

Long Term Plan Aims	LTP IF Page Reference	Oxford AHSN Programme Name (NB some are repeated)	Brief Description of Programme (one paragraph)	Further opportunities for AHSN to support members in local delivery
Transformed 'out-of-hospital care' and fully integrated community-based care	P. 7-9	Diastomeric Devices	Pumps used to administer medication such as IV antibiotics at home	Acute and community providers/CCGs/CCs
		TCAM	Transfer of Care Around Medicine- improve medicine compliance	Acute and community pharmacies/CCG Meds Opt Leads/LPCs
Reducing pressure on emergency hospital services	P. 9 and Annex C	Point of Care Test in urgent care pathways in primary care Healthy Ageing	Point of Care Test in urgent care pathways in primary care - evaluation complete, business case prepared	Brookside GP practice, Berkshire West CCGs, ICS, PCNs, GPs, Trusts, etc
		Point of Care Test into Children's A&E	Julie Hart, Oxford AHSN case study: Introducing point of care testing into Children's A&E improves quality of care, better diagnoses those children with severe infection and reduces unnecessary admissions. Net annual savings ~ £60k across BOB STP	RBH, potential for wider spread
		Improving pre-hospital diagnosis and informed discharge in frail and elderly patients over 75	Oxford AHSN case study: Improving pre-hospital diagnosis and informed discharge in frail and elderly patients over 75. Specialist paramedics used point of care testing to assist in clinical decision-making. Resulted in avoided ED attendances and safer discharge on scene with savings of ~£50k from one unit in SCAs.	SCAs, B West CCG Urgent Care Board. Opportunity for wider spread in region
		Point of Care flu test in A&E	Oxford AHSN case study: Diagnosing flu using point of care testing in the ED, significantly reduces flu-associated morbidity and mortality from secondary bacterial infections as well as reducing time to antiviral prescription. Median length of stay reduced by 3 days per patient and resulted in ~£220k cost savings for one trust in BOB ICS.	RBH, Bucks Healthcare, Bucks CCG. Opportunity to spread wider in region
		Emergency Department Collaborative	Sharing best practice between ED departments in the region	All region's ED Depts engaged
		Good Hydration!	Award winning care home residents hydration improvement programme	Adopted in Berks, Bucks, Bedford and MK. Oxon engaged. Some national spread
		Deterioration	Reduce avoidable harm for patients at risk in acute and community settings	System wide engagement
		Medicines safety improvement programme	As part of the overall Medicines Safety Improvement Programme (MSIP), the aim of this workstream is to reduce harm as a result of errors in the administration of medicines in care homes and improve the safety and experience of care.	Carehomes/CCGs/LAs/ICs/PCNs/GPs/LPCs
Giving people more control over their own health and more personalised care	P. 9	Emergency Laparotomy Collaborative	Reduce length of stay - free up bed capacity	All acute providers
		Diagnostic - point of care test for over 75s Urgent Care Model	Point of care test and specialist paramedics to improve pre-hospital diagnosis and informed discharge	SCAs, B West CCG Urgent Care Board potential for wider spread in region
Digitally-enabling primary care and outpatient care - Primary Care	P. 10	Brookside Practice (Berkshire West) report on Urgent Care Model published recently		
		Paddle	Relapse Prevention/Staying well for patients who have received a course of psychological therapy - A smartphone app is being developed to strengthen the support available to people during treatment for anxiety and depression and after they are discharged. The aim is to prevent relapse and reduce use of other primary care and community mental health services, especially in the first six months.	regional spread
		Sleepio	Real world evaluation of implementation of a digital health improvement programme. GPs in the region	Potential national spread supported by ITP perhaps
		ESCAPE Pain	Exercise classes to alleviate pain from osteoarthritis - alternative to pain killers	Leisure sector/County Sports Partnerships/CCGs
