execution</p> <p>NHSX-AAC Artificial Intelligence in Health and Care Award – Evaluating Brainomix AI Stroke Imaging Technology – Regional prject.</p> <p>Working with 33 sites across five Integrated Stroke Delivery Networks in the South of England as part of the AI in Health and Care Award to evaluate the impact e-Stroke has on the acute stroke pathway. Focussing on rapid access to treatment with mechanical thrombectomy and the impact on outcomes for stroke patients including the prevention of long-term disability. As a phase 4 project, we will support the evaluation of e-Stroke in the routine clinical pathway to determine effectiveness, accuracy, safety and value.</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones)</p> <p>The last quarters activities have culminated our annual report submitted to the AAC on Friday 31st March.</p> <p>As follow up to the ISDN reports circulated at the end of 2022, we hosted a successful formative feedback session online led by Dr Kiruba Nagaratnam on 7th February to gain valuable insights from clinicians using e-Stroke across the evaluation.</p> <p>We have continued analysis of the latest quarter of SSNAP data which has been converged with what we understand to be true of sites from our qualitative findings in order to determine why stroke services vary and to make sense of unique findings and outliers. Part of this work has included the creation and distribution of a workforce survey to quantify staff levels pre and post implementation. We are also working to re-map stroke pathways post implementaiton of e-Stroke to identify and isolate changes.</p>	Green	BOB
Cardiosignal – Local (Discover)	<p>Execution</p> <p>Cardiosignal is currently a very small scale pilot with two practices in BOB testing an app that uses the gyroscope in the phone to detect the movement of the heart. It is widely used across Europe but currently is not widely used in the UK. The aim will be to offer the equivalent of a 'virtual pulse check' to people aged over 65 who are having long term condition reviews.</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones)</p> <p>Patient facing activities commenced, project ongoing.</p> <p>This year we continued to develop the implementation resources and patient facing activites commenced in Q4.</p>	Green	BOB



Local Project Portfolio

Programme	Programme Details	RAG	ICS
Communities of practice	<p>Execution</p> <p>Oxford AHSN is developing a community of practice with the online, time bank and skills sharing platform Hexitime. The Community of Practice will address regional priorities for action on health inequalities in the population, and in the health and care workforce, whilst demonstrating the power of co-production.</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones)</p> <p>Gathered feedback from members regarding preferred design, topics, focus for future Community of Practice activities. Used this information to design a session focused on Social Prescribing and Health Inequalities (will be held in Q1 2023-2024). Also planning for a review workshop which will explore what has worked well and ideas which will make the Community of Practice even better (this will also be held in Q1 2023-2024).</p> <p>This Community of Practice has provided an important opportunity for a wide range of professionals and community members to gather and share ideas regarding Health Inequalities. This is a complex and wide-ranging issue which benefits from collaboration. The Community of Practice activities over the last 12 months or so have highlighted useful learning about effective ways to approach this challenge. The learning will be consolidated in an independent report which will be finalised in the Summer of 2023.</p>	Green	
Developing NHS Health and Wellbeing Leads - Local (Discover)	<p>Execution</p> <p>The health and wellbeing of staff is a growing concern for NHS organisations. NHSE commissioned this programme to understand what supports wellbeing in an organisation and how those leading it can best be supported. In collaboration with NENC, UCLP and Eastern AHSN, over 500 health and wellbeing leads and senior responsible officers have given their input through interviews, surveys and workshops. The outputs have been condensed into a possible organisational model and skills required to lead this agenda. The final phase of this programme is testing these theories at sites.</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones)</p> <p>Undertaking site visits to test the theory of change.</p> <p>Over 500 health and wellbeing leads and senior responsible officers have collaborated together with Oxford, UCLP, NENC and Eastern AHSN to understand how to grow health and wellbeing in organisations including the skills required to lead this.</p> <p>Organisational culture is critical to allow this agenda to move forward. Collaborating with NHSE to co-design competencies for those leading this agenda.</p>	Green	
Development of Rapid Diagnostic Service	<p>Execution</p> <p>Development of tools and processes for the effective diagnosis of cancer to improve overall outcomes</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones)</p> <p>No work has been undertaken this quarter - the local cancer alliances are focusing on screening numbers currently.</p>	Green	



Local Project Portfolio

Programme	Programme Details	RAG	ICS
<p>Digital Children and Young People (CYP) Project (BOB ICS) – Regional (Develop)</p>	<p>Project close</p> <p>A CAMHS digital project was initiated at the request of BOB ICS colleagues to conduct an audit of the digital solutions available to young people via CAMHS within the BOB geography and across the country. Our approach focused on the Thrive framework model and how potential digital solutions might support traditional service provision. The work was accelerated at the request of the BOB ICS Chair for Mental Health. Engagement and views of clinicians and young people sought during Q1 with a jointly hosted webinar presented on 30 June 2022 to share learning and information gathered so far. The report on this work was published and promoted in Q3 and has been well-received and led to further conversations with digital innovators and invitations to ICS meetings to share the findings and explore next steps.</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones) Continuing to have discussions with ICB contacts and boards around potential digital solutions and approaches. Presented key findings from the CAMHS digital report at Mayden event at Keble College, Oxford. The report has been widely distributed and well-received. Although it is understood that it will have been out-of-date almost as soon as it was published, it represents a point in time and a useful reference tool for anyone interested in understanding what is available, digitally, for children aged 18 years or younger.</p>	<p>Green</p>	<p>BOB</p>
<p>Discovery College (Oxfordshire) Evaluation of Pilot</p>	<p>Project close</p> <p>Based on the Recovery College model, Oxfordshire Discovery College have been developing pilot courses aimed at children and young people within Oxfordshire. The aims of the College are to promote emotional literacy and to improve understanding - for young people and their parents - around the mental health issues that affect them (or may affect them). As the Discovery College approach is innovative and the work is being developed locally, we are conducting a light touch evaluation from local pilots, engaging tutors and (for those courses aimed at 18+ years) potentially those attending the courses. This will be to ascertain whether the Discovery College approach offers something that could benefit the health system and whether the approach (structure, ethos, and specific courses) might be mapped out and fixed sufficiently well to be replicable in other geographies.</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones) Conducting semi-structured interviews with tutors delivering the pilot programme through the emerging Oxfordshire Discover College offered an (albeit limited) insight into what benefits, challenges and opportunities could be offered via such a method to those aged under 21 years of age, including primary school aged children. The interviews conducted were constructive but, ultimately, raised questions that could not be answered based on the limited sample interviewed (and limited opportunity given the small number of courses offered via the pilot). However, there is scope to revisit this - potentially having engaged with more established Discovery Colleges in other parts of England - in a year or two's time once the Oxfordshire programme is better established and defined/enshrined as a template or process which could be used to replicate this approach.</p>	<p>Green</p>	<p>BOB</p>
<p>EchoGo Pro - Local (Develop)</p>	<p>Execution</p> <p>Ultromics have developed the EchoGo Pro device and has received FDA 510(K) clearance. The technology intends to use artificial intelligence to analyse stress echo scans to support clinical decision making by automating the reading of echocardiograms. EchoGo Pro provides automated analysis of echocardiograms for patients undergoing echocardiographic assessment for suspected cardiac pathology. Through specialised image-based machine learning, EchoGo Pro assists physicians identify heart disease risk rapidly to enable appropriate care. Ultromics aims to finish recruiting sites by October 2022, to finish recruiting the full 2,500 participants by December 2022 and have the last participants follow-up visit in June 2023. A health economic assessment will be developed comparing the intervention EchoGo Pro to standard of care by Oxford AHSN with the provided real world data.</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones) No planned activity for Oxford AHSN in Q4 for health economics analysis. NIHR extension has been applied to help with data collection. Waiting on the contract to be renewed with Oxford AHSN</p>	<p>Green</p>	<p>Ongoing-Awaiting RWE to complete, maintain communication.</p>



