2019-20 Wessex impact and update
The following slides outline key achievements from 2019-20; before the Covid-19 emergency started.

It does not outline each impact from every AHSN programme delivered, but highlights key achievements.

The programmes featured are both local programmes – devised with engagement with local stakeholders; and local performance of nationally-commissioned programmes.

For information about a specific programme’s delivery, please email enquiries@wessexahsn.net and the relevant associate director will respond.
What the people we work with say*

During the summer and autumn of 2019, stakeholders from each of the AHSNs were surveyed by Savanta ComRes, via online survey and follow-up in-depth interviews. In Wessex, 86 people responded to the online survey, and 10 were interviewed.

Approaching nine in ten partners surveyed (88%) rate their working relationship with us as good; which is higher than the average across all AHSNs (82%).

Two thirds (67%) rate our communication as good; greater than average (53%).

Those who have a good relationship with the Wessex AHSN or report that it has improved, and this is because the organisation is ‘supportive’ and ‘collaborative’ (38%). This is higher than the average of 23% across all regions.

“They’re a great partner to work with. They always tell us what they can and they cannot do and they’re always quite clear about it, and it means to us that they’re prepared to think creatively about how to get things done within the constraints of the environments we’re working in. We’re not always aware of how best to do [some]thing or even the potential alternative ways of getting [it] done, and Wessex has always been good at engaging with us in conversations about how we can get this done somehow.” - Private company/industry body*

*source – click to read: Wessex stakeholder report 2020
Medicines optimisation

PINCER

- Almost every practice in Wessex has now implemented PINCER, a methodology for reducing medication errors and improving safety. Our target was 240 practices and, at the year end, we had supported the implementation into 234 out of a possible 256 GP practices in Wessex (91%) to upload the new PINCER data extraction in 19/20, with some further practices using the legacy system.

- By the end of March, 202 practices have completed a full PINCER clinical audit cycle and delivered:
  - 3,441 (13.4%) fewer patients at risk of clinically significant medication errors compared with the baseline.

  This data included 2,800 (28%) fewer patients at risk from a gastrointestinal bleed.

Transfers of Care Around Medicines (TCAM)

- There is clear evidence that, after discharge from hospital, patients who receive a consultation with a community pharmacist are much less likely to be readmitted within 30, 60 or 90 days.

- Our target was to benefit 2,158 patients. We achieved 6,902 completed referrals, 320% of our target.

- Overall, our four live trusts made 9,379 referrals to community pharmacy and over 74% of these were accepted and followed through, compared with a national rate of 59% across all AHSNs.
Medicines optimisation

Polypharmacy

Polypharmacy refers to many medicines taken on a long-term basis. Inappropriate polypharmacy is an ongoing and growing challenge for the NHS, as more people living with chronic conditions experience problems from the number of medicines they're taking, the clinical challenges posed by the combination of medicines, or both.

Action Learning Sets

We supported GPs and practice pharmacists to carry out structured medication reviews using shared decision making for patients with multiple medications. These were carried out in Southampton and Dorset and spread to Oxford, South West and West of England AHSNs through a commission from Health Education England.

NHS Business Service Authority (BSA) Polypharmacy Comparators

This Wessex-led work, in collaboration with NHS BSA and NHS Digital, has produced demonstrable benefit in its first two years since publication.

In November 2019, this work was recognised by being awarded the HSJ Award for Patient Safety.
Medicines optimisation - national

Electronic Repeat Dispensing (eRD)

- Local work to increase utilisation of eRD was escalated, in six working days in the second half of March 2020, into a national approach in response to Covid 19 with Wessex AHSN as the acknowledged lead.

- Significant efforts were made to turn our locally-facing eRD web pages into a national resource. To date (June 2020), hits on this page increased by almost 3,000% with just under 9,000 views.

National Programme Lead AHSN for TCAM

- **100,770 referrals** from over **60** acute trusts (plus a further **2,712** from non-acute trusts)
- **57,163** of the acute trust referrals were completed (plus a further **1,385** from non-acute trusts)
- **57%** of the acute trust referrals were completed by community pharmacy.

PINCER

- **2,439 GP practices** implemented PINCER, with over **23 million** patient records searched and over **1000 pharmacists** trained.

