# AAC Board Programme Report

## Wednesday 23rd March 2022

# AAC Programmes Overview

AAC Programmes are progressing well, and reporting has been updated to reflect the focus on the five priority areas, plus cross-cutting work, agreed at the last AAC Board

**ACCELERATED ACCESS COLLABORATIVE**

**RAG Key:**
- 🟢 On track to deliver
- 🟡 Challenges to deliver, confident of mitigation actions
- 🔴 Significant risk to delivery and limited confidence in mitigations

| Priority area | Delivery (RAG) | | Key updates |
|---|---|---|---|
| | Last period | This period | |
| **1. Providing a clearer articulation of NHS needs (demand signalling) and matching this to a systematic search for solutions (horizon scanning)** so that the NHS can plan and prepare for the next generation of innovations and stimulate innovation in the highest-priority areas. | 🟢 | 🟡 | • **Demand Signalling and Horizon Scanning:** The Stroke, Learning Disability & Autism, and Mental Health programmes have completed demand signals, which are now being shared with the NHS and industry to support pathway reviews.<br>• Decision to increase resource and focus for these processes, developing closer links with national clinical programmes in policy development and local systems for understanding need to support product development and increase transformational deals with Commercial Medicines Directorate. |
| **2. Increasing the diversity, scale, and speed of research,** so that the NHS can have clinical evidence that better reflects our population and makes it easier to adopt innovations that will improve outcomes and address health inequalities. | 🟢 | 🟡 | • **Embedding Research in the NHS:** A six-month update for the RRG Programme was published in December, implementation plan for the second phase of the programme will be in June. IRLS team are supporting the NHS workforce to participate in research including a publication with the nursing directorate.<br>• **Increasing Scale and Pace:** Continued work on research prioritisation including publication of Excess Treatment Cost guidance. The next phase of NCVR to be launch in April 2022. Rapid review of the existing resources and materials available aimed at increasing the diversity of people taking part in research. |
| **3. Ensuring we have programmes to support the uptake of NICE-approved, proven innovation in the NHS.** This supports work to improve the innovation pathway from ideation to adoption across medicines, diagnostics, medical devices, and digital products. | 🟡 | 🟡 | • **Pathway mapping:** 1) MedTech pathway has been mapped from ideation to adoption and spread, a paper to the Board provides an overview of the steps innovators should go through and highlight opportunities for improvement. 2) Medicines pathway mapping initiated following the approach taken to map the MedTech pathway.<br>• **MedTech Funding Mandate:** Signalling Document published detailing criteria for inclusion in the MTFM for 2022/23. The seven technologies to be supported from April 2022 by the next round of the MTFM to be announced imminently.<br>• **AI Health and Care Award:** Round 3 winners have been ratified and will be announced in May. A review study of Public Perceptions of AI in Healthcare has been finalised, due to be published Feb 2022.<br>• **Rapid Uptake Products:** Significant work has been undertaken to pivot the RUPs to focus on the clinical areas of CORE20plus5, taking a pathway vs individual product approach.<br>• **Support for NICE approved Lipid Therapies:** Uptake of Inclisiran is slower than expected, NHSE are supporting local systems with guidance and implementation tools. |
| **4. Supporting the NHS workforce to champion innovation on the front line,** so that they are better able to both develop and rapidly evaluate solutions (such as remote home monitoring) and to drive local implementation of new innovations | 🟢 | 🟢 | • **NHS CEP:** The sixth cohort of entrepreneurs has been launched including entrepreneurs from NI and Scotland.<br>• **NIA:** Following a rigorous selection process, the new cohort of NIA Fellows are due to be announced at the end of the month.<br>• **AHSNs:** National tour of AHSNs recommenced as we move towards re-licensing AHSNs with a renewed focus on Health Inequalities, linking more proactively into ICSs and research infrastructure to increase impact.<br>• **SBRI Healthcare Awards:** Announcement of £18.8 million to support innovations in urgent and emergency care, cancer, stroke and net zero. |
| **5. Continuing our collaborative approach to transforming patient care with our AAC partners through transparent and at-scale commercial deals** that link to our demand signalling and horizon scanning, and supporting innovators to navigate the NHS, through the launch of the NHS Innovation Service and working locally with AHSNs. | 🟡 | 🟡 | • **Innovation Service:** Site remains in private beta, ahead of Support Organisation Agreements being signed. Innovators and support organisations continue to be invited to test the service and provide feedback. HealthTechConnect will be closed to new innovations when the IS moves to public beta, targeted for the end of March.<br>• **Population Health Deals;** 1) Learning from Inclisiran is being embedded into new triage process. 2) GRAIL Galleri, continued recruitment into the real-world study with over 50,000 people receiving a test to date.<br>• **Increasing capability to agree at-scale commercial deals:** Director for Complex Contracts and establishment of Triage Board. |
| **Cross-cutting policy areas;** Health Inequalities, Patient and Public Involvement and Net zero | N/A | N/A | • **Addressing Health Inequalities:** A proposal to adapt, expand or refocus a number of the programmes so that they better align with the strategic approach to addressing HI articulated through the NHS Core20PLUS5 is set out in a paper to the Board.<br>• **Embedding PPI:** PPI Strategy due to be launched next quarter.<br>• **Moving toward Net Zero:** Recruitment of lead, establishing approach. |