Digitally-enabling primary care and outpatient care - Outpatients	P. 10	Gestational Diabetes Monitoring IBD True Colours	Oxford AHSN case study: Introducing GDM Health smartphone app for monitoring gestational diabetes in 3rd trimester gives savings of ~£700k across BOB ICS	Implemented in acutes in Thames Valley, potential national spread
		See above		Early stage: potential spread to gastro units
Better care for major health conditions: Improving cancer outcomes	P. 10-11	PINCER	Reduce contra-indicative prescribing in GP practices	All Thames Valley CCGs and most GP practices; MK not participating
		See Mental Health		All Thames Valley citizens invited to join evaluation; potential for ITP
Better care for major health conditions: Improving cancer outcomes	P. 10-11	Al in primary care to detect cancer	Julie Hart, Oxford AHSN case study: Introducing GDM Health smartphone app for monitoring gestational diabetes in 3rd trimester gives savings of ~£700k across BOB ICS	Implemented in acutes in Thames Valley, potential national spread
		Endocuff	See above	Early stage
Mental Health	P. 11-13	Faecal Immunochemical test (FIT)	Oxford AHSN feasibility study: deployment of artificial intelligence in primary care to identify patients at high risk of undetected cancer (5 types) with access to a re-designed pathway, channelling and filtering cancer referrals through a Rapid Diagnostics Centre and high risk consultations clinic	Early stage
		Sleepio	Real world evaluation of implementation of a digital health improvement programme. GPs in the region	ITP/AAC/RUP - acutes ITP/AAC/RUP - not confirmed by NHS E yet
Specialised MH services with Learning Disability & Autism services	P. 17-18	Anxiety & Depression recovery	Increase number of patients recovering - including increase in participation of older people/people with long term conditions	All Thames Valley citizens invited to join evaluation; potential for ITP
Maternity outreach clinics	P. 17	SIM or SIM equivalent	Reduce number of vulnerable people with long standing mental illness being arrested or sectioned	Thames Valley wide network Three acute/community mental health providers and Thames Valley Police
Better care for major health conditions: Shorter waits for planned care	P. 13			
Increasing the focus on population health - moving to Integrated Care Systems everywhere	P. 14	Faecal calprotectin	Better diagnosis of IBD/BS and ensure patient gets appropriate treatment quickly	Bucks CCG and 54 GP practices, B East, B West CCGs and Oxon CCG
Prevention - Obesity, Alcohol, Air Pollution, Antimicrobial resistance	P. 15	Incentivising better outcomes for diabetes care	Testing the value proposition and potential for payment by outcomes for a new integrated approach to personalised diabetes management using a range of digital and diagnostic tools	Potential regional spread
		FebriDx point of care test to differentiate viral and bacterial infections	Deployment of disruptive diagnostic technology (FebriDx) at point of care to optimise clinical service delivery and antibiotic prescription. Helps differentiate between bacterial and viral infection and triage infectious patients at point of care.	Six sites initially for service evaluation
Reducing health inequalities	Green paper	SIM or SIM equivalent	See Mental Health	Regional spread
A strong start in life for children and young people - Maternity & Neonatal	P. 16	MatNeo Collaborative	We are key partners in the BOB ICS LMS, and are included in the Safety workstream. PRaCePT and region-wide guideline work (across the BOB system) are examples of our system level work (Martin has case studies) We are continuing Place of Birth of preterms work, and lead on the MatNeo Collaborative, including Local Learning System meetings, which are linked in with the BOB LMS	All local providers of maternity care, TV SCN, TV&W Neonatal ODN
		DiGrip	Stillbirth prevention	All local maternity units; potential national spread
A strong start in life for children and young people - Children & Young People	P. 16-17	PIGF - better detection of pre-eclampsia - avoid unnecessary admission	Oxford AHSN case study: introducing PIGF-based testing for diagnosis of suspected pre-eclampsia improves antenatal care, patient management and delivers cost savings of ~£350k across BOB STP	ITP/AAC/RUP
