

# Business plan 2025/26

 Transforming lives through  
health and care innovation



Health Innovation  
West of England



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# Introduction

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**T**his business plan describes our programme of work for 2025-26 to support the discovery, development and deployment of innovation with our member organisations, local integrated care systems and broader partners across the West of England health and social care landscape.

It also reflects our continued contribution to the national Health Innovation Network and NHS Accelerated Access Collaborative.

Building on our five-year strategy published in April 2024, which sets out our core priorities and ambitions, this plan details how we will deliver against these goals over the next 12 months.

Our strategy aims to ensure all communities in the West of England benefit faster from the best innovations in health and care, with a greater focus on prevention and early intervention and reducing health inequalities.

The strategy outlines eight key priorities steering our activity through to 2029, developed with a wide range of local partners.

Our work programmes in 2025-26 respond to these priorities and support the government's three strategic shifts for the NHS: hospital to community, analogue to digital, and treatment to prevention.

In the context of significant challenges faced by health and social care partners, speeding up the pipeline for health and care innovation is essential. This plan incorporates the agreed priorities of the national Health Innovation Network, our national commissions from NHS England and the Office for Life Sciences, and the needs identified by our three local integrated care systems and the regional NHS England South West team.

While outlining our portfolio of programmes and areas of focus for the year ahead, the plan also ensures that we remain agile and responsive to emerging needs and opportunities.



# 2025/26 Business plan on a page

## Transforming lives through health and care innovation

### Priorities

- Discover, develop and deploy well-evidenced and cost-effective innovation into practice
- Improve quality and safety of care
- Enable reductions in health inequalities and inequity
- Prevention and early intervention
- Drive economic growth
- Enable productivity and support the health and care workforce
- Champion potential of digital and AI
- Expand our insight and evaluation capability

### Goals

- Continue to grow our vibrant local innovation ecosystem
- Enable economic growth
- Evidence the impact of innovation
- Increase flow of evidenced innovation to adoption and spread
- Foster a culture of learning and collaboration
- Unlock the power of data

### Enabling activities

- Facilitate and grow local networks
- Engage diverse communities
- Build our Academy offer and develop innovation capability
- Develop a robust and efficient innovation pipeline
- Deliver new Evidence into Practice calls
- Encourage solutions to improve environmental sustainability and help deliver a net zero NHS

### Partners

- Patients and public
- Clinical networks
- Industry and innovators
- Regional development organisations
- Research and academic community
- Integrated care systems
- Primary and community care
- Acute hospital trusts
- Mental health trusts
- Ambulance service
- Cancer Alliance
- Social care, public health and local authorities
- VCSE organisations
- Health Innovation Network

### 2025/26 outcomes

- 7,500+ lives impacted
- 7+ new innovations introduced to individual clinical sites
- 1,000+ health and care workers benefitting
- Contribution to reducing health inequalities and inequity
- £12 million+ contributed to economic growth
- 70+ jobs created or safeguarded
- 20+ innovators supported
- Contribution towards achieving net zero

# Our portfolio of work programmes in 2025-26

Our strategy outlines eight key priorities that we are using to steer our activity through to 2029.

The development of these priorities last year involved many in-depth conversations with a wide range of our local innovation ecosystem partners, across health and social care, industry, research and academia.

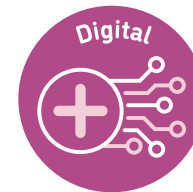
This section takes each of these eight priorities in turn and explores how our work programmes will respond to these over the next 12 months.

## Supporting the three strategic shifts in healthcare

We are also ensuring that our work supports the government's three strategic shifts for the NHS as much as possible, as detailed in the new 10 Year Health Plan. Programme alignment with the three shifts is also indicated using the following key:



1.  
**Hospital to  
community**



2.  
**Analogue  
to digital**



3.  
**Treatment to  
prevention**



# 1 Discover, develop and deploy well-evidenced and cost-effective innovation into practice

Our role is to deliver positive health and care outcomes in the West of England and nationally by supporting the discovery and development of promising innovations and the deployment of proven innovations.

We achieve this by first understanding and then responding to local system priorities, placing a strong emphasis on reducing health inequalities. In this way we can ensure that innovations benefit more patients more quickly, enabling people to play an increasing role in their own care and prevention of ill health.

## Work programmes

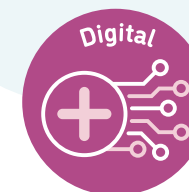
### Needs identification, horizon scanning and demand signalling

Through our needs analysis activities, we engage with health and care professionals, networks and communities to gain their insights and help them to identify and articulate the needs and challenges that would benefit most from new approaches. This allows us to help innovators and health providers to understand the local healthcare demands, and support the development and identification of innovations that may address these needs.

In 2025-26, we will expand our activity with a focus on the three strategic shifts outlined in the Government's Health Mission. New activities this year include the creation of two targeted insights reports aligned to the needs

of system partners, covering market trends, clinical safety, regulations, and implementation, alongside horizon scans for market-ready innovations and case studies.

We will also work with third-sector experts to gather rapid insights from citizens racialised as Black or Brown around the inequities they experience and surface opportunities to improve the design and implementation of digital health technologies. We will share these insights with innovators and the wider market.





# Work programmes

## Evidence into practice: HOME

This year we are supporting the rollout of a remote blood pressure monitoring service across all hospital trusts in the West of England.

HOme Monitoring for Expectant (and postnatal) parents (known for short as HOME) is an evidence-based, remote monitoring pathway designed to enhance care for people at high risk of developing hypertension during pregnancy and the postnatal period, empowering them to stay healthy at home.

Initially developed by Great Western Hospitals NHS Foundation Trust in 2017, HOME (previously known as Go Flo) was the successful innovation selected from our Evidence into Practice call in 2024.

HOME offers a remote blood pressure monitoring service using a digital system and home-based monitoring equipment. This enables early detection and intervention, while reducing the need for frequent in-person visits.

Based on evidence from the implementation at Great Western, the HOME monitoring pathway

has demonstrated significant benefits for patients, staff and the overall system, including:

- Better care for women and their unborn babies: providing care closer to home and optimising hypertension treatment, reducing inpatient stays and hospital admissions.
- Improved experience and empowerment: giving parents greater choice and control over their health.
- Reduction in the carbon footprint of face-to-face appointments and both staff and service user travel and transport usage.
- Cost and resource savings: a reduction in face-to-face appointments and hospital admissions and stays reduces the financial and resource costs for the trust.

Support from Health Innovation West of England will include clinical and project management leadership to ensure a safe and effective rollout of the HOME monitoring pathway by March 2026.

We helped Gloucestershire Hospitals NHS Foundation Trust, one of the 18 Clinical Entrepreneur Programme innovation sites (or InSites) across the country with a successful bid to NHS England's Greener NHS fund

to support delivery of HOME in the West of England. Gloucestershire Hospitals received £83,000 in funding, as well as the opportunity to collaborate with York Health Economics Consortium to undertake a detailed carbon and cost impact evaluation.

