Propel@YH Net Zero Innovator Showcase Event

30th November 2021

Housekeeping

- We will be recording the meeting for those unable to attend today

- Please mute yourself if not speaking

- Feel free to turn off your camera but turn on if speaking

- Q&A- Use chat function throughout

- Also Q&A time allocated in agenda

Agenda

Item	Speaker
Welcome	Frank Swinton Climate Change Lead, West Yorkshire Health and Care Partnership
Thoughts and Insights into the Links between Innovation and Climate Change	Frank Swinton Climate Change Lead, West Yorkshire Health and Care Partnership
AHSN Network and YHAHSN Climate Change Strategy	Kathy Scott Deputy CEO, Yorkshire & Humber AHSN
Propel@YH Net Zero Programme	Victoria Vaines Programme Manager, Yorkshire & Humber AHSN
Patients Know Best	Tom Gausden Senior Business Manager, PKB
Dignio	Ewa Truchanowicz Managing Director, Dignio
Closing Remarks	Frank Swinton Climate Change Lead, West Yorkshire Health and Care Partnership

Thoughts and Insights into the Links between Innovation and Climate Change

Frank Swinton, Climate Change Lead, West Yorkshire Health & Care Partnership

The**AHSN**Network

A connected network of networks

The "Delivering a 'Net Zero' National Health Service" publication references innovation and the AHSNs

To support the future development and adoption of new technologies and innovations, the NHS will:

- require all applicants to national innovation support programmes to consider and articulate the environmental impact of the products and services for which they are seeking support
- embed sustainability in assessment criteria and decision-making processes for all innovation programmes by the end of 2020
- work with the Academic Health Science Networks (AHSNs) to embed net zero into the AHSNs' business as usual processes, working with them to develop a network-wide ambition and identify specific ways of working to promote the drive to reach net zero
- Use the AAC Horizon Scanning Function to identify the future pipeline of innovations which can support efforts to transition to net zero

Our work changes how healthcare is delivered; this can, and will, have an impact on the environmental harm healthcare causes
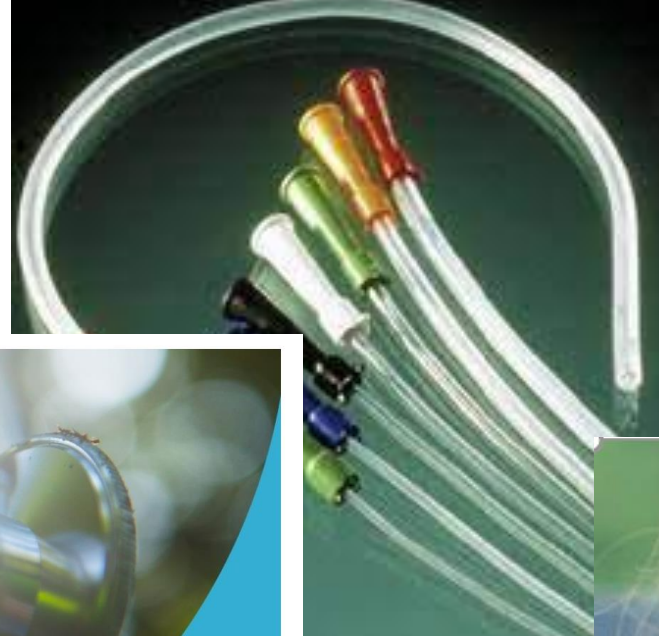
The Network already supports environmentally sustainable innovation from idea to uptake

Through our healthcare innovation expertise we will continue to influence and deliver change

Online event: Delivering a Net Zero NHS – Reducing the carbon impact of anaesthetic gases

The AHSN Network Environmental Sustainability Community of Interest are hosting a series of sharing and learning events that aim to share best practice innovations and initiatives to support delivery of a Net Zero NHS.

Delivering a Net Zero NHS – maintaining the momentum

Pete Waddingham, Programme Manager – Yorkshire & Humber AHSN

Getting started with Environmental Sustainability; Learning from the Journey in Newcastle
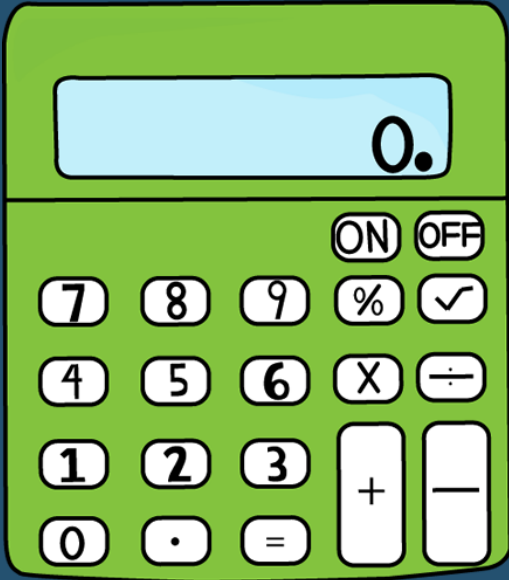
June 23 @ 10:30 am - 12:00 pm
Getting started with Environmental Sustainability; Learning from the Journey in Newcastle

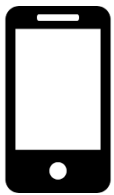# Locally, we are working with our ICS and Regional NHSEI Leads to support regional ambitions

Yorkshire & Humber AHSN

Transforming Lives Through Innovation

In summary, AHSNs contribute to Net Zero in 4 main areas:

Through technology, services or products that specifically address the agenda as their primary focus

Through transforming pathways with a side benefit of reducing emissions

By supporting our supply chain to be greener

By improving understanding and changing culture of staff and patients and their families

About the Programme

- Commissioned by WYH Climate Change Team to support innovators with a 'green' innovation.

- Pilot accelerator programme running in Summer 2021.
  - Introduction to AHSNs
  - Introduction to the Greener NHS Team and priorities
  - Funding and Bid Writing
  - NHS Digital and Carbon Calculators
  - Comms and Engagement

Feedback and Learnings

Propel@YH

NetZero

- Have conducted an end of session survey with the innovators to understand impact.

- Overall the innovators liked the process and the range of topics covered

- They felt like we had supported them to improve their sustainability plans and communication

- They would have liked the sessions/programme to be longer and have more opportunities to engage with stakeholders e.g. procurement

Our Three Innovators

PATIENTS KNOW BEST®
MANAGE YOUR HEALTH

dignio

AUTOMEDI

A digital personal health record platform that allows patients to access tailored resources created by their healthcare teams to enable self-management of their condition.

