

North West Coast Academic Health Science Network

Business Plan 2015 – 16

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Section 1 – Executive Overview

Executive Overview

2014/2015 was a very successful year for the North West Coast Academic Health Science Network (NWCASHN). We are often asked about our Unique Selling Point (USP) as an AHSN, and this year has shown this to be our ability to build strong partnerships and take a trusted partner role, forge collaborations to overcome barriers to innovation, enable action and support system integration.

The AHSN has worked with partners, using the principles of co-design, co-production and co-resourcing. This approach has led to the development and delivery of a number of clinical programmes which will reduce health inequalities and deliver improved outcomes for residents. It has also enabled the AHSN to focus on creating a vibrant economy by investing funds alongside partners into a number of initiatives to improve the health and care infrastructure of the region over the next decade.

There has been a strong Return on Investment from the money allocated to the NWCASHN, which is outlined in Appendix E of this plan. Some of our investments will return benefits in a number of years and are part of the future innovation infrastructure of the region.

We believe that we can make a significant contribution towards the implementation of the Five Year Forward View (FYFV) and to be in an ideal position to play a lead role in supporting the innovative development of services. We are supporting a number of our local vanguard sites and developing our innovation scouts to support front-line innovation. Our system integrator role with healthcare, local councils, life sciences industry and universities to deliver an effective and efficient service for our residents is highlighted in the FYFV.

As part of this integration role, the AHSN has run/ sponsored a significant number of networking events for partners, this will continue during 2015/16. Our role of leading the Patient Safety Collaborative, enables us to support safety in care right across the tertiary, secondary, primary and care home systems.

Our relationship with local councils is developing at pace and we are being increasingly effective in networking our health and local authority partners and 'winning' funds for these collaborations. We engage with our industry partners and are working with them to explore a potential test bed site for the region.

We have recognised and grasped the opportunities to roll out precision medicines and digital health as part of our strategy for prevention of illness and improving health across the region over the next decade. These two themes join some of our other themes as cross cutting work plans to underpin all of our work programmes.

We engage with industry through the Northern Industry Forum, events, delivering business assist programmes, practical advice and matching products to receptive NHS trusts. We have a focus on procurement, which involves developing procurement processes to be enablers of innovation. We are a champion for the small and medium sized enterprises in our region who can add much value to the NHS. We also work very closely with our research and innovation hubs and our Collaboration for Leadership in Health Research Care (CLAHRC) and Comprehensive Research Network (CRN). This will result in commercial research opportunities being available for life sciences partners in our region and beyond.

Section 2 – Introduction to the AHSN

The AHSN was formed from the Treasury policy Innovation Health and Wealth (IHW) (2011), this policy was complemented by the Science and Innovation Strategy. IHW outlined 6 barriers to innovation in the NHS. These are summarised in the headings in the diagram below.

In 2014/15 the AHSN has commenced the process of addressing the barriers to innovation outlined in IHW and will use this work as a foundation for implementing the 2015/16 business plan, which will be focussed on the priorities of the region, in the context of the Five Year Forward View.

Summarised below are a number of actions, which the AHSN has taken in 2014/15 to address the barriers outlined in IHW and some of the actions that will be taken in 2015/16.

Poor access to evidence, data and metrics

- Funded innovations tracked for success
- Withdrawal from failing innovations
- Data dashboard being developed
- PPI strategy in progress

Lack of recognition of innovation

- Celebration events
- Innovation awards sponsorship
- Exhibitions of regional innovation

Lack of financial levers

- Pump priming innovation projects
- Gaining a number of external funding sources to fund innovation

Lack of commissioning tools

- Business plan based on commissioner intentions
- Pump priming commissioner projects
- Supporting commissioner-led applications for new models of care

Inconsistent Leadership culture

- Innovation Scouts Programme
- Science of Yes event
- Leadership in safety training
- European Connected Healthcare Alliance quarterly meetings