Local Project Portfolio

Programme	Programme Details	RAG	ICS
<p>Elastomeric Devices – Regional (Discover)</p>	<p>Execution</p> <p>Elastomeric devices are small, single use pumps used to administer medication such as IV antibiotics or chemotherapy. They can be used in patients' homes and as such they could help relieve some of the pressure on hospital beds, by either facilitating an earlier discharge from hospital of patients who would otherwise only remain in hospital to receive IV antibiotics, or to support the prevention of admissions for such patients.</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones) The implementation resources were published on the Oxford AHSN at the beginning of Q4. The resources include:</p> <ol style="list-style-type: none"> 1. A series of 9 short pre-recorded presentations. 2. An interactive PDF document explaining what the device is, the cohorts of patients who could benefit, the different possible service models, how to introduce and monitor the impact. 3. An overview of service models at other Trusts who use the elastomeric device. 4. Link to useful resources and published papers. <p>Plans are also in progress for creating a training video for clinicians filling the elastomeric device using the aseptic non-touch technique, and a patient experience video to highlight the impact and benefits of being discharged home with the device to continue to receive IV treatment in their own home.</p> <p>Activity highlights this year include:</p> <ul style="list-style-type: none"> - baseline survey sent across South East region - development of a number of implementation resources and creation of webpage for ease of access - Nine separate meetings held with organisations across the South East (and some outside of the region) with the OUH clinician to discuss implementation of devices within the organisation. These meetings have been very well received by the interested organisation - continued collation and analysis of data from OUH in order to understand the impact this service has had on the Trust and wider health economy - OUH clinician was invited to speak on their elastomeric service at the Hospital at Home World Congress in March 2023 	<p>Green</p>	<p>BOB Frimley BLMK</p>
<p>eMaps</p>	<p>Monitor and control</p> <p>eMaps is a digital knowledge hub developed to support life science innovators and entrepreneurs in accessing healthcare markets across Europe and beyond in the areas of drugs, digital health, diagnostics, and medical devices. It provides information and advice on regulation, reimbursement, and adoption.</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones) The eMAPS platform is currently undergoing a transition in which its content will soon be readily accessible to the general public. The completion of this transition is anticipated by the end of Q1, and will anticipate it to be the project's closure.</p>	<p>Green</p>	



Local Project Portfolio

Programme	Programme Details	RAG	ICS
Environmental Sustainability - Local (Deploy)	<p>Planning</p> <p>Oxford AHSN will support its NHS partners to achieve their Net Zero carbon targets helping them to embed environmental sustainability into local adoption and spread projects to improve health and productivity. There is one regional adoption and spread project that will be supported across the whole year and development of the service supported from Oxford 50%</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones) Workshops 2 and 3 Clean Air Framework (CAF) Working closely with Frimley and BOB on implementing the CAF with Global Action Plan. Innovator support. Supporting AiSentia and Promapp Innovator support pack draft created. Pack created and shared with Task and Finish Group. To be presented at the Community of Interest in Q1. Events. Bridging the Gap two net zero workshops complete, KM-SHARe event complete. Asthma guidance. Almost complete, final iteration. Once complete will be shared with Sustainability Leads and Respiratory leads across Oxford, KSS and Wessex.</p>	<p>Green</p>	<p>BOB BLMK Frimley Kent & Medway Sussex Surrey Heartlands</p>
FatHealth Artificial Intelligence - Local (Discover)	<p>Execution</p> <p>FatHealth, from Caristo Diagnostics detects fat tissue inflammation using new artificial intelligence techniques applied to routine computed tomography ('CT') scans. FatHealth detects fat tissue inflammation using new artificial intelligence techniques applied to routine 'CT' scans. This new method has been shown to be better than other diagnostic tests for this purpose. Depot-specific adipose tissue (AT) inflammation, particularly in visceral AT, is an indicator of cardiometabolic risk. However, visceral AT inflammation is not identifiable by any current blood or imaging biomarkers and does not correlate with simple indicators of obesity. This major gap in our diagnostic approach means that powerful new drugs cannot be optimally targeted. FatHealth provides highly quantitative readouts of depot-specific AT inflammation. FatHealth can identify people who may be at risk of developing diabetes, and people with diabetes who are at high risk of death from cardiovascular disease. Partners: University of Oxford, Leeds Teaching Hospitals, Milton Keynes University Hospital NHS Foundation Trust. The Work package for Oxford AHSN consists of Feasibility study and health economics analysis report</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones) No planned activity in Q4. The health economics analysis will be conducted in Q2FY 2023 (data dependent). This year the team have completed a feasibility study which involved a range of stakeholders responsible for management of patients in the Diabetic pathway and its complications . All stakeholders were interviewed using a discussion guide prepared by the Oxford AHSN and a report highlighting key stakeholder insights, benefits, barriers to adoptions and usefulness .Analysis of key human factor tools were generated to report on the acceptability od the AI tool. The report was received well by Caristo. The stakeholders were interested in the AI solution that detects fat tissue inflammation using new artificial intelligence techniques applied to routine computed tomography scans. However, wanted to see the clinical evidence around its usability. Currently, patients are being recruited to collect the observational study data for health economics analysis to explore the cost benefit of introducing the AI technology to identify people who may be at risk of developing diabetes, and people with diabetes who are at high risk of death from cardiovascular disease.</p>	<p>Green</p>	
Frimley Trauma Informed Care Programme Evaluation	<p>Monitor and control</p> <p>Surrey and Borders Partnership NHS Foundation Trust has developed a Programme to support the Frimley South workforce to deliver trauma informed care. The Programme is devised of a number of training modules, consultations for specific projects, action learning sets, a service user module at the Recovery College and a Framework for local organisations. The evaluation also includes piloting an online HEE module for social care staff. The programme has been completely co-produced with lived experience trainers.</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones) Design work for the evaluation has begun with a number of project understanding meetings with key stakeholders and project leads.</p>	<p>Green</p>	<p>Frimley</p>