A digital integrated care platform that connects both patients and healthcare, providing virtual remote care. It is patient-focused and empowers the user to self-manage their condition with the support from healthcare professionals.

An easy-to-use 3D printer which makes healthcare products from sustainable plastics. Like a vending machine, users choose equipment from its on-screen catalogue, and it is made in front of them. It removes delivery costs, delays and reduces climate impact.

PATIENTS KNOW BEST®
MANAGE YOUR HEALTH

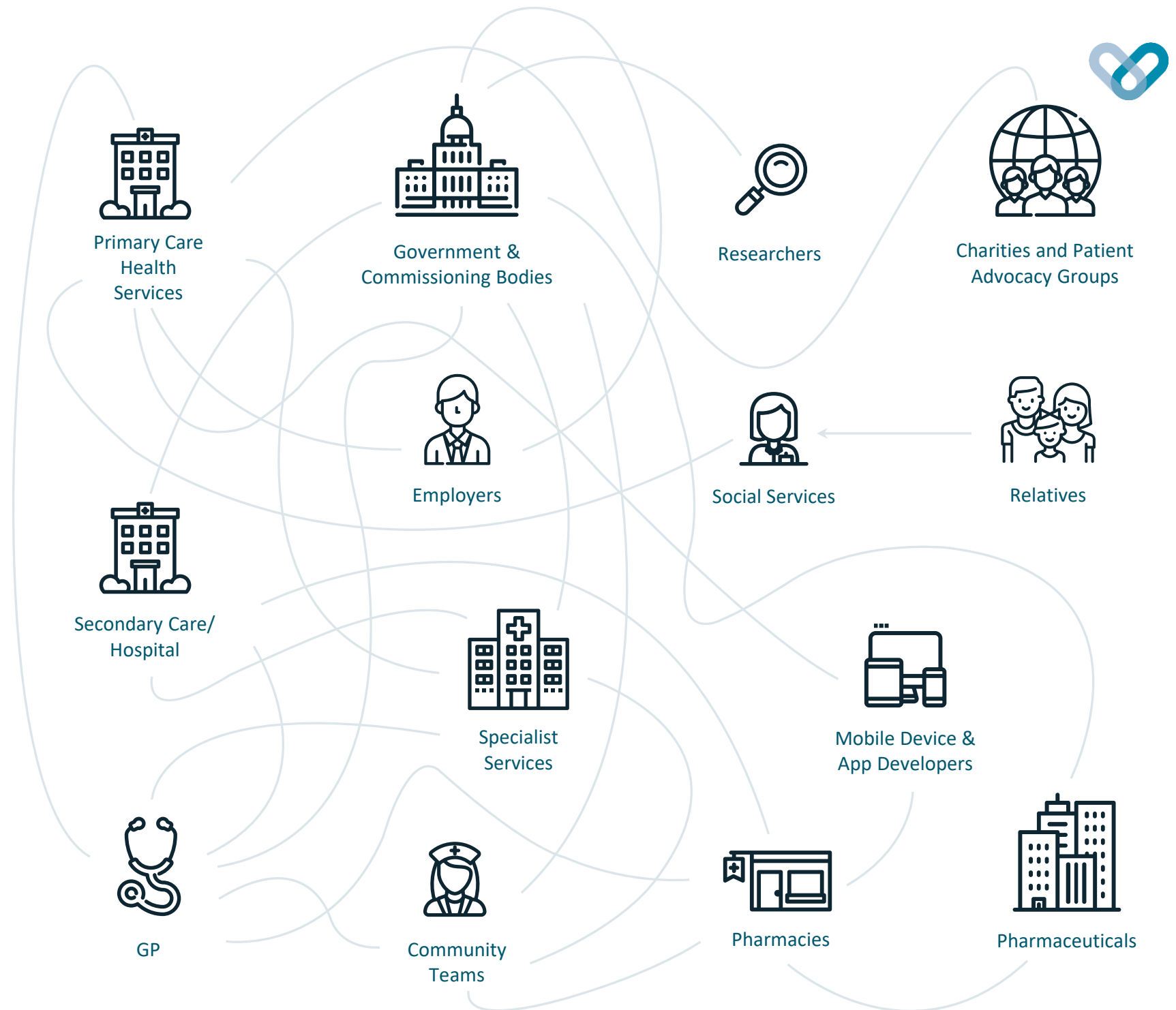@patientsco & @PkbTom

tom.gausden@patientsknowbest.com

www.patientsknowbest.com
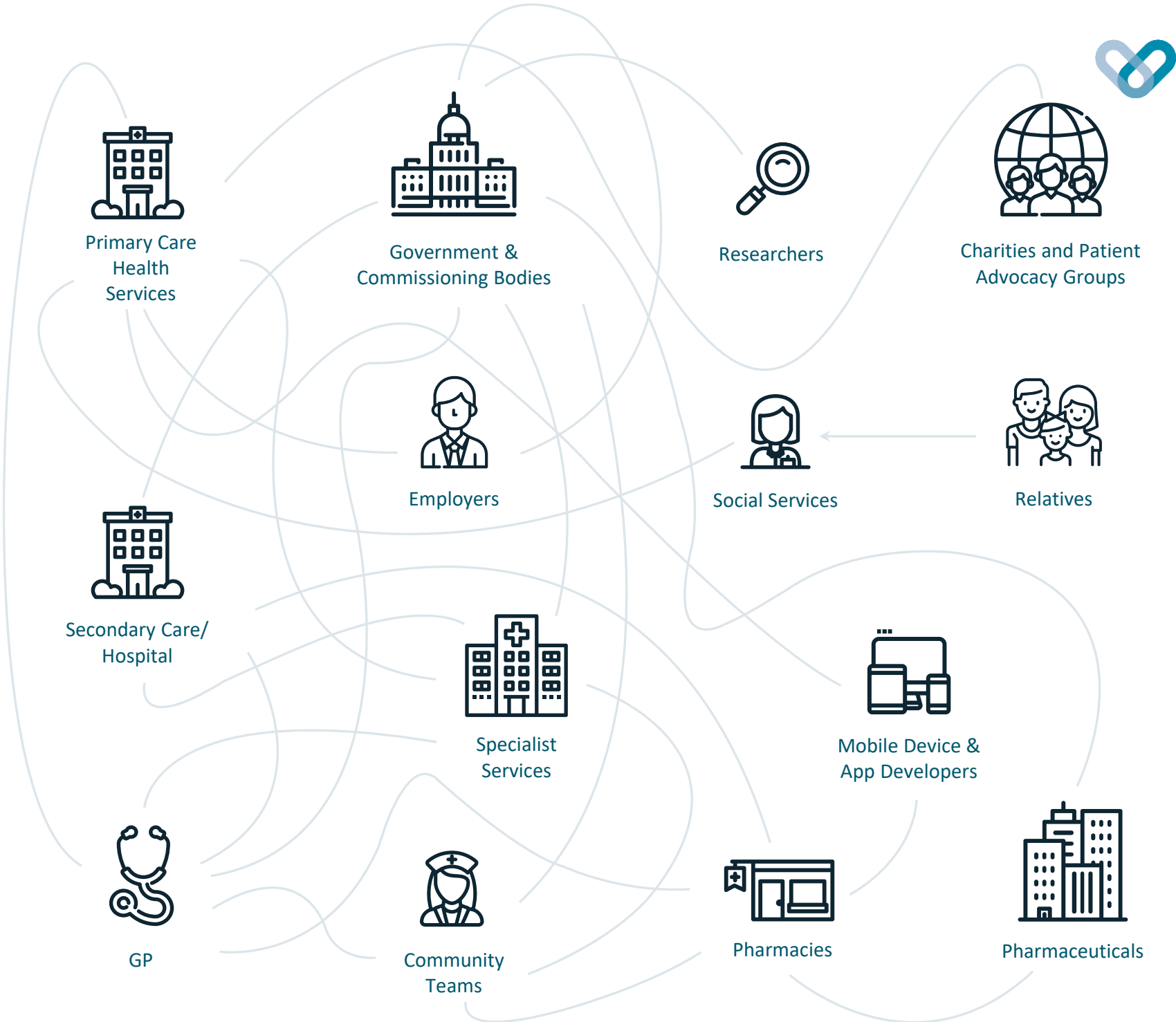
The Problem

- Difficult to connect
- Technical problems
- Legal issues
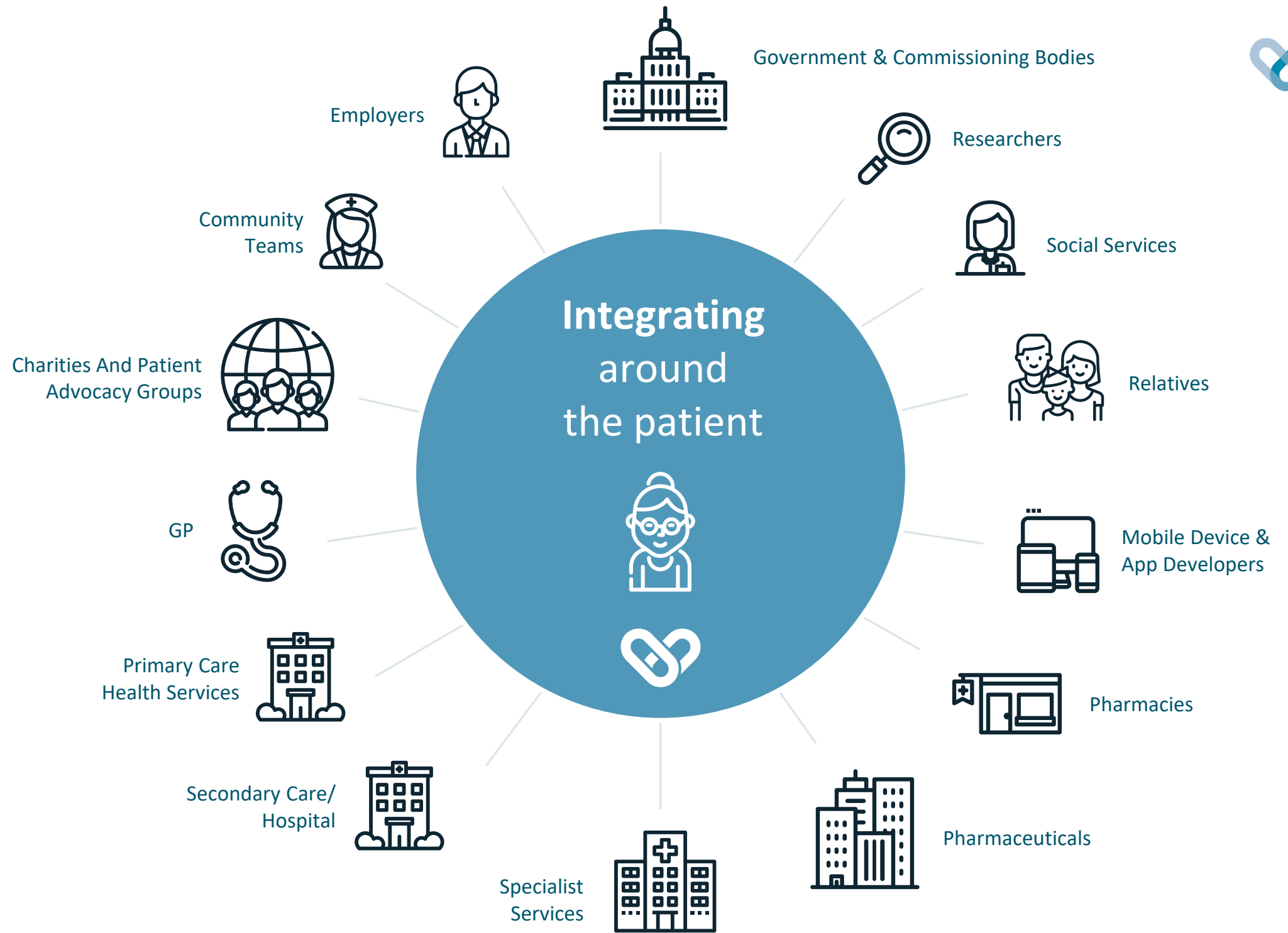- Patient excluded
- No one feels in control

The Problem

Health care
forgot about
the patient

Primary Care
Health
Services

Government &
Commissioning Bodies

Researchers

Charities and Patient
Advocacy Groups

Employers

Social Services

Relatives

Secondary Care/
Hospital

Specialist
Services

Mobile Device &
App Developers

GP

Community
Teams

Pharmacies

Pharmaceuticals

Integrating around the patient

Government & Commissioning Bodies

Researchers

Social Services

Relatives

Mobile Device & App Developers

Pharmacies

Pharmaceuticals

Specialist Services

Secondary Care/ Hospital

Primary Care Health Services

GP

Charities And Patient Advocacy Groups

Community Teams

Employers

Digital Tools In PKB

Asynchronous Messaging

Symptom Tracking

Assessment Questionnaires

Library of resources

Test Results

Care Planning

Journal Entries

Measurements & Device Integration

Audio

Diagnosis, Medications & Allergies

Files feature

Appointment Data

Imaging (CT/X-Ray)