This additional funding will be used to purchase blood pressure monitors, fund backfill of midwives in each trust and pay for further evaluation support from Health Innovation West of England to examine equity of patient access, patient experience and the impact on staff, along with identifying barriers and enablers to implementation and recommendations for wider spread.

In addition, we also supported Gloucestershire Hospitals to secure a further £25k via their small grants bid programme for additional backfill in the unit, which has secured their capacity to adopt this innovation.







# Work programmes

## Innovation adoption into practice

New for 2025-26, our Innovation Adoption into Practice project will test the use of a rapid adoption and spread approach based on the learning and experience gained by system partners in Bristol, North Somerset and South Gloucestershire during the delivery of the Living Well with COPD project in 2023-24.

This collaborative, time-limited project will work intensively with one of our ICBs and relevant system partners to firstly agree problem statements and then scan for spread-ready innovations. We will host an innovation showcase, and if a suitable adoption-ready innovation is identified, we will work with key stakeholders to explore mechanisms for rapid procurement and implementation.



## Cancer Innovation Programme

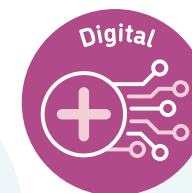
We are working in partnership with the Somerset, Wiltshire, Avon and Gloucestershire (SWAG) Cancer Alliance and Health Innovation South West to deliver a dynamic Cancer Innovation Programme aimed at transforming cancer care and improving outcomes for the 3.3 million people living across the SWAG geographical footprint.

Recognising that cancer remains a priority for the NHS with over 1,000 new cases diagnosed daily in the UK, this programme is supporting the SWAG Cancer Alliance to develop and deliver an innovation strategy for 2025-28. Engaging with local and national cancer teams to accelerate the adoption of innovation in response to local priorities, we are identifying proven innovations ready for local deployment and promising innovations suitable for further development and evaluation.

Last year two successful innovation calls led to the funding of seven projects for delivery in 2025-26. These include tools that support earlier diagnosis, service

efficiency and workforce training. These innovations will be evaluated to evidence return on investment and benefits to patients, staff and the services.

The programme is also seeking to empower the workforce and communities by equipping healthcare professionals with the tools, training and confidence to feel empowered to lead and implement transformative change. We will also be engaging communities and patients as co-creators, thereby focusing innovation where it will make the greatest difference, accelerating early diagnosis, transforming treatment pathways and delivering a more personalised, seamless and equitable experience for every patient.







# Work programmes

## AposHealth

Originally a product promoted through the MedTech Funding Mandate (an NHS initiative to get selected NICE-approved devices, diagnostics and digital products to patients more quickly), we will continue to support adoption of the AposHealth device during 2025-26.

AposHealth is a cost-saving treatment for patients unsuitable for knee replacement surgery. It is a non-invasive device worn on the feet to reduce pain and improve function in patients with knee osteoarthritis. We will work with eligible healthcare providers in the West of England to encourage and support adoption of AposHealth, helping to develop business cases and implementation activities.



## Innovation showcase webinars

In 2025-26, we will co-host a series of themed innovation showcase webinars targeting NHS, social care and VSCE organisations, in collaboration with the health innovation networks covering Wessex, Oxford and South West. These webinars will provide a platform to demonstrate the benefits of regional-specific, adoption-ready innovations, and will closely align with the three national shifts: hospital to community, sickness to prevention, and analogue to digital.





## 2 Improve quality and safety of care

**The safety of patients and improving quality of care is a critical thread running throughout all of our work, in addition to our specific Patient Safety programmes.**

**We want to build on the success to date of our local Patient Safety Collaborative (PSC) and continue to support the ambitions of NHS England's National Patient Safety Improvement Programme.**

### Maternity and Neonatal Safety Improvement Programme

The Maternity and Neonatal Safety Improvement Programme is one of the national Patient Safety Collaborative (PSC) commissioned workstreams. Our work to make care safer by consistently implementing best practice in maternity and neonatal care pathways continues in 2025-26 in line with the established delivery plan. This will focus on:

- Building on our PERIPrem project to enhance the optimisation and stabilisation of the pre-term infant to support the implementation of the updated Saving Babies Lives Care Bundle – a comprehensive package of evidence-based interventions, designed to reduce stillbirth, neonatal brain injury, neonatal death, and preterm birth.
- Supporting implementation of the national Maternity Early Warning Score (MEWS) and updated Newborn Early Warning Track and Trigger tools (NEWTT2) to improve the recognition and management of deterioration in both mothers and babies. By enabling timely escalation when deterioration is detected, we aim to enhance patient safety and reduced adverse outcomes. This work will include helping trusts with digital chart implementation

and ensuring MEWS and NEWTT2 are embedded within an effective PIER (prevention, identification, escalation, response) pathway for managing clinical deterioration. We will continue to facilitate a community of practice across our three Local Maternity and Neonatal Systems (LMNS), providing QI education, sharing learning, and fostering focussed discussions on critical topics.

- Supporting the Perinatal Culture and Leadership Programme, building on the perinatal culture work we have previously supported in maternity and neonatal units through PERIPrem. We will host quarterly 'Leading with Heart' events, providing a breathing space for perinatal leadership, cultural growth and peer connection, and continue to co-host the Regional Perinatal Equity Network share and learn sessions with Health Innovation South West. We will support the development of culture coaches in trusts across the West of England, creating a community of practice to share learning and ideas.





# Work programmes

## PERIPrem

PERIPrem (Perinatal Excellence to Reduce Injury in Premature Birth) is a unique perinatal care bundle of 11 interventions that demonstrate a significant impact on brain injury and mortality rates amongst babies born prematurely. This innovative project was identified through our Evidence into Practice call in 2019.

PERIPrem has been implemented across the South West of England and PERIPrem Cymru was also launched in Wales 2023. We continue to support increased adherence to the elements of the PERIPrem bundle by hosting regular learning and sharing events and signposting resources, which are freely available on our website.

We are also continuing to support the adoption of PERIPrem in Health Innovation West Midlands and Health Innovation East Midlands, where it launched at the end of 2024.



## Polypharmacy

For the last three years we have led the Health Innovation Network's national Polypharmacy programme. This has been extended to complete in September 2025 following a full evaluation.

This programme is supporting healthcare professionals to identify patients at potential risk of harm from problematic polypharmacy and improving conversations with patients about their medicines.

The Polypharmacy programme aligns with recommendations such as the National Overprescribing Review (2021), which identified overprescribing had increased dramatically in 25 years. The Patient Safety Strategy, NHS England's National Medicines Optimisation Opportunities for 2023/24, the Chief Medical Officer's Annual Report 2023 and the World Health Organisation also reference the priority to reduce harm from polypharmacy.

We are supporting local systems to reduce problematic polypharmacy through three pillars of activity.

- Pillar one is using data to support population health management to identify patients at potential risk and prioritise them for a Structured Medication Review.

