

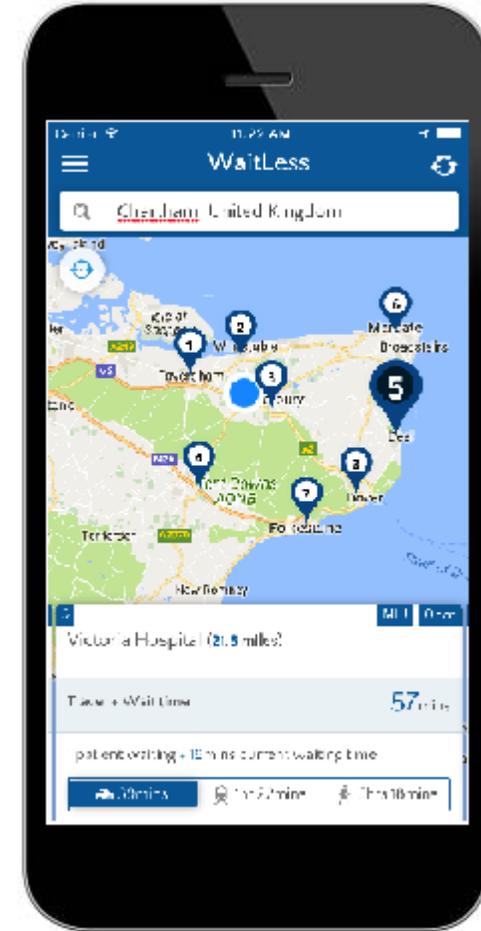
WaitLess

NIA Fellow: Alistair Martin

Free, patient-facing app which shows patients the fastest place to access urgent care services for minor conditions.

- 11% reduction in minor injuries activity in A&E
- 5% reduction in minor injuries activity across the board
- 125,000 uses to date with 99.6% patient satisfaction rate

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NHS

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Home monitoring of hypertension in pregnancy (HaMpton)

NIA Fellow: Asma Khalil

New care pathway involving the use of an app for monitoring high blood pressure at home, empowering expectant mothers to be involved in their own care.

- 53% reduction in number of appointments for hypertension monitoring, and amount of time per appointment
- £300 average cost saving per patient per week according to basic health economic study
- £50 million potential annual cost saving if scaled up across the UK

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CATCH - Common Approach To Children's Health

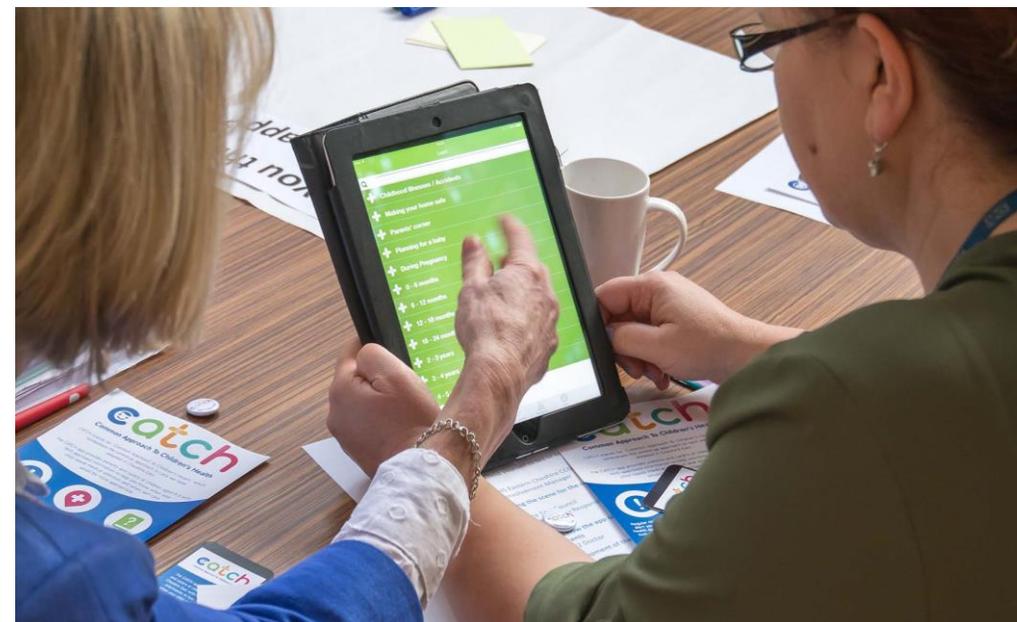
NIA Fellow: Dave Burrows

Addressing the inappropriate use of NHS services when self-care would be more appropriate, the CATCH app gives parents appropriate and understandable information when they need and want it, via smartphone or tablet.