Sharing of data

PKB is first and only PHR integrated with NHS App and NHS login

NHS Login single sign-on into PKB

NHS App user interface embeds PKB functionality
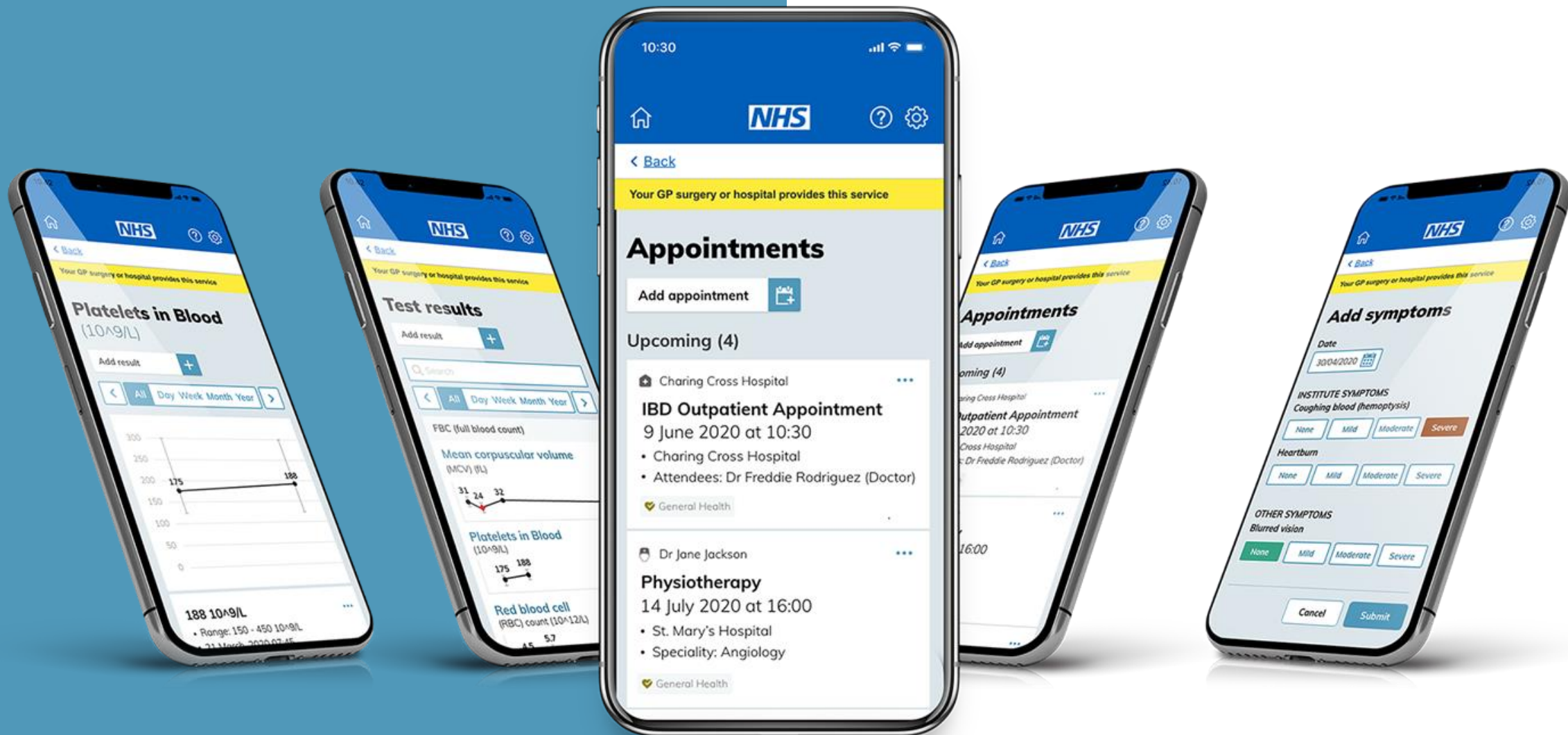
Renal Patient View Switches to PKB

- Five year agreement signed in October 2020

- 74,500 patients set to switch to PKB from RPV

- "Partnering with a leading provider of digital personal health records is a significant step for the Renal Association and showcases our determination to provide quality platforms for patients to streamline their care."
Chief executive of the Renal Association, Ron Cullen

