Impact Report 2025/26

Health Innovation Oxford & Thames Valley

Part of the Health Innovation Network
Local change, national impact

Office for Life Sciences

NHS

Introduction | Professor Gary Ford, CEO

I am delighted to share our Impact Report for 2025/26. It highlights the many and varied ways in which Health Innovation Oxford and Thames Valley (HIOTV) has helped the NHS meet its priorities for both patients and productivity, and boosted economic growth.

We have a proven track record honed over more than a decade in finding, testing, implementing and scaling innovations which have benefitted thousands of patients and healthcare professionals.

But we are not just a route into the NHS for innovation - we are a strategic partner helping systems understand what needs to change, designing the right response, bringing together the necessary expertise and delivering sustainable transformation.

This report features just some of the ways in which we have done this over the past year through numbers, real world examples and testimonials from some of our partners.

We are looking to go further in 2026/27 as we continue to harness local excellence to benefit local people and deliver national impact. Bring us your priority challenge or proven solution and we will work with you to achieve sustainable implementation.

See the last page for details of how to get in touch.

A year in numbers

343

Innovators supported by HIOTV

We supported innovators, from SMEs to global companies, to understand NHS needs, build the right evidence and develop solutions that deliver genuine value. HINs' support to innovators delivers a 3:1 return on investment (using Treasury Green Book methodology).

33

Projects completed at HIOTV

Our focus was on scaling proven innovation, improving care, strengthening the NHS and generating wider economic benefit.

£1.5bn

Investment secured by all 15 HINs

The 15 HINs form a coordinated national network, embedded in local health and research ecosystems for over a decade, which combines place-based change with national impact.

992

Jobs safeguarded by HINs

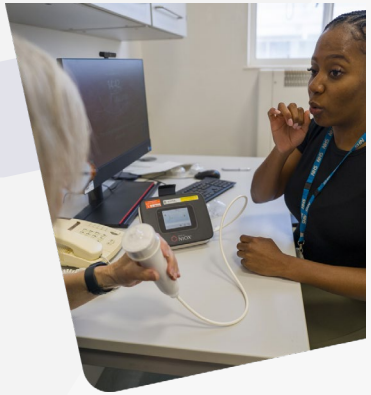
… and 541 new jobs created. Since 2018 we have collectively created or safeguarded more than 12,000 jobs.

A year in case studies

1

Transforming respiratory care

A landmark national collaboration including four industry partners and led by HIOTV aims to improve care for people with asthma and chronic obstructive pulmonary disease (COPD).



2

Reducing preterm birth risk

An education programme focused on cervical length ultrasound is helping to identify pregnancies at increased risk of preterm birth. This approach has been shortlisted for a national award.

3

Improving patient experience with AI

An automated voice system has been integrated into the cataract pathway for routine post-op follow-up phone calls, freeing up clinicians to focus on patients with more complex needs.

4

Digitising consent boosts productivity

A digital tool is replacing paper-based consent processes for thousands of patients leading to improvements in efficiency, reliability, experience and safety.

5

Supporting integration of care models

An HIOTV evaluation of Long Covid and ME identified potential benefits of an integrated service, particularly relating to consistency, waiting times, inequalities and data collection.

Case study 1: Transforming respiratory care

Summary

Too many lives are blighted as a result of inadequate care and support for respiratory disease, adding avoidable pressure to NHS services. We identified this unmet health need and built on our well-established relationships with clinical leaders, the Office for Life Sciences and pharma companies to create the Respiratory Transformation Partnership (RTP), a landmark national collaboration to improve care for people with asthma and COPD. It combines national ambition with local action across England. Strong clinical leadership is at its heart.

It is receiving funding totalling £10 million over the next two years from the OLS, NHS England and four industry partners: AstraZeneca, Chiesi Group, GSK and Sanofi. The RTP received a ministerial launch in March 2026. We are now leading the RTP on behalf of the Health Innovation Network.

This programme marks a shift from crisis-driven care to a proactive data-enabled approach. It will lead to earlier diagnosis, more consistent equitable care, along with a reduction in hospital admissions and premature deaths. It will support the economy by helping people stay healthy and in work. The RTP is supporting pathway transformation, evaluation, learning and spread across systems. It will create a scalable blueprint for transformation across the NHS enabled by innovation.

Thousands of people are already benefiting from earlier disease identification, better access to effective treatments and more support to manage their conditions closer to home.

Feedback

“The challenge is creating the conditions that allow innovation to be adopted and scaled at pace across the NHS. That is exactly what this collaboration is designed to achieve.”

Steve Bates, Executive Chair, Office for Life Sciences

Read more about this case study: [The Respiratory Transformation Partnership]

Case study 2: Reducing preterm birth risk

Summary

Preterm birth is a significant healthcare challenge, placing significant financial and emotional strain on families and a significant economic burden on the NHS. An ultrasound scan measuring the length of the cervix is the most accurate way of identifying those at increased risk of giving birth prematurely.

NHS doctors are now better prepared following a pilot programme which we coordinated in partnership with our regional maternity and neonatal network. Over the course of six education days 46 obstetrics and gynaecology resident doctors developed their skills - helped by 265 pregnant volunteers.

This approach supports clinical decision-making and contributes to improving patient safety through more personalised care, reducing preventable hospital admissions and emergency transfers. It addresses the current disparity between the ultrasound competencies expected of obstetrics and gynaecology resident doctors in clinical practice and those formally embedded within the Royal College of Obstetricians and Gynaecologists' training.