- **1,060 practices** completed a full PINCER cycle resulting in:
  - **13,387 (14.4%)** fewer patients at risk from clinically significant medication errors
  - a reduction of **10,559 patients (25.9%)** at risk from a gastrointestinal (GI) bleed [full report due to be published imminently].
# 2019-20 key impacts: All indicators PINCER results

Table: Change in numbers of at-risk patients identified in at least one indicator (all indicators) for 1,060 practices that have uploaded data at least twice to CHART Online

<table>
<thead>
<tr>
<th>AHSN</th>
<th>Number of practices (n)</th>
<th>Baseline</th>
<th>Latest</th>
<th>Change in number of at-risk patients (n)</th>
<th>% change in number of at-risk patients (%)</th>
<th>% change in prevalence per 1,000 patients (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Numberator (n)</td>
<td>Prevalence per 1,000 patients (n)</td>
<td>Numberator (n)</td>
<td>Prevalence per 1,000 patients (n)</td>
<td></td>
</tr>
<tr>
<td>East Midlands</td>
<td>109</td>
<td>6,179</td>
<td>6.78</td>
<td>5,627</td>
<td>6.14</td>
<td>-552</td>
</tr>
<tr>
<td>Health Innovation Network</td>
<td>78</td>
<td>4,262</td>
<td>4.94</td>
<td>3,595</td>
<td>4.10</td>
<td>-667</td>
</tr>
<tr>
<td>Imperial College Health Partners</td>
<td>45</td>
<td>1,734</td>
<td>5.35</td>
<td>1,484</td>
<td>4.55</td>
<td>-250</td>
</tr>
<tr>
<td>Kent Surrey Sussex</td>
<td>43</td>
<td>4,713</td>
<td>10.30</td>
<td>3,917</td>
<td>8.42</td>
<td>-796</td>
</tr>
<tr>
<td>Oxford</td>
<td>133</td>
<td>12,709</td>
<td>8.11</td>
<td>10,371</td>
<td>6.45</td>
<td>-2,338</td>
</tr>
<tr>
<td>South West</td>
<td>54</td>
<td>6,843</td>
<td>11.43</td>
<td>5,359</td>
<td>8.90</td>
<td>-1,484</td>
</tr>
<tr>
<td>UCL Partners</td>
<td>83</td>
<td>4,094</td>
<td>6.29</td>
<td>3,338</td>
<td>5.07</td>
<td>-756</td>
</tr>
<tr>
<td>Wessex</td>
<td>202</td>
<td>25,663</td>
<td>10.98</td>
<td>22,222</td>
<td>9.38</td>
<td>-3,441</td>
</tr>
<tr>
<td>West Midlands</td>
<td>16</td>
<td>1,016</td>
<td>7.14</td>
<td>878</td>
<td>6.14</td>
<td>-138</td>
</tr>
<tr>
<td>Yorkshire &amp; Humber</td>
<td>57</td>
<td>4,834</td>
<td>8.36</td>
<td>4,852</td>
<td>8.35</td>
<td>18</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>1,060</strong></td>
<td><strong>92,762</strong></td>
<td><strong>8.51</strong></td>
<td><strong>79,375</strong></td>
<td><strong>7.19</strong></td>
<td><strong>-13,387</strong></td>
</tr>
</tbody>
</table>
Healthy Ageing

A growing Healthy Ageing Community of Practice:

- **520 recipients** of our quarterly healthy ageing newsletter
- **50+ attendees** to our bi-annual events
- Monthly contributions from the community for the Healthy Ageing blog
- Development of resources to support learning after Community of Practice events have been utilised in local learning.

**Formal launch of the Nutrition Wheel by the Malnutrition Task force in September 2019, with over 1,000 wheels distributed in 2019/20 across Wessex/nationally.**

**Completion of a six-month Hydration at Home project across two domiciliary care agencies, Apex Care Havant and Portsmouth, with 35 clients:**

- Total of six training sessions delivered across both agencies (total of **39 carers** trained)
- Knowledge of hydration increased from **28%** pre-training to **77%** post-training (**178%** in increase).

