Accelerated
Access
Collaborative

AAC Priorities
Chief Executive's Report
November 2023

NICE National Institute for Health and Care Excellence

National Voices

Academy of Medical Royal Colleges

ABHI HealthTech for Life

UK Research and Innovation

NHS

Medicines & Healthcare products Regulatory Agency

amrc
ASSOCIATION OF MEDICAL RESEARCH CHARITIES

The AHSN Network

BIVDA

HM Government

BIA
UK BioIndustry Association

NIHR | National Institute for Health and Care Research

abpi
Bringing medicines to life

Accelerated Access Collaborative

Our five priorities

Research

Increase the speed, scale and diversity of research in the NHS.

Demand signalling and horizon scanning

Clearly identifying and articulating NHS needs and systematically searching for solutions.

Uptake of proven innovation

Supporting the uptake of medicines, medical devices, diagnostics and digital products.

Building innovation capacity

Supporting NHS organisations and workforce to develop, test and implement innovative solutions.

Innovator support

Making it easier to navigate the innovation ecosystem and deliver transformational commercial deals at scale.

Cross cutting themes - Health inequalities | Patient public participation | Life Sciences Vision | Net zero | NHS England Clinical Priorities

AAC Priorities: Highlights

Chief Executive's highlights:

- **Research**: The Research Engagement Network Development (REND) programme secured £2M (provisionally recurrent) matched funding from DHSC (SRE), to enable a greater number of Integrated Care Systems (ICSs) to increase their diverse engagement around research. Research was also included in NHS England's Long-Term Workforce Plan.
- **Research:** Latest figures for NCVR suggest that time to set up trials has been reduced by 37% compared with baseline; delivering against a recommendation of the O'Shaughnessy Report. More than 310,000 people have now volunteered to Be Part of Research, with 266,627 of those coming from the NHS App.
- **Demand Signalling and Horizon Scanning:** Research Priority Setting being undertaken with the James Lind Alliance, with significant demand from across the innovation ecosystem and NHS England clinical teams. The team is also leading horizon scans in support of the Alzheimer's Disease Modifying Drug (DMD) programme of work, with a particular focus on products to deliver earlier diagnosis.
- **Uptake of Proven Innovation:** The Rapid Uptake Products (RUPs) programme's work on FeNO (Fractional Exhaled Nitric Oxide) device adoption was nominated for an Innovation Award.
- **Building Innovation Capacity:** Clinical Entrepreneur Programme (CEP) cohort 8, applications closed on 29 October. A significant social media campaign ran during the application period to increase reach. resulting in over 300 applications for the first time. A Patient Entrepreneur Programme (PEP) will also be piloted. Applications also closed for the expansion of CEP InSites (from Trusts), with over 50 applications received.
- **Innovator Support:** The NHS Innovation Service passed the Government Digital Service (GDS) 'live' assessment, meeting all 14 service standards. The beta banner will be removed from the service and launch event is being planned. There are now over 1,000 innovators registered and over 380 innovations have passed through Needs Assessment and are receiving active support.

The Impact of the AAC's work though the HINs

1 Innovation Pipeline

Develop a rich pipeline of demonstrably useful, evidence-based innovations. Matching innovations to NHS Challenges.

- **1,360** Innovators have received advice and bespoke support
- **247** Innovations are ready for adoption and spread
- **1,590** Innovations are active within the Pipeline
- **262** Real World evaluations are actively being undertaken, 23 are new to Q1
- **424** Innovations are aligned to Core20Plus5
- **113** Innovations in the pipeline are aligned to the Network's 2023/24 CVD Clinical Priority

2 Adoption & Spread

Support adoption & spread of proven evidence-based innovations across England to serve ICS needs. Supporting roll out, real-world evaluation, national roll out and local to national adoption.

- **18** Innovations are being scaled nationally as networkwide programmes
- **36** Medical technologies being scaled through 38 ICS InHIP projects to underserved populations.
- **132** Innovations are being spread through cross collaboration
- **4** MTFMs are being supported for scale nationally
- **74** Locally supported Innovations are being spread through cross collaboration

Of these programmes we are supporting innovation adoption in

- **13,759** Eligible sites

Health Innovation Network

The Health Innovation Network: CVD priority and innovation pipeline

In 2023/24, The Health Innovation Network set CVD as a key priority to discover, develop & deploy innovations across the CVD clinical pathway to make a high impact change to population health:

1,590

Active innovations documented in the Health Innovation Network Discover, Develop, Deploy Pipeline