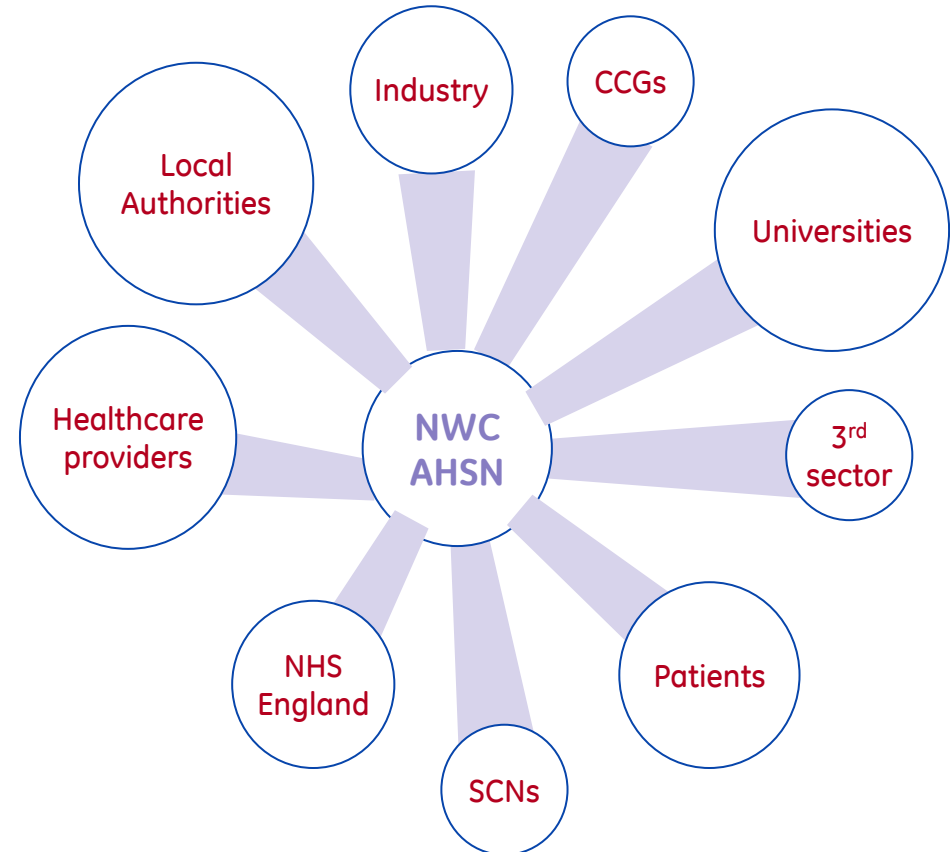
Lack of system architecture

- Establishment of North West Collaborative
- Input to the Smith/Levy review
- Support for 4 new models of care regions plus for non-designated regions

Our vision is to support the reduction of health inequalities and the development of a vibrant economy. We also aim to improve safety in health and social care.

Our key partners include:

- HealthWatches
- LEPs
- PHE and HEE
- NHTA
- Northern AHSNs
- CLAHRC
- CRN
- Three research and innovation hubs
- NW leadership collaboration.



The AHSN values are based on those found in the NHS Constitution:

Working together for patients

- Service excellence, ; regional improvement, working for people not just patients

Respect and dignity

- It's a people organisation – sharing and caring for our NHS colleagues
- Integrity
- Honesty and Trust

Commitment to quality of care

- Safety
- Experience
- Effectiveness

Compassion

- Fairness and Equality

Improving lives

- Make a positive difference
- Development focussed

Everyone counts

- Appreciative inquiry
- Empowerment
- Supported and challenged

However the AHSN has developed its own set of values wider than the NHS Constitution remit:

Do things differently

- Entrepreneurial innovation
- Creative implementation
- Commitment to change
- Sustainability in mind

Clear Space

- Reflection, creativity and planning.
- Value Flexibility
- Having Fun

Courageous & achievement focussed

- People are consistently hard working
- Risk taking and challenging status quo
- Responsibility and commitment
- Passionate about what we do
- Going the extra mile

Co-creation, co-design, co-resourcing

- Engagement & collaboration with- "partners"
- Network Engagement
- Sharing ideas
- Sharing resource to fund projects

