Unleashing the power of collaboration, experimentation and innovation in healthcare.

2016/17
A look back over the last year

GET STARTED
Our impact in numbers...

12 thousand people benefitting from our work

20+ innovations spread across NWL and beyond with our help

Over £3m leveraged to support our work

25+ contracts awarded to companies supported by ICHP
We turn the potential of innovation into reality to help solve our partners’ challenges

Imperial College Health Partners (ICHP) exists to accelerate the adoption and spread of innovation amongst our member organisations to transform care and maximise efficiencies for the benefit of patients.

We connect a unique network of health experts within and outside the NHS who together, through collaboration, are committed to solving the biggest challenges facing the health and healthcare of our population.

“Working with ICHP has provided a real opportunity to look at innovation, applied across patient interfaces and across partner organisations, to support system solutions. The next step is distilling the interventions to provide the catalyst for change to occur.”

Dr Mohini Parmer, NWL STP Lead and Chair, NHS Ealing Clinical Commissioning Group

“I am very convinced of the importance of connections, relationships and organisational partnerships to the future of healthcare. My experience of working with ICHP has been strongly collaborative and with a clear focus on supporting and spreading approaches to innovation and improvement”

Dr Bob Klaber, Consultant Paediatrician and Associate Medical Director (QI), Imperial College Healthcare NHS Trust
Our partners

The ICHP way…

**Diagnose**

*Identify problem*
- Economic, analytical, clinical, human factors and patient involvement expertise
- Partnership model enables diagnosis of genuine ‘whole system’ problems
- Deployment of systems thinking

**Treat**

*Gather insights, ideate, adapt & evaluate*
- Innovation scouting capability
- Access to AHSN and international networks and partnerships with innovators
- Source evidence based solutions quickly
- Working with industry on partnership models

**Change**

*Incubate, assess, impact*
- Expertise in traditional project and change management as well as more innovative approaches
- Bringing together stakeholders for accelerated learning, implementation and funding

Innovation requires behaviour change. Transactional models are not sufficient to deliver transformational change
Highlights from 2016/17

2,000 patients identified and treated for Atrial Fibrillation (AF) – that’s at least 10% of the estimated number of undiagnosed people living with AF in NWL.

TEDxNHS

We supported the sold out TEDxNHS event in August ‘Re:imagining Health’ which was live streamed to 60 sites, spreading great ideas, inspiring new connections and action in the NHS.

163

Better management of 163 patients with acquired brain injuries and the implementation of an innovative electronic referral system (Badgernet) as well as the Neuro-Navigators pilot delivered £300k savings.

30

30 organisations participated in our programme on outcomes based commissioning for population health. This was developed in partnership with COBIC and international partners.

As founding partner of Digital Health. London we supported the launch of the accelerator programme and 31 SMEs. We are now recruiting for cohort 2.

We launched the research navigator tool to help industry and SMEs interact with the NWL research landscape. In the last 6 months over 400 people have used the tool.
Reducing strokes, saving lives

The challenge

Atrial Fibrillation (AF) is an irregular heartbeat and is the most common form of cardiac arrhythmia affecting approximately 900,000 people in England. National data suggests that AF accounts for approximately 20% of all strokes.

In North West London, Public Health England estimates there are more than 17,000 people with undiagnosed AF. This results in a considerably higher risk of AF related strokes for those not undergoing treatment.

We also know that over 4,300 patients with identified AF in North West London and at a high risk of stroke are not on the anticoagulation treatment recommended by NICE guidelines.

IMPACT IN FOCUS:

More than 17,000 people are living with undiagnosed AF in NWL

Over 4,300 patients are not on the recommended anticoagulation treatment in NWL

20% of strokes are AF related
Our interventions

Over the last year we have made significant progress in our work to improve the diagnosis and treatment of Atrial Fibrillation (AF). Taking a pan-London approach working with the other two London AHSNs, we have led a number of interventions to increase diagnosis of those with AF as well as increase adherence to NICE best practice guidelines. Interventions have included:

**GP AF Drills and Skills sessions:**
Developed in collaboration with leading primary and secondary care experts and delivered across NW London and hosted in Wembley stadium. The initial sessions were extremely well attended with excellent feedback. Neighbouring CCGs accessed the core materials with local adaptation as applicable.

**Pathway Redesign:**
ICHP collaborated with a number of CCGs, looking at the barriers to excellent care for AF patients. We worked alongside cardiovascular leads and reduced variation and increased levels of anticoagulation.
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A series of pop-up innovation workshops:
Bringing together stakeholders from across the AF pathway in North West London including clinicians, industry partners and patients. The aim of the sessions was to identify and share best practice both technology and process innovations. We divided the AF pathway into stages from early stage detection, through to diagnosis, selecting the right anticoagulant and living with the condition. Delegates were encouraged by ICHP to ‘think local’, planning what and how AF care could be improved in their area. Underpinning all these themes was how innovation assists in bringing high levels of quality to AF treatment in NW London.