Learning disabilities and autism	P. 17-18	PRaCePT	Reduce incidence of cerebral palsy through improved uptake of MgSO4	All maternity units in Thames Valley. Sustaining 90% compliance
Better care for major health conditions - Cardiovascular	P. 18-19	Heart Failure	Improve prevention of heart failure. There will be at least one AHSN Network national programme in cardiovascular for 2020/23	Currently in Bucks CCG
Better care for major health conditions - Stroke care	P. 18-19	Heartflow	Diagnostic test for 40,000 people presenting with new onset chest pain suggestive of stable angina	ITP/AAC/RUP
Better care for major health conditions - Diabetes	P. 20	AF Detect, Protect and Perfect. Local AF Champions	AF Detect, Protect and Perfect - GP practices in the region. Reduce incidence of stroke	Regional spread - impact on 6,000 patients
		Diagnostic - stroke mimics	Point of care test to better detect stroke mimics	CUH, RBH and Bucks Healthcare
Better care for major health conditions - Diabetes	P. 20	Mobile ECG devices	AF detection	ITP/AAC/RUP
Better care for major health conditions - Diabetes	P. 20	Incentivising better outcomes for diabetes care	Oxford AHSN feasibility study: testing the value proposition and potential for payment by outcomes for a new integrated approach to personalised diabetes management using a range of digital and diagnostic tools	Potential regional spread
Better care for major health conditions - Respiratory disease	P. 20	Turbu - digital optimisation of asthma management	Oxford AHSN feasibility study: Supporting improvements in patient outcomes by optimising medicine adherence in asthma patients through the introduction of Turbu, a digital intervention, impact on reducing long term healthcare costs associated with a high number of oral corticosteroids (OCS)	Early stage
Research and Innovation - improving outcomes	P. 21	COPD Care Bundle	COPD Care Bundle - part of adopt and spread in PSC portfolio	Fairly widespread in region already
		MyCOPD	Online self management tool	ITP/AAC/RUP
Genomics	P. 22	AHSN/ARC collaboration	Close working with the ARC/AHSN to move research into delivery will be consolidated by shared Implementation Manager's role. Innovation/transformation ideas around topics such as workforce, frailty, self management, CVD will be explored.	Speed up evaluation and evidence base
Volunteering	P. 22	Evidence based programmes	Examples - Heart Failure project Bucks, Frailty projects - Fall Safe, AF, ELC, PINCER, ITP products, eg Plu Sutures, SecurAcath, Urolift, Gammacore, SpaceOAR, Troponin, DrDoctor, Penuex, FMT, Cladribine, PCSK9I	System wide engagement
Wider social impact	P. 22	Genomics	AHSN PPIEE theme includes building capability and capacity for lay people to get involved in healthcare improvement and innovation programmes	Leading Together programme
Giving NHS staff the backing they need	P. 23-24	Innovation Course - partnered with HEE and Bucks New Uni	The Adopting Innovation and Managing Change in Healthcare Settings course is for frontline health and social care employees to enable them to manage improvement or innovation uptake programmes	Open to all NHS and social care staff in the Thames Valley. Link to new Training Hubs for sustainability learning tool - available for national use
Delivering digitally-enabled care	P. 25-27	Auscultation training	training for midwives, supported by HEE	
Digital Strategy and Investment Plan	Annex A - Technology	See Sleepio, PADDLE, GDM for examples	We are key partners in the BOB ICS LMS, and are included in the Safety workstream. PRaCePT and region-wide guideline work (across the BOB system) are examples of our system level work (Martin has case studies) We are continuing Place of Birth of preterms work, and lead on the MatNeo Collaborative, including Local Learning System meetings, which are linked in with the BOB LMS	
Financial planning and assumptions for systems	P. 28-29	LHCRE support with PPIEE	PPIEE theme supporting Thames Valley and Surrey health and social care records programme	LHCRE
Improving productivity	P. 29-30	Various on this sheet	Savings achievable from Point of Care diagnostics and improving patient safety	System wide engagement
Reducing variation across the health system	P. 30	Various on this sheet		