Section 3 – Looking back at 2014/15

All of our clinical work streams were planned for an initial two year period and will continue into 2015/16 and beyond. Key achievements are listed below:

Stroke/ Atrial Fibrillation (AF)

- AF Public Awareness raising campaign delivered across Liverpool in 2014
- Genotype guided dosing for warfarin project funded applied for and awarded by the CLAHRC.
- AliveCor devices deployed in Warrington, South Sefton, Liverpool, Halton, East Lancs, Greater Preston. Evaluation underway
- Technical review for AF developed and delivered with Greater Manchester, Cumbria and Lancashire Strategic Clinical Network (SCN)
- Delivered workshops for the eCare Pathway with Cheshire and Mersey SCN
- Support to UCLAN in commissioning a Stroke app, which will be delivered in autumn15
- Support for South Sefton CCG and MSD to deliver an evidence into practice programme for patients with heart failure
- Support for Cheshire & Merseyside CSU to commission an evaluation for their Patients in Control programme.

Precision medicine

- Provided funding and drove the 100,000 genomes bid, which led to the successful award of North West Coast Genomics Medicine Centre. (GMC) - a collaboration between all secondary care providers across the North West Coast, hosted by Liverpool Women's Hospital. The GMC will primarily deliver the 100,000 Genomes Project and is part of transforming healthcare across all patient pathways.
- Funding of 4 clinicians to lead the project continues into 2015/16 and the second phase of extending this work will be scoped in 15/16 when the genomics work stream will become a cross-cutting AHSN work stream across all our programmes, recognising that this is future of medicine.

Mental Health

Successfully engaged with key stakeholders across statutory and voluntary sectors over the year. This has led to the development of a specific programme for depression for 15/16 as well as the introduction of a dedicated assessment tool for vulnerable children and young people. The AHSN supported the successful development between a small local digital company, a mental health provider and an arts organisation in the launch and of an app which supports self management in young people's mental health. This model of working closely with service users will be replicated in other projects.

Workforce Development

- Operationalised our Innovation Scouts programme to support organisational innovation champions attracting industry and academic leaders, both national and global, to contribute to their development. This programme improves networking and sharing of innovative ideas between Trusts who have developed working solutions to difficult problems
- Oversight of Cheshire & Merseyside workforce project (Forerunner fund HE NW) with a budget of £50k received into the AHSN.

International

- Presented at the World Health Design Forum
- Led a successful study tour to incorporated best practice in interoperability from Austria
- Partner in the Stop and Go project to look at PPI across Europe. The project has developed the European specification template and aims to procure technologies across five economies by the end of the year.
- Partner in the digital maze challenge sourcing a study tour to Sweden for five successful SMEs.
- Successful in a European bidding process with AAL for the ENSAFE project which aims to review the process of taking a new innovative product to market with patient and end user experience as a key enabler.

Digital health

The AHSN has developed a region wide ecosystem to enable better connected health and economy growth through digital innovations. This work is linked too a further 24 ecosystems Europe wide which has offered the region the opportunity to develop at pace through sharing and learning of best practice.

As part of the ecosystem work, we have developed a connected health working group which consists of key leaders from the region who meet every six weeks to drive key areas of the work forward.

Collaborative working with Cumbria University and CSC to develop a Tele-health Readiness Tool which support organisations and economies to assess their level of readiness. This tool has received regional, national and international interest and usage.

Our digital health programme will become an underpinning theme in 2015/16 as we will incorporate digital methods of delivering healthcare into all pathways.

Commercial Engagement and Business Support

- Won the Liverpool City Region LEP bid for Business Support to sit alongside its New Markets Programme.
- Established as the preferred provider for Lancashire LEP to provide the very same support in 2015/16.

Procurement

- Facilitated the Procurement of bringing together SMEs and procurement departments from provider trusts.
- The Cheshire & Merseyside Procurement Heads of Procurement Meetings are being held at our offices – where we have started to invite a number of companies/SMEs to pitch their products/services.

