



**Health  
Innovation  
Network**  
*Local change, national impact*

# Impact Report 2023-24



  
Office for  
Life Sciences

Working with



Accelerated  
Access  
Collaborative



# 1

# Introduction

# 1. Introduction

Welcome to our 2023/24 Impact Report.  
The first as the Health Innovation Network.



“ Anyone with a great idea can become a health innovator, and innovating for the benefit of patients is everyone’s job. It’s vital that these great ideas are adopted everywhere so that all patients benefit, and that’s the role we play as the Health Innovation Network. ”

Richard Stubbs  
Chair, Health Innovation Network

As the key organisation in England responsible for implementing innovative practice in health and care we have a unique mission: improving the health and wealth of our nation, with patient and citizen benefit as the ultimate goal to all our endeavours. **Since 2018, our efforts have benefitted over 3.2m patients and generated almost £2.6bn for the economy.**

In 2023/24, we focused on delivering programmes in key areas of unmet need, including targeting cardiovascular disease, improving patient safety and tackling health inequalities. Highlights of this work included the locally-driven, nationally-coordinated Innovation for Healthcare Inequalities Programme (InHIP), which engaged **34,000 people from under-served populations** to increase their access to NICE-approved technologies and medicines in Core20PLUS5 areas; and our Network-wide lipid management programme, which is estimated to

have **prevented over 9,000 serious cardiovascular events** such as heart attacks and strokes.

Through our support for innovators, last year we **leveraged £476m of funding**, supporting companies we work with to **secure or create 1,300 jobs**.

Local change programmes delivered national impact in support of NHS priorities around workforce, productivity and Net Zero. Including **over 33,000 staff upskilled** through local training initiatives, **almost half a million people with access to technology-enabled care at home** as a result of the Innovation Collaborative for Digital Health, and **over £20m was leveraged** to support Net Zero innovations.

The contribution that health innovation can make to supporting economic prosperity as well as patient outcomes is huge. While we welcome the new government’s prioritisation of three shifts for

health and social care – from hospital to community, sickness to prevention and analogue to digital – and its focus on health as a driver of growth, placing innovation at the heart of the 10 Year Plan will be central to delivering on these ambitions, not just for patients but for the UK economy.

As the NHS stands ready to implement the new government’s plans for the next decade, we stand ready to support health and social care teams to find, test and implement new solutions at scale to the NHS’ greatest challenges, driving economic growth.

A handwritten signature in black ink that reads "Richard".

Richard Stubbs  
Chair, Health Innovation Network

# Health Innovation Network

Local change, national impact

## A new name for an established network

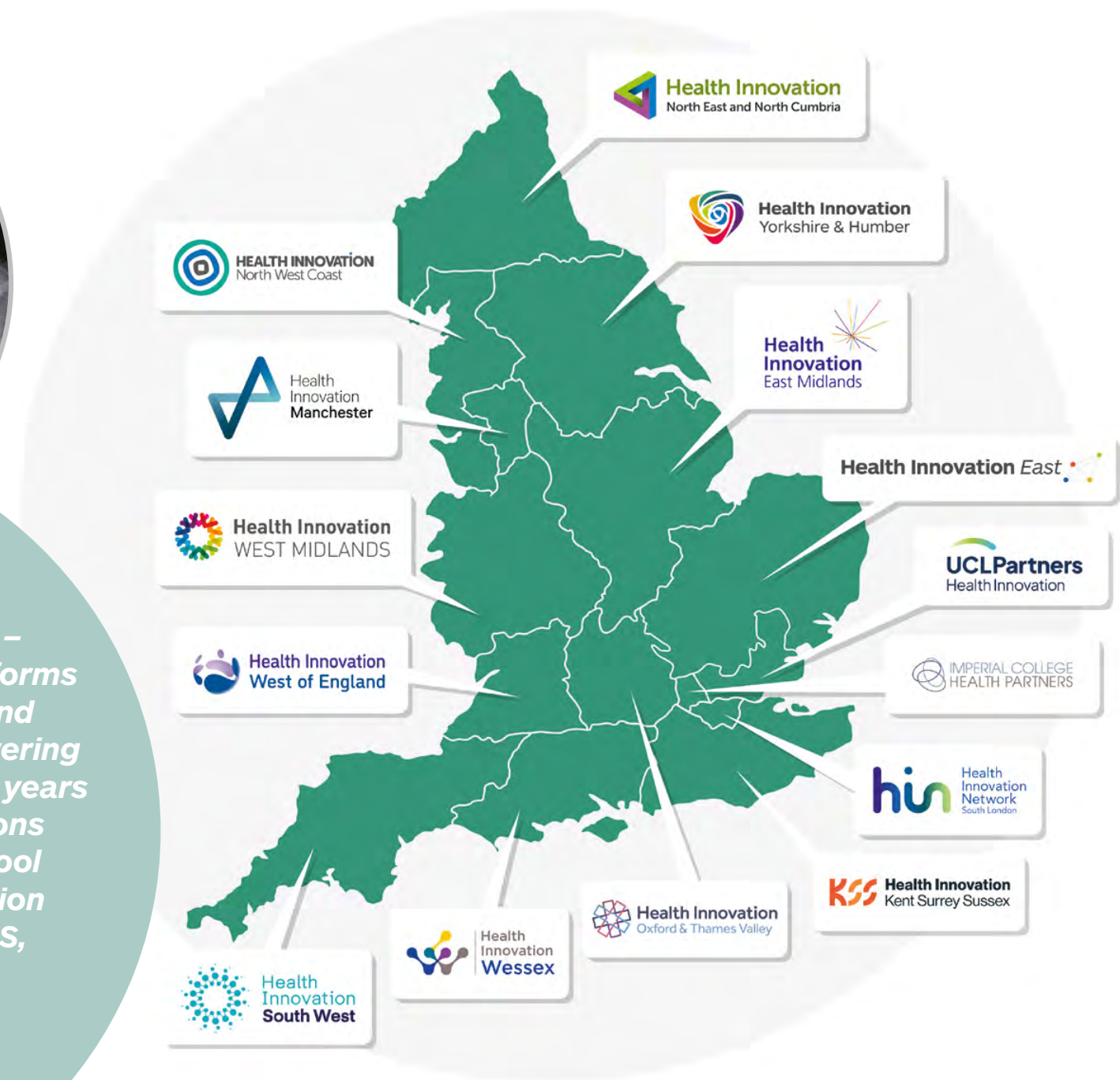
Academic Health Science Networks were created in 2013. These locally focused organisations have since become a strong, national network that delivers greater impact, together.

We tackle national problems, with local understanding. And local problems, with national expertise. Each health innovation network is fully-embedded in their local health and research ecosystem. This drives economic prosperity and growth in all parts of the country, and ensures that everyone benefits from innovation.



*“ Our name may have changed, but our mission remains the same – ensuring that health innovation transforms health outcomes for our patients and boosts economic growth through powering up our life science sector. Our first ten years has shown us that innovative solutions and innovators come from a wide pool of expertise – as the Health Innovation Network we bring together the NHS, academia, industry to work in partnership to accelerate the adoption of best practice. ”*

Richard Stubbs  
Chair, Health Innovation Network



# In this report

### Delivering local change, national impact

Find out how health innovation networks are working to reduce health inequality, tackle cardiovascular disease, and develop our pipeline of innovations with the potential to transform health and care.

More than **1,228,000** patients have benefitted from our national programmes and initiatives

Page 7 >

### Reaching under-served communities

The Innovation for Healthcare Inequalities Programme (InHIP) focused solely on reducing health inequalities. Delivered in collaboration with the Accelerated Access Collaborative, and in partnership with 38 integrated care systems, it helped 34,000 people from under-served communities engage with healthcare services.

Page 14 >

**3,500** people from under-served communities are benefiting from NICE-recommended medicines and medical technologies as a result

### Patient safety in partnership

Through our 15 Patient Safety Collaboratives (PSCs), hosted by each local health innovation network, we work with health and care systems to improve safety and reduce health inequalities.

Almost **1,200** babies' lives have been saved through maternity and neonatal safety interventions

Page 16 >

### Tackling NHS priorities together

Our cross-cutting themes mirror the NHS national priorities and act as the foundation for the work we do: improving productivity, involving patients, and building a more sustainable NHS.

Page 17 >

**£20.7m** investment leveraged into Net Zero innovations

### Improving health, creating wealth

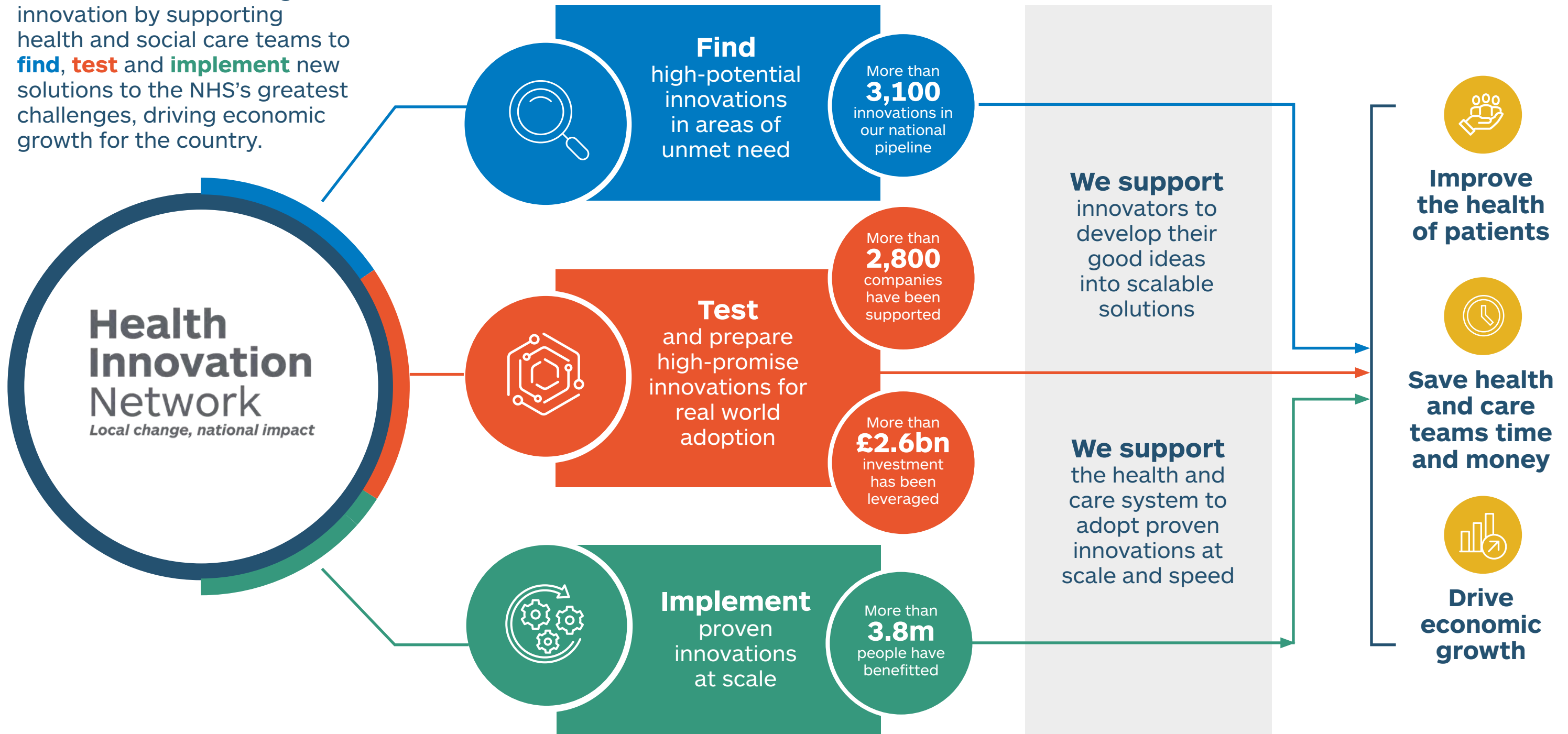
Health innovation networks discover, develop and deploy the most promising innovations that industry has to offer, driving economic growth and prosperity across the country.

Over **1,300** jobs were either created or safeguarded in companies we supported

Page 24 >

# We are the health innovation adoption experts

We transform lives through innovation by supporting health and social care teams to **find**, **test** and **implement** new solutions to the NHS's greatest challenges, driving economic growth for the country.



Collective impact since 2018.

2

Local change,  
national impact

## 2. Local change, national impact

Innovation adoption is not taking an off-the-shelf product to be 'delivered' into health and social care. The need for flexibility in how we innovate in different areas - from rural, to metropolitan, to coastal - cannot be underestimated.

A deep understanding of local systems is key. Being both a national network and trusted healthcare partners locally means we can support the delivery of national impact, while retaining a closeness and investment in what is happening on the ground. Inspiration might happen nationally, but it's perspiration locally that delivers innovation to patients.



For 2023/24, as a Network we identified three main priorities:



Cardiovascular disease



Health inequality



Patient Safety



We also continued our support for **national NHS priorities**, including productivity, patient-led healthcare, and Net Zero (page 20).