Local Project Portfolio

Programme	Programme Details	RAG	ICS
HeadStart and RightStart (OLS) - Local (Discover)	<p>Monitor and control</p> <p>Needs analysis. Headstart can be used in cases of COPD as a rapid test for urine, to detect markers indicating exacerbation of the disease before the symptoms develop. Rightstart is a rapid test of whole blood which can determine if a COPD exacerbation is eosinophilic or neutrophilic to guide either steroid or antibiotic treatment.</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones) No activity to report - company has not re-engaged after the end of the grant. No activity on the project this year - we were waiting for the company to re-engage with us when they had data from their clinical trials for us to work with.</p>	Green	
Health Inequalities Dashboards – Local (Deploy)	<p>Monitor and control</p> <p>In late 2021, Oxford AHSN commissioned Unity Insights (formerly part of Kent Surrey Sussex AHSN) to scope and develop a series of Health Inequalities dashboards to further understand the demographics and needs of our population starting with a Primary Care view. The dashboards are accessed via an internet browser and use the web-based interactive data visualisation software tool "Tableau".</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones) We are currently working on a specification for a Polypharmacy Dashboard to help with this programme of work. A working group has been established which includes the three Medicines Optimisation leads from BOB, Frimley and BLMK ICBs. Each MO Lead has contributed to the specification to ensure it will meet their needs. The next step is to produce mock-up version which will be ready in Q1 (April 23). A big win for the HI dashboards is that they have led to us having closer working relationships in terms of Health Inequalities with our ICB senior colleagues. The dashboards have also been useful in our project/ programme work, especially at the start-up phase, allowing us to understand our population better and show where to direct our resources. They have also been useful in preparing HI-related material for meetings with our Stakeholders. We continue to socialise the existence of our HI dashboards with external organisations and have most recently demonstrated them to managers at the Office for Health Improvement & Disparities, and Berkshire Healthcare NHS FT.</p>	Green	
Heart failure inequalities workstream – Local (Develop)	<p>Execution</p> <p>Heart failure outcomes are disproportionately worse in areas of high health inequalities. Oxford AHSN is working on two projects that aim to address this issue within the BOB ICS.</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones) Evaluation of phase 1 completed. To be shared with NHSE by BOB ICB.</p>	Green	BOB
Improving opioid use	<p>Planning</p> <p>Technologies using artificial intelligence are being developed to examine and optimise the use of opioids. Oxford AHSN in collaboration with Centre for Evidence-Baes Medicine reviewed published studies that explored the types of AI models being developed and the application of these models in people taking opioid. This review was published in BMJ Innovations. Link: https://innovations.bmj.com/content/9/2/78</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones) Worked with the SIP team to compile and consider adoption ready technology that centred around improving opioid use and was ready for piloting for adoption. Explored supporting innovators with a grant application for the recently launched Reducing Drug Deaths Innovation SBRI Challenge. The AI and Opioid Use review was published in BMJ Innovations. Link: https://innovations.bmj.com/content/9/2/78 The next step will be to bring innovators and a clinical panel together to explore if there is any new technology that providers are interested in piloting.</p>		