Research/ Innovation

- Funding secured from NHS England to develop a joint CLAHRC project on knowledge Mobilisation
- Support given for Regional Innovation Funding bids (Telemedicine for, Paediatric Neurology), Heart Failure App; App for head and neck patients. Projects successfully up and running
- Three workshops delivered to support the development and understanding of innovation in region
- Support from Oliver Wyman in the delivery of the Sustainability Assessment Framework for the Healthier Lancashire Project.

Communications and Marketing

- Developed and established the NWC AHSN brand across all communications and marketing materials both in print and online.
- Delivered a host of successful events, for up to 450 people, across the North West Coast region, engaging with thousands of stakeholders in the NHS, academia and industry.
- Gained a wealth of media coverage regionally and nationally reaching out to hundreds of thousands of people.

Creating space

- Established a large board room/meeting room with break out facilities at our headquarters in Vanguard House. This room is free to use for AHSN associated organisations and is increasingly being used by our stakeholders, partners and members to run their events and meet with their staff.

Medicines optimisation (MO)

- Developed a trade-marked MO strategy for the region.
- Engaged with local stakeholders to develop priority areas where innovation will improve outcomes in MO and established work programme for 15/16.
- Commenced support of an electronic transfer from hospital to community pharmacy with a local CCG.
- Supported 2 international companies to access and support the NHS.
- Managed the Proteus technology into the UK with evaluation sites established in Liverpool, Sefton, Lancashire and Newcastle in a variety of healthcare settings and across disease areas. The projects will establish the value of Proteus as a decision support tool and or an adherence support aid. The disease areas under investigation are dementia, hypertension, hypercholesteremia and step down care to support independent living. Obtained inward investment into the AHSN from Proteus.

Fundraising

In addition to the funding sources already outlined the AHSN has achieved the funding sources below:

- Support for the Lancashire Digital Strategy application for the tech fund - successful in securing £1million.
- Support for the Transformation Challenge Award - Development of a commissioning collaborative across six Local Authorities to improve commissioning of complex care services for adults with learning difficulties / complex mental health, implementation of assistive technologies and transformation of direct care payments for care – successful in securing £750,000
- Support for the application to become the North West Coast Genomics Medicine Centre (GMC) to deliver the regional element of the national 100k genome project – successful in securing £1.1 million.
- Internal bid to the Ambient Assistant Living funding stream for the ENSAFE project – successful in securing £84,000.

Section 4 – Looking forward to 2015/16

Health Innovation Priority Areas

Our priority areas for 2015-16 have been identified to enable us both to maximise the impact of work which is currently in progress, and to take account of other local and national drivers.

Planning of activities within each priority area draws upon work generated through the core platforms and cross-cutting workstreams described elsewhere in the business plan.

This approach enables us to optimise use of our resources for delivering innovation within specific areas whilst at the same time enabling to explore other areas in the future as our platforms and cross cutting workstreams mature.

In 2015-16 we shall drive innovation through a combination of new treatments, new technologies and new working practices in areas identified opposite:

Much of the work will focus on particular care pathways and on current issues around service design and development identified by local NHS organisations.

Safety							
Leadership	Paediatric/Adult care transition	Hydration	Sepsis	Technology for safety	Support to avoid frail elderly admissions	Good practice Care Homes programme	Health and wellbeing of staff
					Measurement	Medicine optimisation	

Clinical			
Stroke	Mental health	Musculoskeletal innovation	Reduce alcohol related A&E attendances

Cross Cutting Workstreams

Our cross-cutting workstreams provide a focus for bringing together key stakeholders, experts and skill bases to drive and facilitate innovation and system re-design across a range of health conditions and settings.

All workstreams share the ethos and common purpose of driving innovation to:

- Reduce health inequalities
- Enhance disease prevention and treatment
- Advance green healthcare.

The cross-cutting workstreams for 2015-16 are shown in the diagram opposite.

Much work is underway developing all of these work stream, one example of this development work is a project that will commence in early 15/16 to produce a narrative to describe the digital health initiatives that are rolling out across the county and the North West Coast. This project will involve health, academia and industry and the outcome will be to;

- define the potential 'value' of the initiatives working together (more than the sum of the parts)
- reference material for future business planning/ economic growth / building strategic partnerships
- attract inward investment
- inform AHSN stakeholders.