Scotland

Northern Ireland

Wales

England

London

London

● Hospital using PKB for renal care

PATIENTS KNOW BEST®
MANAGE YOUR HEALTH

THE RENAL ASSOCIATION
founded 1950
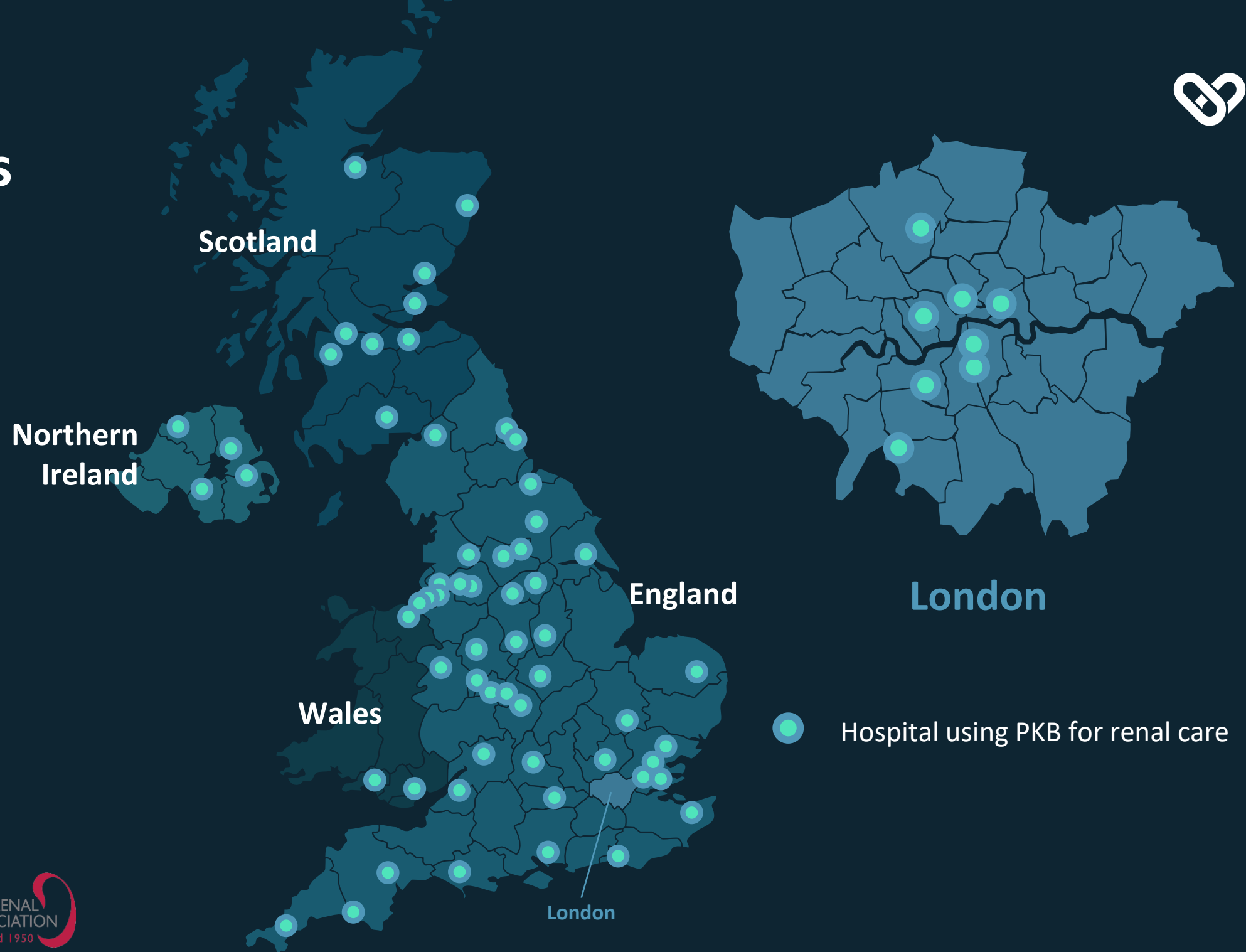
Enabling patients to manage their own health and wellbeing

- Luton & Dunstable implemented virtual outpatient clinics for patients with Crohn's and Colitis and moved 600 patients

- Self-management care plan with symptom tracking

- In three years there have been no emergency admissions

1,100 Extra outpatient appointments created

25.59 kg CO2 saved per registered patient

25%

Long term conditions managed by remote out patients appts.

75%

240 Surgical cases avoided

NHS
Bedfordshire Hospitals
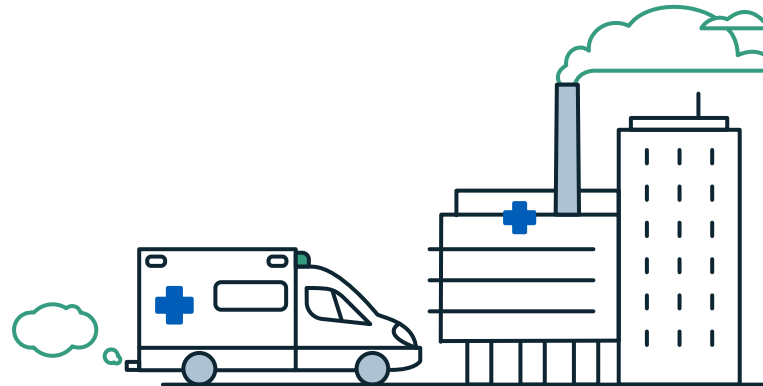NHS Foundation Trust
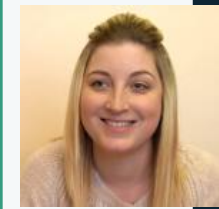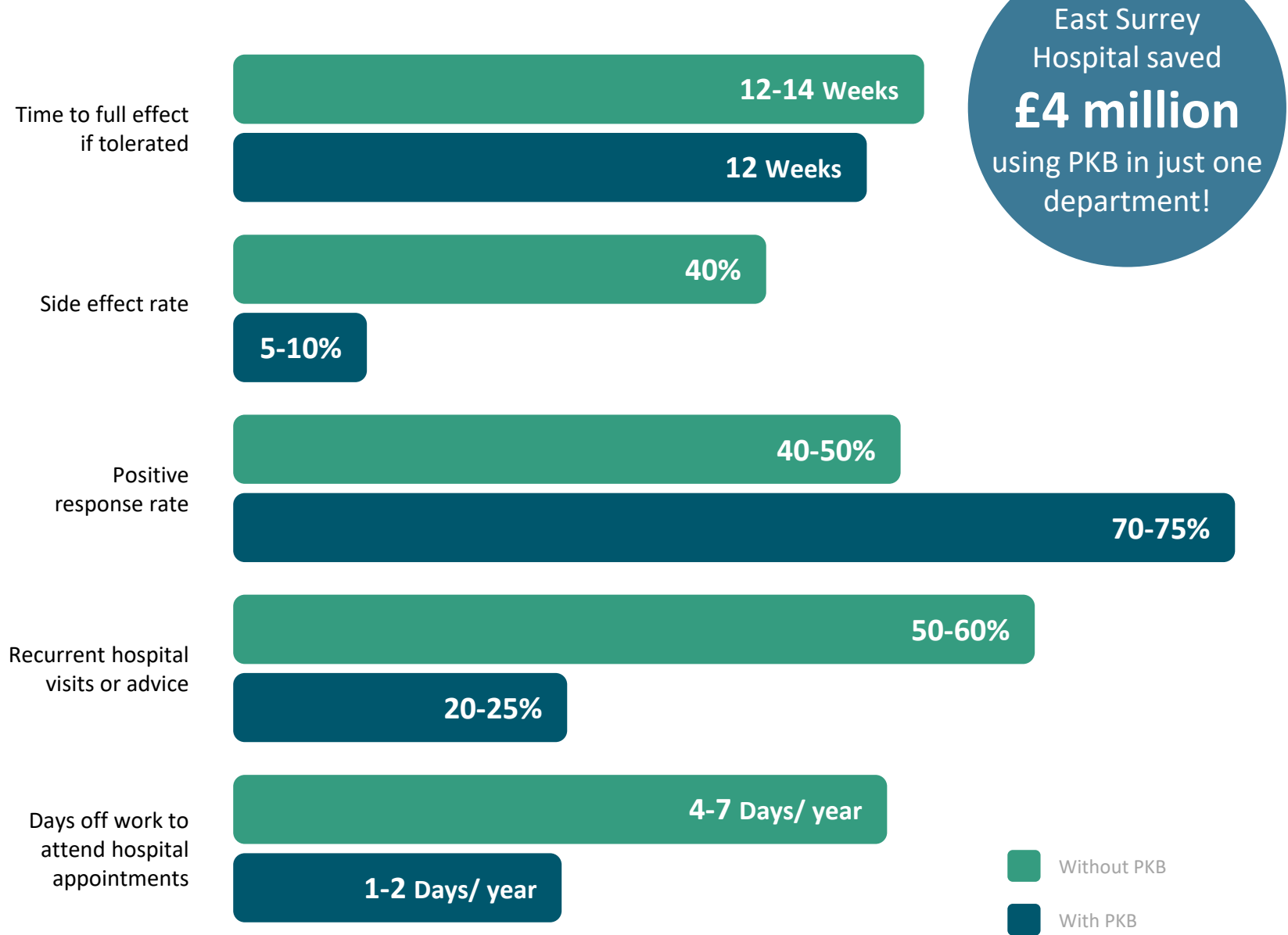
Climate Crisis