# Transforming cardiovascular care through innovation

**Why CVD?**  
85% of all CVD deaths are due to heart attack or stroke

One death every three minutes

27% of all UK deaths are due to CVD

100,000 hospital admissions each year

One admission every five minutes

36,000 stroke deaths each year

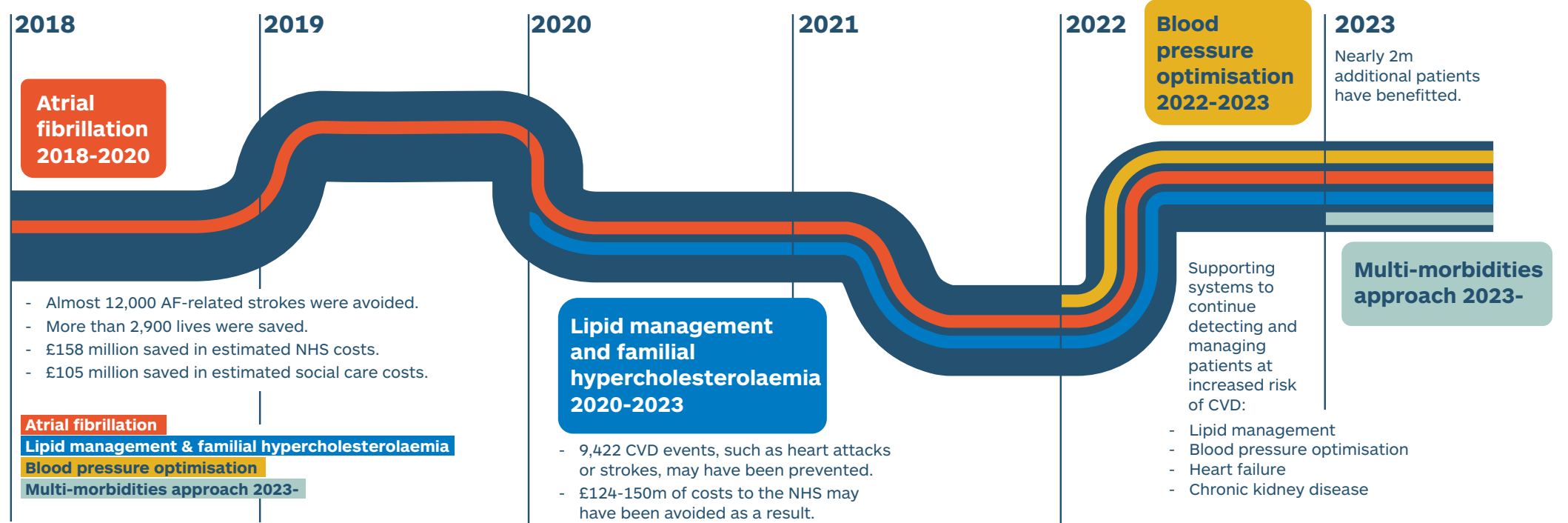
Stroke is the fourth biggest killer in the UK

£9 billion cost to the health service every year

CVD is also estimated to cost the UK economy £19 billion each year

Cardiovascular disease (CVD) causes one in every four deaths in the UK. It is the single biggest cause of health inequalities, responsible for a large percentage of the life expectancy gap between deprived and affluent communities.

Improving the care and treatment of CVD has been a long-term priority for the Network. As a collective, we have delivered several high-impact national programmes aimed at improving the detection, treatment and secondary prevention of the disease. In 2023/24, we moved to a portfolio approach to tackle the multi-morbidities that contribute to strokes and heart disease.





*“ I have found the national Community of Practice and all the other learning and sharing events incredibly useful and I really valued having the chance to provide my input. ”*

*“ It has helped us to focus activities in our most deprived areas and enabled us to have conversations with partners around key groups of people who may experience health inequalities. ”*

*“ This programme allowed us to start building a local coalition around hypertension proactive management. ”*

Quotes from Blood Pressure Optimisation Leads



**Find out more**



**WEB:** Find resources and information on our blood pressure optimisation page.



**READ:** There's much more detail on the programme, learning points and case studies from each health innovation network in the Blood Pressure Optimisation Programme Impact Report.

## Blood pressure optimisation

**2m**

fewer people with hypertension recorded in June 2022 compared to 2021



Through treating high blood pressure with antihypertensives, one heart attack for every 100 patients and one stroke for every 67 patients is prevented.

In response to the negative impact of the pandemic on diagnosis and control of hypertension, the Blood Pressure Optimisation (BPO) programme, which began in April 2022, supported primary care colleagues across the country to lower CVD risk factors in their local populations three ways:

### 1. Implement UCLPartners' Proactive Care Frameworks

**Proactive Care Frameworks** support staff within Primary Care Networks (PCNs) to optimise clinical care and self-management for people with high blood pressure and other CVD risk factors such as high cholesterol. The frameworks help GP practices to meet their Quality and Outcomes Framework (QOF) and other quality improvement targets and enable:

- Risk stratification to prioritise which patients to see first.
- Use of the wider workforce to support remote care and self-care.
- Support for patients to maximise the benefits of remote monitoring and virtual consultations where appropriate.

### 2. Develop case finding initiatives

Health innovation networks are supporting PCNs to identify patients with previously undiagnosed high blood pressure through case-finding interventions.

### 3. Focus on tackling health inequalities

Support is being targeted to the most deprived populations and other local priority groups for CVD, as outlined in NHS England's **Core20PLUS5 guidance**.



**9,422**  
CVD events, such as heart attacks or strokes, may have been prevented

**£124-150m**  
of costs to the NHS may have been avoided as a result

## Lipid management and familial hypercholesterolaemia

Lowering lipids in the blood can reduce someone’s risk of developing CVD. Meanwhile, the genetic disease familial hypercholesterolaemia (FH) affects around 1 in 250 people and significantly increases their risk of CVD. Our national spread programme started in October 2022 and tackled both.

By September 2023, all health innovation networks were engaged with primary care (at both GP practice and Primary Care Network levels) and Integrated Care Boards, delivering engagement and education events, and supporting clinicians to identify those at risk, so they could in turn support patients to lower their lipid levels. We provided clinicians with a range of education and training, through our collaboration with Heart UK ‘Tackling Cholesterol Together’ roadshows. We also recommended innovations that had been through

our pipeline that help identify and manage patients at risk. An independent evaluation has shown that the prescribing rates of drugs to lower lipid levels have increased over the two and a half years of the programme:

- **1,010,102 more patients taking high intensity statins**
- **86,313 more patients taking ezetimibe**
- **2,594 more patients taking PSCK9i**

Rates (per 100,000 person years) for genetically confirmed familial hypercholesterolemia increased from 9.6% to 13.8%.

This programme has shown that our continuing focus on CVD is shifting the dial in improving care and finding those most at risk of developing the disease, helping to avoid serious CVD events.

*“ You’ve facilitated and sped up the whole process. It’s like pressing fast forward on an NHS development which, in my experience, would usually take several years. ”*

Doctor, Yeovil Hospital



### Inclisiran

Health innovation networks supported the deployment of inclisiran, a lipid lowering therapy. Initial modelling suggested 750,000 patients with cardiovascular disease could be eligible for lipid medication, which may include the introduction of inclisiran.

Inclisiran was originally only prescribed in acute, secondary care settings. The aim was to make this treatment available earlier for patients by offering it through primary care, as part of a pathway approach for lowering high cholesterol in patients.

By March 2024, **inclisiran had been taken up in 93% of Primary Care Networks** and there was a corresponding **drop in prescribing in secondary care from 17 to 7%.**

**Find out more** >

**WEB:** Find guidelines and resources and information on our lipid management and FH web page. >

**READ:** This **summary report** shows the outcomes of the programme from the independent evaluation and other data source. An **impact report** captures how the programme was run, with case studies from each health innovation network. >

**LISTEN:** Catch programme manager Dr Joe Chidanyika talking about CVD and health inequalities.



## Taking a portfolio approach

Adopting a multi-morbidity approach that encompasses conditions such as chronic kidney disease and heart failure is the best way to create sustainable reductions in CVD, which currently causes one death every three minutes in the UK and costs the NHS £9bn every year.

Our portfolio approach, which began in October 2023, places a heavier emphasis on prevention and allows for population-level interventions to be implemented that take health inequalities and deprivation into account.

Our aim is to reduce cardiovascular disease through the timely identification of people with hypertension, high cholesterol, heart failure or kidney disease through optimised prevention, detection and treatment ('perfection').

Our experience shows taking a whole pathway, system-wide approach can reduce the number of heart attacks, stroke and deaths associated with cardiovascular disease, heart failure and chronic kidney disease.

**People in the most deprived 10% of the population are almost twice as likely to die as a result of CVD, than those in the least deprived 10% of the population.**

### Heart failure

Heart failure is a major health problem affecting approximately one million people in the UK. In England, 80% of heart failure diagnoses are made in hospital following an acute admission, despite 40% of these individuals having signs and symptoms that could have triggered an earlier assessment in primary care. There are estimated to be 200,000 new diagnoses of heart failure each year. With an average length of stay of eight days, and up to 100,000 admissions a year, the potential for improvement is clear.

Innovations in primary care will support the early identification of the disease and reduce the number of hospital admissions for heart failure:

- Point of care testing for natriuretic peptides to detect heart failure.
- A web-based triage platform to determine patients where heart failure is suspected.
- A cardiac diagnostic system for the early detection of 95% of all common cardiovascular diseases.
- A remote monitoring app to optimise treatment and support self-management for heart failure pathway transformation.
- NHS Heart Failure @home initiatives and virtual wards.
- Health promotion and case-finding tools.

### Chronic kidney disease

The most common causes of chronic kidney disease (CKD) are diabetes and hypertension. CKD is increasing in prevalence and is associated with significant mortality. CKD disproportionately affects minority ethnic groups and those living in deprived areas.

Diagnosis of chronic kidney disease is often too late. Early detection of kidney disease in patients with diabetes and hypertension could lead to a reduction in the need for dialysis and/or renal transplantation, and also could prevent excess deaths due to heart attacks and strokes. A number of case-finding systems are being explored for the early detection of disease.





# Tackling health inequalities

We are committed to create health equity across the population through innovation.

Our programmes align with the **Core20PLUS5** NHS initiative, and the frameworks' key areas of focus such as maternity, cardiovascular disease, mental illness and respiratory disease, are also the themes of our clinical working groups.

We ask our innovators to demonstrate how they will integrate tackling health inequalities into their innovation, include patient input into the design, and focus more energy on the innovations that will deliver the largest health equity gains.

**224**  
initiatives in our pipeline that address health inequalities



## Black Maternity Matters

Launched in 2022, **Black Maternity Matters** is a ground-breaking collaboration that supports maternity and neonatal staff to reduce the inequitable maternity outcomes faced by Black mothers and their babies. Black women are four times more likely to die during pregnancy or in the postnatal period than white women. Developed by Health Innovation West of England in partnership with Representation Matters, BCohCo and Black Mothers Matter, maternity and neonatal staff from the two Bristol hospital trusts took part in a pilot training programme to develop their understanding of racism and the impact on the health and wellbeing of women within the health system and beyond. So far, **161 health and care professionals have been through the programme**. It is now working with its third set of cohorts from across the West of England, including senior health and care leaders.

## Good Health, Good Lives

East and West Midlands health innovation networks joined with East and West Associations of Directors of Adult Social Services on a '**Good Health, Good Lives**' project to help identify how 'Supported Living' organisations can best support the identification and escalation of deterioration for people with learning disabilities.

**This resulted in over 500 people with a learning disability saying what worked well in having their health care needs met and what needed to be improved.**

## Pain Café

Our patient safety programme to reduce the use of opioids for non-cancer patients tackles inequalities in prescribing practice as part of its approach. In Plymouth, there is a higher proportion of people receiving high-dose, long-term opioids than nationally.

Health Innovation South West supported a person, who had experienced persistent pain and harm caused by opioids, to set up a pilot **Pain Café in Plymouth**. This has created a growing support network, and further Pain Cafés are planned, to help others living with chronic pain to use pain management techniques.