Our strategy is founded upon four core platforms, which are part of our licence from NHS England, all of which underpin our overall approach, our strategic planning and our specific activities. In 2015/16 we will closely measure our achievement against these platforms, which are summarised below:

Work with commissioners and public health bodies

- Focus on the needs of patients and local populations: support and work in partnership with commissioners and public health bodies to identify and address unmet medical needs, whilst promoting health equality and best practice.

Build a culture of partnership and collaboration

- Promote inclusivity, partnership and collaboration to consider and address local, regional and national priorities.

Rapid Spread of Research and Innovation into Practice

- Speed up adoption of innovation into practice to improve clinical outcomes and patient experience - support the identification and more rapid spread of research and innovation at pace and scale to improve patient care and local population health.

Improving Economic Growth

- Create wealth/ improve economic growth through co-development, testing, evaluation and early adoption and spread of new products and services.

Core Platform 1 - Work with commissioners and public health bodies

The AHSN supports many of the regional development projects in its region including

- Healthy Liverpool
- Better Care Together
- Healthier Lancashire
- Shaping Sefton

In 14/15 a number of sites were supported by the AHSN in their application to be vanguard sites or multi-specialty community providers. In 2015/16 the AHSN will provide support as required for the four sites which were successful with their applications.

The AHSN is a supporter and contributor to the Well North Project, which is funded by Public Health England and local regions. This project seeks to enable a move from a high cost biomedical model to a high value healthcare system. The programme focuses on economic growth and reform across northern local authorities to ensure that its citizens access employment opportunities. This programme sits firmly within this ambition. Well North seeks to improve the health and wellbeing outcomes of individuals and families in our most deprived communities to deliver three strategic goals:

- Addressing inequality by improving the health of the poorest, fastest
- Reducing levels of worklessness a cause and effect of poor health

- Reducing premature mortality.

More detail of Well North is provided in Appendix C.



Core Platform 2 - Build a culture of partnership and collaboration

NWC AHSN is pioneering a new, innovative way of working by supporting projects that should give longevity of health and innovation infrastructure for the region around the AHSNs core themes.

Our aim is to close the gap between best practice and current practice through collaborating with patients, the NHS, academia and industry to co-develop solutions to joint challenges. Our goal is to improve patient and population health outcomes by translating research into practice across Cheshire, Merseyside, South Cumbria and Lancashire. We are delivering a step-change in the way the NHS identifies, develops and adopts new innovative products and services. We have a unique opportunity to align education, clinical research, informatics, innovation and healthcare delivery to improve patient care.

The AHSN supports three research and innovation hubs in its region, one which was newly developed in 2014/15. These hubs co-ordinate research activity in their footprint – Liverpool, Lancashire/ South Cumbria and Cheshire.

Bi-annual summits are held for the regions nine universities and in 2015/16 these will focus on international research (June 15) and research dissemination/ knowledge exchange (Dec 15).

Workforce development is also supported with the AHSN supporting the Forerunner Cheshire and Merseyside workforce development project and the North West Scientist Network.



Core Platform 2 - Build a culture of partnership and collaboration (continued)

In 2014/15 NWC AHSN awarded £1.1 million funding to organisations for the implementation of infrastructure to aid innovation.

The funding will help partners to develop and install infrastructure which will smooth the way for the uptake of new systems and programmes, and improve efficiency and innovation in health and social care delivery. Initiatives supported through this scheme will enable the development of large-scale, multi-partner infrastructure to support health innovation, and or job creation, across the North West Coast. Match-funding for these initiatives equates to approximately £3m and progress is monitored by the AHSN board to ensure successful delivery.

Alder Hey Children's Hospital was awarded £280,000 to fund the internal fit out of a new innovation hub which is set to be constructed. Incorporating a hospital 'living lab' and co-creation space, the hub will be used for testing and training, with potential for international partnerships with organisations including Boston Children's Hospital.