4.4% of the world's net CO_2 emissions are from health care

Move data not patients

- Digitisation avoids carbon emissions

- Remote monitoring prevents need for carbon-intensive treatments e.g. surgery
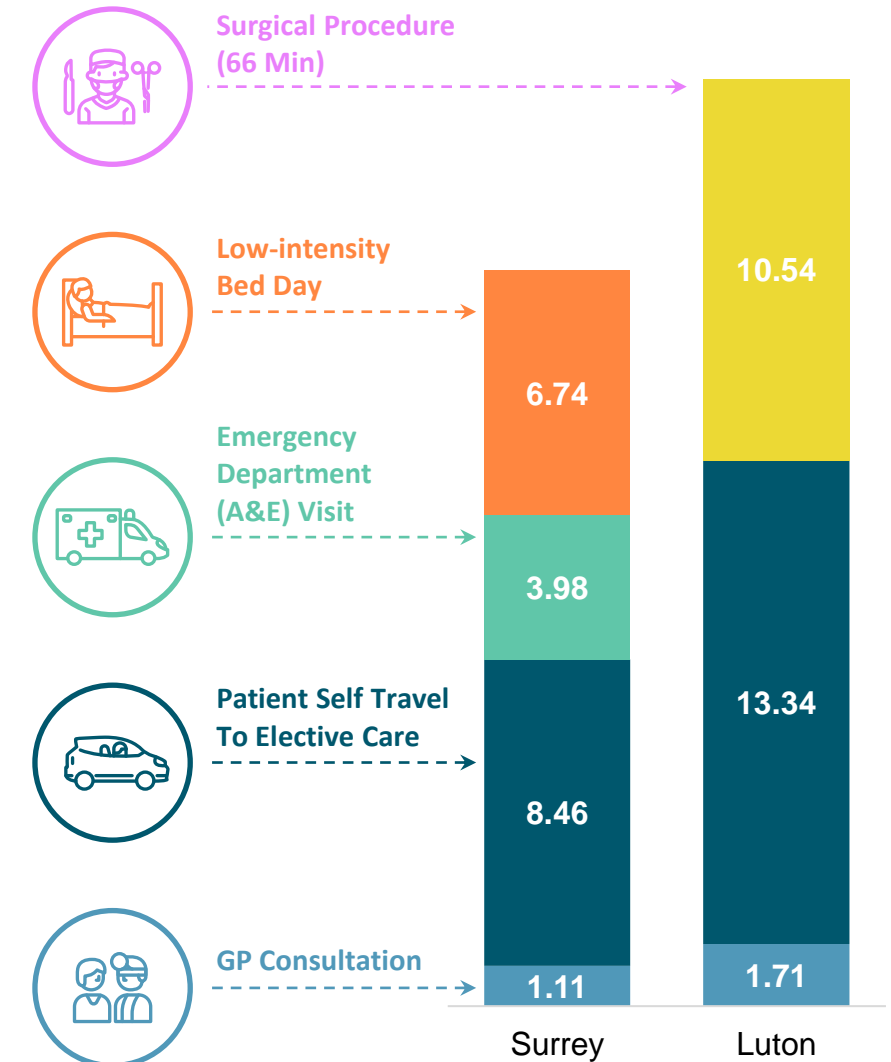
5.4% of UK carbon emissions are from NHS

NHS responsible for **5 per cent** of all traffic on roads

KG CO_2 emissions avoided/Patient

Surgical Procedure (66 Min)

Low-intensity Bed Day

Emergency Department (A&E) Visit

Patient Self Travel To Elective Care

GP Consultation

	Surrey	Luton
Surgical Procedure (66 Min)		10.54
Low-intensity Bed Day	6.74	
Emergency Department (A&E) Visit	3.98	
Patient Self Travel To Elective Care	8.46	13.34
GP Consultation	1.11	1.71

Dignio Integrated Care Platform

Trusted Blend of Methodology and Technology

November 2021

Ewa G Truchanowicz PhD, FRSA
Managing Director

ewa@dignio.com

www.dignio.com/en

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Dignio highlights

2013   First year of patients on the solution

200+   Active customer organizations on our solution across Norway, China and the UK

>40k   Patients serviced through Dignio Connected Care across pathways

90%   Norwegian RPM market share

44%   Fewer hospitalizations

90%   Feel more in control of own health
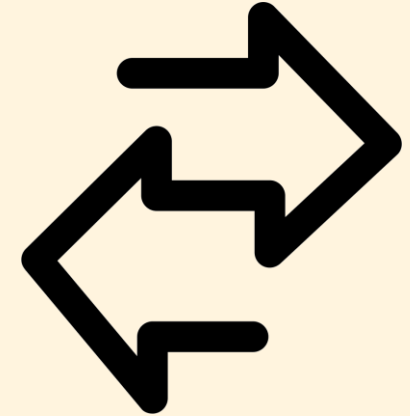
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What is remote patient monitoring?