- Pillar two is supporting the workforce by providing national and local Action Learning Sets and bespoke training sessions to improve confidence in stopping unnecessary medicines.
- Pillar three focuses on public behaviour change, supporting patients to consider their prescribed medications and encouraging conversations with healthcare professionals.

In our local delivery of the programme, we will continue our regular community of practice and masterclass events continue to provide sharing and learning opportunities.

Deprescribing and medicines optimisation is also a contributor to supporting the NHS Net Zero agenda, as this work reduces unnecessary costs associated with pharmaceuticals and hospital admissions linked to medicines related harm.

The full evaluation report will be published in September 2025. A separate report will be published in June on the impact of our coproduced patient resources to support better shared decision making, particularly focusing on increased engagement with seldom heard communities.





# Work programmes

## Medicines Safety Improvement Programme

The Medicines Safety Improvement Programme is one of the national Patient Safety Collaborative (PSC) workstreams and aims to address the most important causes of severe harm associated with medicines.

This year our collective focus is on reducing harm from psychotropics in people with learning disabilities in the absence of serious mental illness. People with a learning disability are 16 times more likely to be prescribed an antipsychotic than the general population.

We are working with patient safety, learning disability and pharmacy leads in each of integrated care boards (ICBs) to determine interest and capacity for involvement in this year's programme.



## Martha's Rule and Managing Deterioration Safety Improvement Programme

This programme aims to reduce deterioration-associated harm by 2027 by improving the prevention, identification, escalation and response to physical deterioration, through system co-ordination as part of safe and reliable pathways of care.

'Martha's Rule', which gives patients and their families round-the-clock access to a rapid review from an independent critical care team if they are worried about their or a loved one's condition, is named in memory of 13-year-old Martha Mills. Martha tragically died after developing sepsis in hospital due to a failure to escalate her to intensive care and after her family's concerns about her deteriorating condition were not responded to promptly.

The Health Innovation Network has been a delivery partner for implementing Martha's Rule since May 2024. This programme is building on NHS England's 'Worry and Concern' pilots, which developed and tested escalation methods for patients' and families' concerns.

Last year we supported six pilot trust sites across the West of England to test and implement Martha's Rule. The three key components are:

1. Patients will be asked, at least daily, about how they are feeling, and if they are getting better or worse, and this information will be acted on in a structured way.
2. All staff will be able, at any time, to ask for a review from a different team if they are concerned that a patient is deteriorating, and they are not being responded to.
3. This escalation route will also always be available to patients themselves, their families and carers and advertised across the hospital.

In 2025-26 we will continue to support implementation of each of the components, building on the learning from the pilot phase and sharing learning through webinars, guides and toolkits. We will also promote use of QI tools and offer QI coaching and local support to sites.





# Work programmes

## PreCiSSlon

Our award-winning Preventing Surgical Site Infection (PreCiSSlon) programme was another successful applicant to our Evidence into Practice call back in 2019. We helped to spread this care bundle to all hospital trusts across the West of England, halving surgical site infections (SSIs) after elective colorectal surgery.

Building on its success, in 2023 we launched a successor project working with six acute hospitals and maternity units to reduce surgical site infections following caesarean births through an evidence-based care bundle of four elements. This was supported through use of a bespoke digital reporting tool provided by Cemplicity, making it easier for patients to provide feedback following caesarean surgery.

We are now evaluating the rollout and use of PreCiSSlon following caesarean surgery and the final report will be published by September 2025.



Improve quality and safety of care

## Real world evaluation: Hegenberger Retractor

We are carrying out a real-world evaluation with Royal United Hospitals Bath (RUH) NHS Foundation Trust to test a groundbreaking device, designed to improve recovery for women and birthing people after childbirth.

The focus of the trial is the 'Hegenberger Retractor', an innovative tool that supports obstetricians in repairing second, third and fourth-degree tears. These injuries, which affect around 19,000 women annually in England, can have long-lasting physical and emotional impacts if not treated correctly. The Hegenberger Retractor aims to shorten procedure times, improve healing, and make the experience less stressful for both patients and staff.

Our evaluation will explore the impact of using the Hegenberger Retractor. We will gather feedback from clinicians and patients to understand both the benefits and challenges of incorporating this tool into standard practice. The evaluation report will be completed by December 2025.







### 3 Enable reductions in health inequalities and inequity

**We aim to understand our impact on addressing health inequalities at a local level across our portfolio of work, specifically as we seek to reduce unwarranted variation in care outcomes and spread innovation.**

**The following are examples of specific project-related activity that we believe directly address key issues in the context of inequality and inequity of care outcomes in health and social care at the current time.**

# Work programmes

## Black Maternity Matters

In 2021, Health Innovation West of England established the Black Maternity Matters collaborative with Representation Matters, BCohCo and Black Mothers Matter.

The Black Maternity Matters programme aims to reduce inequitable maternity outcomes faced by Black mothers and their babies, supporting perinatal teams to offer safer, equitable care.

The six-month programme delivers in-depth, anti-racist training to multidisciplinary clinicians and senior leaders within the West of England. This training is delivered through in-person sessions and is supplemented by book clubs to embed learning.

A key component involves encouraging participants to develop QI projects to transform perinatal services. The

programme also fosters an ongoing community for continued learning and support.

By the end of 2025, 10 perinatal cohorts across the three local maternity and neonatal systems in the West of England and three cohorts of senior leaders will have completed Black Maternity Matters. That's 300+ graduates – and counting.

This year we will evaluate the impact of the training on senior leaders across multiple organisations, and on staff across North Bristol NHS Trust. We will also investigate the programme's impact on the care given to women and babies.

Based on the success of the PERIPrem care bundle for preterm babies, we are also developing a clinical perinatal anti-racism bundle to optimise outcomes and experiences for women and babies racialised as Black.







# Work programmes

## Global Community Insights Project

In 2025-26 we will be launching our new Global Community Insights Project. We will work closely with third-sector partners to surface challenges faced by citizens racialised as Black or Brown around the design and implementation of digital health technologies.

The theme of this work will align with the shift from analogue to digital as part of the government's health missions. We will conduct an initial exploratory workshop with a selected third-sector partner, utilising their knowledge and understanding of the diverse range of communities within the West of England to identify the most appropriate communities to engage with.

The third-sector organisation will utilise their understanding and expertise to engage stakeholders from the identified communities, as well as co-create and co-facilitate three workshops with us to gather insights from these community stakeholders.

Rapid insights from the workshops, including needs, insights and problem statements, will be shared widely with healthcare innovators and the wider market. Our report will be published in late 2025 and we will also host a learning webinar.



## South West Learning Disability Collaborative

Our original Learning Disability Collaborative was established in early 2019, and initially focused on using the National Early Warning Score and soft-signs tools such as RESTORE2, and increasing uptake of annual health checks and flu vaccinations.

After notable successes, the expanded South West Learning Disability Collaborative was created in 2022 to cover the entire South West region and has grown 540 members.