Liverpool Clinical Commissioning Group has been awarded £136,000 to install an aggregator which will enable new digital technologies to link to and access the Trust's NHS IT infrastructure; creating benefits for the NHS and SME suppliers. Mersey Care successfully bid for £125,000 which will fund the development of an Employment and Enterprise Hub within the organisation's new Centre for Recovery and Social Inclusion. The

hub will be accessed by service users, carers, staff and the public. It will integrate existing models of vocational support and engage local employers, entrepreneurs, the voluntary sector and the local community.

The 'Connecting Care across Cheshire Pioneer Programme' which brings together two councils and four clinical commissioning groups to efficiently deliver integrated care has been awarded £100,000. While the Cumbria Clinical Commissioning Group has been allocated £115,000 which will go toward the implementation of software which will help to address patient flow problems in South Cumbria and North Lancashire.

Appendix E gives more details for match funding / investment into 15/16.



Over the last year, the AHSN has been instrumental in the development of a regional Connected Health Ecosystem, which underpins the goal of improving health outcomes. A key element of this ecosystem is to improve interoperability, which is the flow of electronic information across care pathways to frontline staff, patients and carers.

To support this interoperability agenda the AHSN has invested time and resources into pioneer communities across the region to establish their information sharing solutions. In 2015/16 this work will continue with:

The North Mersey iLINKS Programme

The iLINKS Informatics Transformation Programme is being implemented across the North Mersey health and social care economy as part of a shared vision to improve health and social care by providing professionals with the information they need to enable them to work and share collectively around the individual. The programme is an enabler to commissioner and provider transformation strategies, supporting the move to a culture where we share information by default, questioning 'how do we' rather than 'why can't we'.

The strategy objectives are to:

- Create and deliver an information exchange across health and social care
- Ensure informatics system wide coherence and strategic

leadership

- Exploit the benefits and investment of existing and future technologies.

Huge strides have been taken to work on key priority areas to enable the programme including the development of a scaled sharing and information governance model for the whole economy which will be enabled by a digital interoperability roadmap.

Key deliverables for 15/16 will see the sharing model signed off by all organisations with a move towards implementation providing practitioners with key information to support care delivery through the interoperability of strategic health and social care IT systems.



The Lancashire Person Record Exchange Service (LPRES)

An innovative solution that is breaking new ground in the NHS, with the introduction of an 'on demand' model to sharing information. The technology, widely used across the world, enables organisations to retain control of their data and only publish what is necessary for the provision of care. The scalability of the solution means information can be exchanged both within a community and across a region.

The LPRES project forms part of a broader transformation programme, called Healthier Lancashire. Implementation work has already started, with the development of a shared care plan for frail elderly that brings together disparate information from primary, secondary and social care into one electronic document. In 2015/16, LPRES will be expanded to include more organisations and information types. The project will also begin to explore how citizens can use this technology to access their own care data, empowering them to take more control over their health and wellbeing.

Supporting Lancashire's interoperability solution is a new tool for managing the complexity of Information Governance (IG). This web application, initially funded by the AHSN, is now attracting interest at both a regional and national level.

Expansion of Interoperability across the Region

In addition to the LPRES and iLINKS projects, the AHSN is commissioning a piece of work to support interoperability across region. The output will assist commissioners and providers by producing:

- The clinical / operational benefits of record sharing
- Practical guides for effective information sharing
- A library of potential solutions and where they are being implemented

The AHSN will also facilitate the creation of an Interoperability Community of Interest group to promote collaboration between local initiatives. Over the long-term, as the level of interoperability matures across the North West Coast, the AHSN will work with stakeholders and the public to promote the use of shared data for population health research and planning.

Core Platform 3 - Rapid Spread of Research and Innovation into Practice

The AHSN works locally with a number of partners to speed up adoption of innovation into practice, improve clinical outcomes and patient experience by the rapid uptake and spread of research evidence at pace and scale.