- 3% reduction in overall A&E attendances reported by Eastern Cheshire CCG in winter 2016/2017
- 47% of users deciding self-care over an A&E visit*
- 64% of users deciding self-care over a GP visit*

**Based on 284 responses from user satisfaction survey conducted by Eastern Cheshire CCG*

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Common Approach To Children's Health



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My Diabetes My Way

NIA Fellow: Debbie Wake

Low-cost, scalable, comprehensive online self-management platform for people with diabetes.

- > 88% of users felt MDMW helped them to manage their diabetes better*
- Improvements in long-term blood glucose sustained out to three years (based on case control study)
- > 5:1 return on investment (ROI) based on analysis of outcome data from long-term user in NHS Scotland

**Based on recent evaluation survey of 1,098 users*

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FREED

‘First episode Rapid Early intervention service for Eating Disorders’
NIA Fellow: Karina Allen

The FREED model of care provides a rapid early response intervention for young people aged 16 to 25 years with short (three years or less) first episode illness duration.

- Reduced waiting time for treatment by approximately 50% compared to audit data from matched patients*
- Improved treatment uptake by 100% compared to 73% for audit patients*
- 59% patients with anorexia nervosa reached a healthy weight by 12 months, versus 17% of the audit sample*

**Initial evaluation where implemented*

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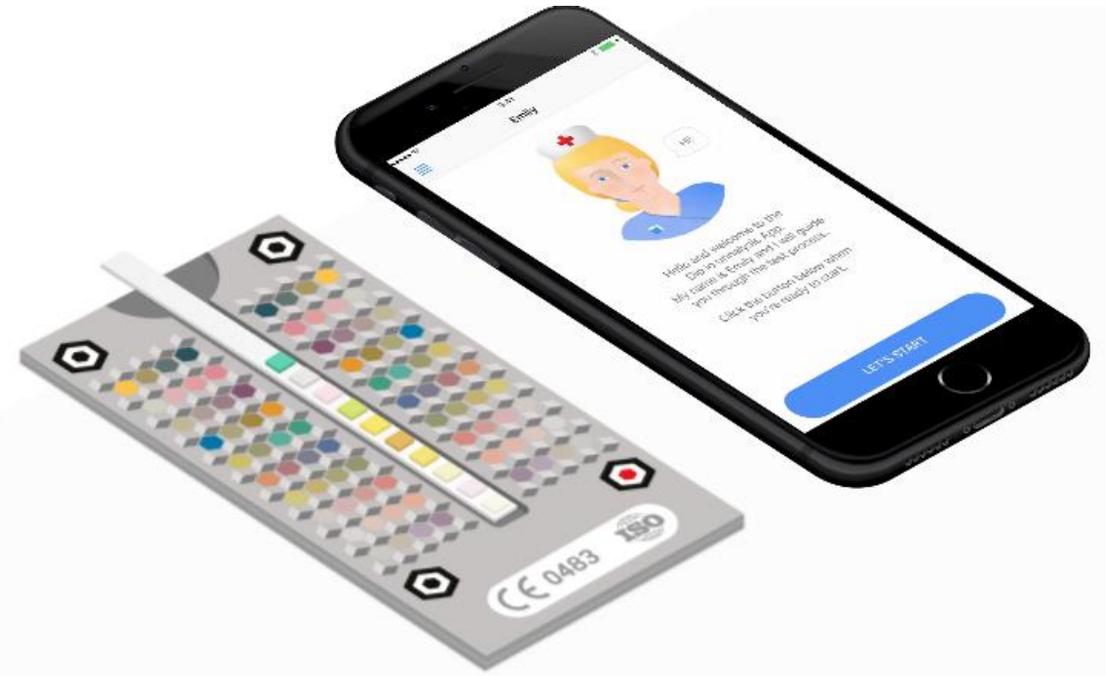
Dip.io