180
CVD innovations identified

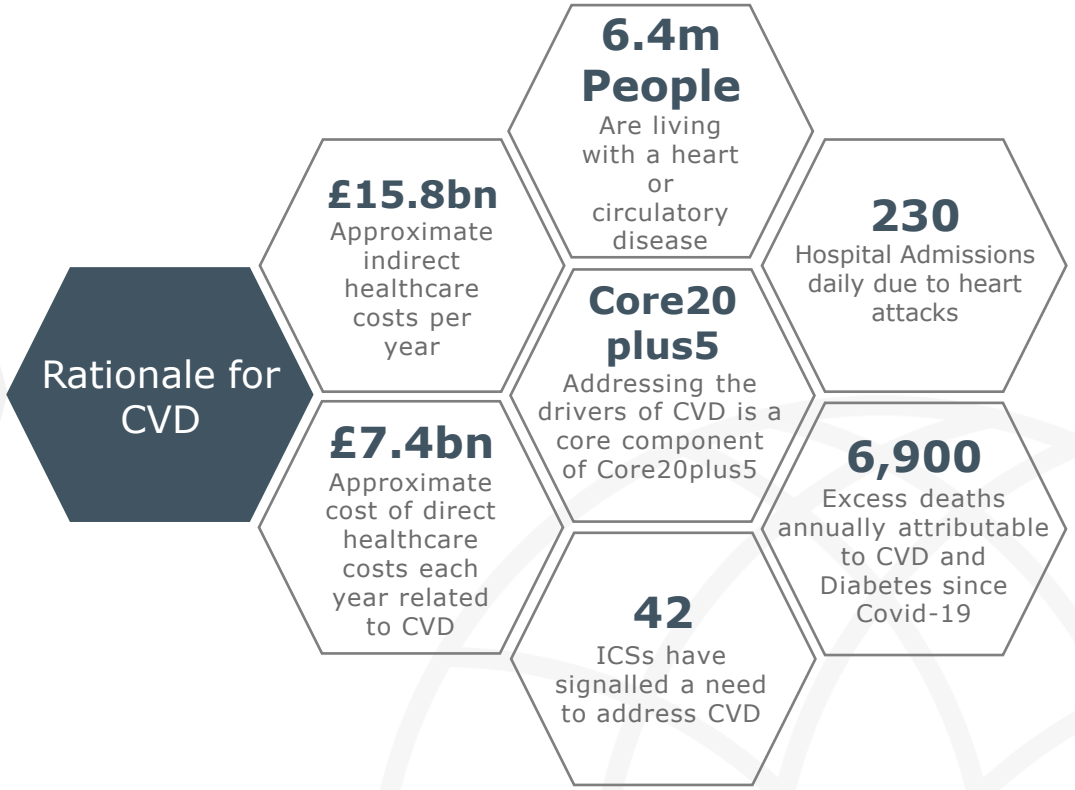
CVD innovations identified.
174 from the active innovation pipeline and 6 from up-and-coming innovations from NIHR, market horizon scans

18
CVD innovations matching ICS needs

Innovations selected to support a networkwide CVD portfolio programme through due diligence, policy driver reviews and matching CVD innovations with ICS and local business plan needs.

The CVD Prevention Portfolio Programme focusses on Innovations across the following clinical pathways:

- CVD Prevention (risk factor management)
- Obesity
- Chronic Kidney Disease
- Heart Failure



Over three years optimally treating adults diagnosed with hypertension could avoid:

- Prevent 14,500 strokes
- Prevent 9,710 heart attacks

Health Innovation Network

The Health Innovation Network: CVD portfolio programme

Using a portfolio approach, The Health Innovation Network will deliver a three year networkwide CVD programme by selecting and supporting innovations matching ICS signalled needs. These innovations will be used as part of the CVD portfolio programme to scale, evaluate and spread proven CVD innovations to improve patient outcomes whilst improving the uptake of existing approved interventions through pathway transformation and redesign.

Six innovations are existing NICE approved pharmacological interventions, where enhanced uptake through clinical pathway redesign will improve patient outcomes:

NICE Approved Pharmacological Interventions

- AstraZeneca (Dapagliflozin)
- AstraZeneca (OPERA intervention)
- Bayer (Finerenone)
- Boehringer Ingelheim (Empagliflozin)
- Novartis (Sacubitril/valsartan)
- Vifor (Patiromer, Sodium Zirconium Cyclosilicate)

Twelve novel technologies selected as part of the CVD portfolio programme are at the "roll out" stage where further evidence is gathered to demonstrate real-world benefits.

MedTech/Digital CVD Solutions

- Healthy.io, Minuteful Kidney [NIA & AAC Alumni]
- Luscii, Luscii HF app
- Eclipse, Eclipse AI-based risk stratification & optimisation of management
- LENUS, LENUS Health Heart Failure Pathway
- UCLPartners, CVDAction data mining & risk stratification
- Health Innovation Kent Surrey & Sussex, EQ+ Dashboard

Diagnostic CVD Solutions

- Lenus, Point of care NT pro BNP
- US2a.i, point of care ultrasound
- Abbott Afinion, Point of Care Cholesterol Testing

NIHR/ARC Funded CVD Solutions

- University of Exeter, REACH-HF - Home based cardiac rehabilitation

BHF Funded CVD Solutions

- University of Exeter, Digital REACH-HF – Digital Heart Failure Manual

Patient Advisory CVD Solutions

- Pumping Marvellous, BEAT HF

Health Innovation Network

The Health Innovation Network: CVD portfolio policy alignment

Across the Health Innovation Network we will be evaluating twelve novel innovations for CVD, across multiple sites in the real world, to test their impact against the aims and objectives of the Long term plan (2019) and Major Conditions Strategy(2023)