North West Coast AHSN works closely with the North West Coast Collaboration for Leadership in Applied Health Research (CLAHRC). The objectives and outcomes of each organisation are closely aligned and in 2015/16 the AHSN will put into practice the CLAHRC health inequalities action tool (HIAT). The two agencies will also work together on joint projects around reducing alcohol admissions to A & E, epilepsy, stroke, mental health and precision medicines.

The Clinical Research Network (CRN) and the AHSN have a strong working relationship. This will be strengthened in 2015/16 with a focus on industry engagement.

The AHSN also works with other agencies to identify innovations on a national and international level that can transform patient outcomes and to ensure appropriate evaluation of the product is applied. One such innovation is the Proteus technology (see Appendix B).

Officers of the AHSN sit on a number of national research bodies including the Health Services Research Network Board, NIHR Dissemination Centre, Health Services and Research Delivery

Programme Commissioned Priority Panel and NHS England Knowledge Mobilisation Programme. These bodies are integral to providing oversight and rigour to many of the research programmes that provide an evidence base for adoption of new models of care into the NHS.

In 2015/16 the AHSN will recruit a Researcher in Residence in partnership with Lancaster University to support the developing new models of care across its geography.

In 2014/15 the AHSN has been assessing the suitability of research software in 2015/16 we will work with our partners to extend the reach and capability of the FARSITE software.



***National Institute for
Health Research***

Clinical Research Network
North West Coast



Innovation Scouts Programme

Our Innovation Scout Programme is designed to create a culture change movement which is inclusive of all our NHS, Local Authority, and Academic colleagues along with other partners including industry and the voluntary sector.

The first phase of the Innovation Scouts Programme, which commenced rollout in 2014/15 has been specifically designed to offer our NHS partners an opportunity for a senior manager/leader to work with other like-minded individuals across the region to understand the challenges and cultural implications needed to increase the adoption of innovative practices, technologies or treatments. Having a named individual in every NHS organisation will help us collectively provide a consistent and collaborative approach to delivering key innovations and service improvements across the NWC region.

The role of an Innovation Scout is to encourage a culture of innovation within their organisation and to proactively promote and encourage adoption of evidence-based innovations, integrating it as a core process and embedding in staff behaviours. Please see the attached flyer.

Whilst there is no remuneration for undertaking the role there is a comprehensive support package which includes workshops, bespoke support, coaching and training. Nominations are made by the organisation's Chief Executive.

Innovation Scouts must be motivated to bring about improvements to patient outcomes, cost effectiveness and patient experience through the use of new techniques, products or treatments. Innovation Scouts should be on a trajectory to hold an executive position; have established relationships (or the facility to create them) with members of their executive team; and a comprehensive network throughout their organisation.

The NWC AHSN has committed to support every Innovation Scout and has therefore created a comprehensive package of benefits. In return we ask that Innovation Scouts:

- Actively support their organisation in creating a culture where innovators are supported and innovations grow
- Seek out opportunities to promote the spread of evidence-based innovations
- Attendance at least 2 events run for the Innovation Scouts each year
- Have evidence of their work as an Innovation Scout e.g. newsletter articles, participation in the work of the NWC AHSN, innovation and improvement work with demonstrable outcomes etc., and
- Encourage colleagues to incorporate innovation into their own practices

Core Platform 4 – Improving Economic Growth

In 2015/16 a new scheme, 'Innovations with Impact' will be launched whereby NHS partners can apply for funding to pay for the early adoption of innovative technologies with a view to these being evaluated in practice and adopted more widely if successful.

Through a tender process Liverpool City Region Enterprise Partnership (LCR LEP) chose NWC AHSN as the delivery partner for their business assist programme. A similar scheme has also been agreed with Lancashire Enterprise Partnership.

These programmes offer SMEs in the region bespoke workshops on topics such as: NHS structure and organisation, commissioning and procurement, evidence base and health economics. The delivery team will also be providing:

- Guidance for new product development
- Evidence gathering
- Focus Groups
- Access to potential customers

The programmes are in their infancy but will be enhanced by a newly created health and life science post activities which combined will encourage new businesses, attract established companies to the region, grow existing businesses and further develop a skilled workforce, with the key anticipated outcome

being an increase in jobs, within the sector, and across the region.