One way data capture tools

+ good for simple pathways & data gathering
- Doesn't capture the full clinical picture
- Location specific hardware
- EPR specific

Disease Specific tools

+ Highly focused
- Multiple apps needed
- Can't grow with the patient

Generic, non-flexible tools

+ Multiple use cases
+ Easy to visualise
- Restrictive flexibility
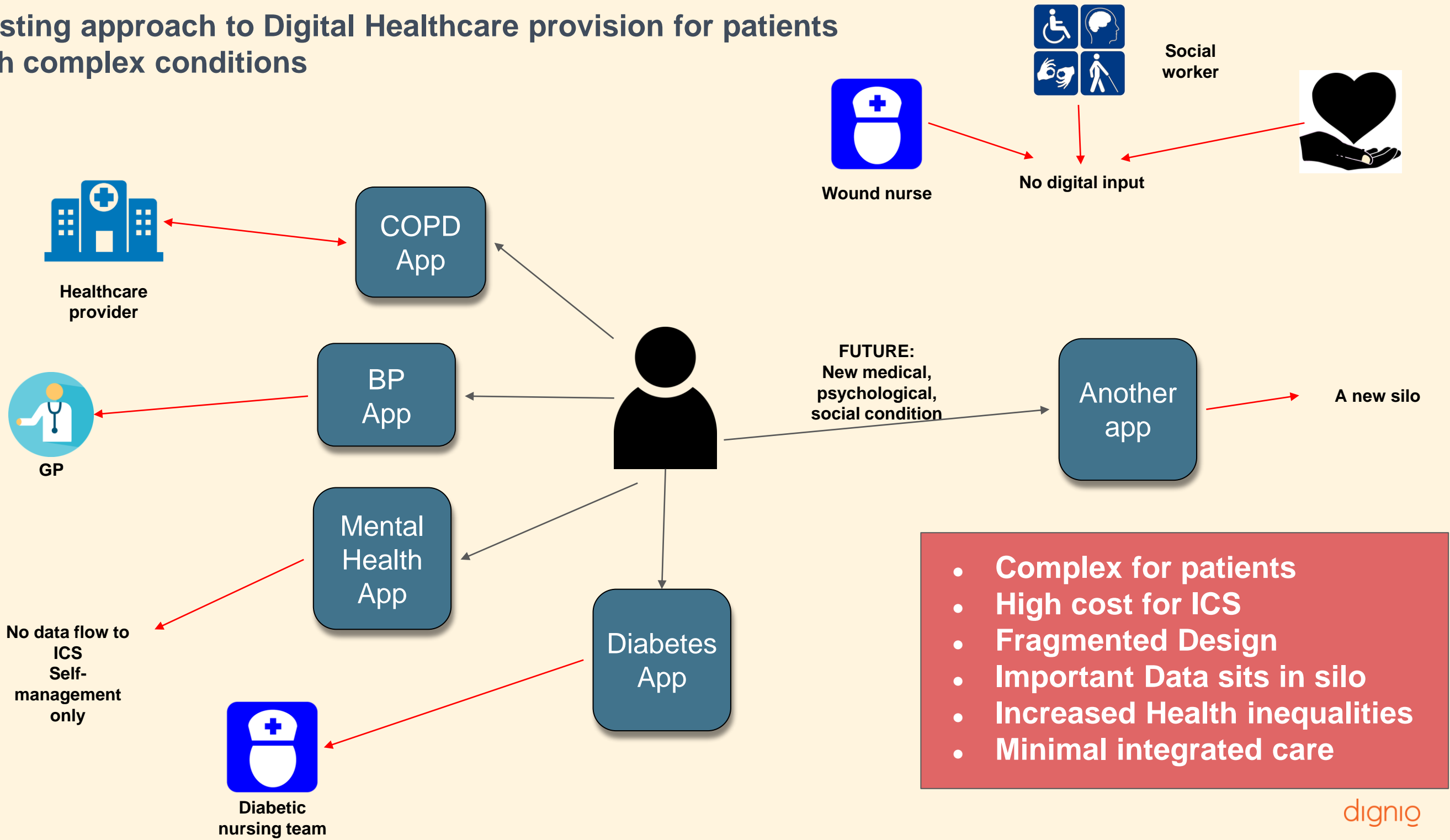- Difficult to scale
- Difficult to add new pathways

Generic, flexible tool

+ Increased flexibility to change as system evolves
+ Integrate across care pathways
+ Scalable Virtual wards/digital transformation
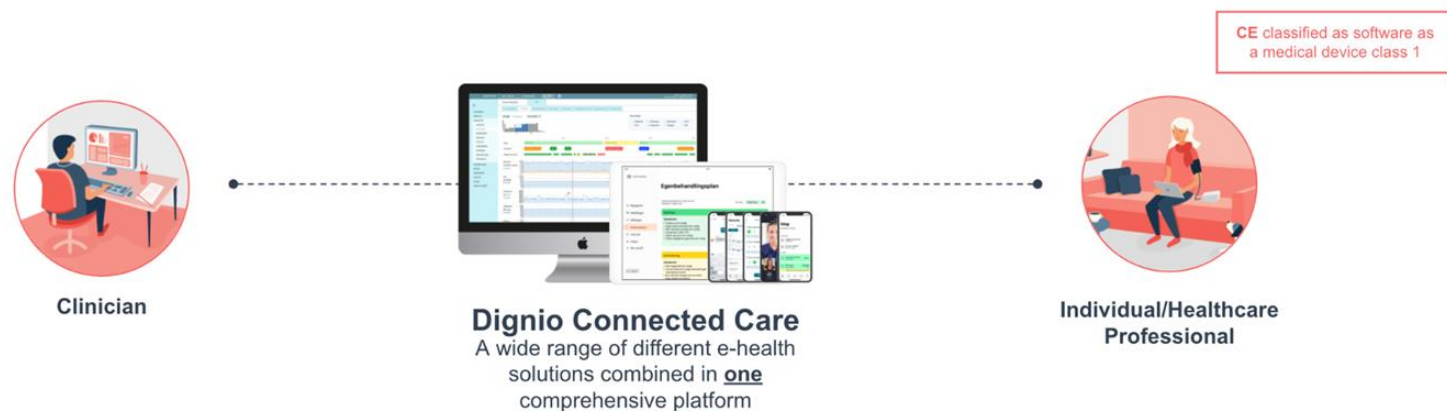+ Easily add new pathways
- Difficult to visualise
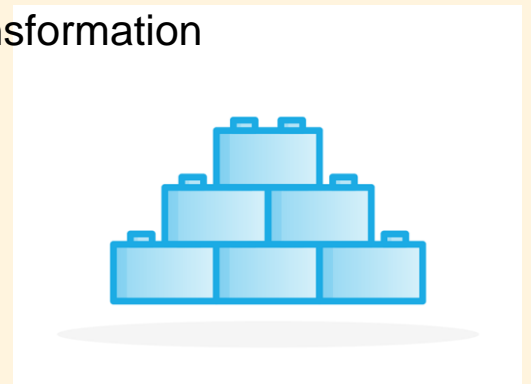
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Existing approach to Digital Healthcare provision for patients with complex conditions