Local Project Portfolio

Programme	Programme Details	RAG	ICS
InHIP to improve the current Asthma and COPD pathway (Frimley)	<p>Initiation</p> <p>Frimley ICS plan is to improve the current Asthma and COPD pathway across the ICS by identifying at risk patients in the IMD 20% most deprived populations and ethnic minority communities. As well as extending the provision of community respiratory team, the approach will include population health management and identification of patients at increased risk, use of FeNO testing and spirometry to support diagnosis and increasing access to RES Roflumilast.</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones)</p> <p>New operational lead for the project. Project review – outcome of which no switch of focus to exclusively Asthma Biologics as the NICE approved therapy for the project (although this data will also be captured) – focus will remain on COPD therapy</p> <p>Data deep dive review ongoing to facilitate discussions with Connected Care team to agree benchmarks and ongoing metrics capture.</p> <p>Although early in the project, this project has provided an opportunity to carry out a deep data dive, insights from this are not only invaluable for the InHIP programme, but also will be used to inform wider activity across the Frimley area.</p>	Green	Frimley
InHIP to reduce unwarranted variation in cardiovascular outcomes (BLMK)	<p>Initiation</p> <p>This project aims to reduce unwarranted variation in cardiovascular outcomes in the IMD 20% most deprived populations in the ICB with existing CVD. Alongside an outreach campaign, community engagement and data analysis, identified patients will be offered a pharmacist led review to support prevention, optimisation, and treatment access to lipid-lowering agents for those with co-existent heart failure and reduced ejection fraction.</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones)</p> <p>Baselining for metrics described in the PID completed. Implementation of plan co-developed with system partners is complete, further development of planning for community engagement is in progress.</p> <p>Development of SOP, training resources and patient-facing material is complete.</p> <p>MOU sent out to participating Practices.</p> <p>General enthusiasm from system partners that this is an extremely valuable and worthwhile endeavour. Data collection has been helpful in identifying the scale of inequality in management of CVD in BLMK and the gradient by socioeconomic deprivation for hospital admissions. This was much higher than anticipated. This project has provided and opportunity to produce resources to support best practice, standardised reviews for people with CVD with view to appropriate secondary prevention/optimisation.</p>	Green	BMLK
InHIP to reduce unwarranted variation in severe Asthma outcomes (BOB)	<p>Initiation</p> <p>Buckinghamshire, Oxfordshire and Berkshire West ICB aims to reduce unwarranted variation by increasing access to NICE approved therapies for asthma management including asthma biologics, MART, DPI and SMART inhalers in the IMD 20% most deprived populations across ICS footprint. Building on pre-existing work, the Integrated Severe Asthma Care project team plan to use population health management and system tools such as SPECTRA to proactively identify, review and refer individuals with potential severe asthma to the rapid access clinic for review and medicines optimisation including biologic therapy initiation.</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones)</p> <p>Project evaluation metrics reviewed and agreed – follow up meeting with Steven Goldensmith (SRO - Prevention & Health Inequalities) to agree engagement strategy completed, metrics finalised.</p> <p>DPIA refresh with OUH Governance team.</p> <p>The ISAC team have been retained under this project, which has enabled an existing team to expand a previous project. This has greatly streamlined the initiation processes.</p>	Green	BOB



Local Project Portfolio

Programme	Programme Details	RAG	ICS
Intelligent Intermittent Auscultation – Local (Deploy)	<p>Monitor and control</p> <p>The programme aim is to improve safety for mothers and babies in low risk labour and birth by improving the knowledge, skills and confidence of midwives. Uniquely the programme uses real fetal heart sounds as part of the interactive learning. In order to better understand the impact of the training we approached Unity Insights to scope support in the analysis and presentation of impact from the IIA programme in a user-friendly interface. This commission is complete and we have a dashboard reflecting the e-learning metrics to support measurement improvement using the data from e-learning for health. The dashboard will be refreshed on a quarterly basis.</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones) 'Discussions with Unity Insights to incorporate the metrics from e-lfh platform and the dashboard. Discussions planned with BOB LMNS re funding a pilot for Year 2 as a larger scale project -Fetal Monitoring Programme. The IIA project has spread to organisations in England and Wales, it is available in countries external to the UK via e-integrity the commercial arm of e-lfh our work with Unity Insights.</p>	<p>Green</p>	<p>BOB</p>
LiverMultiScan (OLS) - Local (Discover)	<p>Monitor and control</p> <p>Needs analysis for LiverMultiScan for autoimmune hepatitis</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones) No funding has become available, so project has not continued. Oxford AHSN and Perspectum are still looking for viable funding options.</p>	<p>Amber</p> <p>Project is delayed due to lack of grant funding opportunities</p>	<p>BOB</p>
Medicines Optimisation Integration	<p>Execution</p> <p>The programme aim is to:</p> <ul style="list-style-type: none"> • form collaborative networks and relationships between Oxford AHSN and system medicines optimisation leads • align and integrate Oxford AHSN medicines optimisation programmes and activity with ICB medicines optimisation plans • align and integrate Oxford AHSN medicines optimisation programmes and activity with southeast region medicines optimisation activity • ensure system medicines optimisation leads are aware of and able to contribute and support AHSN-led medicines optimisation initiatives • scope medicines optimisation innovation requests from ICB medicines optimisation leads and provide appropriate support if possible <p>Q4 Update (Q4 Specific activity/delivery/milestones) Membership and attendance at local and regional senior medicines optimisation senior leadership meetings has enabled alignment and integration of AHSN medicines optimisation programmes with ICB medicines optimisation plans. This will enable smoother more efficient implementation of programmes and initiatives. It includes:</p> <ul style="list-style-type: none"> • Inclusion of the Polypharmacy Programme in the Frimley ICB Medicines Safety Plan, BOB medicines optimisation delivery plan and BLMK medicines optimisation programme plan • OUH Opioid Stewardship Group support to develop a clinical panel to review relevant innovation in this area • Collaboration with the AHSN to develop a system approach to reduce the inappropriate prescribing of opiate medication for non-cancer pain by Frimley ICS Medicines Safety Group • RMOC support to escalate the overuse of high dose oral corticosteroid prescribing for uncontrolled asthma flagged by the Asthma Biologics programme. 	<p>Green</p>	<p>BOB</p> <p>Frimley</p>