It has the potential for significant healthcare cost savings and improved neonatal outcomes by ensuring the right people get the right care, in the right place, at the right time. This approach has been picked up and developed by other HINs and shortlisted for an HSJ Patient Safety Award.

Feedback

"This programme is a great example of effective collaboration across our region."

Dr Aparna Reddy, Consultant in Obstetrics and Fetal Medicine, Buckinghamshire Healthcare NHS Trust

Read more about this case study: Cervical length ultrasound education for obstetrics and gynaecology resident doctors

Case study 3: Improving patient experience with AI

Summary

For almost a decade we have helped Ufonia develop their AI-powered automated voice system Dora, maximising its potential to enhance a clinical pathway. Our support has included securing funding, gathering real world evidence in the NHS and exploring patient experiences. Dora is in use in a growing number of NHS trusts with the English version having safely completed more than 200,000 routine phone calls following cataract surgery.

Dora offers an alternative to a hospital appointment, freeing up skilled health professionals to focus on face-to-face contact with patients who have more complex needs, as well as reducing waiting lists and costs. For patients without complications it means fewer journeys to hospital, improving convenience and bringing environmental benefits too.

Scaling innovation equitably is not just about reaching more people - it's about ensuring services are designed alongside the people who will use them. To that end, this year our focus has been on developing a multi-lingual version of Dora, in partnership with Moorfields Eye Hospital. We have gathered feedback from patients whose first language is not English.

The next slide shows a timeline of our partnership with Ufonia - view an extended version here.

Feedback

“Health Innovation Oxford and Thames Valley supported our early evidence generation and health economic evaluation – providing critical insights into the clinical effectiveness, safety and cost-efficiency of our AI assistant, Dora. This early stage support enabled us to demonstrate value to the NHS and build a strong foundation for wider adoption.”

Aisling Higham, Medical Director, Ufonia

Read more about this case study: AI assistant improves patient experience and eases NHS pressure

How Health Innovation Oxford and Thames Valley helped Ufonia prove the value of their innovation to the NHS.

Now in 10+ NHS organisations
60,000+ patients benefitted

2019

Kick-off with Innovate UK

Health Innovation Oxford and Thames Valley (HIOTV) joins Ufonia's Innovate UK project to test automated phone calls following cataract surgery.

2020

Barriers to adoption uncovered

We map out the blockers to NHS uptake, giving Ufonia a clearer path to clinical integration.

2021

Early-stage economic modelling

We deliver Ufonia's first health economics analysis - showing cost-effectiveness versus standard care. This early insight helps shape their evidence strategy.

2022

Clinical trial and national funding

Ufonia secures an NIHR Artificial Intelligence in Health and Care Award. HIOTV co-designs a multi-site study with real-world health economics built in from the start.

Public involvement led by experts

Dr Sian Rees, Director of Community Involvement and Workforce Innovation at HIOTV, ensures patient voices shape the work and reflect best practice in co-production.

2023

Real-world evidence delivered

We lead a full economic analysis across Oxford University Hospitals NHS Foundation Trust - comparing Ufonia's AI-led model with face-to-face care.

Published results

We co-author a peer-reviewed study proving Ufonia's AI assistant is safe, accurate - and offers strong economic value to the NHS.

Available now on ScienceDirect

2024

Case study 4: Digitising consent boosts productivity

Summary

Obtaining informed consent is critical to safe, high-quality care, but the traditional paper-based process is often inefficient and inconsistent, creating delays and increasing risk. Modernising to a digital consenting process improves safety, reduces variation, supports better patient communication and aligns with wider NHS goals for digital transformation and sustainable service delivery.

We led a comprehensive evaluation to assess the impact of the Concentric digital consent platform in two pathways at two trusts in our region. It demonstrated Improved documentation accuracy, secure storage and reduced risk of incomplete or lost paperwork leading to strengthened clinical governance and staff confidence in the consent process.

Patients can review consent forms at home, supporting shared decision-making, improving satisfaction and experience and benefiting the environment with fewer journeys and less paper.

Feedback

“We commissioned HIOTV to do an evidence-based evaluation of the nationally-funded roll-out of Concentric. Thanks to their evidence we can see the technology has firmly proven itself at scale across our region.”

Henry White, Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board

Read more about this case study: From paper to precision: Evaluation demonstrates benefits to patients and services of digitising consent

Case study 5: Supporting integration of care models

Summary

Similarities in symptom presentation present an opportunity to apply the same structured approach to ME/Chronic Fatigue Syndrome services as has been implemented for Long Covid.

Establishing a clear pathway, incorporating multi-disciplinary team (MDT) assessments and providing access to a jointly provided range of rehabilitation support could significantly improve patient care and resource efficiency.

At the request of the Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board, we carried out a 'case for change' evaluation focusing on the potential impact of integrating these two services on service delivery, patient support and capacity.

We found that service integration presented an opportunity to enhance patient care, strengthen workforce capacity and improve overall system efficiency. Early integration efforts have yielded positive outcomes, but continued evaluation, strategic planning and sustainable investment will be essential to ensure long-term success.

Feedback

"We value the comprehensive coordination, analysis and evaluation that HIOTV provided as our system partners. The integrated care model design and evaluation provide key insights and recommendations to progress service integration which has the potential to reduce disparities and improve patient care, workforce sustainability and system efficiency."

Paul Swan, Thames Valley Integrated Care Board

Read more about this case study: [Evaluating an integrated model for Long Covid and ME/CFS services]

Further reading

HIOTV quarterly reports

HIOTV case studies

National Health Innovation Network

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