# Reaching under-served communities

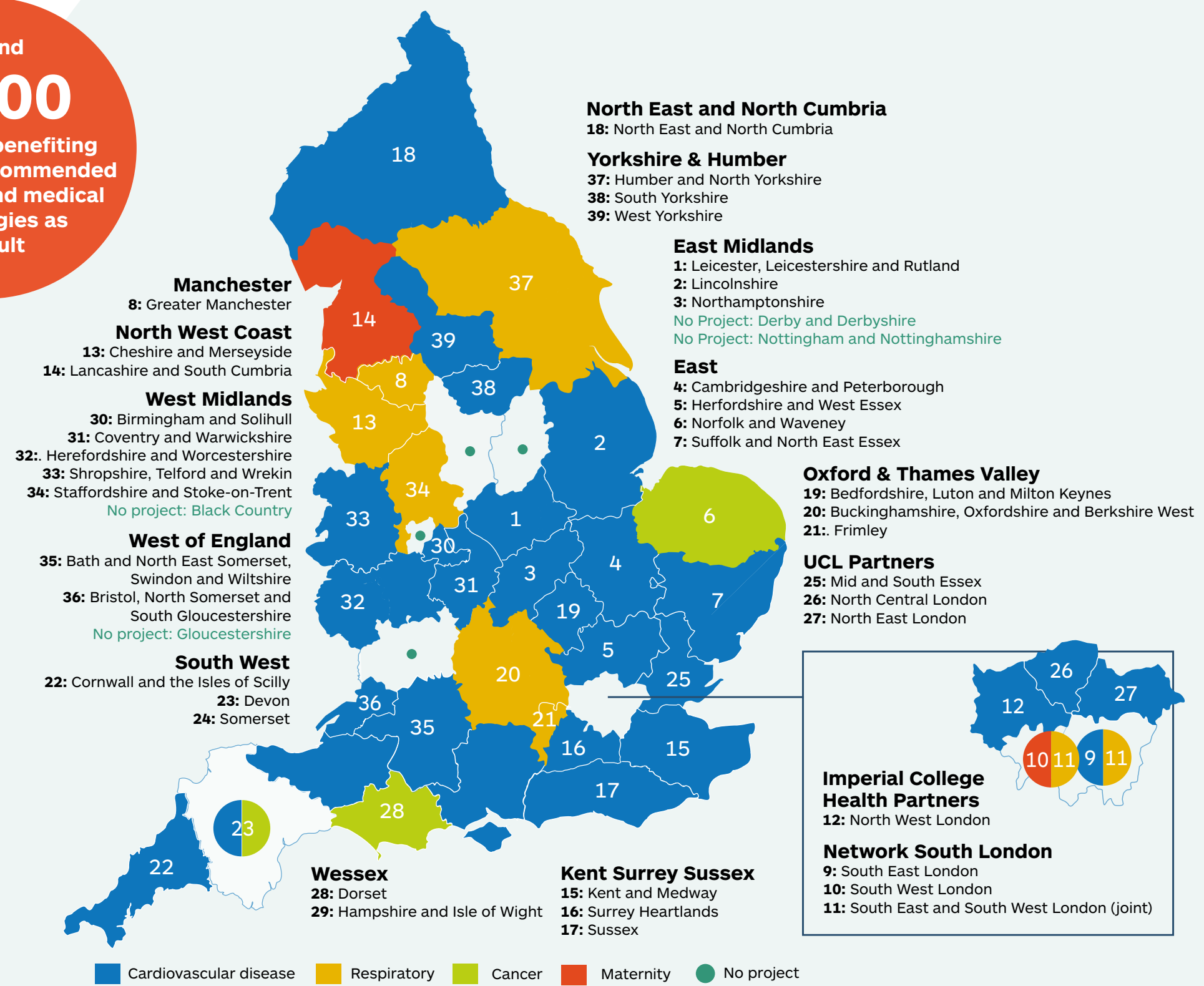
While all of our programmes aim to reduce health inequalities, the **Innovation for Healthcare Inequalities Programme (InHIP)** focused solely on this issue.

Delivered in collaboration with the Accelerated Access Collaborative, in partnership with integrated care systems, it aimed to improve outcomes for under-served populations by increasing access to NICE-recommended technologies in the priority areas set out by the Core20PLUS5 framework.

Building on the national Rapid Uptake Products programme, projects were designed and developed by local teams, guided by local communities to make sure that those most in need would benefit from this investment.

Nationally, 38 Integrated Care Systems, supported by their local network, successfully applied for a share of the £4.2 million made available for eligible projects, and projects worked with community, charitable, religious and sporting organisations and institutions, often bringing healthcare professionals into these environments to engage directly with people who are most affected by healthcare inequity.

Around **3,500** people are benefiting from NICE-recommended medicines and medical technologies as a result





**34,000**

people from under-served populations have been engaged through the programme



### Health Innovation North East and North Cumbria

To help prevent cardiovascular disease, it's important that the most at-risk groups should be proactively identified and risk assessed. However, Black Africans, South Asians and deprived white British communities have historically had poor health check uptake. To understand the barriers, Health Innovation North East and North Cumbria hosted focus groups and conducted in-depth interviews with under-served communities. As a result, heart health checks were delivered to 500 people from under-served communities including Afro-Caribbean, African and South Asian communities. **Over 60% of those tested had an abnormal result and were referred to their GP for a lipid medication review.**

### Health Innovation Oxford & Thames Valley

In the Buckinghamshire, Oxfordshire and Berkshire West Integrated Care System, deprivation significantly impacts health, driving variations in severe asthma care. Data revealed that up to 80% of those eligible for asthma biologics were not receiving them. Health Innovation Oxford & Thames Valley and the Integrated Severe Asthma Care team worked with two district hospitals and the 14 Primary Care Networks serving the most deprived and ethnically diverse populations in the region. Since then, **115 patients have started asthma biologics, saving an estimated £400,000** through reduced need for acute healthcare. 214 patients received a comprehensive medicines review.

### Health Innovation East

Deprived and under-served communities are known to have reduced uptake of cancer screening programmes, whilst deaths from cancer are responsible for circa 20% of the life expectancy gap. Health Innovation East worked with Norfolk and Waveney Integrated Care System and voluntary, community and social enterprise organisations through a 'Community Voices' model to target refugees, migrants and homeless people to access a bowel cancer screening test. 322 conversations were held in total across 10 VCSE organisations, with almost **30% of individuals intending to order a testing kit as a result of the conversation.**

**4,000**

have been referred onto clinical pathways



**Find out more**



**WEB:** There are more details about InHIP and a list of projects around the country on the Accelerated Access Collaborative website.



# Patient safety in partnership

Each health innovation network hosts a Patient Safety Collaborative. The fifteen PSCs deliver the **National Safety Improvement Programmes**, designed to meet the objectives of the **NHS Patient Safety Strategy**. Patient safety is also a key theme for our programme delivery and innovation pipeline. The teams are experts in supporting quality improvement projects, using the Institute of Healthcare Improvement (IHI) **model for improvement**.

*“ The number of lives saved and harms avoided through our safety improvement programmes continues to grow, and I am confident we will sustain this and embed the 1,000 lives and £100m saved per year that we believe we are close to achieving. ”*

Aidan Fowler, NHS National Director of Patient Safety

\*through optimal cord management, antenatal corticosteroids and intrapartum antibiotics since April 2020



**Find out more**



**WEB:** Find out more about how patient safety runs through our work on the web page.

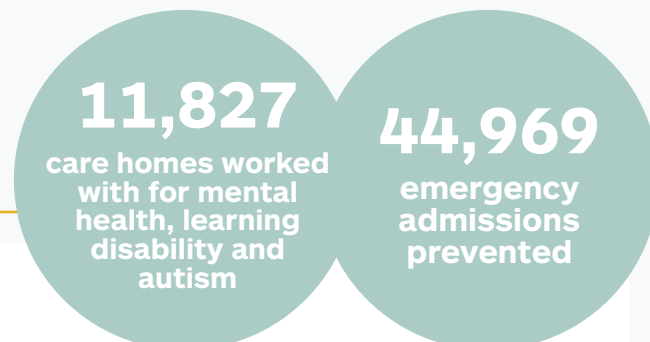


**READ:** There's much more detail about our progress and ambitions in our patient safety plan, **Patient safety in partnership**. You can also download our **quality improvement resource pack**.

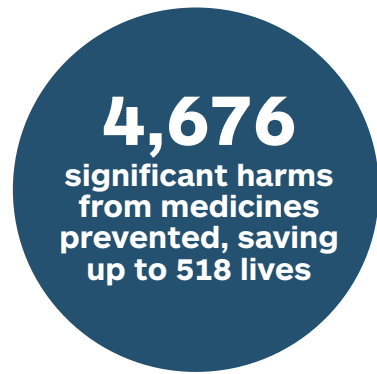


**JOIN:** Contact your local health innovation network to link up with their Patient Safety Collaborative.

## Our current programme



We have supported all **maternity and neonatal** units in England to adopt the optimisation of the pre-term infant care bundle. This consists of seven interventions which are known to improve the safety of pre-term infants. So far **94%** of units have adopted all seven elements.



We are actively supporting **31 ICBs** across England to implement a whole-system approach to the reduction of high-dose opioids through the **medicines safety** improvement programme.

We are working with all acute, mental health, community and ambulance trusts and have supported **174 trusts** to implement the **Patient Safety Incident Response Framework (PSIRF)**, a new system for reporting and learning from serious safety incidents. These are incidents where the potential for learning, or the consequences for patients, families and carers, staff or organisations are significant.

## 2024/25

We completed our **managing deterioration** safety improvement programme in 2023, having reached **64%** of care homes adopting a deterioration management tool. We had reached 100% adoption in acute and ambulance settings, plus spread to community, mental health and primary care settings.

We completed our **mental health, learning disability and autism** safety improvement programme in 2023, having worked with **246 wards** across 51 out of the 52 mental health trusts in England, plus a number of private providers, to reduce their use of restrictive practice for in-patients.

This year, Patient Safety Collaboratives will be supporting the delivery of **'Martha's Rule'** with local partners as part of their long-established managing deterioration work. This has brought in a clearer system for patients and their families when they don't feel that their voice is being heard.



# Supporting national NHS priorities

33,960

staff being upskilled by improving their knowledge, skills and confidence through local training initiatives

9,688

staff have changed the way they work as a result of a programme

5,223

staff said their experience of providing care had improved through involvement in one of our programmes

## Improving productivity

Managing increasing demand continues to be a significant challenge in the NHS. Innovation is key to improving productivity, and health innovation networks are supporting NHS priorities through workforce, digital, patient involvement and sustainability initiatives.

## Meeting the workforce challenge

The gap between demand and the capacity of our workforce is growing and there are not enough people available to support existing models of care. The Network's Workforce Collaborative is spreading innovations that can increase efficiency and save clinical time, supporting the NHS to deal with the increasing demand with the staff it has.

Between April 2023 and March 2024, the Health Innovation Network delivered 117 local projects that have generated benefits to the NHS workforce.

### Examples of some of the productivity increasing innovations we are supporting:

An electronic repeat dispensing system which is reducing prescribing workload. This is being supported by health innovation networks in Oxford, Wessex, Kent Surrey and Sussex, and the South West. **If 80% of all repeat prescriptions were issued electronically, 2.7 million GP hours could be saved.**

S12 Solutions is a mobile application to make Mental Health Act assessment quicker and simpler. The platform speeds up the process by making it easy to find the most appropriate clinician, in a timely manner. S12 Solutions was supported in Wessex, Kent Surrey and Sussex, and Oxford. **In Hampshire, assessments organised in less than an hour rose from 4% to 41%.**

Health Innovation North West Coast (HINWC) and the NHS England Sustainable Procurement team have collaborated with two trusts to pilot surgical tray rationalisation. HINWC evaluated the impact and produced guidance on further spread and adoption. **During the pilot, 10 minutes per procedure was saved, resulting in a 133 hours being released back to care.**



**Find out more**



**WEB:**

Find out more on our workforce page.

Increasing the adoption of digital solutions is a cornerstone of the NHS's plans to transform health and social care, increase capacity in the workforce, and improve care for patients.

We have accumulated years of insight into digital transformation and artificial intelligence (AI). The resulting efficiencies and improvements to patient experience are key to making the NHS the most forward-thinking healthcare system in the world.

**“ It’s not about the technology, it is about putting the patient at the centre of the pathway and starting with the problem that needs to be solved. ”**

Director of Innovation & Digital Health, NHS England

**487,000**  
people have been supported at home through the collaborative, including **152,000** care home residents.

The Innovation Collaborative for Digital Health is changing lives through digitally enabled care at home, wherever that may be.



**“ Great to hear that one of the biggest benefits is that patients are even more engaged in their care and treatment for long-term condition management - this is really important! ”**

Programme Manager, NHS England

**3,200**  
participants

## Technology-enabled care at home

Commissioned and delivered by NHS England in partnership with the Health Innovation Network, the collaborative has been sharing successes and learning across a network of over 2,000 health professionals to support them to deliver technology-enabled care at home.

Its collaborative events have reached more than 3,200 participants, and the programme has contributed to the spread and adoption of digitally-enabled healthcare at home for people with long-term conditions across all seven NHS regions in England. It has created a network to rapidly share learning and best practice in digital transformation across the NHS and care sector.



**Find out more**

**WEB:** Find out more on our digital transformation pages.

**WATCH:** This video explains more about how the Innovation Collaborative for Digital Health works.

**JOIN:** For best practice, inspirational resources and shared learning, sign up for the Future NHS workspace.

# Inspiring patient-led healthcare

Each of the 15 health innovation networks has a unique approach to involvement and co-production, which takes account of local circumstances, relationships and organisational models.

Our Patient and Public Involvement and Engagement (PPIE) Forum brings together health innovation networks and their patient representatives, providing them with a platform to share, learn and coordinate activity.

Here are some examples of how people with lived experience are shaping their healthcare.



30 projects

**Health Innovation Network South London** has appointed two people with lived experience to take an active role in embedding involvement within the organisation. Since **Faith Smith and Aurora Todisco** joined in February 2023, they have shared their expertise on more than 30 projects.

In Greater Manchester, **Health Innovation Manchester** has been leading on the creation of a **Health and Care Digital Transformation Strategy** on behalf of NHS and social care partners. It has been shaped by the participation and involvement of over 250 local people and 250 care professionals to make digital health services work better for everyone.

500 locals & care professionals

Working with **South Asian patient groups in Mid Yorkshire, Health Innovation Yorkshire & Humber** and partners set out to increase their knowledge of asthma, and the need to engage with primary care services as this community is at greater risk. Many resources were produced including guides for the self-management of asthma, in multiple languages, and shared by video and through a poster with QR codes for easy access.

**UCLPartners Health Innovation** worked with the **Wood Green Community Diagnostic Centre (CDC)** to understand how the service could be made more accessible to under-represented groups, including Turkish and Kurdish, Black Caribbean and Polish communities. Through interviews and focus groups, this process led to changes to the signage, the service opening hours, and to referral information sheets and result processes.