Online conferences:
We piloted the use of WebEx’s (online conference) tools to increase engagement.
Our interventions

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**Online community:**
We supported the development of the ‘PEN’ environment for AF, a secure extranet community developing peer-to-peer dialogue.

**Pan-London toolkit:**
ICHP have been working in collaboration with HIN, UCLP and the LCN to develop a toolkit identifying and sharing best practice from across the AHSN network.
IMPACT IN FOCUS:

Making impact
Since our work begun, 2,000 additional patients with AF have been identified across North West London. This is more than 10% of the total number of undiagnosed people.

“The work that Imperial College Health Partners has done in supporting us through the process of reviewing our performance as a CCG in AF, and then helping us with defining the service to improve the outcomes in patients with AF, has been of great value. We have been able to provide very successful educational events for GPs, all through the help received from ICHP.”

Dr Ajit Shah, Clinical Director, NHS Brent Clinical Commissioning Group
Investing in NWL’s ‘intrapreneurs’

The challenge

The NHS faces a widening gap between budgets and delivery expectations, in both quantity and quality. Staff are under constant pressure to hit targets and manage an overstretched system. We’re all desperate for ways to break the cycle and discover smarter solutions to our problems.

At the same time we’re all familiar with the cultural and managerial factors that undermine transformation efforts: “not enough time”, “not invented here”, “people won’t get on board”. There’s a growing need for teams of empowered healthcare professionals to unlock problems quickly and democratically, improving clinical outcomes and efficiency.

Innovation takes place all the time in the NHS, but is often ad-hoc and driven by individuals. Very few people are equipped to solve problems involving many players across multiple silos.

We’re all desperate for ways to break the cycle and discover smarter solutions to our problems.
Our interventions

We are working in partnership with thought leaders ?WhatIf! Innovation to deliver the Intrapreneur Programme – a programme aimed at supporting both executive and frontline staff in NHS provider trusts to adopt and scale innovation in their everyday roles.

The purpose of the programme is to enable providers to build capability and capacity to address their challenges through the adoption of innovation with a strong focus on scouting for existing best practices and adapting solutions to their environment.

It achieves this by supporting participants to:

• Be clear about their innovation ambition;
• Understand the key elements of an innovation ecosystem;
• Unlock and mobilise the capability of their staff to source solutions.

"Going on the journey with ICHP and ?WhatIf! really helped us to think differently about how to engage frontline clinical staff in matters to do with safety. It was immensely helpful in prompting them to pilot a novel way of assessing the attitudes and behaviours of teams (within operating theatres) to better understand their priorities for improving their safety culture."

Will Gage, Senior Nurse and Quality and Safety Project Lead, Imperial College Healthcare NHS Trust
Making impact
Feedback from our 2016 Intrapreneur Fellows

I have the skills to gather deep patient and colleague insight quickly
I’m confident sharing and building innovative ideas with other colleagues and service users
I know how to experiment quickly and cheaply so I can test new ideas before launching
I’m confident engaging all our stakeholders in new ways of working and winning their support
I know what it takes to make innovation thrive on the ground in our trust and I feel empowered to play my part

- Before the programme started
- At the end of the programme
How we support our STP

During the last year, our support for the NWL STP has grown. Here are some examples of how we are delivering targeted innovations and supporting problem solving:

1. **Outpatient re-design**
   Each year, across NWL we see more than 800k patients for first appointments in outpatient clinics. Our STP has committed to using technology more effectively to avoid the need for patients to travel in to appointments and improve communication between primary care and hospital specialists. We are supporting the STP to identify a range of innovations that could help revolutionise this part of the care pathway for our population including digital advice and guidance systems.

2. **Primary care workforce**
   Responding to the growing demand crisis in primary care, we have teamed up with Health Education North West London and the NWL Collaboration of CCGs to test whether advanced artificial intelligence (AI) services can help bridge the demand gap. We will imminently be launching a 12 month pilot – the first of its kind in the NHS – to assess the efficacy and impact of the use of AI technology in primary care.

3. **Using behavioural insights to change behaviour**
   We have a strategic partnership with the Behavioural Insight Team which has enabled us to bring this science to our partners across the NHS. Most recently we have run a session with STP leads to look at the role behaviour change can bring in delivering improvements and efficiency.