The expanded collaborative, which is funded and delivered in partnership with NHS England South West, shares learning and best practice on a range of topics across the region.

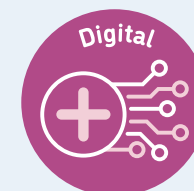
In 2025-26 we are pleased to be continuing our support for this collaborative, running our popular and highly valued webinars, bringing together health and care professionals, carers and people with lived experience driven by a shared ambition to improve health outcomes for people with learning disabilities.



## Real world evaluation: Anya

Anya is a pregnancy, parenting, and breastfeeding support app that uses cutting-edge 3D interactive technology and AI intelligence to assist new mothers. Health Innovation West of England has supported Anya since its founder participated in our Health Innovation Programme in 2018.

We have partnered with Gloucestershire's LMNS to pilot and evaluate the use of the app to increase breastfeeding initiation and continuation rates in younger and deprived populations. The evaluation report will be published in June 2025.





## 4 Prevention and early intervention

**Preventing illness and disease and a greater focus on the wider determinants of health is a high priority for all our system partners.**

**This 'left shift' is now seen as key to reducing health inequalities across all aspects of health and social care and is one of the three strategic shifts for the NHS, announced by the Secretary of State for Health and Social Care earlier this year.**

**The shift to bring care closer to home will help us redefine care away from reactive, crisis-driven interventions to more proactive, preventative health solutions that improve outcomes and quality of life for all our communities.**

# Work programmes

## CVD Prevention

CVD Prevention is a Health Innovation Network collaborative programme, which aims to reduce the burden of cardiovascular disease (CVD) on both individuals and the healthcare system through the early and timely diagnosis and treatment of conditions that can lead to cardiovascular conditions.

In line with the national programme, our approach will be to work with colleagues in primary care, which will be shaped through discussions with key stakeholders in each ICB to ensure our work complements existing local initiatives aimed at reducing CVD generally, and heart failure specifically.

Our shared ambition is to improve outcomes for people living with heart failure by increasing quality of life, reducing admissions and readmissions and improving overall prognosis. In 2025-26 we will support the prevention of heart failure through supporting primary care colleagues with case finding

and treatment optimisation to reduce the significant number of patients currently being diagnosed in acute settings.

We will support the Brunel Health Group, a collaborative of seven primary care networks (PCNs) in and around Swindon, to introduce an approach to preventing heart failure that specifically targets Core20+ communities. The broader aim is to reduce attendances and admissions through hospital emergency departments through the local delivery of preventative care.

Additionally, we are planning to work with BSW Integrated Care Board (ICB) to support the delivery of key elements of their hypertension programme.

We continue to work closely with our neighbouring health innovation networks (Wessex and South West) to run the regional CVD Collaborative, educating colleagues and sharing best practice through webinars and quarterly newsletters.





# Work programmes

## Transforming wound care

The National Wound Care Strategy Programme (NWCSP) is led by NHS England and is focused on developing evidence-based standards and best practices for wound care across the NHS. The Health Innovation Network's Transforming Wound Care programme is a regional initiative that tests and spreads these innovations in practice.

Together, they align by ensuring that the latest wound care advancements, as outlined by the NWCSP, are successfully implemented and adopted locally, improving patient outcomes and reducing costs.

We will begin local delivery of the Transforming Wound Care programme in October 2025. We are working with all community providers to understand current baseline positions and how the national aspirations for improving wound care fit within local priorities.



## Respiratory pathway optimisation

Around 1,400 people each year die from a severe asthma attack and asthma deaths are 50% more likely in the poorest areas compared with the richest. Biological therapies can transform patient lives by reducing long-term side effects of other treatments (such as oral corticosteroids) and can also reduce the number of exacerbations and life-threatening asthma attacks.

Chronic obstructive pulmonary disease (COPD) is a progressive, debilitating condition characterised by frequent exacerbations and hospitalisations, contributing to approximately 60% of all respiratory-related healthcare costs in severe cases. Patients with advanced COPD often face declining quality of life and increased mortality risk.

We are leading the development of a new national Health Innovation Network programme to improve care for patients with severe or

uncontrolled asthma and COPD. This will focus on optimising respiratory pathways and increasing access to new biological therapies that are available to treat patients with these diseases.

Transforming pathways, services, and networks to expand biologic access will both require and accelerate three critical shifts in healthcare. This work will be a catalyst, driving digital innovation, prevention-focused care and the shift from hospital to community - enabling these transformations to go further, faster, while strengthening life sciences in the UK.





## 5 Drive economic growth

**One of our key principles as a health innovation network is that wealth is as important as health.**

**We aim to support the creation of a forward-thinking commercial environment in the West of England.**

**We believe that as part of a vibrant health and life sciences sector, the NHS can collaborate effectively with industry for patient benefit, while delivering greater value for the taxpayer, contributing towards the nation's prosperity and stimulating economic growth.**

# Work programmes

## Innovator support and signposting

Our team offers a range of support services and guidance to innovators who are developing products and services with the potential to improve patient outcomes, increase efficiencies and grow the UK health sector economy. This support can include:

- providing early feedback and signposting on innovators' products or ideas and whether they meet UK health and care needs
- exploring appropriate clinical pathways with feedback from clinical teams
- signposting grant and funding opportunities
- understanding the evidence the NHS would require for adoption and assessing gaps in company evidence
- assessing market readiness and supporting the development of a value proposition
- delivering real world evaluation projects to gather the data and evidence required for commissioning and business case development
- identifying and referring to services provided by other organisations, such as regulatory and intellectual property advice.

The innovators we support include academic and clinical entrepreneurs, lived-experience innovators, SMEs and large businesses, including multinationals. Companies can come from anywhere in the world to receive our support. We tailor our support according to the level of adoption readiness of the technology, the demand and interest from our local systems and the innovator's needs.

This year we will further embed the national Health Innovation Network innovator offer, drawing on newly developed toolkits and resources and ensuring delivery of a consistent service to innovators across the country. We will deliver the Commercialisation Academy for a second cohort ([see page 19](#)).

We will expand our network of trusted partners, to provide expert advice and services in areas such as patient and public involvement and engagement, digital regulations and grant support.





# Work programmes

## West of England Commercialisation Academy

In autumn 2025 we will be teaming up again with Triple Chasm to deliver the West of England Commercialisation Academy, specifically designed to address the needs of later-stage health and care innovators. This year our selection criteria for companies will align with the three strategic shifts for the NHS: hospital to community, analogue to digital and sickness to prevention.

The commercialisation of health and care innovations can be challenging, particularly at the stage where a scalable business model is being developed. Success depends on the ability of a company to integrate a wide range of economic, technological, commercial, social and cultural factors in the commercialisation process. The Commercialisation Academy is designed to support innovators identify and address areas within their product and organisational maturity.

The Commercialisation Academy is a free eight-week programme designed to support health and care innovators who are seeking wider adoption and scale of their innovations. Successful applicants will join weekly workshops designed to help them develop their strategic commercialisation plans. Seven companies successfully completed our first Commercialisation Academy programme last year.