Social worker

Wound nurse

No digital input

COPD App

Healthcare provider

BP App

GP

Mental Health App

No data flow to ICS
Self-management only

Diabetes App

Diabetic nursing team

FUTURE:
New medical, psychological, social condition

Another app

A new silo

- **Complex for patients**
- **High cost for ICS**
- **Fragmented Design**
- **Important Data sits in silo**
- **Increased Health inequalities**
- **Minimal integrated care**

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Dignio Integrated Care Platform

Clinician

Dignio Connected Care
A wide range of different e-health solutions combined in **one** comprehensive platform

Individual/Healthcare Professional

CE classified as software as a medical device class 1

Telemedicine	Remote Patient Monitoring	Medication Compliance	Reporting	Self Management Plan	Interoperability

emis

A solution that follows the citizen through the full care journey

Fully Independent — MyDignio
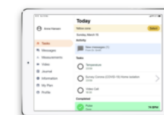
Domiciliary Care — MyDignio + Dignio Care
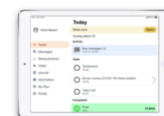
Care Home — Dignio Care

Nursing Home — Dignio Care

Delivering Innovation in to Health and Care - Medlink West Midlands 2021	Driving Digital Transformation Innovation 2021	2021- Winner with Mastercall North of England Healthcare Business Awards	2021 - Finalist with Mastercall Healthcare	Most Transformative Digital Healthcare Company 2020	Start-up Award Medlink West Midlands 2019	Innovative Low Cost Business Model 2017

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Impact on care delivery and experience
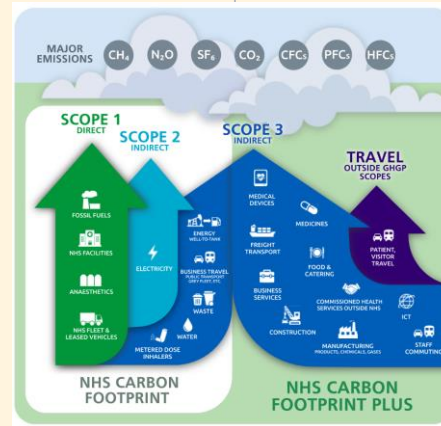
NHS Net Zero

Patients

- Improved sense of security
- Early detection of deterioration
- Improved self-management
- Personalised care

99% Patient satisfaction across all UK deployments (avg)

Clinicians

- Efficiency gains
- Access to information when needed
- Transforms communication
- Enables MDT working

100% Clinician/client satisfaction across all UK deployments (avg)

"...my own dad who is in residential care benefited from Dignio, to the point I believe it saved his life."

Mastercall Healthcare

700% ROI - annual savings of £6m to the local health system

Salford Royal NHS FT

Cardiology Patients Hospital Admissions Reduction

City of Oslo

32% Lower costs per patient per year

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Mastercall STOCKPORT

THE IMPACT OF REMOTE MONITORING

In support of the Covid 19 - Patients in Stockport were given additional support through innovative technology and first-class clinical patient management.

DOING MORE FOR PATIENTS

Mastercall Healthcare provided additional monitoring and throughout the pandemic via the TEL Service (Technology Enhanced Living)

MASTERCALL WANTED TO DO MORE....

By providing the system with remote monitoring and 24/7 Service powered by DIGNIO in collaboration with Stockport Local Authority.

SUPPORT
Local Health System

ADVANCED TECHNOLOGY

providing patients remote monitoring results direct to a clinical team.

24HR Monitoring Response

MORE EFFICIENT

Care was improved further by.....

904 PATIENTS ONLINE

644 CARE HOME Residents

44% Hospital Admission Avoidance

577 COVID-19 PATIENTS
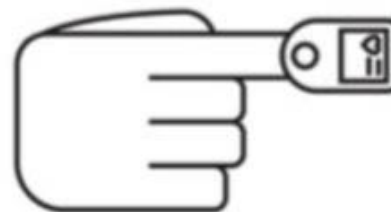
AVERAGE DAYS MONITORED 21

AVERAGE AGE MONITORED 68

TRAILBLAZING SERVICE

Which has made a tremendous impact........

700% ROI

£6,000,000 SAVING To health community

CONDITIONS

FRAILITY, COVID, LONG COVID. COPD HEART FAILURE, DIABETES

EMPOWERS THE PATIENT To be monitored & manage their own health.

UK 1st dignio & DIGITAL EXEMPLAR Nominated for HSJ Award

We believe digitising aspects of care can increase value and improve outcomes for organizations and individuals

Empower users to self-manage

" I had decided to apply for a place in a nursing home until I started receiving remote care assistance

— User (84) with COPD

Target care to users with greatest need

" The beauty of Dignio is that it will risk stratify the observations, and we can respond appropriately to the patient's needs

— Head of Clinical Team

Reduce hospital admissions

" I haven't been hospitalised at all over the last year. Before, the hospital was my first home, and my own home my second one

— User (71) with COPD

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Example: **How Dignio helps organizations deliver better care to patients like Elizabeth**

Elizabeth (81)
Hypertension, hypercholesterolemia, type 2 diabetes requiring insulin and chronic pain

Before	**Dignio products provided**	**Impact**
In-home adaptations that allow her to continue living at home (e.g. bathroom adaptations)	**Vital signs measurements** (blood pressure, pulse oximetry and glucose)	**Improved control** of own blood pressure and glucose levels, as well as own medication
5-6 daily home visits from her local home care organization	**Automatic medication dispenser**	**Identifies deterioration** before it becomes critical
In and out of the hospital in the past years	**Symptoms tracking via questionnaires**	**Increased sense of security & reduced anxiety** for Elizabeth and and her family
Poorly controlled type 2 diabetes requiring insulin	**Multidisciplinary care pathways** with plans, alerts and schedules for clinicians	**Secondary prevention by promoting healthy behaviours** (diet, physical activity, social contact)

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A solution for personalised care journey

Methodology	Technology	Scalability	Quality & Standards
10+ Over 10 years of methodology development	Flexible & Dynamic	Feature rich, yet intuitive	**NHS**ˣ Passed DTAC
Continuous feedback loop and co-design	Cloud based	30k patients on solution in Oslo alone	**NHS Digital** Published DSPT
Collaborative partner, not just a supplier	Connected Care Platform	**①** One solution for many pathways	**ORCHA** ORCHA approved
Change management expertise	Interoperable	**£** Affordable	**QMS** ISO, DCB & other standards compliant
	Communication tools		**HL7 FHIR**

dignio

https://vimeo.com/641221811/b4b6bb4bed