4. **Analytics and business case support**
   We have provided a number of workstreams and projects within the STP with business intelligence and analytical services, as well as supported the development of a number of business cases.
Capability building

Over the last year our capability building programme grew from strength to strength – bringing global best practice to our partners

**Intrapreneur Programme**
A range of bespoke training packages targeted at current and future healthcare professionals. Our aim is to provide capacity as well as capability for addressing system as well as organisational priorities.

**Introduction to innovation in healthcare practice**
Aimed at individuals, this programme aims to promote an advanced level of understanding of innovation and change management processes in healthcare practice. This programme has been adapted from one developed by Oxford AHSN.

**Accountable care learning from best practice**
For accountable care teams across health, social care and the voluntary sector.
Moving towards Accountable Care

In 2016/17 we built the foundations of our accountable care programme; connecting experts in their field to emerging systems across NWL and beyond:

Knowledge
What works where
- Learning and partnering with the best in the world
- Sharing learning and knowledge with our local partners and beyond
- Contributing to the learning by sharing our local experience, including with industry, to support product development

Capacity
Funding and infrastructure
- Developing an Accountable Care Fund
- Scouting for and advising on the right infrastructure including population management systems
- MoU signed with Optimedis-Cobic to be an ‘integrator’

Capability
Building sustainability
- Delivered outcomes based commissioning and accelerated learning programmes for emergent accountable care partnerships in 2016/17
- Now working with Imperial College Business School and Optimedis-Cobic to design and deliver an intense residential programme for a broad range of stakeholders, nationwide.
Making research and collaboration better

In the last year we have further accelerated how we support collaborations between industry and the NHS, and how we strengthen our research infrastructure. Here are some examples of initiatives we have launched:

1. Started to develop a ‘consent for contact’ research register for people who are interested in research and want to find out more about these opportunities.
Making research and collaboration better

In the last year we have further accelerated how we support collaborations between industry and the NHS, and how we strengthen our research infrastructure. Here are some examples of initiatives we have launched:

In partnership with the Imperial Diagnostic Evidence Collaborative (DEC) we have developed a market appraisal service for SMEs and entrepreneurs to help them develop their products and navigate the NHS market.
Making research and collaboration better

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We developed the Research Navigator - a new online tool matching industry with North West London research organisations.

The Research Navigator provides a clear route-map for industry and clinicians to navigate the health research sector in North West London and aims to break down barriers to entry to the sector.

Since its launch in December 2016 over 400 unique visitors have used the tool.
We launched HealthMakeSpace – an online collaborative platform that connects industry and entrepreneurs with clinicians to enable them to work in partnership to foster clinically guided innovation. Developed as a networking platform, once users have registered, HealthMakeSpace matches the skills, expertise and locations of healthcare professionals to the needs of those working in industry. HealthMakeSpace has already attracted over 60 SMEs and entrepreneurs and more than 100 clinicians – all who have an ambition to come together to drive healthcare innovation.

Making research and collaboration better

In the last year we have further accelerated how we support collaborations between industry and the NHS, and how we strengthen our research infrastructure. Here are some examples of initiatives we have launched:
We continue to forge and foster strategic partnerships locally and internationally to ensure our partners can work with, and learn from, the best in the field.
Increasingly a global brand
We don’t just do, we learn

Five things we’ve learned over the years…

1. **There is a focus on solutions rather than needs.** Falling in love with a solution does not mean it will solve the problem. Only after thoroughly understanding the problem are you able to find solutions.

2. **The healthcare system is fragmented and does not collaborate.** Innovation and improvement only works when we achieve true collaboration and break down structural barriers.

3. **Short-term financial pressures dictate longer-term plans.** The tactical nature of NHS budgets and financial management can mean that improvement projects will not be commissioned as they may not provide instant return on investment and therefore be perceived as high risk.

4. **Existing approaches prevent the transformation of healthcare.** Organisations that support staff to invent and adopt new practices, and accept it won’t always go right, are more likely to succeed in transforming services; adaptive leadership as opposed to linear and transactional is required.

5. **Industry and the NHS talk a different language (and the NHS has different dialects).** Closer partnership working between industry and the NHS means better understanding of each other - with the development of more effective products and services.
In summary:
Financial statement

**Expenses**
- **20%** Transformational change
  - £748,020
- **17%** Membership contribution
  - £838,750
- **47%** Staff and core offer
  - £1,762,888
- **30%** Capability building
  - £1,132,624
- **3%** Hosted Services*
  - £128,579

**Revenue**
- **17%** NHSE funding
  - £2,263,875
- **36%** Other
  - £1,773,734

*Services we host on behalf of other partners, for example the secretariat service for the AHSN Network.
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