Local Project Portfolio

Programme	Programme Details	RAG	ICS
<p>MRCP+ advanced biliary visualisation software - Local (Discover)</p>	<p>Monitor and control</p> <p>MRCP+ is a non-invasive MRI-based technology that has gained FDA 510(k) clearance and CE marking to aid clinicians in the monitoring and diagnosis of Primary sclerosing cholangitis. MRCP+ uses the images of the biliary tree acquired from standard clinical MRCP scans and can build a quantitative model of the pancreatobiliary system from a 3D MRCP acquisition. MRCP+ will provide a number of measurements including gross biliary tree volume and gall bladder volume. Additionally, it measures the cross-sectional diameter of the ducts at every point in the tree which allows for more precise and objective characterisation of biliary irregularities such as strictures and dilatations. The Work package for Oxford AHSN consists of Feasibility study and health economics analysis report</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones) 'Stage 2 for i4i Product Development Awards have been submitted as co-applicant. Stage 1 for i4i Product Development Awards was submitted as co-applicant with Perspectum. The application was successful for stage 1 and now the stage 2 has been submitted for the same.</p>	<p>Green</p>	
<p>MyAsthmaBiologics App</p>	<p>Planning</p> <p>A deliverable from the AAC Asthma Biologics programme has been the development of a patient-centred digital remote monitoring solution. This has been developed in partnership with digital therapeutics company MymHealth. The App, referred to as MyAsthmaBiologics, is designed to support ongoing monitoring of patients on asthma biologics. The objective of this real-world evaluation is to establish the value of the MyAsthmaBiologics App to both patients and the Severe Asthma Service (SAS) overseeing their care. The expectation is that the findings and results from the evaluation will support decision making around future investment.</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones) Progress has been made in confirming the evaluation sites, the numbers of patients and staff to be interviewed and refining the agreed approach to the evaluation, supported by creation of a logic model. The need for ethics approval to interview patients is confirmed and will be obtained through University Hospital of Southampton NHSFT's "ERGO" process. Assuming ethics approval can be sought in a short time period, planned "go live" will be in late June / early July based on current timings. This new evaluation project has quickly got off the ground, formed from a sub-team from the Asthma Biologics RUP and evaluation expertise from Oxford AHSN. The scope has been confirmed and the initial protocol drafted. Next steps are to plan the detail of the study, secure ethics approval and plan the data gathering and interviews.</p>	<p>Green</p>	
<p>Nelli Home - Local (Develop)</p>	<p>Execution</p> <p>Nelli provides a novel intervention for the diagnosis and management of Epilepsy by enabling clinicians to prescribe and assess the right treatment and identify non-seizure related issues whilst the patient is asleep, at home in their own bed. The AI technology uses video recordings of the patient while they sleep to identify potential seizure activity and compile the potential events in a report for the neurologist to use to make a diagnosis. By identifying seizure/non-seizure activity Nelli reduces the need for multiple EEG recordings and possible admission to specialist telemetry units with long waiting times. For patients and caregivers, it reduces anxiety as they do not need to worry about counting seizures at night and missing vital information. Oxford AHSN will project manage the evaluation of the technology across two NHS sites - one a tertiary centre, the other a DGH - and provide health economics for business cases at both sites via York Health Economics Consortium. The project will also involve input from patients and carers around the acceptability of the technology. Partners: OUH and Royal Wolverhampton, with PPI being provided by Epilepsy Action.</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones) 'Data has been received from Royal Wolverhampton Hospital. No data has yet been received from Oxford University Hospitals - due to operational pressures - have been investigating mitigation actions if this data is not forthcoming. Meetings have been arranged for Q1 2023-24 with Wolverhampton to discuss business case going forward while the health economics is being modelled. Practical side of project is complete - 34 patients have had recordings taken and reported back on. Royal Wolverhampton have reported good patient outcomes - treatment regimes optimised, or further investigations have been selected that wouldn't have been possible without Nelli. Still waiting for Oxford University Hospitals data to complete the Health Economics and Sustainability reports, as well as business cases. Royal Wolverhampton are very keen to procure this (provided that the health economics are worthwhile).</p>	<p>Green</p>	<p>BOB</p>



Local Project Portfolio

Programme	Programme Details	RAG	ICS
<p>NIHR Applied Research Collaboration, Oxford and Thames Valley working with Oxford AHSN – Local and regional (Deploy)</p>	<p>Monitor and control</p> <p>The Applied Research Collaboration Oxford and Thames Valley (ARC OxTV) started in October 2019 and runs for five years to September 2024. There are 15 ARCs across England, funded by the NIHR. The purpose of the ARCs is to undertake and implement applied health and social care research, based around local health and social care needs, both for people and the systems the care is provided within. ARCs work in collaboration with AHSNs, universities, NHS trusts, councils, and charities.</p> <p>The ARC OxTV is hosted by Oxford Health NHS Foundation Trust and based at the University of Oxford’s Nuffield Department of Primary Care Health Sciences. The Programme Director is Professor Richard Hobbs, and the Implementation Lead is Professor Gary Ford who is also Chief Executive of the Oxford AHSN. The ARC OxTV is working closely with the Oxford AHSN to implement ARC research outputs into practice across the Oxford AHSN region and, where appropriate, across the wider South East region, and nationally.</p> <p>There are six themes within the ARC:</p> <ul style="list-style-type: none"> Changing behaviour for better health and preventing disease Helping patients to manage their own conditions Mental health across the life course Improving health and social care Applied digital health Novel methods to aid and evaluate implementation <p>Q4 Update (Q4 Specific activity/delivery/milestones)</p> <p>The ARC has continued with its planning for the extension, engaging with local system partners and developing project proposals which align with local and regional priorities, along with the DHSC research priorities. Alongside this an informal visit was held with the head of NIHR infrastructure to discuss our ARC impact to date and future plans.</p> <p>The Implementation Manager led on a review of ARC approaches to implementation, which has been shared with AHSN Chief Officers and ARC Directors.</p> <p>Key outputs from the ARC during 23/24:</p> <p>ARC supported researchers published two papers showing self-monitoring of blood pressure during pregnancy neither results in earlier detection of high blood pressure, nor helps with blood pressure control in those who are pregnant, compared with NHS usual standard of care. It was though well tolerated, with high levels of acceptability.</p> <p>The OxWell student survey annual report was published. The OxWell Student Survey measures the wellbeing (health and happiness) of children and young people aged 9-18 years old. The survey is a collaboration between young people, schools, the NHS and the OxWell Study team at the University of Oxford’s Department of Psychiatry, supported by the NIHR ARC OxTV. The annual report reveals the scope and impact of the OxWell survey, in terms of both its effects on services and care as well as more broadly, even internationally.</p> <p>The research generated by the survey is now being used at a national, local and school level to help provide valuable insights into what students need, which factors influence their wellbeing and how they would like to access help if they have mental health difficulties. The survey for 22/23 recruited 43,000 participants and is currently being analysed.</p> <p>Two technologies from the University of Oxford, Online Support and Intervention for Child Anxiety (OSI) and Online Social anxiety Cognitive therapy for Adolescents (OSCA) were among four digital tools recommended for use in the NHS that can help children and young people with mild to moderate symptoms of anxiety or low mood. The recommendation, from an independent NICE committee, is the first ever published as part of the National Institute for Clinical Excellence (NICE) new Early Value Assessment (EVA) for medical technologies, a speedier alternative to the ‘NICE medical technologies guidance’ typically used for such treatments. The recommendation, from an independent NICE committee, is the first ever published as part of the National Institute for Clinical Excellence (NICE) new Early Value Assessment (EVA) for medical technologies, a speedier alternative to the ‘NICE medical technologies guidance’ typically used for such treatments.</p>	<p>Green</p>	<p>BOB BLMK Frimley</p>