NIA Fellow: Katherine Ward

App which turns a smartphone into a clinical device, providing patients with clinically accurate urine analysis from home in a matter of minutes

- CE approved and ISO 13485 certified
- 99.5% usability rates in FDA clinical trials covering 500 patients across demographics
- John Hopkins prenatal study demonstrated that less than 10% preferred testing at the clinic
- Roll out of home ACR screening in collaboration with US and Dutch National Kidney Foundations

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 Healthy.io


The **AHSN** Network **England**
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ORCHA

NIA Fellow: Liz Ashall-Payne

ORCHA works with CCGs and Providers to develop health app portals, allowing professionals easy and clear access to a verified resource. This enables them to enhance services and outcomes by finding and recommending the best apps to patients.

- Data collation and reporting of app usage by population, patient and professional group, to help assess and prove digital strategies, investment and outcomes
- Activating over eight million people and patients to use healthcare apps in England
- Over 90% of healthcare professionals believe that health apps will increase their knowledge of patients' conditions

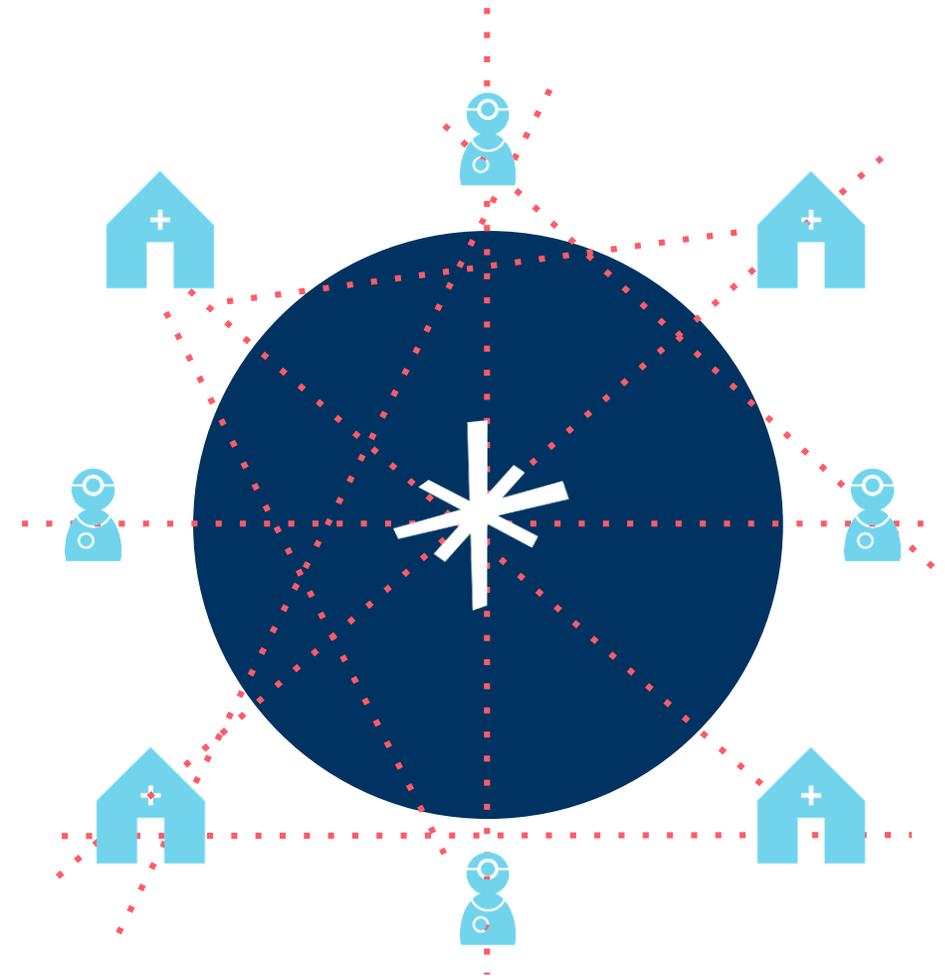
Lantum

NIA Fellow: Melissa Morris

A cloud-based tool built to help NHS Providers fill empty shifts in clinical rotas.