The programme is based on the Triple Chasm Model®, which provides a holistic data-driven framework that was devised following research into around 3,000 products taken to market.





# Work programmes

## Exploring a potential Health and Life Sciences Cluster for the region

In 2024-25, we have been working with partners to gather stakeholder views on the benefits and opportunities a health and life sciences 'cluster' might offer the region.

Currently the South West is the only region in the UK that hasn't created a formal life sciences cluster. In other parts of the country, successful clusters are bringing together industry, investors, universities and research institutions, NHS organisations and health innovation networks.

Clusters aim to drive growth and productivity by facilitating:

- Networking and collaboration
- Research and innovation
- Skills development and training
- Internationalisation of cluster assets
- The ability to do 'high risk' work in a low risk environment.

There is evident energy and enthusiasm from partners for more formalised regional partnership relationships, with a view to either

creating a single health and life sciences cluster model or a network of localised clusters or hubs across the South West.

We will look to build on the excellent [South West Life Sciences website](#), developed last year by the University of Bristol's Translational Research Hub. This has been an important first step towards establishing an advocacy organisation for the South West region to help increase the visibility of our region's life sciences ecosystem.

In 2025-26, we will continue to work with partners, including the GW4 alliance and Health Innovation South West to coproduce structured proposals that build on collective ambitions, support more strategic collaborations, and showcase our regional talent and assets.



## SBRI Healthcare

The Small Business Research Initiative (SBRI) Healthcare is a national programme, which provides funding and support to early stage projects, enabling testing for business feasibility and technology development, as well as to more mature products by supporting real world implementation studies. The programme is funded by the Accelerated Access Collaborative (AAC), which brings together industry, government, regulators, patients and the NHS, and is supported by the Health Innovation Network.

We have a strong track record in successfully supporting innovators to apply for SBRI Healthcare funding to develop and spread their products and services, and will continue to provide this support in 2025-26 as new competitions are announced. This support includes bid writing and review, introductions to potential project partners, as well as supporting the SBRI programme with shortlisting and as panellists.







# Work programmes

## NHS Innovation Accelerator

We continue to support the NHS Innovation Accelerator (NIA), which is an AAC initiative delivered in partnership with England's 15 Health Innovation Networks. Each year the NIA selects promising innovators to join their fellowship programme, which places a dual focus on both the innovator (Fellow) and their innovation.

The NIA's mission is to spearhead the national acceleration of innovation and business growth of health and care innovators to help enhance patient experience and outcomes and drive economic growth in the UK. The NIA does this by supporting NIA Fellows to extend their footprint in the NHS and further afield, as well as supporting their business growth.

Three innovators supported by Health Innovation West of England were announced as NIA 2025 Fellows: Jinghui (Helen) Liang from LabCycle, Tom Oakley from Bleepa® and Melinda Rees from Psymics Platform.

Our team also seek to identify adoption and spread opportunities for NIA innovations across the West of England when they match local demand.

## NHS Clinical Entrepreneur Programme

Launched in 2016, the NHS Clinical Entrepreneur Programme encourages healthcare staff to develop the commercial skills, knowledge and experience needed for successful spread of innovation. The programme is now part of the AAC. We will continue to support the programme by encouraging local clinical entrepreneurs to apply, providing support to local clinical entrepreneurs and helping to spread the innovations of those who are successful.

## NHS Innovation Support Service

Led by the AAC, the NHS Innovation Service acts as a catalyst for the development and spread of impactful innovations into the NHS. It's a useful tool for innovators, explaining the required standards and evidence, plus the NHS procurement and reimbursement processes. Innovators can use the service to access personalised support from all 15 Health Innovation Networks, plus national support organisations including NICE, MHRA, NIHR and NHS Supply Chain. A rising number of innovators are being referred to us through this service and we provide support and signposting in a similar way to those who contact us directly.





## 6 Enable productivity and support the health and care workforce

Health and social care systems in the West of England need innovative solutions to help them cope with demand and improve services for local people. We also recognise the importance innovation can play in delivering efficiencies and supporting productivity.

We need to find ways to support our over-stretched and busy staff to provide services more efficiently and safely and, in many instances, release time to care and spend with patients and users.

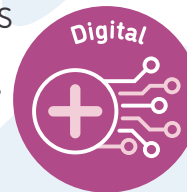
# Work programmes

### Real-world evaluations: Clera, Uniwee, Hegenberger Retractor and Capsule Sponge

In 2025-26 we will complete several real-world evaluations of innovations that offer potential benefits for supporting the workforce to improve productivity and increase efficiency while also promising positive changes for patients.

We are working with North Bristol NHS Trust to evaluate **Clera Healthcare**, a platform that allows healthcare teams to communicate with their patients and families. Predominantly through SMS, the platform can send patients and their families updates on their stay in hospital. Communication can be two way and aims to free up clerk and clinician time rather than coordinating often multiple phone calls to patients and their families.

In 2024-25 we launched a real-world evaluation with Royal United Hospitals Bath NHS Foundation Trust to test the **Hegenberger Retractor**, a groundbreaking device designed to improve recovery for women and birthing people after childbirth.



This innovative tool supports obstetricians in repairing third- and fourth-degree tears. It aims to shorten procedure times, improve healing, and make the experience less stressful for both patients and staff.

The results of our six-month evaluation will be published by December 2025 and will explore the impact of using the Hegenberger Retractor on outcomes like operating times, blood loss, and patient satisfaction. We are gathering feedback from clinicians and patients to understand both the benefits and challenges of incorporating this tool into standard practice.

In 2025-26 we will deliver a real-world evaluation of **Capsule Sponge**, one of the seven innovations we are supporting through the Cancer Innovation Programme ([see page 8](#)).

Two GP practices are case-finding patients at risk of oesophageal cancer and testing these patients using Capsule Sponge, a minimally invasive procedure used to collect cells from the lining of the oesophagus (food pipe) for analysis. The aim is to identify more people at an early stage, preventing late-stage cancer complications and mortality. We will deliver the evaluation, which will include measuring patient pathway outcomes, patient experience, and staff acceptability of the innovation.





# Work programmes

We will also deliver a cost benefit and carbon calculation analysis of **Uniwee**, a female urinal device developed by Omnipac and Great Western Hospitals NHS Foundation Trust. The device has been designed to provide female patients who are unable to walk with a dignified, pain-free way to urinate whilst sitting or lying down. By minimising discomfort and reducing unnecessary movement, the device improves the patient experience while also saving valuable staff time.

We will complete a desk-based analysis of the health economic and cost benefit impacts to support business case development for NHS Supply Chain and the innovators, as well as supporting wider adoption.

## Innovate Healthier Together

This year we have produced an evaluation of our Innovate Healthier Together programme with Bristol, North Somerset and South Gloucestershire (BNSSG) Integrated Care Board (ICB). Our intention is to work with the ICB and system partners on the dissemination of this learning and support them in baking this into practice, particularly as focus shifts towards system-wide strategic commissioning.

