

Integrated care Opportunity for innovations

Context

The West Midlands Academic Health Science Network (WMAHSN) has a defined process for addressing the region's health delivery needs and challenges through asking for outcome-focused innovation proposals that can be received and agreed with our partners throughout the year. This document provides you with an overview of the areas in which we are interested in seeking to pull innovation proposals.

WMAHSN criteria

Proposals will be shortlisted against the following criteria:

- Regional scalability
- Fit with WMAHSN priorities and business plan
- Clear deliverables, outcomes measures and quality indicators
- Evidence of support across the region
- Patient/carer involvement
- Consistency with other WMAHSN themes
- Fit with the NHS Outcomes Framework
- Evidence of additional investment.

Priority - Integrated care

For the NHS, the lack of Integrated Care (IC) working can result in communication gaps between clinicians in different settings, recurrent primary care consultations, excessive poly-pharmacy, medication clashes for various co-morbidities, unexpected, preventable and often recurrent hospital admissions and over-long hospital stays, resulting in an avoidable burden on health systems and increased costs and unduly high morbidity and mortality rates.

Improved integration of health services provided by different organisations (including local authorities and the third sector) is a key priority for health and social care providers and commissioners. The WMAHSN has recognised the importance of IC by establishing an enabling theme. Due to the close alignment between IC and long term conditions (LTCs), the WMAHSN has established a joint IC/LTC Advisory Group, which is chaired by Rhian Hughes of Keele University.

To date, the WMAHSN has supported the spread of two large, evidence-based IC innovative approaches across the West Midlands region:

- Flo mobile phone texting telehealth: provides a technology-based example of patient-centric supported shared management for asthma, COPD, hypertension and diabetes. This programme is being disseminated across primary, acute, community nursing, mental health and social care settings.
- STarTBack provides an example of stratified care for back pain (the biggest cause of disability worldwide), which delivers integration of care between GPs and physiotherapists along the primary and secondary care pathway, ensures back pain patients are assessed

according to risk and then targeted to receive the right treatment, at the right time, in the right place.

For future programmes of work, the WMAHSN is particularly interested in the following priorities to support the development of integrated care across the region:

Integrated care

- Increasing the integration of services across different health and social care sectors/settings, whether between primary and secondary care and/or mental health or social care and/or voluntary sector, with evidence to support further implementation of approaches that capture how to overcome the challenges effectively.
- Programmes for this priority will work to spread evidence-based approaches across sectors, to improve the effectiveness and quality of delivery of patient care and maximise service efficiency. Potentially, programmes could link in to the cultural and staff development priority below. Programmes will support the collection of evidence to support the further rollout of similar or revised programmes.

Cultural and staff development

- Organisational culture and leadership has a significant impact on the successful rollout of integrated care initiatives. Team working within and across organisations is also of critical importance.
- This priority is looking for programmes of work related to workforce development and education, networking and other activities to address cultural development, leadership and team working. Due to the close working relationship between the WMAHSN and Health Education West Midlands, programmes could potentially be undertaken in partnership between the organisations.

Digital and telehealth/care

- Digital and telehealth/care technologies support delivery of care and services from
 perspectives of patients, carers and staff, enhance integration between organisations,
 support integrated care records and can be used to develop the evidence support the
 evaluation of integrated care approaches.
- This priority is looking for digital tools and approaches to support the accelerated integration of services and health records, improve the quality of patient care and carer and staff support, ensure patient safety and effectiveness of delivery of care and enhance the evaluation of programmes of work. Consideration should be given to the practical application of solutions and their integration into existing healthcare systems within the timeframe of programmes, and rollout across the region.

Process

1	Submission sent to the relevant WMAHSN Head of Programmes
2	•Review and shortlist by Theme Director/Clinical Lead in consultation with the Advisory Group
3	Review by other Theme Directors/Clinical Leads and Spoke Chairs
4	•WMAHSN Calls Panel consisting of Managing Director, Commercial Director, Theme Director/Clinical Lead, Spoke Chair and Head of Programmes
5	•WMAHSN Board for approval, which meets every other month

For any queries on the process please contact the relevant contact for assistance. A template for any submissions can be obtained from our website at www.wmahsn.org/get-involved/Opportunities or by emailing for a copy.

Theme	Contact	Email	
Medicines optimisation and adherence	Lucy Chatwin	lucy.chatwin@wmahsn.org	
Patient experience and feedback			
Wealth creation			
Digital health	Neil Mortimer	neil.mortimer@wmahsn.org	
Mental health			
Open data			
Education and workforce for the future	Louise Stewart	louise.stewart@wmahsn.org	
Integrated care	Lucy Chatwin and Neil Mortimer	lucy.chatwin@wmahsn.org	
Long term conditions		neil.mortimer@wmahsn.org	
Evidence and adoption			
Wellness and healthy ageing			
Patient safety	Peter Jeffries	peter.jeffries@wmahsn.org	