In collaboration with Hampshire County Council, the development of an e-hydration toolkit tested within two care homes in Dorset and one mealtime assistant at University Hospital Southampton NHS Foundation Trust – the toolkit is due for launch in summer 2020. The toolkit will be hosted by Health Education England (eLFH) for access by all health and social care partners and the public.

**22 Primary Care Networks** took part in the Wessex Community Frailty Audit to understand the opportunities for improvement across Wessex to improve quality of care and deliver the frailty aspects of the long-term plan.

**Delivery of a Community Frailty workshop to 44 representatives across the Wessex system including strategic leaders from health, social care and voluntary care. A service improvement collaborative will be set up to identify and spread new best practice approaches.**
Healthy Ageing

Arising from the Wessex Acute Frailty Audit carried out between 2018-20, a suite of frailty screening and identification gold standards and supplementary guidance was developed for managers, clinicians and patients. These tools will be piloted by Salisbury Foundation NHS Trust, post Covid-19.

A peer review and additional Tier 1 Skills for Health Frailty education resources were developed by Dorset Healthcare, in collaboration with 25 acute and community frailty experts across Wessex; agreement to collaborate with Kings College London and the London Clinical Frailty Network to share resources and to support the development of a wider frailty education toolkit.

In collaboration with University of Southampton and Bournemouth University, the development of a validated Tier 1 and Tier 2 resource list available for use across Wessex. Getting It Right First Time (GIRFT) to include as part of their examples of best practice.

In collaboration with Salisbury NHS Foundation Trust, the development of three educational leaflets: holistic approaches for assessing people living with frailty; communicating with people living with frailty; and 'Frailty screening: what you need to know' to be included in the Tier 1 Skills for Health Frailty Education resources.

Identification of local improvement plans and projects across seven trusts, promoted through Healthy Ageing Line and quarterly newsletter.

Preparation of the acute frailty audit tool for trial at the Health Innovation Network across five South London hospitals, including the development of an implementation pack.

Planning of the re-running of the Wessex Acute Frailty Audit to include a greater scope of specialities, in partnership with NHS Benchmarking.
Deterioration

National Early Warning Score version 2 (NEWS2): this is a tool developed by the Royal College of Physicians which improves the detection and response to clinical deterioration in adult patients and is a key element of patient safety and improving patient outcomes. It is based on a simple aggregate scoring system allocated to six simple physiological parameters. NHSEI have endorsed NEWS2 for use in acute and ambulance settings. As a direct result of building an active Community of Practice to facilitate and support engagement with our stakeholder organisations:

- 100% of acute (eight) and ambulance trusts (two) are now using NEWS2 in Wessex
- 100% of community trusts (three) are using NEWS2 in hospital settings in Wessex
- our Deterioration / NEWS video project (with West of England AHSN and Health Education England) has received over 40,000 views since March 2020.

SBARD communication tool (Situation, Background, Assessment, Recommendation, Decision): SBARD is an easy to use, structured form of communication that enables information to be transferred accurately between individuals and has been successfully used in many different healthcare settings, particularly relating to improving patient safety.

In Wessex, we’ve supported the adoption of SBARD across all acute organisations.
Deterioration

**RESTORE2™:** this is a physical deterioration and escalation tool for care/nursing homes based on nationally recognised methodologies including early recognition (Soft Signs), the National Early Warning Score (NEWS2) and structured communications (SBARD).

- The British Geriatric Society (BGS) adopted **RESTORE2™** in March this year as part of their guidance for care homes during the pandemic. The support of the BGS has been influential in encouraging the spread of this Wessex-developed tool across England and in attracting enquiries from countries such as Wales (via Public Health Wales) and Sweden.

- **RESTORE2™** is being rolled out by all CCGs to their local care homes in Wessex.

- **RESTORE2™** received a **Parliamentary Award for Excellence** (July 2019), the **Sir Peter Carr Partnership Award** (November 2019) and was a finalist in the **HSJ Value Awards 2020**.
Maternity and Neonatal Safety Improvement Programme

A programme to support improvement in the quality and safety of maternity and neonatal units across England. The programme aims to:

- Improve the safety and outcomes of maternal and neonatal care by reducing unwarranted variation and provide a high quality healthcare experience for all women, babies and families across maternity and neonatal care settings in England.