We worked collaboratively with the ICB to design the Innovate Healthier Together Programme to help them take full advantage of innovation in achieving their ambitions to change lives and improve health, wellbeing and care for the populations they serve.

One of the key ambitions was to develop an innovation mindset and culture across the

integrated care system (ICS). An important legacy of this programme will be the Innovate Healthier Together Fellowship, which we helped to launch in May 2024. This is a community of innovation pioneers and change-makers from across BNSSG.

Fellows benefit from access to mentors, regular workshops and seminars to share knowledge, enhance innovation and quality improvement (QI) skills, and support networking and connections across the community.

In association with colleagues from the West of England Academy, we have developed the Innovate Healthier Together development programme – a three-module accredited course to develop participants' skills in design-thinking, QI and facilitation. This is resourcing them with the techniques and tools to support innovative and creative thinking.





# Work programmes

## Educating and empowering health and care professionals

An important aspect of many of our work programmes is supporting health and care professionals to develop an innovation mindset and to grow the skills and confidence to drive change within their services and systems.

Through our **Black Maternity Matters** programme for instance, we are supporting health and care professionals at all stages of their career to embark on a journey of antiracist education, joining an ever-expanding community empowered to make on-the-ground changes in reducing the inequity of outcomes experienced by Black women, families and babies. [Read more on page 14.](#)

Improving the knowledge and confidence of GPs and pharmacists to tackle overprescribing is an important component of our national **Polypharmacy** programme. We are creating clinical, multi-stakeholder communities of practice across England, focusing on problematic polypharmacy within local areas.

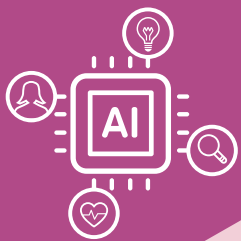
Through a series of national webinars, education and training, we are encouraging routine use of the NHSBSA Polypharmacy Prescribing Comparators to identify and prioritise patients for structured medication reviews. We also run Action Learning Sets to support GPs, pharmacists and other healthcare professionals who undertake prescribing or medication reviews to understand the complex issues around stopping inappropriate medicines safely. [Read more on page 11.](#)

## West of England Academy

Our West of England Academy provides a wide range of accessible resources and learning opportunities for health and care professionals, frontline workers, support service providers and innovators to support their professional development, increase their knowledge and understanding of quality improvement (QI) and enhance their ability to drive positive change.

Our Academy covers the entire innovation journey from ideation to implementation. We help people learn how to develop creative problem solving techniques, prototype and test potential ideas and solutions, and gather evidence to drive meaningful change. [Read more on page 30.](#)





## 7 Champion the potential of digital and AI across health and care

**Harnessing the power of data, artificial intelligence (AI) and digital technologies is essential if we are to tackle the many and varied challenges faced by our health and care systems.**

**As a health innovation network our strength lies in our ability to convene and harness the skills of others as consortia developers and catalysts.**

**We are also extremely sensitive to issues around digital exclusion and, while we want to promote the benefits of digital and AI, we recognise it is not always a panacea for every situation. Co-production of solutions with citizens and patients is vital in this space to ensure the benefits of technological 'advances' are not only appreciated by a select few, resulting in the unintended consequence of increasing health inequities.**

# Work programmes

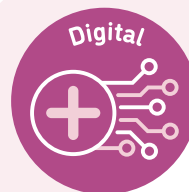
## Global Community Insights Project

Through our new Global Community Insights Project will be working closely with third-sector partners to surface challenges faced by citizens racialised as Black or Brown around the design and implementation of digital health technologies and pathways ([see page 15](#)).



## South West Secure Data Environment

Due to go live in the summer of 2025, the South West Secure Data Environment (SDE) will provide an innovative and efficient approach to conducting research with millions of people's health and care records, while maximising privacy and security. The goal is to enable research that's faster, fairer and safer.



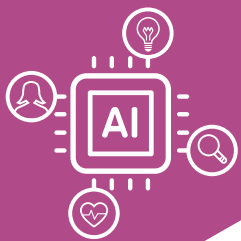
Nationally, the NHS Research SDE Network is transitioning to the new Health Data Research Service, announced by the government in April 2025.

SDEs are online platforms for accessing and analysing routinely collected health and social care data for research. SDEs give trusted researchers secure access to NHS and local authority data. Access is only allowed with the permission of a data access committee, which represents the organisations providing data.

Hosted by Bristol, North Somerset and South Gloucestershire (BNSSG) Integrated Care Board, we are one of the partner organisations from across the region involved in developing the South West SDE. We will support the development of the commercial strategy and engagement for the SDE in 2025-26.







# Work programmes

## LEAP Digital Health Hub

We are a partner in the LEAP Digital Health Hub, an EPSRC-funded programme that aims to cultivate a multidisciplinary, digital health community in the South West of England and Wales.

LEAP's objectives have been co-produced by its partner network – surfacing unmet health and care needs, shaping and nurturing new collaborative research projects that bring together new partnerships of industry, academia, patients, carers and healthcare professionals. By engaging with local communities, the region's health and social care organisations, and with industry partners nationally, LEAP aims to lead and shape the international agenda in digital health.

In July 2025, we are taking part in LEAP's Festival of Digital Health and are organising a day of events in partnership with UWE and the Health Tech Hub, exploring opportunities for co-design in digital health. We are also part of the LEAP Executive Fellows Group and are active participants in supporting programme events, activities and impacts.



## Supporting digital innovators

As part of our focus on working with companies whose products align with the three strategic shifts, we will provide specialist support to digital health innovators, including webinars and workshops.

Our Commercialisation Academy for later-stage innovators ([see page 19](#)) will select innovations that closely align with the three shifts, in particular the shift from analogue to digital, and support rapid deployment and wider adoption.

In 2025-26 we are also conducting real-world evaluations of digital technologies, including the Clera Healthcare communication platform ([see page 22](#)), the Anya breastfeeding and parenting app ([see page 15](#)) and several solutions as part of our Cancer Innovation Programme ([see page 8](#)).

Our Innovator Support team also provides specialist support to digital innovators in terms of regulatory requirements, evidence frameworks and information governance.







## 8 Expand our evaluation and insight capability

We recognise the importance of our evaluation and insights function to enable others to demonstrate impact and support the spread and adoption of innovation.

Our Evaluation and Insights team is embedded within programmes of work across the organisation, facilitating their analytical and evaluation requirements. They provide a critical assessment through various robust and real-world processes to understand whether the adoption of an innovation within a health or social care setting achieves the desired change in outcomes.

We also benefit from established partnerships with other research organisations, such as NIHR Applied Research Collaborative (ARC) West.

This year, our main area of focus will be to increase our evaluation and insight support for innovators.