- £3 million savings for the NHS in under five years by providing a free platform for providers to manage their existing clinical workforce
- Support to meet CQC requirements - rota managers can improve governance processes by creating cloud-based profiles for staff
- 30% - 50% more shifts being filled by providers' own clinical staff banks, thereby reducing use of agency staff and improving continuity of care

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ESCAPE-pain

NIA Fellow: Mike Hurley

‘Enabling Self-management and Coping of Arthritic Pain through Exercise’ (ESCAPE-pain) is a six-week group programme delivered to people aged 45+ with Osteoarthritis (OA).

- Shown to reduce pain, improve physical function, depression, health beliefs and general well-being in randomised control trial (RCT)
- Sustained benefits for up to two and a half years after completing the programme
- £2.8 million annual savings in total health and social care for every 1,000 participants who undertake ESCAPE-pain

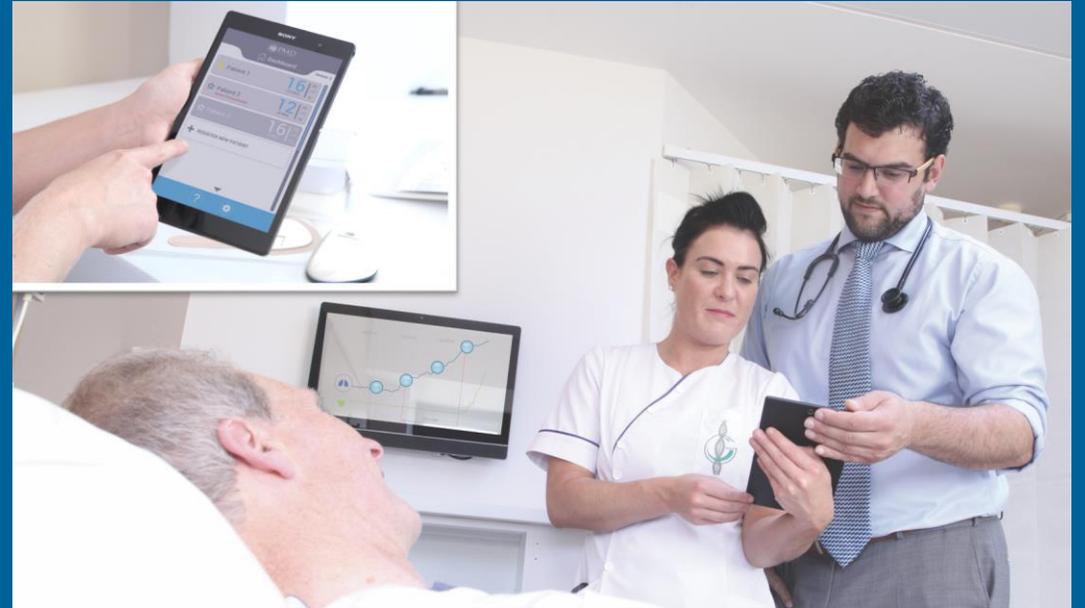
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RespiraSense

NIA Fellow: Myles Murray

The world's first continuous respiratory rate monitor, enabling medical teams the ability to detect signs of patient deterioration 12 hours earlier than the standard of care.



- Improves patient flow by reducing the rate of preventable escalations of care, and supporting timelier patient discharge
- More than 70% return on hospitals' investment
- Over £100 million potential net savings in pneumonia and sepsis pathways, from 5% reduction in preventable escalations of care

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Oviva Diabetes Support

NIA Fellow: Olivia Hind



A fully remote, technology-enabled programme of type 2 diabetes structured education, combining 1-to-1 support from a registered dietitian with evidence-based online educational materials and use of the Oviva app to support behaviour change.

- Average uptake of 75%, with 85% of participants completing the programme
- Clinically meaningful improvements in diabetes treatment targets
- Estimated NHS savings of £1,000 per participant based on reduced medication need and use of services

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