Local Project Portfolio

Programme	Programme Details	RAG	ICS
<p>Oxford AHSN Accelerator Programme</p>	<p>Execution</p> <p>Oxford AHSN continues to support accelerator innovators from cohorts 1 (2019), 2 (2020), and 3 (2021) with a range of support tools and events.</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones) Exploring ways to deliver accelerator programme with new partnership arrangement around specific focus areas aligned to Oxford AHSN core specialities. Updated support to all alumni via dedicated Slack channel and regular updates on opportunities for funding and development support across Oxford AHSN region and national programmes. The Oxford AHSN Accelerator continues to be recognised by industry partners, funding bodies, and participants as a highly effective means to identify and support promising early stage innovations for the health system.</p>	<p>Green</p>	<p>BOB</p>
<p>Oxford AHSN/ ARC OxTV NHS Insights Prioritisation Programme (NIPP) Project: Virtual clinics for managing transient ischaemic attack and minor stroke – developing a safe and effective model for post-pandemic working (Regional)</p>	<p>Monitor and control</p> <p>Prior to the pandemic patients with symptoms of suspected TIA or minor stroke were usually seen face-to-face by a healthcare professional in a dedicated clinic. At the start of the pandemic, the Oxford AHSN and the Getting It Right First Time (GIRFT) programme produced guidance to help stroke services rapidly adapt and reduce the risk of infection. This included advice on developing virtual clinics based on the experience of early implementers in the NHS. Each stage of the pathway could be managed remotely – referral, initial triage and consultation – with patients only attending hospital for essential investigations when needed such as brain imaging, electrocardiogram (ECG) and blood tests. Some services have now reverted to pre-pandemic ways of working while others have retained all or some virtual care provision. There is an urgent need to understand the benefits and potential risks of the virtual model of care – and the reasons behind some services returning to pre-pandemic care models. The project team is working closely with the five Integrated Stroke Delivery Networks (ISDNs) which cover the South East region – and the NHS organisations within them. The aim is to produce a ‘rapid insights’ guide for healthcare staff, service providers and NHS commissioners highlighting good practice and opportunities for quality improvement. It will include: -what a good care pathway looks like in face-to-face, virtual and hybrid models for TIA and minor stroke clinics -experiences of healthcare professionals and patients -benefits for patients of the different models taking account of health inequalities and digital exclusion -environmental impact in the light of the NHS net zero carbon emissions ambition -suggested data requirements to enable routine monitoring of services</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones) The NIPP project team applied for and were given a two month extension, due to the challenges with recruitment for the patient and staff interviews linked to the PIC process. The project is now due to complete end of May '23 and is on track to meet this deadline. Each workstream is completing their analysis, ahead of the completion of two reports, one for NHSE (a rapid insights guide aimed at ICS commissioners) and a more detailed evaluation report/ improvement guide for TIA/ Stroke services and the Integrated Stroke Delivery Networks (ISDNs). We have taken an active part in the central NIPP evaluation, looking at success and lessons learnt from the programme. The NIPP project has been an excellent opportunity for the AHSN and ARC to work collaboratively together on an evaluation. There has been opportunities for capacity development for both teams and the approach taken can certainly be applied for similar programmes of work.</p>	<p>Green</p>	<p>BOB Frimley Kent & Medway Sussex</p>



Local Project Portfolio

Programme	Programme Details	RAG	ICS
OxSys - Local (Discover)	<p>Planning</p> <p>This University of Oxford project provides an innovative, data-driven system for individualised cardiotocography (CTG) analysis to enhance clinical decision-making and avoid foetal damage during labour. Oxford AHSN is collaborating with clinicians and scientists from the University of Oxford on a project funded by the National Institute of Health Research where the overarching goal is to improve clinical decision-making around labour management and CTG monitoring by providing timely, data-driven and individualised assessment of fetal wellbeing, so that fetal damage due to oxygen deprivation intrapartum can be avoided. The intelligent data analysis software (OxSys) will provide computer-based, real-time estimates of oxygen deprivation risks during labour. Partner: University of Oxford. The role of Oxford AHSN is to conduct a feasibility study report</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones) Feasibility study report was submitted on the acceptance and barrier to adoption of OxSys a decision support tool for improved clinical decision-making around labour management and CTG monitoring by providing timely, data-driven and individualised assessment of fetal wellbeing. The report was received well and there are discussions going on the real world evaluation in future</p>	Green	
Paddle Psychological Therapy Support – Local (Deploy)	<p>Planning</p> <p>Relapse Prevention/ Staying well app for patients who have received a course of psychological therapy - A smartphone app</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones) The Paddle app, which was developed by patients for patients via the Patient Forum to maximise treatment potential and support patients after treatment to stay well, has reached its final development phase. Paddle is now being further developed outside of the AHSN.</p>	Green	
Peri-operative Innovation - Local (Develop)	<p>Execution</p> <p>The team together with Buckinghamshire, Oxfordshire, and Berkshire West (BOB) Integrated Care System (ICS) led a successful collaborative bid for an NHSx Perioperative Adoption Fund grant to support innovation in the peri-operative (before surgery) care pathway to assist elective recovery. The programme is looking to evaluate four digital technologies, in four pathways, in three hospitals in high volume low complexity pathways, with a view to the ICS procuring the successful technologies for roll out across the region.</p> <p>The AHSN will provide project management for the evaluations, and health economics support will be provided by YHEC. We are also exploring the workforce implications of one technology (PROMAPP) and the patient/carer experience of another (DaytoDay)</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones) Concentric: Delay in going live due to barriers with integration. Contextual launch in both Medisoft and Cerner Millennium is in progress. Ophthalmology can proceed to first live use once contextual launch in Medisoft is available.</p> <p>DORA: Dora called patients on the surgical ENT waiting list and the data relating to these patients is proving difficult to source, so looking at alternative options.</p> <p>PROMAPP: Completed patients' surgery. PROMAPP has received exceptionally positive feedback from patients;100% of patients were very satisfied or satisfied and 92% of patients proposed the questionnaire was easy or very easy to complete. A draft Sustainability and Social Value report was produced. The final health economics report was also drafted.</p> <p>Prehabilitation for people on a surgical waiting list: Data from the prehabilitation workstream at RBH was sent to YHEC; Health economics is underway.</p> <p>The PDPOP Evaluation process will continue into the new financial year with scope to expand the number of practices trained and evaluated using the Kirkpatrick Level 3 Evaluation Model. Interviews with the GP Leads and colleagues who've received the training in 21/22 will continue to be conducted before a report is drafted and submitted in the summer. Relevant academic papers will also be prepared for submission for publication.</p>	Green	BOB