# Work programmes

## Real-world evaluation

Our real-world evaluations in 2025-26 will include support for early cancer diagnosis, and the use of AI and digital tools, along with collecting data to evidence our impacts against these priorities. Currently planned real-world evaluations are:

- Clera Healthcare ([page 22](#))
- Anya ([page 15](#))
- Uniwee ([page 23](#))
- Hegenberger Retractor ([page 13](#))
- Cancer innovation projects ([page 8](#))

We will also deliver evaluations for our system, including:

- Black Maternity Matters ([page 14](#))
- HOME outpatient hypertension monitoring ([page 7](#))

## Insights reports

This year we plan to create two targeted insights reports aligned to the needs of our health and care system partners, covering market trends, clinical safety, regulations, and innovation implementation.

These reports will be designed to support wider discussions around the use of innovation to support the drive towards prevention, digitalisation and care closer to home, with insights drawn from the wider Health Innovation Network, stakeholder publications, case studies and horizon scans.

## Innovator support and evaluation planning

We will support innovators working within our local health and care systems with evaluation plans and advice, including:

- Advice sessions for up to 12 innovators, providing bespoke written advice and signposting.
- More detailed evidence reviews for up to four of these innovators, assessing the quality of their existing evidence, identifying gaps and providing support on how to address these.
- Development of evaluation plans for up to four innovators. This will involve mapping the innovation pre- and post-pathway, developing a logic model and measurement framework, and a scoped evaluation plan.





# Work programmes

## Evaluation and insight webinars for innovators

We are also planning a series of themed webinars for innovators on various aspects of evaluation and insights. These will be delivered collaboratively with other health innovation networks and will be aligned with the three strategic shifts of hospital to community, analogue to digital and sickness to prevention.



## Bespoke insights support

We will support our programmes with bespoke data insights, dashboards and data visualisations.

We are currently delivering data insights for Martha's Rule ([see page 12](#)), allowing the programme team to hold data-driven conversations with the participating sites, enabling them in turn to review and adjust their QI efforts.

We will expand this insights support to other programmes during the year.

## South West Evaluation Online Network

Established in 2016 by Health Innovation West of England and UWE, the South West Evaluation Online Network is a free, virtual group for anyone interested in health and care evaluation who wants to share learning and source new perspectives and ideas.

We currently have almost 200 members, and our numbers continue to grow. Our aim is for our membership to be diverse and includes

evaluation professionals, practitioners, independent consultants, commissioners from across national and local government, the voluntary sector, as well as the research community.

Find out more at [www.healthinnowest.net/evaluation-online-network](http://www.healthinnowest.net/evaluation-online-network).

## Evidence repository

Established in 2020 in partnership with local integrated care systems and hospital libraries as the COVID-19 pandemic unfolded, our Evidence Repository, supports rapid evidence sharing of grey literature.

The numbers of registered users and documents uploaded continue to increase and in response to feedback we have expanded the membership to include public health organisations, as well as broadening the content to include QI and population health management projects.

In 2025-26 we will work to improve uptake and access to the repository and expand the range of resources available.

# Enabling activities

Alongside our portfolio of work programmes, we will enhance our broader offer of support functions and enabling activities to...



## 1. Facilitate and grow local networks

We are valued for our role as an 'honest broker' in facilitating vibrant clinical networks and will seek to build on the strength and depth of existing relationships to create new networks and communities through which we can learn, engage and deliver impact.

In 2025-26 we will continue to nurture and develop these vibrant networks and communities, such as the regional CVD Collaborative ([page 16](#)), South West Learning Disability Collaborative ([page 15](#)), the Black Maternity Matters collaborative ([page 14](#)) and the Innovate Healthier Together Fellowship ([page 23](#)).

Last year, in collaboration with the SWAG Cancer Alliance and Health Innovation South West, we launched a new cancer innovation programme ([see page 8](#)) to speed up the adoption of innovations in response to local priorities, and we will look to strengthen engagement with local cancer networks.

We are also prioritising engagement with local authorities and communities to identify opportunities for innovation to address social determinants of health, building on established relations with organisations such as Bristol Health Partners and establishing new links.





## 2. Build our Academy offer and develop innovation capability

The West of England Academy continues to be one of our strongest and most valued assets by our system partners. The Academy supports health and care professionals to think and work innovatively and implement new ways of working using creative problem-solving techniques, plus QI methods and tools to drive incremental improvements.

Our Academy webpages provide users with high quality information and resources at [www.healthinnowest.net/academy](http://www.healthinnowest.net/academy).

In 2025-26, we will continue to provide training opportunities that develop capabilities and mindsets for innovation and improvement.

The NHS is a complex, ever-changing landscape and our Academy offer is well matched to help people develop the right mix of skills needed to navigate and respond to this environment. Our Core Improvement Skills series has been designed to meet current needs as well as those we expect will be needed in the future. Sessions are modular, so that different combinations can be tailored around individual learner's needs.

As well as providing access to core improvement skills training and resources, we also embed Academy education sessions across our portfolio of programmes, such as Black Maternity Matters and Innovate Healthier Together, which leads to more direct impact. We are also collaborating with colleagues and partner organisations to co-deliver events and develop new resources as needed.

This year we are developing a cluster approach for the Innovation Academy with our neighbouring health innovation networks, creating a collaborative that shares delivery of the offer and onward development of content using economies of scale and avoids duplication.

Through the Innovate Healthier Together programme ([see page 23](#)), we have worked with BNSSG ICB to galvanise, grow and support the local innovation community, and we are looking to develop similar initiatives with other system partners to respond to their challenges and needs.



## 3. Develop a robust and efficient innovation pipeline

During 2025-26 we will continue to manage our vibrant innovation pipeline to identify and support innovators from both our region and across the UK whose innovations offer the potential to meet local health and care needs. This will include innovators who require support to further refine and test their innovations, along with proven innovations who are ready for wider adoption and spread.





## 4. Collaboration

Our deployment of innovation in the local health and care system over the last ten years has nurtured lasting relationships with a wide range of partners, and collaboration is at the heart of all our work programmes.

As part of the Health Innovation Network, we will continue to play an active national role in spreading innovation into practice during 2025-26. This will include continuing to lead the national Polypharmacy programme through to September 2025 ([see page 11](#)) and encouraging and supporting the wider spread of PERIPrem ([see page 11](#)).

We are successfully working in close partnership with our neighbouring health innovation networks, Wessex and South West, to optimally serve the wider South West region, particularly in delivering economies of scale and responding collectively to regional priorities.

In 2025-26 we will continue our collaborative work on cardiovascular disease, supporting systems to adopt and spread innovation that improves the identification, prevention, early intervention and management of CVD. This will focus on preventative care for heart failure and providing a programme of education webinars on blood pressure optimisation, heart failure, lipids and familial hypercholesterolaemia (FH).

We are expanding our partnership work to wider clinical priorities. We are exploring approaches to address the increasing needs of our aging populations (in particular around frailty) and are developing a programme to transform respiratory pathways to increase access to biologic therapies.