- Contribute to the national ambition set out in Better Births of reducing the rates of maternal and neonatal deaths, stillbirths and brain injuries that occur during or soon after birth by 50% by 2025.

Wessex Local Learning System

Established in 2018, Wessex Local Learning System (LLS) provides an improvement forum for maternity systems to build relationships, across and between organisations and different professions with a shared ambition. The Patient Safety Collaborative team co-ordinates and co-designs delivery of the LLS with key stakeholders from regional networks and commissioners. The meetings encourage sharing and adoption of good practice as a trust and across the whole maternity system.

The Wessex CO Monitoring Pathway, established to support monitoring of carbon monoxide (CO) levels at every antenatal contact, was developed following a recommendation from the Wessex Stillbirth Review Panel. It links to an NHS Improvement ambition of increasing the number of smoke-free pregnancies. **Antenatal CO monitoring has been adopted by 100% of the maternity services in Wessex.**

Three Local Learning Systems have been attended by a total of **104 delegates**, with representation from each trust including improvement teams, Heads of Midwifery and Directors of Nursing.

In Q4 the LLS was forecast a Progression Assessment Score of 3 to indicate its level of maturity. The forecast was exceeded with a score of 3.5, highlighting strong engagement from providers and commissioners and adoption of the CO Monitoring Pathway by all eight trusts.
Adoption and spread

**Safer Practice Framework:** a self-assessment tool to support general practice teams, with a focus on patient safety. Viewed over 500 times and downloaded circa 430 times from the Wessex Patient Safety Collaborative webpage.

**ED Checklist:** to improve the safety and clinical outcomes for patients accessing the emergency care system - 100% adoption across all trusts.

**PReCePT**

- **All Wessex acute trusts** took part in the project to reduce cerebral palsy through uptake of magnesium sulphate during preterm delivery.
- Aim was to give magnesium sulphate to 85% of eligible mothers in preterm labour, which we have achieved with 91.9% overall at year end, moving from 69.7% baseline (2017). We exceeded each quarterly target throughout 2019-20.
- We were required to treat 20 additional women, which we exceeded with 33 additional women in 2019-20.
- Over the three years of the project from April 2017 to March 2020, we have given magnesium sulphate to 376 women, which equates to ten cases of cerebral palsy prevented, and potential health and social care cost savings of £8 million.

**COPD**

In 2019/20, 100% of COPD teams in Wessex use a discharge checklist based on the British Thoracic Society bundle.

Discharge experiences from **three COPD** patient representatives were shared with all Wessex COPD teams to help teams consider what matters to their patients.

The number of COPD patients receiving all six parts of the discharge bundle increased from 5% to 14% by the end of the year.
Emergency Laparotomy Programme

- Over **40 senior delegates** from eight Wessex hospitals attended a series of network events focusing on patient experience, frailty and older adult care, enhanced recovery and making the best use of data.
- Supported continued roll-out of six-part care bundle.
- Emergency laparotomy care for over **1,000 patients** across Wessex impacted by the programme.

Medicines Safety

- The experiences of **70 Wessex care homes** were collated through an online survey and structured conversations with the Patient Safety team and added to the national report.
- **20 structured conversations** with GPs, pharmacists and nursing teams working with Wessex care home teams were undertaken to develop insight into how medicines administration by care home staff can be influenced by external processes.
- **90%** of Wessex responses to the recent national survey identified they would benefit from working with the Patient Safety team to support improvements to their medicine processes.

Other

- The Community of Safety, Quality and Improvement (CSQIP) virtual network has grown to over **750 members**.
- Approximately **220 people** participated in the 4th Wessex Safety, Quality and Improvement Practice Conference, with keynote speaker Dr Aidan Fowler, NHS national director of patient safety.
The support

Supported **156 innovators** in 1:1 meetings, of which, **33** additionally benefited from a panel review in the Health Innovation Surgery, and **16 have attended our four-day Health Innovation Programme** course.

Coordinated the national AHSN input to NICE’s Health Tech Connect system.

Our funding support service helped **13 innovators**. Out of eight applications for development grants, four have been successful, securing a total award of **£2,555,910.00** in grants over the last year.

Used Hospital Episode Statistics (HES) data to support **nine companies to** develop their value propositions.