Local Project Portfolio

Programme	Programme Details	RAG	ICS
Personality Disorder Positive Outcomes Programme (PDPOP)	<p>Execution</p> <p>PDPOP is a training programme (delivered in person or online) for whole teams within General Practice and Primary Care Network Staff to increase confidence and skills when attending to patients with Personality Disorder. The programme has been delivered in a number of practices over the past two years with data collected accordingly. From September 2022, Oxford AHSN is developing and delivering a Kirkpatrick Level 3 Evaluation of the delivery of PDPOP to demonstrate behaviour change. A Kirkpatrick Level 4 Evaluation is also being explored using expertise from the University of Oxford to interrogate the EMIS data to demonstrate results and benefits from the PDPOP training.</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones)</p> <p>PDPOP training has continued to be delivered to practices across the South East, with pre- and post- questionnaires being collected, transcribed, and analysed following the training. A number of interviews have been conducted and the 4-6 week follow-up questionnaires from relevant practices have been circulated, chased-up, and transcribed for analysis. Invitations to GP Leads for the 6 monthly follow-up interview are in preparation. Initial findings from the process were delivered at an event at Cumberland Lodge which was attended by many of the Primary Care Leads and PDPOP trainers.</p> <p>The PDPOP Evaluation process will continue into the new financial year with scope to expand the number of practices trained and evaluated using the Kirkpatrick Level 3 Evaluation Model. Interviews with the GP Leads and colleagues who've received the training in 21/22 will continue to be conducted before a report is drafted and submitted in the summer. Relevant academic papers will also be prepared for submission for publication.</p>	<p>Green</p>	<p>BOB</p>
Pharmacy Key Box - Local (Discover)	<p>Project close</p> <p>Pharmacy Box is a Medicines Storage Innovation, which uses trust-controlled cards to activate or inactivate locks, which are easily replicable on relevant medicines cabinets, has been created in order to help achieve these goals and improve medicines storage and management, increase clinical staff productivity and efficiency and help ensure more timely administration of patient medication. In addition, it can ensure that all relevant medical staff such as pharmacists and nurses are adequately equipped with medication storage access in all trusts throughout the England ensuring timely access to medicines particularly in times of urgent clinical need. Oxford AHSN will conduct a barrier to adoption study report</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones)</p> <p>This project is closed.</p> <p>A barriers to adoption study interviewing various pharmacists of a various grades. A report was generated showing the key value insights, barriers to adoption and potential place for pharmacy box in medicine management, which will allow Oxford University Hospitals to make a more informed procurement decision.</p>	<p>Green</p>	
Publications and Posters	<p>Planning</p> <p>Manuscript was finalised and a journal article was published in BMJ.</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones)</p> <p>Manuscript on the case study for LAP was submitted.</p> <p>A journal on the topic "LiverMultiScan as an alternative to liver biopsy to monitor autoimmune hepatitis in the National Health Service in England: an economic evaluation" was accepted and published by BMJ open. The article published the work conducted on Feasibility study using LAP methodology and the health economics analysis of using LiverMultiScan for autoimmune hepatitis patient monitoring.</p>	<p>Green</p>	



Local Project Portfolio

Programme	Programme Details	RAG	ICS
Stroke Rehabilitation – Regional (Develop and deploy)	<p>Planning</p> <p>Rehabilitation is a key component of the stroke pathway and a priority area for the Integrated Stroke Delivery Networks (ISDN). Following discussions with Frimley and Surrey Heartlands, and BOB ISDNs, it was agreed that the CIA team will provide support to their rehabilitation programmes of work.</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones) No planned activity. Support provided to BOB and Frimley/Surrey Heartlands ISDN as required for specific pieces of work. ISDNs will approach AHSN for support on an as required basis..</p>	Green	BOB, Frimley, Surrey Heartlands
The Hill - Men's Mental Health – Local (Discover)	<p>Initiation</p> <p>Working with Oxford University Hospital's 'The Hill', experts by experience, clinicians and companies we are aiming help facilitate the understanding of challenges, unmet needs and opportunities around seeking and accessing mental healthcare services for men. Companies are then invited to propose solutions. Further fora events to be developed over the next six months for those who would like to follow-up the conversations begun at the workshops and to demonstrate or present other digital solutions that might be relevant to engage with men and support their mental health.</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones) No further direct activity, though the Oxfordshire Men's Health Partnership continues to seek innovative ways to engage with men within the county to support their mental and physical health. Healthwatch's work investigating men's attitudes and access to health in the Carterton area is likely to lead to further potential activity. Supporting various workshops and webinars engaged in issues around men's health have continued, although no specifically male focussed digital products have been identified; apart from one in development around chronic pain (with introductions made to Unipart, BMW, and other potential local partners).</p>	Amber	BOB
Ufonia	<p>Initiation</p> <p>"Dora" (an automated clinical assistant that conducts routine conversations with patients through a telephone call). A telemedicine AI product. Oxford AHSN is supporting with the patient, public and workforce workstream, to inform activities from designing research through to adoption and implimentation of outcomes.</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones) Detailed planning for an economic evaluation. This has involved the development of a logic model, evaluation plan and detailed liaison with stakeholders in OUH, BHT, the Centre for Sustainable Healthcare and Ufonia. Data gathering activities have begun and include: user testing with people who have insight into a range of disabilities and long term health conditions, a workshop focused on the ethical application of automated telemedicine, interviews with managers and senior clinicians to understand their perspective of introducing AI in the clinical setting, and liaison with those involved in data gathering and relevant IG / Data protection professionals. Work during 2022-2023 will build towards an evaluation report for SBRI which will be complete in the Summer of 2023.</p>	Green	BOB, Frimley, Southampton, Portsmouth