*“ Involving patients, carers and communities – particularly those who may be marginalised or seldom listened to – is not only the right thing to do, it builds trust and helps create an effective healthcare system. ”*

Kathy Scott, Deputy Chief Executive, Health Innovation Yorkshire & Humber

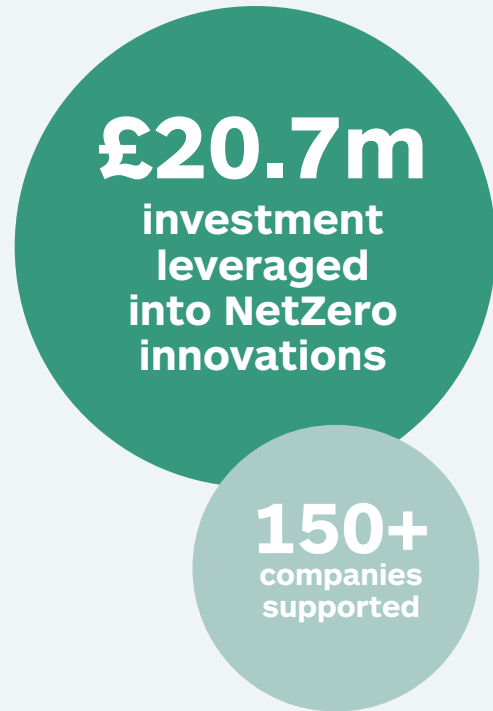


Find out more

**WEB:** Find out more and read our strategy on our patient involvement and co-production page.

# Achieving Net Zero

We're supporting the NHS to reduce its carbon emissions through innovation and become carbon neutral by 2045.



The Health Innovation Network supports our partners in testing, scaling, and embedding innovative approaches that reduce their carbon footprint.

We are using our expertise to identify and support innovators, foster cross-sector collaboration, pilot promising solutions, and ensure environmental sustainability principles become embedded into healthcare planning at every level.

To ensure vaccines remain safe and effective it is vital that refrigeration used in their storage is maintained in a strict temperature range even during power cuts when temperatures can rapidly rise. **Health Innovation East** worked alongside Phase Change Solutions to evaluate the effectiveness of their Apollo Smart Panels at helping maintain an acceptable temperature range in vaccine refrigerators where a power cut was simulated threatening a cold chain breach. They found the panels, made from proprietary bio-based phase change materials called BioPCM®, maintained acceptable temperatures for longer, and made fridges more energy efficient, reducing waste. **Read the evaluation.**

**Definition Health and University Hospitals Sussex NHS Foundation Trust** won the **NHS Sustainability Partnership of the Year Award** for their SBRI-funded study on carbon reduction through a personalised surgical journey. With greater digitisation of paper-based processes and a reduction in patient travel, the carbon footprint across the NHS can be reduced. This project utilised the digital solutions provided by Definition Health to support orthopaedic and musculoskeletal surgery, creating so-called 'Green Patients' whose entire patient pathway is digitised from first referral to discharge. Both **Health Innovation Kent Surrey Sussex** and **Health Innovation Oxford & Thames Valley** supported the project and how its impact on carbon reduction could be measured. The project showed a saving of 7.6 tonnes of CO2 per 1,000 patients.



**“ Ecomedic didn't have any prior experience working with NHS and is getting much-needed assistance from the Health Innovation Network, ranging from advice on understanding NHS Supply Chain, trust structure, product testing, and funding. ”**

Ecomedic

**“ Collaborating with the Health Innovation Network on climate change and sustainability has been an incredibly valuable partnership for our Greener NHS Regional Team. Their expertise and commitment have contributed enormously to our work in moving towards a Net Zero NHS. ”**

Net Zero Programme Manager Greener NHS,  
North East and Yorkshire

**“ As a start-up in the healthcare segment, developing innovative decontamination solutions to help the Net Zero cause, the support and guidance that the Health Innovation Network have given us has been invaluable. ”**

Mackwell Health Ltd



**Find out more**



**WEB:** Find out more on our environmental sustainability page.



**READ:** Health Innovation Kent Surrey Sussex and Health Innovation Oxford and Thames Valley have produced this guide to help innovators working with the NHS towards its Net Zero ambitions.

# Building a legacy

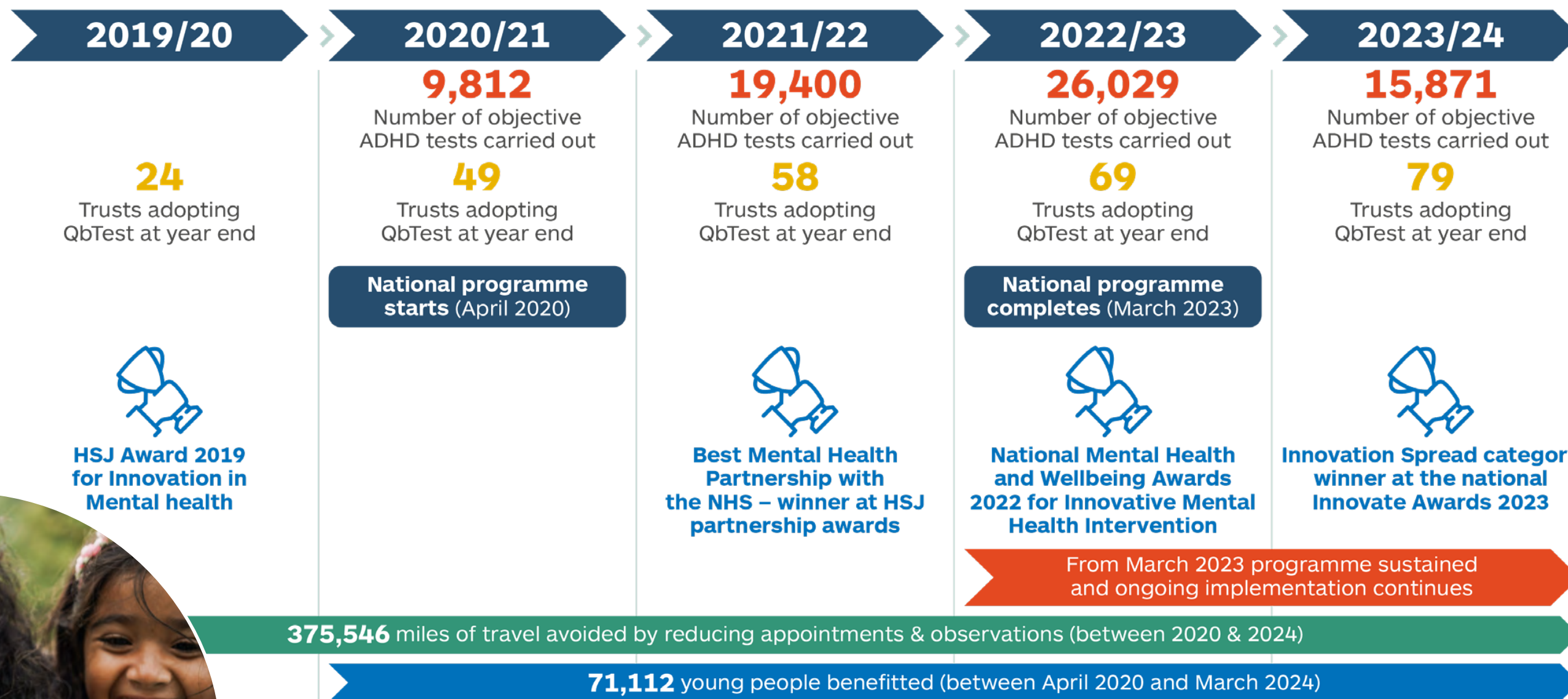
We supported mental health trusts and community services to implement **Focus ADHD**, an innovation that can speed up the diagnosis of attention deficit hyperactivity disorder (ADHD) in children and young people.



Once a programme has been completed, our work is not over. We support local health and care teams to ensure innovative practices they adopt are sustained as 'business as usual', and our previous national programmes have continued to improve patient outcomes in 2023/24.



## Faster ADHD assessment

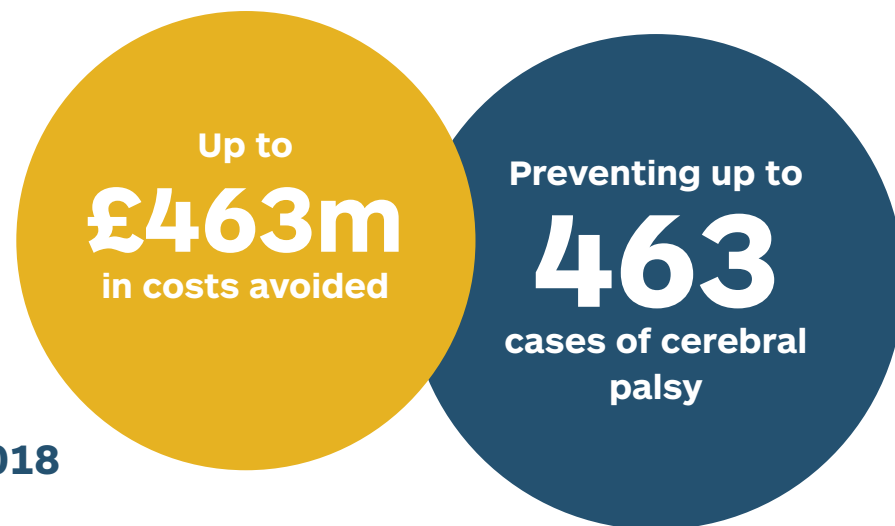


# Reducing the risk of Cerebral Palsy in pre-term babies

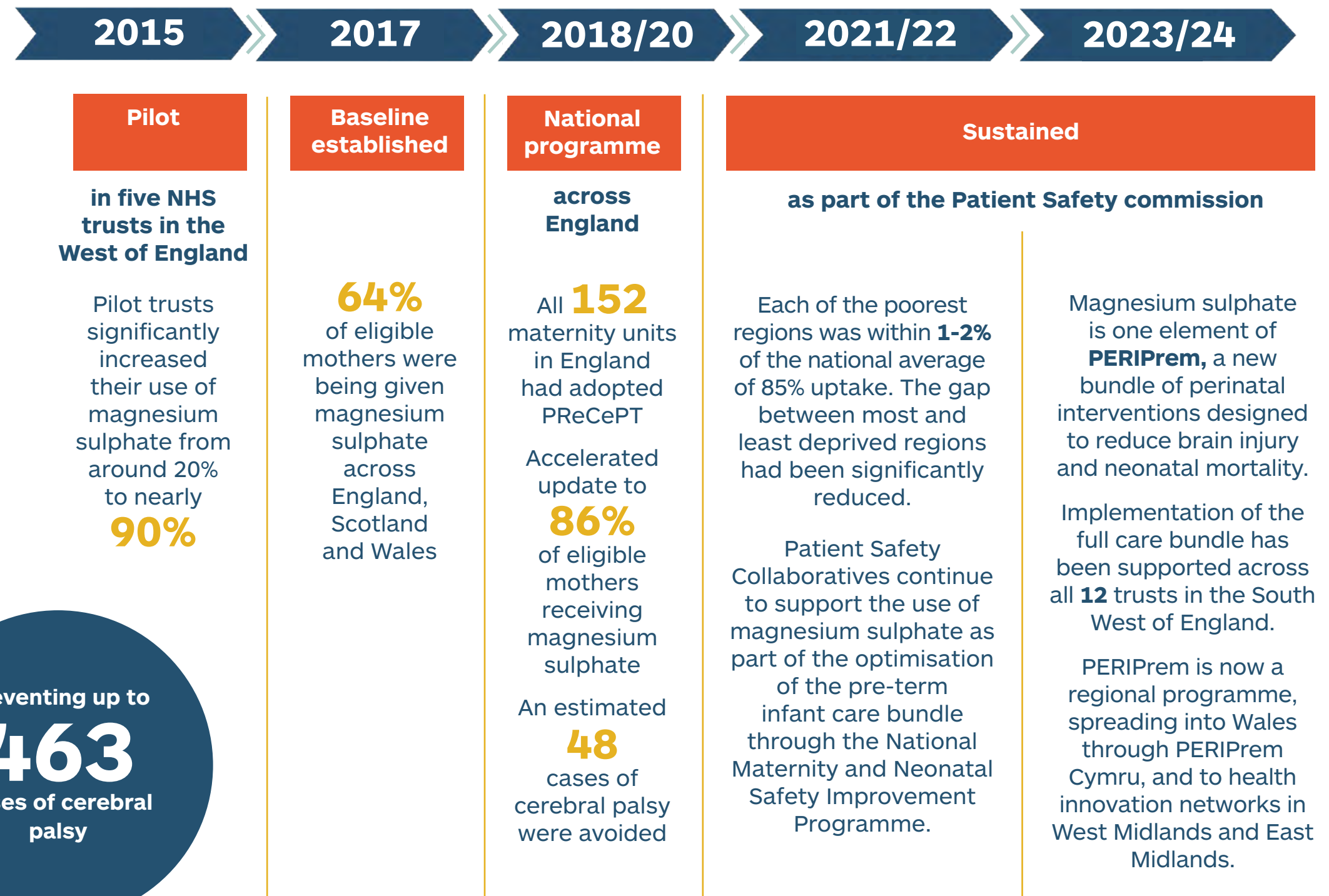
Premature birth is the main cause of brain injury and cerebral palsy in babies. Evidence shows that babies can be protected from brain injury by giving magnesium sulphate to women who are at risk of premature birth. This medicine, costing £1 per dose, reduces the risk of cerebral palsy by a third.