Led calls to industry on diabetes, cardiology and neurology and we continue to support innovators selected through those calls in partnership with Wessex Clinical Research Network.

**Events 2019-20**

Delivered **five events** connecting SMEs to NHS professionals with total attendees over **200**. One of the events was ‘South Coast Bridging The Gap’, a national programme delivered with three other AHSNs for innovators to learn directly from bodies such as NHS Supply Chain, NIHR, MHRA, and BSI, the national standards body.

Co-hosted **four** clinically themed Innovation Forums in partnership with our NHS organisations, showcasing a total of **28 innovations/companies** to clinicians.

“The technical and market knowledge of the great people at Wessex AHSN has really helped us refine our business plans for bringing our product to the NHS. Their support has opened the doors we needed to carry those plans out.”

Michael Leach, CEO & AI Tech Lead at GenomeKey

“Not only do you have a very friendly demeanour but it would appear also a great mind!”

Dr Tony Higginson
Consultant Radiologist, Portsmouth Hospitals NHS Trust
Primary Care Innovation Sites

The challenge
We use clinical knowledge and experience to refine cutting-edge, ground-breaking primary care digital innovations to make them clinically safe and fit-for-purpose in a test bed environment. The programme contributes to system-wide improvement and enhanced patient outcomes.

The support
Innovation sites offer four different tiers to test innovations.
Tier 1: Needs validation
Tier 2: Functional trial
Tier 3: Efficiency trial
Tier 4: Spread

Top facts and figures
- 50+ registered primary care innovation sites
- 1.3m registered patients in general practice sites involved within the programme
- Nine different innovation implementation projects
- Two projects funded through awards
- Eight Primary Care Networks taking part in projects to determine benefits to new primary care structure
- 50+ further sites engaged in projects to understand level of digital readiness in primary care across Wessex
- Three evaluation reports completed for projects within the programme; establishing real world evidence to support further spread and adoption of digital technology.

"Wessex AHSN has been great to work with right from the start. The team initially provided valuable feedback about our QuiqCare compliance application and were able to advise on key marketing messages, they even helped us design our marketing materials. They suggested steps we should take including getting approved on the Government G-Cloud portal which has increased our profile across the public sector.

Working with the team, we identified several key areas for our innovation, in particular for general practice and PCNs. The AHSN was able to help us in recruiting 8 PCNs covering nearly 30 practices to participate in a 6-month evaluation program.

There has been incredible support and guidance from the AHSN throughout the process and in addition we have had other introductions from them which have led to opportunities in new areas."

Paul Kaye
Director
Quiq Solutions
The outcomes
Over 100 primary care sites engaged with the programme to deliver or support understanding of digital innovation with primary care.

Tier 1 Trials:
Five innovative products have been market tested in primary care settings, with positive outcomes for clinical validation trials.

Tier 2 Trials:
Four innovations undergoing clinical validation in primary care settings with real-world evaluations wrapped around them for 20-21 dissemination.

Tier 3 Trials:
One innovative technology product is undergoing a CCG-wide clinical efficacy trial to determine equality or better than the alternative.

Tier 4 Trials:
One product is embedded in a multi-faceted primary care project to support adoption and spread.

Next steps
Showcasing national and international innovations for primary care in Wessex, (e.g. the teledermatology platform on the Isle of Wight) through conferences, workshops and regional system events, to identify innovations that the programme can support, and to increase registration of test beds across primary care settings.
ESCAPE-pain: Group exercise and education programme for self management of arthritic pain

Number of sites delivering the programme in Wessex:
25 sites (March 2020) increased from eight sites (March 2019).

Number of participants completing 75% or more of the programme:
486 (April 2019 – March 2020) in addition to the 137 completing between April 2018 and March 2019. This is a total of 623 participants.

Wessex’s target is 872 completers of the course. Prior to Covid-19, target was predicted to be achieved by end Q2 2020-21. We now hope to meet this by end 2020-21.

Covid-19 adaptations:
Without face-to-face groups during the Covid-19 crisis, low numbers seen in Q1/Q2 for 2020/21. Physio sites at Salisbury NHS FT and Dorset County Hospital NHS FT ran virtual groups using Attend Anywhere platform, for three participants per cohort. Leisure centres unable to operate. It is hoped that numbers will start to increase again in Q3/Q4 as leisure centres open and physio departments resume face-to-face activity.