Local Project Portfolio

Programme	Programme Details	RAG	ICS
<p>Validation in real-world settings. Conduct real world evaluations in the Community Diagnostics Centre in Oxford</p>	<p>Initiation</p> <p>Use Oxford Community Diagnostics Centre as a test bed for evaluation for BOB ICS for novel diagnostic technologies to free up diagnostic capacity and make the best use of resources and workforce</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones) No activity to report - meeting with the CDC to discuss potential evaluations has been delayed until Q1 in 2023-24. Activity with the CDC has been impacted due to uncertainty around future funding and direction. The CDC are willing to engage with evaluations going forward, provided that funding is available to support them.</p>	<p>Amber</p> <p>Risk: Funding for CDC innovation is not assured. Mitigation: Keep dialogue with Johannes.</p>	<p>BOB</p>
<p>Validation in real-world settings. Develop value proposition for University of Reading UTI device</p>	<p>Execution</p> <p>This University of Reading project will develop and evaluate a rapid, portable test that checks for antibiotic drug resistance in bacteria responsible for UTIs so that clinicians can treat the infection with the most appropriate antibiotic drug, maximising the likelihood that the infection will be cleared. The role of Oxford AHSN is to conduct a feasibility study to assess the perceived usefulness and potential barriers to adoption of Point-of-care test for suspected UTI patient and a health economic analysis with the real world data.</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones) Stakeholders were identified and interviews were conducted to assess the usefulness and barrier to adoption of the rapid portable test for UTI. Semi structured interviews are being conducted to explore the views of the clinicians on a rapid, portable test that checks for antibiotic drug resistance in bacteria responsible for UTIs so that clinicians can treat the infection with the most appropriate antibiotic drug. Real world data will be collected to explore the cost effectiveness of this rapid test next year.</p>	<p>Green</p>	
<p>Community of Interest Group for Diagnostics</p>	<p>Initiation</p> <p>Initiate an AHSN Network Community of Interest group around diagnostics to help disseminate good RWE of diagnostics from around the AHSN Network to increase uptake of diagnostics with Oxford AHSN providing AHSN Network Diagnostics leadership</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones) No activity to report. There have been discussions of a national Community of Interest Group that would cover diagnostics, which would have made this a duplication of effort. Still awaiting a national decision before proceeding with this.</p>	<p>Amber</p> <p>Risk: Still awaiting national guidance on the Diagnostics@Home Mitigation: Engage the 3 blood culture T&F members to set up inaugural meeting</p>	



Local Project Portfolio

Programme	Programme Details	RAG	ICS
Virtual Wards/Virtual Care	<p>Execution</p> <p>The 5-year vision for the ICS is that a fully integrated virtual ward (VW) and virtual care (VC) pathway will be in place across the BOB area. All VW and care home residents support will be optimised through technology which ensures that patients are able to be safely treated in their home wherever possible and are monitored for improvement or deterioration across the long-term condition spectrum including frailty on a 24-hour basis. The integrated pathway will ensure that patients who are 'at risk' of hospital admission while under VC can be transferred to the VW and be under consultant level care without ever leaving their usual place of residence. They will then be seamlessly discharged back to the care of their GP/local MDTs or carers with appropriate follow-up arrangements in place. The success of this approach will be evaluated within the first year of operation to inform the future funding from 24/25. Throughout the programme the ICS will compare outcomes, capacity and flow, cost efficiency and ensure value for money is maximised across the ICS. Our programme is clinically driven with Dr Syed as our VW Clinical Lead and with the nationally recognised expertise of Professor Lasserson.</p> <p>BOB will prioritise patient cohorts for a) admission avoidance opportunities and b) early discharge opportunities and ensure a particular focus on care home residents testing out two models of care to demonstrate the most effective ways to support acute flow between Hospital@Home (H@H) and VW.</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones)</p> <p>Detailed planning for the evaluation across BOB ICS. This has involved the development of a comprehensive evaluation plan using engagement from a wide group of stakeholders to establish the scope, the questions of interest and outcomes framework detailing a set of meaningful outcome measures to assess the impact of the VW programme. Formal governance has been established with evaluation sub-group meetings and reporting to the BOB VW programme board occurring on a monthly basis. During this quarter we have spent a lot of time reconciling the data across the ICS, reviewing available data sources and identifying data gaps to work towards consistency in data reporting, whilst recognising different models, settings and systems in use. We also supported BOB with their choice of outcome metrics for the VW Impact tracking dashboard and supported Berkshire West with their benefits realisation and future business planning workstream.</p> <p>Point of care testing: Developed implementation plan for Butterfly IQ point of care ultrasound device to be used across all providers in BOB.</p> <p>Delivered a point of care testing 'share and learn' session alongside KSS and Wessex AHSN to virtual ward providers across the South East.</p> <p>Sustainability plan: Finalised the VW sustainability plan with input from stakeholders.</p> <p>Point of care testing: Developed implementation plan for Butterfly IQ point of care ultrasound device to be used across all providers in BOB.</p>	Green	BOB
Working Together Partnership - collaborative group of organisations interested in PPIE (Oxford AHSN, Oxford Biomedical Research Centre, Oxford Health Biomedical Research Centre, TV ARC, NIHR Clinical Research Network, NIHR Research Design Service, NHS England South East Clinical Senate).	<p>Monitor and control</p> <p>The CIWI team convenes and chairs the Working Together Partnership. It brings together infrastructure organisations from across the Thames Valley and Milton Keynes that have a shared interest in developing patient and public involvement, co-production, person-centred care and research. The partnership meets every 6-8 weeks and run a number of training and development events.</p> <p>Q4 Update (Q4 Specific activity/delivery/milestones)</p>	Green	