**PReCePT** (Prevention of cerebral palsy in pre-term labour) was initially developed by Health Innovation West of England with University Hospitals Bristol and Weston. It became the first ever perinatal quality improvement (QI) programme delivered at scale across the whole country, bringing together midwives, obstetricians and neonatologists.

**The combined impact since 2018**

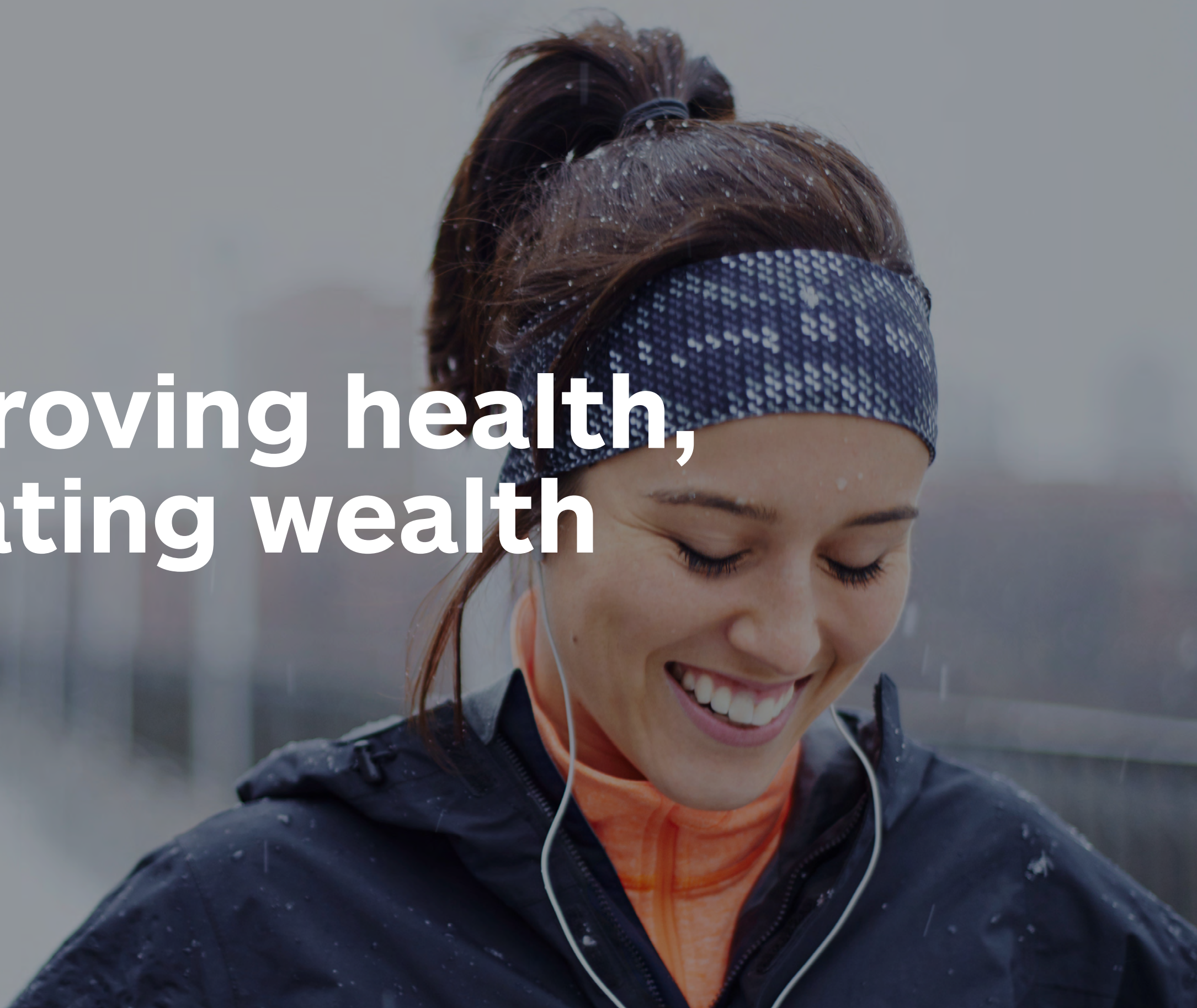


## Reducing the risk of cerebral palsy in babies



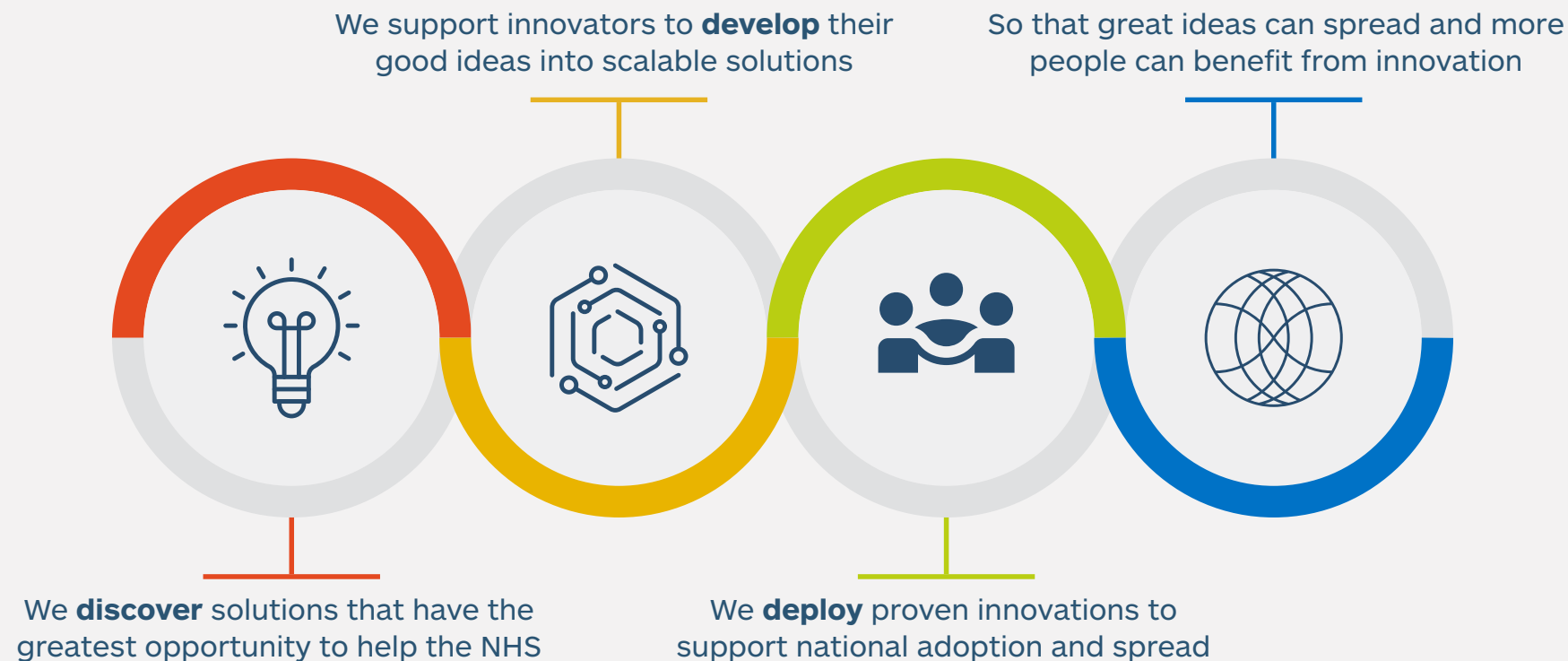
3

# Improving health, creating wealth



# 3. Improving health, creating wealth

We want the NHS to benefit from the UK's thriving life sciences sector. By supporting great ideas to become scalable solutions, we support both patient benefit and economic prosperity across the whole of England.



**£476m**  
investment leverage by companies we supported  
2023/24

**1,300**  
jobs were either created or safeguarded in companies  
2023/24

**Find out more** >

**WEB:** There are useful guides for early stage innovators on the innovator support web pages.

**READ:** Download our 'innovator offer' booklet.

**As a connected 'network of networks' provide the following support to innovators:**

- Help to navigate the NHS
- Signposting to resources
- Market access studies and research
- Developing a value proposition
- Evaluating real-world impact
- Health economic reports / business cases
- Implementation support and advice for adopting organisations
- Grant funding opportunities
- Product development



# Innovator support for economic growth



## AI to prioritise patients waiting for elective surgery

The NHS has a significant waiting list of patients requiring elective surgery. However, it can be hard to determine which patients are most at risk of harm and should be seen first. This is where artificial intelligence (AI) can help.

While there is plenty of data available to clinical teams to help them prioritise patient care, it is often difficult to make the best use of this information. C2-Ai is an AI tool that uses a bespoke algorithm based on data from over 200 million global health records to create an 'urgency score matrix'.

C2-Ai was supported from the start by Health Innovation North West Coast, and tested in Cheshire and Merseyside. They are now being

supported by 12 health innovation networks. The system has since been successfully deployed in many NHS trusts, and an NHS England evaluation showed around 125 bed-days have been freed up per 1,000 patients, with an 8% reduction in emergency admissions.

As a result, C2-Ai has received Core20PLUS5 funding in Merseyside, been accepted onto the NHS Innovation Accelerator, included as part of GIRFT best practice guidelines, and been successfully awarded Health Technology Adoption and Acceleration Funding.

**8%**  
reduction in  
emergency  
admissions

*“Health Innovation North West Coast has been amazing. They’ve opened doors we didn’t even know were there. They’ve helped us get into the right conversations with the right people. We were identified as suitable to be spread nationally and that’s led to developing relationships with other health innovation networks. It’s great to see them working nationally with organisations, because that’s moving UK innovation to the next level.”*



[Find out more](#)



**READ:** A full case study about C2-Ai’s journey and meet the innovators, Mark Ratnarajah and Steve Barnett.

## Innovator support for economic growth

### Digital support for women and their birth partners

Used by  
**11,000**  
women  
so far

The Real Birth Company is working to narrow inequalities in maternity care. It has a nationally accredited training programme for midwives and an antenatal programme for women and their birth partners.

Its Real Birth Digital Workshop is a user-friendly, animated tool that provides mothers-to-be with the essential support. This birth preparation resource gives women a deeper understanding of their birth options, sharing current and evidenced-based information positively and factually.

Health innovation networks in Kent, Surrey and Sussex, Manchester, and the West Midlands supported the company with real-world evaluations, signposting to relevant national events, and with commercialisation planning and award applications.

The workshop has been used by more than 11,000 women so far, with 11% of those from ethnic minorities. The company is growing, with increased revenues and more staff, and has recently been awarded nearly £500,000 from **SBRI Healthcare** to develop more childbirth information tailored for marginalised groups.

“ We’re passionate about our work, supporting people and families nationwide. Empowering them with essential childbirth information is our mission, ensuring each step is informed and supported. It’s a privilege to aid families across the UK during this pivotal moment in their lives. Working with health innovation networks has helped us grow and increase our support for women and families. ”



[Find out more](#) >

**READ:** A case study on the Real Birth Company's progress.

### A blood test to speed up stroke treatment

**95%**  
accuracy

Upfront Diagnostics' patented blood-based diagnostic 'LVOne' identifies large vessel occlusion (LVO) strokes within minutes, with 95% accuracy. This means patients can be taken directly to specialist hospitals where they can receive urgent treatment.

If the test were adopted across the NHS, it could allow up to 15,000 LVO patients to receive urgent treatment more quickly. The test can increase a patient's chances of complete recovery by 20% and saves 97 minutes of vital time on average.

Health Innovation North East and North Cumbria provided funding for Upfront Diagnostics to bid for SBRI Healthcare Funding. It received £900,000, which allowed the company to develop prototypes and manufacture the product.

The LVOne test has now been included on the NHS Supply Chain Framework. The next steps are patient recruitment and related evaluation activities, with the Network supporting national adoption by facilitating introductions to ICS commissioners.

“ Long-term relationships between the public and private sector are paramount for the success of this type of project. The work with the Health Innovation Network allowed us to engage early with NHS stakeholders and to develop a product that fits perfectly into the NHS. ”



[Find out more](#) >

**READ:** A case study on LVOne.





## An effective innovation pipeline

In 2023/24, we worked closely with NHS England, to understand how could improve the capability of our innovation pipeline, an asset of over 3,100 promising innovations with the potential to increase the health and wealth of the nation. The pipeline provides value to local partners who, in collaboration with their health innovation network, can scan for new products and ideas to help tackle areas of unmet need. It provides value to our commissioners by generating insights on how well-developed innovations are in different clinical areas.



Over the past decade, we have curated a pipeline of over **13,000** health innovations

## A network approach to spreading new innovations

Each of our clinical working groups (covering maternity, cardiovascular disease, mental illness, and respiratory disease) undertakes regular horizon scans to identify high-promise innovations. Those that are deemed ready for deployment are for adoption at regional level across the Network.

In 2023/24 the maternity and neonatal clinical working group, which identified four possible innovations to take forward:

**PERIPrem:** a care bundle to improve outcomes of premature babies born before 34 weeks, which was developed in the West of England and tested across the South West. A recommendation was made to offer this to health innovation networks where there was a high level of deprivation and infant mortality. PERIPrem is currently being supported by four networks.