Meanwhile, the ESCAPE-pain digital support tools have enabled participants and facilitators to replicate the six week face-to-face programme online (via website and app), to encourage positive changes during the pandemic.

Other outcomes:
A further 39 new ESCAPE-pain facilitators were trained in 2019-20, bringing the total of trained facilitators to 65 across Wessex between 2018 and 2020.
Innovation Adoption Reviews

We completed five innovation adoption reviews at Hampshire, Dorset County, Southampton, and Bournemouth and Poole Hospital NHS Foundation Trusts.

These reviews aim to help the trusts understand their current practice and experience of adopting innovation, what they do well, and how they might improve.

They are based on semi-structured interviews, and core questions include: “How do you identify innovation?”, “How do you decide whether to adopt?”, and “How do you subsequently implement and sustain an innovation?”.

Throughout the five reviews to date, the AHSN’s team interviewed 100 people, with 21 case studies developed.

A summary of the reviews will be published later in 2020 in a special report. The below diagram is taken from this report, and outlines the stages reviewed in the process.
Innovation Adoption Reviews

• We have supported five successful AAC Rapid Uptake Product Pathway Transformation Fund applications, equating to £91k of funding to our local hospitals.

• Three of seven eligible trusts have adopted Placental Growth Factor (PLGF) testing across the region. This testing supports clinical teams with the management and care of expectant mothers with suspected pre-eclampsia.

• SpaceOAR Hydrogel was adopted in University Hospital Southampton NHS FT to help reduce the side effects of prostate radiotherapy. This work was featured on BBC South Today.

• We accelerated the spread of mush - a free online app which seeks to support new mothers and their mental health – in Wessex. In 2019, 8,000 new friendships were formed across Wessex through the app. That’s around 160 new mums talking to each other every week in the region.

• The AHSN has supported two further hospitals to adopt Heartflow in Wessex (meaning four of five eligible hospitals in Wessex have now adopted). This 3D modelling software simulates coronary blood flow to rapidly diagnose heart disease.

• Two (of three) neurological services across Wessex have adopted GammaCore to support treatment of cluster headaches. This non-invasive method stimulates the vagus nerve and is particularly appropriate for cases previously resistant to standard treatment options.
Innovation Adoption Reviews

Peter Chapman
Clinical director radiology and consultant radiologist
Hampshire Hospitals NHS Foundation Trust

"The support and guidance from Wessex AHSN in introducing and effectively implementing Heartflow to our Trust has been invaluable.

The direct support from the AHSN has given me the tools and support I needed to host a multi-disciplinary pathway transformation meeting and to set up a new cardiac CT reporting hub. This support has definitely supported our project to implement innovative new technology for the benefit of our patients."

Dr Cindy Shawley
Postnatal Lead for SHIP LMS (Better Births Midwife), Quality Improvement Lead for Maternity
Hampshire Hospitals Foundation Trust

"I was fortunate enough to be introduced to mush by Suzi Van Es as an NHS England Innovation project. This social app for women has supported so many new mums particularly with mental health and isolation and has improved communication between mums with similar interests or situations. The fact that mums have control of this app is fantastic, there is no pressure on them and meeting up can be arranged to suit the women and families. Southampton had already introduced mush to their women and midwives and by the end of 2019 I had introduced mush into Hampshire Hospitals, Portsmouth Hospitals and the Isle of Wight. As a SHIP LMS (Southampton, Hampshire, Isle of Wight and Portsmouth Local Maternity System), we are now all using mush and have had so much positive feedback from our women and midwives. What an amazing idea and innovation! Thank you.

I also wanted to include how supportive and key Saskia was in setting this up with providing the mush packs and information for staff and cards and stickers for women’s notes. Having the data about mush use in each area will also help us to see how much the app is being used to support women."
Mental health programme

- We have engaged with over 20 mental health innovators, including: Argenti, Big White Wall, Blue Ice, Healiost, S12 Solutions, Think Ninja, Monsenso, SilverCloud, Xenzone, ProReal, Thalamos, Otsuka Health Solutions (OHS), People Matters and QUOL.