Further joint activities and collaborations with other health innovation networks in the coming year include:

- The Cancer Innovation Programme co-delivered the SWAG Cancer Alliance and Health Innovation South West ([see page 8](#))
- Development of a Health and Life Sciences Cluster with the GW4 Universities Group and Health Innovation South West ([see page 20](#))
- A series of innovation showcase webinars targeting NHS, social care and VSCE organisations, in collaboration with the health innovation networks covering Wessex, Oxford and South West ([see page 9](#))
- A series of themed evaluation and insights webinars aimed at innovators, in line with the three strategic shifts and delivered collaboratively with other health innovation networks ([see page 28](#)).



We are also a key partner in the development of the new South West Secure Data Environment, which is due to go live in the summer of 2025. This will provide an innovative and efficient approach to conducting research with millions of people's health and care records, while maximising privacy and security. [Read more on page 25.](#)





## 5. Engage diverse communities

An important enabling activity set out in our strategy is to explore how we engage effectively with more diverse communities to both design and deliver our work programmes. New partners will also be needed if we are to successfully respond to the national strategic shift of moving care away from hospitals and more into communities. Similarly, the 'left shift' towards a greater focus on prevention and the wider determinants of health will require new relationships.

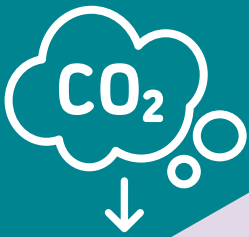
We will work more closely with integrated care systems and seek to engage more with partners in social care, local authorities, the voluntary, community and social enterprise (VCSE) sector alongside colleagues in the NHS, particularly around prevention and early intervention.

We will also engage with local communities, in particular the disadvantaged and seldom heard, to better understand social determinants of health and enable people with lived experience to shape how we collectively tackle issues and barriers. Our refreshed communications strategy highlights how we will provide our staff team with increased shared intelligence on our local populations, including resources around engagement approaches, channels and networks.

Our groundbreaking Black Maternity Matters programme ([see page 14](#)) is demonstrating what can be achieved when we work in true collaboration. This work has partly inspired plans for our new Global Community Insights programme ([see page 15](#)) to surface challenges faced by citizens racialised as Black or Brown around the design and implementation of digital health technologies.







## 6. Help deliver a Net Zero NHS

With millions of employees and tens of millions citizen reliant on it, the NHS is a major contributor to the country's carbon emissions. Our unique role working with industry, academia and the health and care system puts us in the perfect position to support the drive for sustainability at every level.

We will actively support the development and uptake of technologies and best practices designed to reduce emissions in health and care.

One example is our HOME programme, which is set to make a significant contribution to reducing the carbon footprint of hospital trusts across the West of England.

HOME is a remote monitoring pathway designed to enhance care for people at high risk of developing hypertension during pregnancy. The pathway was developed by Great Western Hospitals NHS Foundation Trust. By empowering people to stay well at home, the programme is reducing the need for face-to-face appointments and both staff and service user travel and

transport usage should decrease. Modelling of data from 2023 shows that every year Great Western's outpatient service saves 1,248 face-to-face appointments, 312 clinical hours, and 118 acute unit appointments.

These reduced travel requirements have resulted in an annual carbon emissions reduction of over 22,000kg CO<sub>2</sub>e - the equivalent of four premium economy flights from London to Hong Kong.

Health Innovation West of England is committed to mitigating the impacts of climate change through our work with NHS organisations and innovators. Where possible, we make efforts to conserve energy and reduce waste in our offices and events, as well as supporting our staff to make sustainable choices.

Whilst offsetting carbon is a key step in mitigating the impacts of emissions, it is not a substitute for reducing carbon emissions. Our current focus is on reaching Net Zero through carbon reduction rather than offset.





## 7. Corporate support services

Our corporate team, which spans finance, procurement, organisational development, HR, and business administration together with communication and events, provides essential support for the effective delivery of our work programme as well as maintaining the organisation-wide governance processes, including the secretariat for the Health Innovation West of England Partnership Board.

In addition to the subject matter expertise available within the corporate team, as part of the Royal United Hospitals Bath NHS Foundation Trust, we benefit from additional support from within the Trust around finance, procurement, HR and information governance.

Colleagues from the corporate team work closely with the programme delivery team, including as part of individual programme and project teams, as well as supporting the work of the Chief Executive and leadership team.

Key activities this year will include:

- Development of a business and planning function, incorporating a programme management office (PMO)
- A review of our organisational governance to assure robust management of the business
- Following feedback from our staff engagement survey, development of an organisational development (OD) plan to ensure we have the right skills and capabilities in place (or in development) to meet future challenges and opportunities
- Production of a framework to support the delivery of strengthened business planning.



# Measurement framework

In our five-year strategy, we highlight that we will hold ourselves to account for the successful delivery of our bold ambitions and have set clear targets that will enable us to demonstrate impact, as well as share learning. Our five-year targets are:

**50,000+**

lives impacted by innovations in our local portfolio



**50+**

innovations introduced to individual clinical sites



**5,000+**

health and care workers benefitting from our work



Measurable contribution to reducing health inequalities and inequity



**£60 million+**

contributed to economic growth and UK PLC



**550+**

jobs created or safeguarded



**1,250+**

innovators supported



Measurable contribution towards achieving net zero



To help deliver on these ambitious longer-term goals, we have developed a measurement framework to demonstrate our impact during the next 12 months.

This framework follows a path beginning with our top-line business objectives, broken down into high-level measurable goals, key performance indicators (KPIs) and metrics. The framework also aligns to the

new national combined data set, providing clarity and transparency to our commissioners and partnership board around our business objectives and deliverables, and which is aligned to delivering our five-year strategy and master licence agreement with NHS England.

Supporting this, we are developing several systems, processes and documents to monitor progress and

support the story we tell. These include investing in our Evaluation and Insights and Programme Management Office (PMO) functions, a balanced scorecard and associated assurance and performance reporting at an organisational level, with logic models and highlight report summaries developed at a project and portfolio level.

# Get in touch and find out more

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If you're interested in finding out more about how Health Innovation West of England can support you or how you can get involved in our work programmes, we'd love to hear from you.

## Supporting innovators

To talk to our Innovation team about support for developing healthcare innovations, email [healthinnowest.innovation@nhs.net](mailto:healthinnowest.innovation@nhs.net) or visit [www.innovationexchange.co.uk](http://www.innovationexchange.co.uk).

## West of England Academy

To find out about the learning events and training resources available through our Academy, email [healthinnowest.academy@nhs.net](mailto:healthinnowest.academy@nhs.net) or visit [www.healthinnowest.net/academy](http://www.healthinnowest.net/academy).

## General enquiries

To find out about anything else, drop us a line at [healthinnowest.contactus@nhs.net](mailto:healthinnowest.contactus@nhs.net), explore [www.healthinnowest.net](http://www.healthinnowest.net) or sign up for our regular email newsletters at [www.healthinnowest.net/newsletter-sign-up](http://www.healthinnowest.net/newsletter-sign-up).

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