**Black Maternity Matters:** a maternity programme developed in the West of England to improve outcomes for Black mothers and their babies. See page 13 for details.

**QUIPP App** (to detect early onset of premature labour) and **BSOTS** (triage tool for pregnant women who present in emergency department): these are being supported in a number of networks and maternity units through the patient safety improvement programme.

109 obstetric units have now implemented BSOTS across England, supported by seven health innovation networks.



## Transforming care through MedTech

The MedTech Funding Mandate (MTFM) is a programme designed to help get selected NICE-approved cost-saving devices, diagnostics and digital products to NHS patients more quickly.

NHS commissioners and providers agree local funding arrangements for the most cost-saving technologies to enable equitable access for patients, while we support local Integrated Care Systems to increase the uptake of suitable products.

**12**  
medical technologies are being supported through the programme



Find out more



**WEB:** The full list of products available through the MedTech Funding Mandate is available on the web page.



**WATCH:** An introduction to the MTFM and details of each technology are available on this YouTube playlist.

### Sickle cell transformation

We have been supporting national, regional and local stakeholders to improve the apheresis (automated red cell exchange) pathway for sickle cell patients. This automated treatment is life-changing for those that can access it.

In 2023/24 we supported the funding and implementation of 27 new sickle cell apheresis machines across England, an investment of £1.5m. The ambition is to facilitate access for **up to 400 additional patients** (a 20% increase on 1,900 currently) to benefit from approximately £10m investment in services, with an additional 2,500 procedures in England through **a 40% increase in workforce** supporting sickle cell apheresis pathways.

An additional **£1.5m** invested in equipment

### Improving pre-eclampsia diagnoses during pregnancy

Our previous work to scale Placental Growth Factor testing is now benefitting an estimated **35,000 pregnancies per year, across more than 90% of eligible maternity services in England, saving the NHS an estimated £9.5m.**



We're applying this knowledge and experience to sinusitis and pneumothorax conditions, to accelerate patient access to balloon surgery for chronic sinusitis and digital chest drains. Both technologies are now available in over 50% of eligible providers with further work to drive adoption and to capture the patient benefits ongoing into 24/25.

### Enhancing urology services

As people with prostates age, these can enlarge causing urological issues if left untreated. This non-cancerous issue is called benign prostatic hyperplasia (BPH) and is an example of a clinical area where, over the last decade there have been several advances that improve patient experience and reduce the time needed in hospital.

We are supporting England's 48 Urology Area Networks to consider the best implementation routes for these procedures, with four separate technologies available through the MTFM. **Nearly half of the networks are offering all four procedures** as an option for patients alongside standard care, showing how patient choice is improving. Based on current levels of adoption, we estimate that over 10,000 patients in England benefitted from these procedures during the course of 23/24. We are continuing to drive uptake into 24/25.

Estimated to be benefitting a total of **10,000** patients



## Supporting innovation to go further, faster: Health Technology Adoption and Acceleration Fund

In October 2023, the team behind the Department of Health and Social Care (DHSC)'s MedTech Strategy launched the Health Technology Adoption Accelerator Fund (HTAAF). £30m was made available to Integrated Care Systems to accelerate the implementation of technologies that could alleviate local operational and clinical pressures.

The Health Innovation Network helped inform the overarching scope of the fund, ensuring it would resonate with both national and local priorities, and that planned technology adoption was facilitated in a pathway-first, system-focused way.

Locally, health innovation networks supported ICSs to capitalise on their share of the funding (approximately £700k per ICS), using our change knowledge and experience across four key areas of support:

- 1. Defining local challenges that technology could play a pathway-first role in addressing.**
- 2. Identifying evidence-based technologies that could address a clinical and/or operational pressure point.**
- 3. Developing a costed application to support both technology and implementation resource requirements.**
- 4. Putting evaluation and measurement front and centre of the planned work.**

As a result, all **42** ICSs in England have received approval to proceed with their plans, with implementation and evaluation supported by health innovation networks. This will lead to the rapid scale-up more than 100 medical technologies in 2024/25, that both aligns with local system needs and improves the lives of both patients and the workforce.



**Find out more**



**WEB:** There's more about the HTAAF on the Accelerated Access Collaborative website.

4

# Partnering for success

1. Introduction

2. Local change,  
national impact

3. Improving health,  
creating wealth

**4. Partnering  
for success**

5. Your local  
network

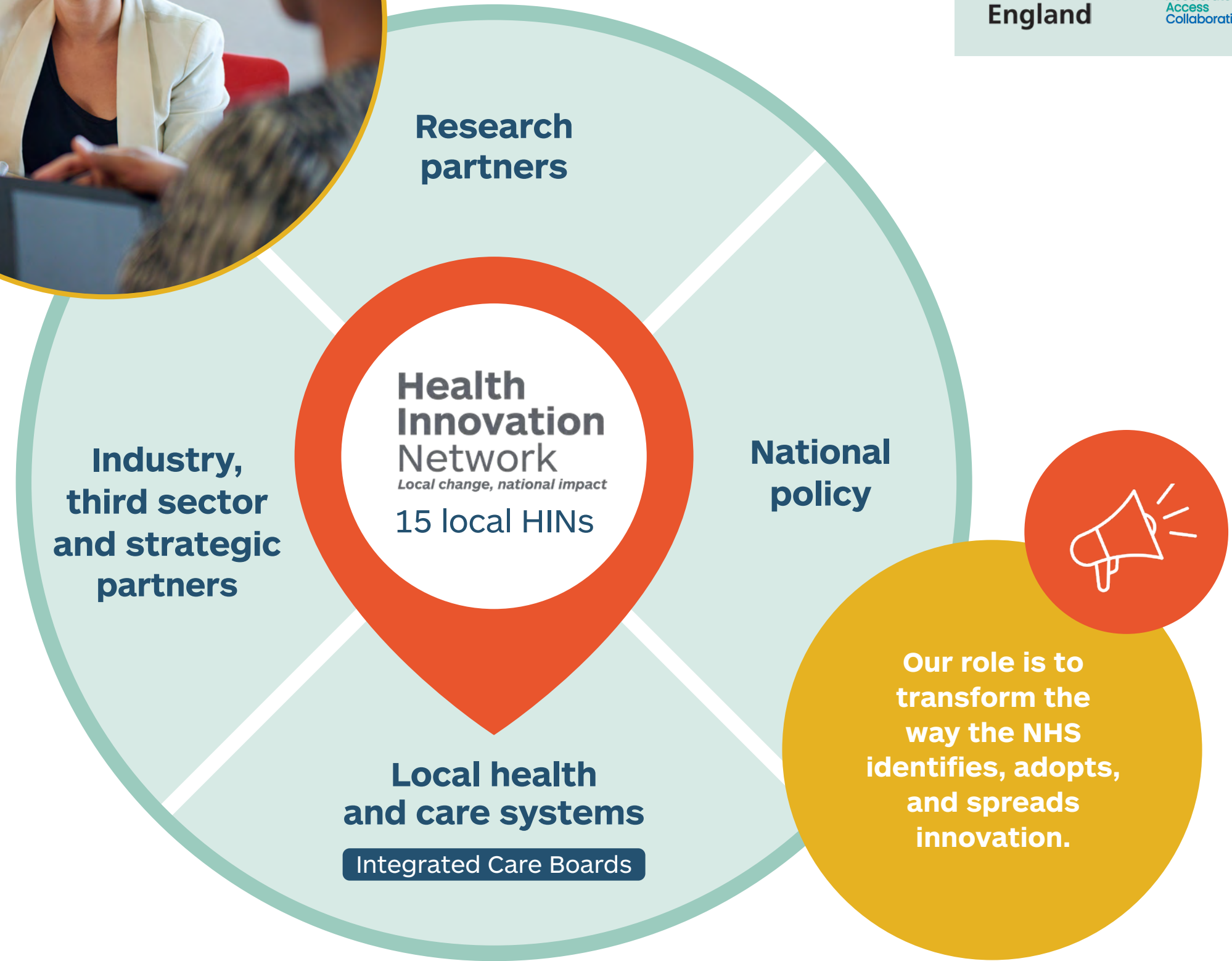


## 4. Partnering for success

We work with many partners across health, care, research, industry and beyond to accelerate the adoption and spread of innovation. Our connections enable health innovation networks to increase their impact within their local systems. Nationally, we benefit from the expertise of many agencies who can help make spreading innovation easier.

We work with research organisations, universities, social care, Public Health, business partnerships, and the third sector. These strategic partnerships are vital to magnify the reach and impact of our work.

We are commissioned by NHS England and the Government's **Office for Life Sciences**. We are also a partner in the **NHS Accelerated Access Collaborative**, which brings together key organisations to streamline the adoption of new innovations in healthcare.



# Support and funding framework for innovators

## NHS Innovation Service



We are a partner in the **NHS Innovation Service**, led by the Accelerated Access Collaborative.

This online service for health innovators is a one-stop portal, where - depending on their individual needs - innovators will be allocated to the most appropriate support organisations (selected from 15 health innovation networks and nine other national bodies) to receive bespoke support relevant to their needs.

The service helps innovators to understand the regulations and standards they need to meet, the evidence they should demonstrate, and the NHS procurement and reimbursement processes.

**In 2023/24**

**338** innovator assessments completed



**Find out more** > **WEB:** NHS Innovation Service

## NHS Innovation Accelerator



The **NHS Innovation Accelerator (NIA)** is an NHS-funded national programme, working in collaboration with the Health Innovation Network. It supports exceptional individuals to grow their business while scaling up promising solutions across the NHS in England for patient and staff benefit.

This year the programme welcomed 12 new Fellows, who each offer a unique solution designed to address problems in the NHS. These range from digital health technologies to novel care delivery models. The NIA also developed an exciting programme to target health inequalities, working with NHS England, the NHS Race and Health Observatory and the NHS England Inequalities Team.

Since the NIA started in 2015, Fellows have gained more than £220 million in income or investment and have won over 200 awards for their solutions, spread 100 solutions across 3,271 locations in the NHS, created over 1,200 jobs and successfully marketed 60 solutions internationally.

**In 2023/24**

Reached over **1.8** million patients.  
 Created **106** jobs  
 Achieved over **£31** million in UK revenue and over **£9.5** million in investment  
 Entered **508** new NHS organisations



**Find out more** > **WEB:** NHS Innovation Accelerator (NIA)



## Small Business Research Initiative



The **Small Business Research Initiative (SBRI) Healthcare** programme runs regular themed funding competitions, with a range of partners including the Health Innovation Network. This development funding allows innovators to invest in testing new ideas that can address unmet health and care needs in the NHS and social care system.

**In 2023/24**

**95%** of all SBRI award recipients had a health innovation network involved in the development of the proposal or providing support.



**Find out more** > **WEB:** Small Business Research Initiative (SBRI) Healthcare



# Partnerships

## AstraZeneca - transforming CVD pathways

**Industry**  
AstraZeneca 

The Health Innovation Network is working with AstraZeneca through our CVD programme (see page 9). With engagement from AstraZeneca's pathways team, we have benefitted from their valuable expertise and insight on the development of pathways related to heart failure.

We are exploring opportunities to develop a collaborative partnership, to explore the range of ways we can work together to support local networks and their communities.



## NICE - generating evidence and developing guidance

**Ecosystem**  
NICE National Institute for Health and Care Excellence

We work closely with the National Institute for Health and Care Excellence (NICE) across three key areas:

- 1. Knowledge sharing to inform NICE's topic selection and the Health Innovation Network's national and regional programme selection.**
- 2. Aligning our innovator offers, including joint-work on NICE's Early Value Assessment (EVA) Programme and a series of knowledge sharing webinars.**
- 3. Using our learning to inform NICE's guidance development and our approach to evidence generation.**

As a result, NICE is informing our approach on CVD, Respiratory and Mental Health programmes. This year, we've provided network support across eight EVA themes to identify innovations, develop evidence generation plans and refine the guidance.

We have also co-designed a set of real world evaluation principles, learning from past network programmes, and gathered learning from the MedTech Funding Mandate programmes and local work on virtual wards, to help NICE improve the way that it develops guidance.



**Find out more** >

**READ:** News story on prioritising new technologies and medicines that support local unmet need



**Find out more** >

**WEB:** BHF Healthcare Innovation Fund

## Third sector

### British Heart Foundation



The BHF was keen to partner with the Health Innovation Network to raise awareness of and roll out their Healthcare Innovation Fund opportunity, which links with our CVD programme (see page 9). Health and social care providers are encouraged to collaborate with their local health innovation network team on grant applications, for advice and support on grant writing, project development, delivery, evaluation of outcomes/impact and subsequent implementation. In the first round in 2023, approximately 30 bids were submitted. Four were successful, all with the support of local health innovation network teams. Further rounds of funding are taking place in 2024/25.



# Supporting post-pandemic priorities

The NHS Insights Prioritisation Programme (NIPP) was set up to accelerate the evaluation and implementation of promising innovations – selected for their potential to support new ways of working, build service resilience and benefit patients.

As a result of NIPP, the number of survey respondents who considered ARC and Health Innovation Network teams as collaborative, improved

from **70%** to **97%**

**Find out more**

**READ:**

The learning and recommendations from the programme are captured in this impact report.