- Provided over 500 hours of support to facilitate the spread and adoption of mental health innovation across Wessex.

- Advised on four national innovation panels reviewing proposals for research, AHSN national programmes and grant applications.

- Established and chaired the national AHSN Mental Health Network, with engagement from all 15 AHSNs; promoting a networked approach to spread and adoption of innovation in mental health.

- Supported the implementation of S12 Solutions (an app supporting the setup of Mental Health Act Assessments across Hampshire and Southampton) utilising QI methodologies.

- Mentored a Health Education England digital fellow and a consultant practitioner undertaking a PhD.

Evaluation of the S12 Solutions Platform in Hampshire and Southampton

- We have led on the design and implementation of an independent evaluation of S12 Solutions with the aim of supporting national commissioning decisions.

- S12 Solutions is a mobile application and website created to make Mental Health Act (MHA) assessment set-up and claim form processes quicker, simpler and more secure. The platform connects Approved Mental Health Professionals (AMHPs) with section 12 approved doctors.

- The S12 Solutions platform officially 'went live' in Southampton and Hampshire on 1 October 2019. The evaluation report is due to be published in August 2020.
Mental health programme

Advancing applied analytics across Hampshire and Isle of Wight
We have supported Hampshire and Isle of Wight Sustainability and Transformation Partnership (STP) to develop analytic capability in simulation modelling in order to review out-of-area mental health placements (OAP). This work was funded with £73k from the Health Foundation’s Advancing Applied Analytics programme.

Seven local analysts specialising in mental health data received SIMUL8 software licences and specialist training from the University of Southampton’s Business School and the Centre for Implementation Science. This project led to the set-up of a mental health analysts working group.

Covid-19 Response
We have organised and chaired regular national AHSN mental health network meetings to rapidly share learning and solutions to support the mental health response to Covid-19.

We participated in national Covid-19 Horizon Scanning for mental health, in response to NHSX requests to understand digital innovations that help mental health services manage current caseloads/referrals remotely.

"Hampshire and the Isle of Wight Mental Health programme has been privileged to have the skills and expertise of the Academic Health Science Network within areas of our mental health transformation programme. We have established excellent partnership working, have been able to enhance our work streams through innovation and been able to bring organisations together to evaluate and to deliver high quality patient care in our region."

Sonya McLean
Senior commissioning manager for mental health crisis care
Hampshire and the Isle of Wight Partnership of Clinical Commissioning Groups
Detecting and treating Atrial Fibrillation (AF)

**The challenge**
To reduce the risk of stroke in people with Atrial Fibrillation (AF) – an irregular and rapid heartbeat - and as a result, improve patient care and save costs associated with stroke, including financial, physical, emotional and mental health.

The improved detection and effective management of AF leads to better prevention and treatment with anticoagulation, a reduction in the rate of strokes in patients diagnosed with AF, improved health outcomes for patients and reduced burden on the health and care system.

The AF register in Wessex comprises **71,573 people**. The expected AF register is **81,925**, and we have been set a detection target of **85%** by NHS England and Improvement.

**The support**

**Detection:** **4,447 new cases** of AF were detected in Wessex during 2018-19 achieving **445%** of our target of 1,000 people. Combining that data with 2019-20, we have detected **7,734 new cases** of AF over the last two years. Our detection rate shows that we have detected **87.4%** of people on the expected AF register, exceeding our target.

**Anticoagulation:** of the **60,927 people** eligible for anticoagulation in Wessex, **51,545** are receiving it. This is **84.6%** of the eligible population and exceeds our NHS England target of **84%**.
Detecting and treating Atrial Fibrillation (AF)

The learning
The stroke rate for patients known to have AF has reduced steadily over the past four years (2014 – 19), from 191 to 137 per 10,000 patients with AF, in spite of an increase in the numbers of patients with AF. That’s a reduction of 54 strokes per 10,000 patients in four years.

Next steps
The range across our CCGs is 80.4% to 88%, with five CCGs at or exceeding the target. This programme finished in March 2020.

Table:
The percentage of patients treated and number of patients not treated with anticoagulation drug therapy with CHA2DS1-VASc≥2*(1)

85% (RNG: 80%-88%, SD: 2.27%) of people at risk of stroke were treated across Wessex.