Our novel innovations include:

40% patients have symptoms that should trigger primary care assessments

- Currently 80% of acute admissions could have been prevented through primary care management. BEAT HF aims to raise awareness of signs/symptoms in Patient and Healthcare professionals to allow a timely diagnosis in a primary care setting

Expand Capacity & Capability in the workforce

- LENUS Health HF Diagnostic pathway streamlines the referrals to secondary care for Echocardiogram testing, potentially freeing up workforce capacity by reducing inappropriate referrals

Testing for Familial Hypercholesterolaemia (FH) to achieve a diagnosed Population Prevalence of 25%

- With the current prevalence at 9%, Afinion POC Cholesterol Test is a genetic test for earlier diagnosis of FH. As part of a Child Parent Screening pilot programme it aims to help reduce the gap in undiagnosed population prevalence

Earlier diagnosis and detection of Chronic Kidney Disease (CKD) in Primary Care

- Healthy.io Minuteful Kidney is a homebased smartphone urinalysis kit to diagnose CKD. Early evaluation suggests that early detection can save the NHS over £1,262 per patient
- Over five years, the predicted outcomes of Healthy.Io could save 11,000 cases of end-stage renal disease and produce net cost savings for the NHS of £660m

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Portfolio Delivery Overview

Delivery against AAC priorities has continued, alongside scoping the next set of programmes and actions

	Research		Demand signalling & horizon scanning		Uptake of proven innovation		Building innovation capacity		Innovator support		Cross cutting	
Rating	Last Period	This Period	Last Period	This Period	Last Period	This Period	Last Period	This Period	Last Period	This Period	Last Period	This Period
Key updates	• The National Contract Value Review has reduced study set up time by over a third • Research Engagement Network (REN) £7.2M programme has around 50 active programmes at ICS level, awarded across 3 competitions • More than 341k registered to Be Part of Research, mainly through NHS App • The response to the Lord O'Shaughnessy review to be published in November. NHSE is contributing to the draft, including a separate brief on the announcement • The Research Reset achieved its aim of 80% of all open studies delivering on time by the end of June 2023. 83% delivering on time and to target.		• The NIHR Health and Social Care Delivery Research (HSDR) Programme launched two calls for research in early June, addressing areas highlighted in the Mental Health and Learning disabilities and Autism demand signalling exercises within the programme's remit. • Two Diagnostics @ Home horizon scans reported: Spirometry at Home for COPD and Asthma. • Work also ongoing to support Alzheimer's Disease DMD programme, with targeted horizon scans.		• Innovation for Health Inequalities Programme (InHIP): 35/39 projects in delivery moved to quarterly review meetings, with four granted a 3-month extension with ongoing monthly review meetings. • External evaluator commissioned for national evaluation and ICS local evaluation plans submitted • Communities of practice and learning sessions ongoing with focus on transition and sustainability in November edition		• Health Innovation Network (HIN) Master Licence Agreement (MLA) gained final approval, allowing for a start date of 1 October for the new contracting period. • Innovation and Real-World Evidence: NHS Innovation Accelerator programme (NIA) – Health Inequalities (HI) competition launched 7 July in collaboration with NHS Race and Health Observatory (RHO) and NHSE HI team. New collaboration with Greener NHS to make sure NIA Fellows are "climate-ready".		• NHS Innovation Service passed 380 individual needs assessments completed (overall, not in year). • NHS Innovation Service successfully passed the GDS 'live' assessment, meeting all 14 service standards. The beta banner will be removed from the service and launch event is being planned. There are now over 1,000 innovators registered. • Onboarding of DTAC as a support unit paused following team re-prioritisation of resources.		• On-going support to Innovation and Research programme initiatives (including REN and Innovation Ecosystem review). • Launched the Patient Entrepreneur Programme • Developed a framework to support the use of Patient Experience and Insight to accelerate Adoption and Spread (PEIAS) of innovations.	
Next steps	• Establishing project plans for NHSE commitments in the response to the Lord O'Shaughnessy review • Pilot NCVR in ATMP/early phase studies beginning in Dec 2023 • Research Volunteer Registry: progress discovery blueprint work to support linking of charity registries with BPoR. • Draft Research Finance Guidance • Support for REN sites including running peer learning virtual workshops and face-to face event on 21 November 2023.		• Support the Alzheimer's Disease DMD programme with targeted horizon scans.		• Agree priority activities and ambitions for ongoing HINs involvement to be built into MLA in 24/25 • Programme Board and transition planning day in February to move leadership to HIN programme director • Leading role for our team in healthcare inequalities conference at Royal Society of Medicine in January • Article being published in Pharmacy Journal on programme approach and philosophy		• Assess applications for the Clinical Entrepreneurs Programme (CEP) cohort 8 and CEP InSites programme. • Onboard successful applications onto the CEP and CEP InSites programmes.		• A 'launch' event for the NHS Innovation Service is in development, with a showcase of innovators benefitting from the services support.		• Deliver Patient Entrepreneur Programme • Co-lead ICS REN programme delivery • Extend testing of the PEIAS framework to support update.	