**LISTEN:**

In a series of five podcasts, guests involved in the programme explore each of its themes.

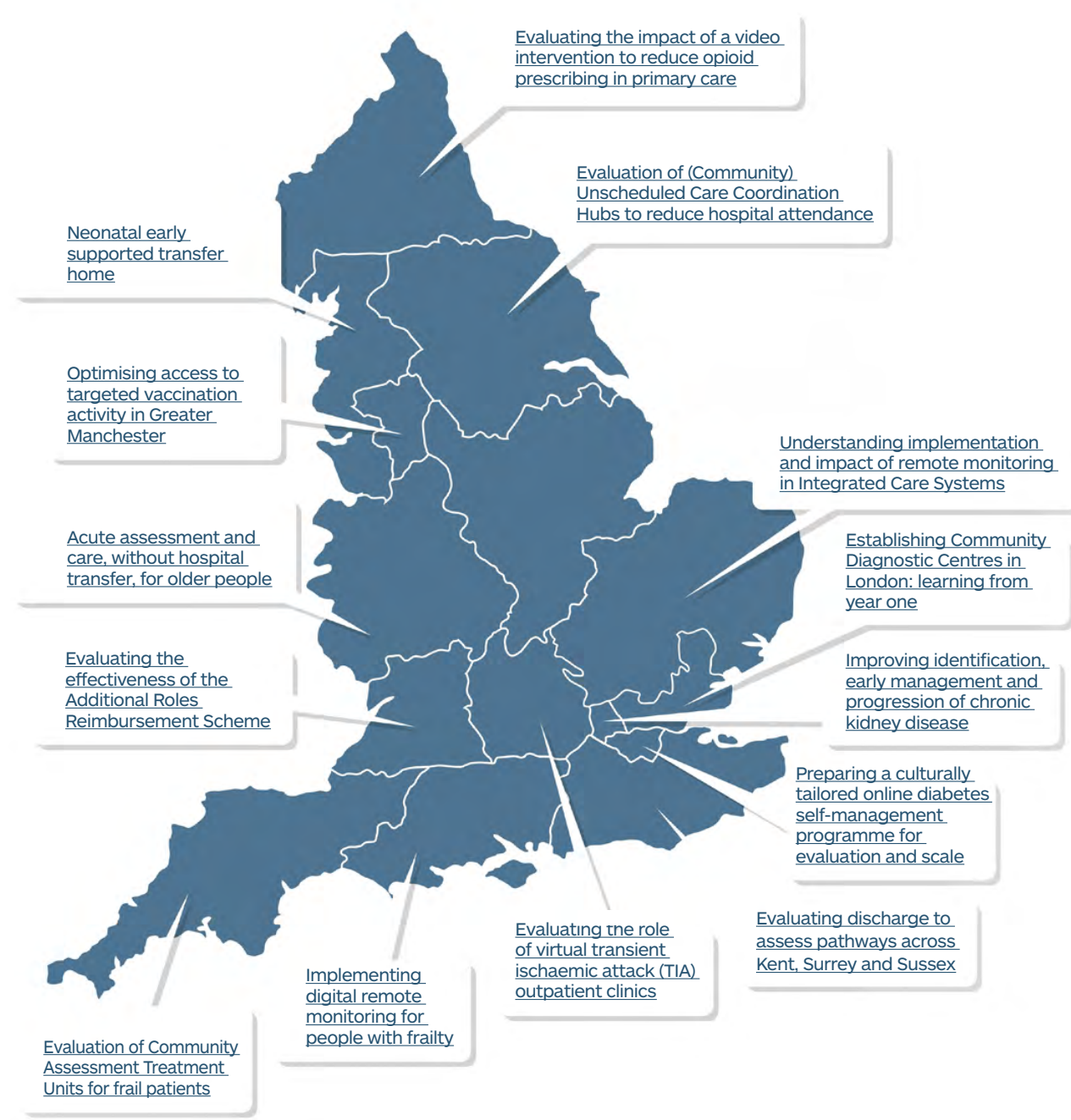
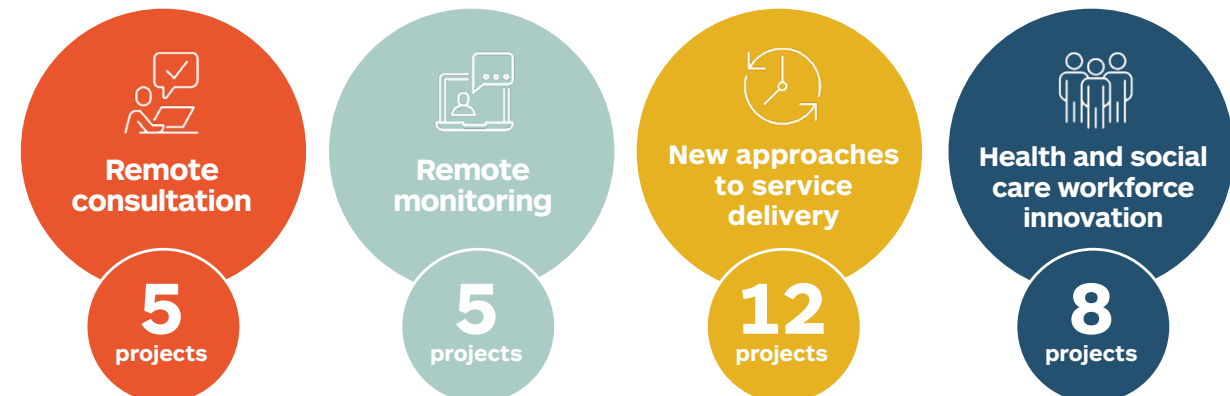
**JOIN:**

Learn more about the NIHR Applied Research Collaborations and find your local NIHR ARC on the NIHR ARCs national webpage.

The programme was independently evaluated in 2023/24 and concluded that the structured approach for the funding and acceleration of innovations and interventions had a positive impact and acted as an accelerator for collaboration between ARCs and health innovation networks. It leaves a legacy of learning points and recommendations for service provision that can help spread successful ways of working.

*“I'd like to thank all the project partnerships who took part, for their efforts to make sense of our evolving healthcare landscape and provide the research evidence to validate these positive stories of innovation. I hope this will be the start of continued, greater collaboration between NIHR Applied Research Collaborations and the Health Innovation Network.”*

Professor Dame Nicky Cullum  
Chair, NIHR Applied Research Collaborations



# Innovate Awards celebrating success in innovation

Recognising and rewarding innovators is crucial to creating a culture of innovation. The Innovate Awards are delivered in partnership between the Health Innovation Network and **NHS Confederation**. The awards shine a light on those working tirelessly to spread innovation, for the benefit of people across the country.



<b>Innovative Health System of the Year</b>	Continuing to Push the Boundaries around Innovation Mid and South Essex Integrated Care System
<b>Net Zero Innovation of the Year</b>	Surrey and Sussex Healthcare NHS Trust Achieves Remarkable Carbon Emission Savings with Pathpoint® eTrauma and VFC Open Medical
<b>Outstanding Collaboration with Industry</b>	Adoption of a digital solution to recover from COVID-19 and transform surgical pathways Definition Health & Royal Surrey NHS Foundation Trust
<b>Outstanding Contribution to Population Health Through Innovation</b>	The power of 3: an AHSN*, a NHS Trust and a Tech developer Eastern AHSN, Norfolk and Suffolk NHS Foundation Trust (NSFT) and BFB Labs
<b>The Diversity in Innovation Award</b>	Use of oVRcome Virtual Reality Headsets to reduce social anxiety and phobias associated with hospital visits in patients with Learning Disability and Autism in Mid and South Essex Mid and South Essex NHS Foundation Trust
<b>Innovation Champion of the Year</b>	Prioritisation of the elective waiting list and prehabilitation C2-Ai + Cheshire and Merseyside ICS

\*Health innovation networks were previously known as Academic Health Science Networks, or AHSNs.



5

# Your local network

# Health Innovation Network

Local change, national impact

## 5. Your local network

There are fifteen health innovation networks (formerly Academic Health Science Networks) across England. Each health innovation network is fully-embedded in their local health and research ecosystem.

This drives economic prosperity and growth in all parts of the country, and ensures that everyone benefits from innovation.

Explore each individual network's impact report, and get in touch with your local network to find out how they can support you.



## Your local network

### Health Innovation East

Health Innovation East 

We are the innovation arm of the NHS in the East of England, and we believe that great ideas only make a difference for our health when they are put into practice. We serve a population of over five million people and are proud to work with our region's world-leading health technology and life sciences companies to bring their innovations to patients.

Over the last 12 months we have significantly increased our portfolio of work. Notable successes this year include our continuing focus on cardiovascular disease, where our work helped an additional 50,000 people to have their blood pressure or cholesterol treated to NICE target levels.

We doubled the amount of external financial investment accessed by the companies we work with and we greatly expanded our work in health informatics, particularly with our role in the consortium designing, building and operating the NHS Secure Data Environment (SDE) for our region. The SDE offers approved researchers, working on approved projects, secure access to anonymised NHS healthcare data for research purposes.



*“ We serve a population of over five million people and are proud to work with our region's world-leading health technology and life sciences companies to bring their innovations to patients. ”*

Piers Ricketts  
CEO, Health Innovation East

  
Read more in our Impact Report

### Health Innovation East Midlands

Health Innovation East Midlands 

We continued to deliver high quality innovation support to organisations across the East Midlands' five integrated care systems and beyond. We held Innovation Insights webinars and events, and provided toolkits and expert resources, including our free, updated Innovation Academy.

We supported the ICSs, the East Midlands Mental Health & Learning Disabilities Alliance and the East Midlands Radiology Consortium (EMRAD) to each recruit a specialist Innovation Lead to increase capacity and capability to bring innovation to patients.

Some of our key programmes, at different stages of development and adoption, covered: Rehabilitation in hospital, Addressing problematic polypharmacy, Medicines safety (opioid reduction), Transforming wound care, Identifying and optimising treatment for cardiovascular disease, Using innovation to target healthcare inequalities, Providing safer care and ADHD diagnosis.

We also supported innovators to further develop their products and their businesses, access funding and evaluate their product's effectiveness in real world environments. We are looking forward to building on these impacts in 2024-25.



*“ By bringing together innovators from within the NHS, from our universities, and from commercial and industry partners we can act as a catalyst for constructive change. ”*

Nicole McGlennon  
Managing Director,  
Health Innovation East Midlands

  
Read more in our Impact Report

# Imperial College Health Partners Health Innovation



In 2023/24, ICHP supported North West London to mobilise three Missions:

- **Optimising care for long-term conditions (starting with Cardiovascular Disease)**
- **Enabling more days at home**
- **Supporting children and young people's mental health**

This approach has supported more effective integration of national innovation priorities and support to innovators and industry. Of the 132 innovators supported through ICHP's Innovation Exchange function, 75 offered solutions relevant to the Missions and received bespoke support. We're strengthening the system's ability to adopt, adapt, and scale innovation that works in four distinct ways:

- **Data and insights:** Harnessing NW London assets (including WSIC and Discover-NOW datasets) to best enable the use of real-world health data for research.
- **Public and patient involvement and engagement:** Involving 58 service users in the Mission 'Discovery' phase.
- **Evaluation:** Supporting the development of a NW London Evaluation Consortium to deliver a unified system-level approach to evaluation.
- **Enabling clinical innovation leaders:** Including recruitment of six Innovation Fellows.

**+260**  
stakeholders involved in 4 Innovation Forums across the 3 NW London Missions

**+400**  
additional blood pressure checks with 50 patients identified for follow-up, funded by The Big Case Fund 2023 campaign



*“ Thank you to our partners and collaborators across NW London and beyond. ”*

Dr Axel Heitmueller  
Managing Director, Imperial College Health Partners Health Innovation

  
Read more in our Impact Report

# Health Innovation Kent Surrey Sussex



The 2023-24 year has been transformative for Health Innovation Kent Surrey Sussex (KSS), with significant changes and achievements. Our key programmes covered multiple disease areas and focus areas, including patient safety, cardiovascular disease, polypharmacy, and health inequalities.

We've continued to build strong partnerships with local ICSs, leading to impactful initiatives such as improved cholesterol screening in Surrey, an evaluation of mental health practitioners in Kent and Medway, and a comprehensive women's health assessment with NHS Sussex.

Our support for innovators has contributed significantly to economic growth. Through our NIHR Applied Research Collaboration connection, we've advanced research in dementia, social care, primary health, and children's and young people's mental health.

We're proud to deliver programmes in partnership with citizens, NHS and academic organisations, local authorities, the third sector, and industry. A huge thanks to everyone for making this year so successful. We remain committed to driving innovation, improving patient care, and contributing to economic growth in the health sector.


**393**  
innovators supported in Kent, Surrey and Sussex

**45**  
innovative programmes completed by our team in 2023-24



*“ We remain committed to driving innovation, improving patient care and contributing to economic growth. ”*

Professor Hatim Abdulhussein  
Chief Executive Officer, Health Innovation Kent Surrey Sussex

  
Read more in our Annual Review

# Health Innovation Manchester



2023-24 marked Health Innovation Manchester's seventh year of operations. It has been our most significant yet in terms of delivery of impact from our innovation activities.

It has also been a pivotal year strategically – from strengthening our Board, augmenting our executive team, to launching the new Greater Manchester (GM) Digital ICS strategy and co-designing our new three-year strategy. All of this supports our vision - to be world leading in improving the lives of local people, transforming care and boosting the economy through innovation.

Four priority areas that have delivered the greatest impacts to the health and care system this year include improving the diagnosis and treatment of cardiovascular disease, the development of a more effective obesity pathway, the wider deployment of virtual wards to enable more people to be treated at home, and optimising the GM Care Record to give clinicians better access to information to support better informed care for patients.

**“ Research and innovation, and record levels of industry investment, are providing the tools with which we can tackle health challenges, with massive advances in artificial intelligence, precision medicine and other novel technologies – the opportunity and the need to partner with industry has never been more pressing. ”**



Professor Ben Bridgewater  
Chief Executive, Health Innovation Manchester

**Enhancing the GM Care Record to inform patient care:**  
over 21k healthcare professionals are now accessing the Record for over 270k patients each month. This represents a 21% annual increase in usage.

**Increasing access to novel therapies for people with high cholesterol:**  
by the end of March 2024, 1,180 at-risk people have received a novel therapy to lower their cholesterol to prevent a heart attack or stroke. In this group, 496 people have since been reviewed and their cholesterol has been reduced by 44%.



**Read more in our Impact Report**

# Health Innovation North East and North Cumbria



It has been an exciting year for Health Innovation North East and North Cumbria (HI NENC) as we embarked on our third, five-year commission from NHS England reflecting the crucial role innovation continues to play within the healthcare system.

HI NENC was also delighted to welcome Professor Dean Fathers as our new Board Chair in December 2023. Our vision remains the same and it is a privilege to work with our partners to:

- **accelerate innovations that improve population health;**
- **support our economy;**
- **improve patient safety; and**
- **support the reduction of health inequalities.**

Working with the NENC ICB and becoming embedded within the regional ecosystem has been a particular highlight. We have launched several joint initiatives such as the regional Health and Life Sciences Pledge, through which over 150 organisations have pledged to unite in our ambitions.

Please view the HI NENC Impact Report which provides a comprehensive overview of our initiatives, achievements and the measurable benefits we have delivered over the last year.



**“ Achieving these goals is only possible by fostering a culture of innovation within the NHS, which HI NENC proudly champions throughout the NENC region and delivers via our Innovation Pathway. ”**

Dr Nicola Hutchinson  
Chief Executive Officer, Health Innovation North East and North Cumbria

Heart health checks were delivered to approximately **500 people** from under-served communities. Over **60%** tested had an abnormal result and were referred to their GP for a lipid medication review.

Over **150** regional organisations have joined the **Health and Life Sciences Pledge**, which unites Partners across the ecosystem to champion innovation for the health and social care sectors



**Read more in our Impact Report**



## Health Innovation North West Coast



Our re-licensing last year and that of our partner health innovation networks was an endorsement of the work we've done in the field of healthcare innovation in the last 10 years.

It's a signal to our colleagues in the region that we continue to be their trusted innovation partner. We have built a unique set of skills, enabling clinical colleagues to benefit from a range of new products, pathways and medicines. It's this expertise in spread and adoption which is our unique value proposition.

We've continued to develop innovative collaborations, such as that we formed to tackle the impact of fuel poverty on some of the most vulnerable people in our communities, and built on our relationships with industry to support nearly 300 innovative companies.

Our Chief Executive Dr Phil Jennings is Vice Chair of the Health Innovation Network, and it's part of his role to explore ways to remove obstacles to health innovation.



*“ We have built a unique set of skills, enabling clinical colleagues to benefit from a range of new products, pathways and medicines. ”*

Dr Phil Jennings  
Vice Chair, Health Innovation Network / Chief Executive, Health Innovation North West Coast

**1,300**  
people supported in a project to mitigate the impact of fuel poverty on people with respiratory conditions

**£7.9m**  
of investment secured for innovative companies



Read more in our Annual Review

## Health Innovation Oxford and Thames Valley



High-quality care can only be delivered across healthcare systems by embracing the potential of technology to transform services and care pathways, leading to improved outcomes, safety and experience of patients.

Health innovation networks are uniquely placed to make this happen through our partnerships with regional healthcare systems and the vibrant life science research ecosystem which have strengthened over our first decade.

We also work with healthcare professionals to empower patients, reduce inequalities and maximise the impact, productivity and effectiveness of the skilled but stretched NHS workforce.

We have expanded our capacity for rigorous evaluation to understand the impact of innovations on patient outcomes, giving more support to innovators looking to develop and deploy their innovations in the NHS. This is fuelling growth, both of individual companies and the wider UK economy.



*“ More patients are getting the right treatment in the right place more quickly through the widespread deployment of artificial intelligence (AI) to interpret scans in stroke diagnosis. ”*

Professor Gary Ford  
Chief Executive Officer, Health Innovation Oxford & Thames Valley

AI tech speeds up time-critical intervention following stroke by **50 minutes**

Disability reduced with **70%** more eligible patients getting mechanical thrombectomy following stroke



Read more case studies on the website

## Health Innovation Network South London



We are passionate about digital technology transforming patient care and services, and have led important work to understand the views of 4,138 people on digital tools such as the NHS App, digital mental health apps and virtual wards.

Our regional and national work in automation and Ambient Voice Technology demonstrates how we are informing the use of AI to tackle issues including productivity and workforce burnout. Additionally we concluded the spread of our national Early Intervention Eating Disorders programme to all 54 eligible Trusts, with 2,430 patients receiving treatment and saving the NHS an estimated £10.9m.

We started our UK-wide commissions: Mindset, looking at mental health immersive technology, and Accelerating FemTech, supporting innovators addressing key challenges in women's health. Ten companies from our first FemTech cohort were awarded a share of £3m Biomedical Catalyst funding.

We also strengthened links with local partners to address regional priorities, with 96% of our cardiovascular fellows agreeing their practice or primary care network has improved how it manages cardiovascular care.



“Our work focuses on accelerating innovation and transformation to benefit patients, populations, health and care systems.”

Rishi Das-Gupta  
Chief Executive, Health Innovation Network (South London)



Read more in our Annual Review

## Health Innovation South West



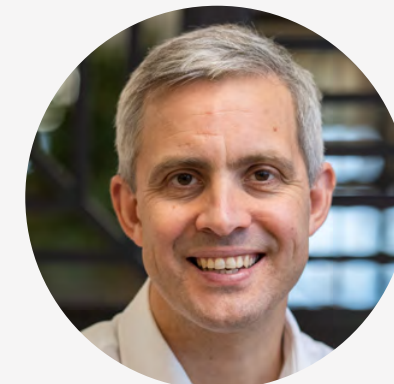
As innovation adoption experts, in 2023-24 we have delivered in-depth support to more than 100 health and care projects, centred on the South West's key clinical missions, including cancer and long-term conditions, using cutting-edge technologies.

We have worked with over 200 innovators, supported 14 real-world evaluations, and facilitated the delivery of 15 innovations into real-world settings.

Our work with BRAVE AI, for example – an artificial intelligence app that predicts a patient's risk of emergency admission to hospital – has led to it being deployed in over 30 sites by NHS Somerset.

A key development with our NHS and academic partners across the South West has been the creation of the Peninsula Research and Innovation Partnership.

Our collective vision is to drive impact for rural and coastal health and care, and we will now focus on amplifying the influence of the Partnership regionally and nationally to reduce health inequalities in our under-served communities.



“A key development with our NHS and academic partners across the South West has been the creation of the Peninsula Research and Innovation Partnership.”

Jon Siddall  
Chief Executive Officer, Health Innovation South West



Read more in our Annual Review

## UCLPartners Health Innovation

Over the last year we have been developing our approach to innovation. The priority disease areas we have chosen are some of the big health challenges of our time, driving mortality and poor health in our local community and more widely.

We work with industry, academia, innovators, voluntary and charitable organisations, and our local community. Our work this year has focussed on improving **adolescent mental health, cardiovascular disease prevention, holistic support for cancer patients, and asthma control for children and young people.**

We also work with Moorfields to act as an innovation partner for their eyecare pathway transformation work which we help to develop and scale. Our emerging work in **dementia** is bringing together experts in the field to define challenges and opportunities on the horizon with the potential introduction of disease modifying therapies. Looking at the wider impact on our health, we have been supporting the NHS to move a step closer to **net-zero** and focus on the **social determinants of health.**



*“Over the next year we will continue to focus on providing sustainable solutions for the biggest health challenges, designing care to meet the needs of the diverse communities across London, Essex and beyond.”*

Dr Chris Laing  
Chief Executive Officer, UCLPartners



**225**

companies or innovators helped to get their innovations adopted, resulting in £5.8m sales or new investments

**800k**

patients covered by the CVD ACTION demonstrator programme, helping to reduce the risk of heart attacks and strokes



Read more  
in our Case  
Study

## Health Innovation Wessex



In 2023, we marked ten years since the inception of health innovation networks, with the announcement of a further five year licence from NHS England. Alongside the new licence came a clearer name for our network, and we welcomed fresh leadership with **Nicola Bent** stepping into the role of CEO to drive us in continued success.

Our teams have worked closely with commissioners and our local partners in integrated care systems, industry, research and academia to offer co-produced solutions to meet healthcare challenges and priorities and to grow local prosperity.

We have provided almost 5,000 hours of support to innovators, supported innovations contributing to early stage diagnosis of cancer, delivered training in medicines optimisation and cancer education to NHS staff through our expert teams and our partner organisations, helped 340 people in under-served communities to receive blood pressure monitoring and identified several hundred new patients with a genetic condition causing cardiovascular disease.



*“Adopting innovation creates transformational change, and we have bold ambitions to build on our contribution to healthier, longer lives for our communities in Wessex.”*

Nicola Bent  
Chief Executive, Health Innovation Wessex

**304**

people from under-served communities receiving blood pressure monitoring at outreach events, with over 33% referred for further care

**4,838**

hours of support provided to Wessex innovators



Read more  
in our Impact  
Report

## Health Innovation West Midlands



2023/24 marked an important milestone for us, with the Government and NHS England's decision to re-licence England's 15 health innovation networks for a further five years.

The healthcare sector continues to be a highly dynamic and evolving environment and the West Midlands has the fastest growing population in the UK. It has seen an increase by 40,000 in the last year and remains the second largest population in the UK.

In November 2023, our project 'West Midlands Managing Deterioration in Care Homes Safety Improvement Programme' was highly commended in the 'Provider Collaboration of the Year' category at the 2023 Health Service Journal (HSJ) Awards. It has been recognised as a national exemplar and HIWM is continuing to support NHS England by establishing a national change package in line with the deterioration framework. It is now widely known as the 'West Midlands Model'

**“ Much has been achieved over the past 12 months. We have been involved in developing exciting projects such as a Point of Care Ultrasound (POCUS) Programme. POCUS aims to support clinicians and increase understanding across the industry of how it can transform unchallenged traditions in healthcare. ”**



Tim Jones  
Chief Officer, Health Innovation West Midlands



## Health Innovation West of England



We've become known for our joined-up approach to transformation and innovation, working in genuine partnership with our local health and care systems, VCSE and life sciences sector.

In 2023/24 we co-created an ambitious five-year strategy, setting out a clear roadmap for how we will discover, develop and deploy proven innovation together to achieve better and fairer health outcomes for all our communities.

Our commitment to supporting a vibrant health innovation ecosystem has never been more evident. This year, we successfully supported 235 innovators, offering potential benefits to patients and health systems alike.

We are proud of the impact our programmes have on patient care. The PreCiSSion care bundle has now been used to treat 6,000 mothers following caesarean births in the West of England, while our non-invasive ventilation care bundle has saved at least 100 lives.

And through our unique Black Maternity Matters programme, we are supporting an exciting movement to improve maternal health outcomes for Black women through anti-racist education and practice.



**“ This year, we successfully supported 235 innovators, offering potential benefits to patients and health systems alike. ”**

Natasha Swinscoe  
Chief Executive Officer, Health Innovation West of England



# Health Innovation Yorkshire and Humber



**Maintaining strong partnerships with our ICSSs is a top priority: our staff are embedded into organisations to better accelerate the spread of innovation and improve patient outcomes.**

Through the Innovation for Healthcare Inequalities Programme (InHIP), we're working with partners to improve the diagnosis of cardiovascular disease, diabetes, and uncontrolled asthma amongst our most deprived communities.

We're addressing regional health and economic disparities through our 'YHealth for Growth' campaign. This year we published a white paper setting out 10 recommendations for regional and national leaders on how to tackle rising health inequalities while also growing our economy.

We collaborate with the combined authorities in our area to help stimulate economic growth by supporting both UK innovators with their export ambitions and global innovators to import their HealthTech solutions, ensuring people in our region benefit from the best innovations first.

Our InHIP projects engaged with over **4,400** under-served patients in the community, diagnosing **1,072** with a condition and referring them for treatment.

Our Propel@YH digital accelerator supported **39** international innovators leading to **£90k** being spent in the local economy and **9** companies establishing bases in the UK.



**“ Collaborating with our stakeholders is critical to achieving our ambitions for Yorkshire and Humber and has enabled us to drive the adoption of innovation over the last 12 months. ”**

Richard Stubbs  
Chair, Health Innovation Network /  
Chief Executive, Health Innovation  
Yorkshire & Humber

  
Read more  
in our Impact  
Report

## Contact us

For more information about our work, visit [thehealthinnovationnetwork.co.uk](https://thehealthinnovationnetwork.co.uk)

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-  @TheHealthInnovationNetwork

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