The AHSN also works with companies who have been successful through the Small Business Research Initiative and through the AHSN's own infrastructure investment schemes. A number of technologies have been identified and adopted in 14/15 and the AHSN led the SBRI process for Child and Maternal Health. Similar opportunities will be sought in 15/16.

In addition the AHSN is a founder partner in the National Innovation Accelerator and through this scheme will support a number of innovative technologies into early stage adoption in the region and then nationally.



Northern Industry Forum

In 2014 NWC AHSN led the formation of the Northern Industry Forum (NIF). This forum brings together the four AHSNs in the North of England, the Northern Health Science Alliance and industry groups representing both large corporate companies and SMEs across the pharmaceutical, medical technology, diagnostic and biotechnology sectors.

The forum was established to maximise and streamline communication and effective working between the NHS and health-related industries with a location and/or interest in the North of England.

For industry, the primary aims of the Forum are to:

- Help industry to understand the unmet needs of the region and the strategic direction of the NHS
- Provide a forum to align innovation with clinical need
- Ensure faster adoption of proven products
- Provide easier access to the NHS in the North of England, especially for SMEs
- Lower the risks associated with investment in bringing products to the NHS market
- Provide a single facilitation point to solve broader issues for industry partners regarding access, administration and other barriers to progress.

For the NHS the primary aims of the Forum are to

- Ensure the NHS in the North of England has early access to the technologies and products required to deliver cost efficient, clinically effective patient centred care and treatment
- Provide a focus for inward investment in the region
- Understand the remit and capacity of the industries located in its footprint.
- Explore opportunities for collaboration
- Ensure an approach to engagement and partnership that is aligned with the health objectives and strategies of our NHS organisations.

International links for industry

As priorities are Implemented and deployed ,the AHSN will position itself as an exemplar region providing better patient care , through innovation and collaboration.

Being a showcase creates economic and export opportunities but only if those opportunities are recognised and promoted outside of the AHSN Region.

As an example , if a local company wins a contract and deploys it successfully the AHSN will use the its networks e.g. the International Networks of the ECHAlliance and the CCHAlliance to make potential buyers aware of those successes and the Networks will provide presentation opportunities , which hopefully will create opportunities for businesses and more jobs locally .

Commercial research

NWC AHSN and the CRN NWC will develop a centralised mechanism for establishing a unified commercial contract and costing model for delivering commercial research trials across the network. The model will be established in partnership the regional health hubs in Cheshire, Liverpool, Lancashire and Cumbria.

This streamlined service will attract commercial companies to the NWC bringing more investment into the region. Key outcomes of this initiative will be an increase in the number of companies placing research studies in the NWC region and an overall increase in the number of trials. This would be significant for the CRN, the AHSN and the health hubs as it would increase income for partner organisations, particularly those that don't have well established links with the pharmaceutical industry.

Events

Throughout the year NWC AHSN will host a range of events to bring industry partners together with University and NHS partners, providing opportunities for networking and developing collaborative partnerships. The events will be focused on key priorities including patient safety, medicines optimisation, infection control, procurement, ecosystem development and innovation.

Support for SMEs

NWC AHSN provides support and advice to SMEs across the NWC region wanting to engage with, and sell to, the NHS. We also welcome approaches from SMEs outside our geography with proven technologies that could have a positive impact in our core areas of work.

As a result of developing a business assist programme that the Local Enterprise Partnerships in Liverpool City Region and Lancashire part fund we offer intensive support to SMEs in these areas. Specifically NWC AHSN provides bespoke advice to companies in a number of key areas including, but not limited to:

- NHS structure and processes
- Understanding the potential market and defining the route to market
- Developing a clear value based offering that will lead to cost and efficiency improvements, better patient outcomes and clinical excellence.
- Developing a meaningful health economic case
- Identifying how a new product or service would impact on current patient pathways and procedures
- Advice regarding clinical evaluations and trials to ensure the evidence and data gathered will support regulatory (CE) submissions and / or clinical decisions
- Understanding how products and services are procured and commissioned.

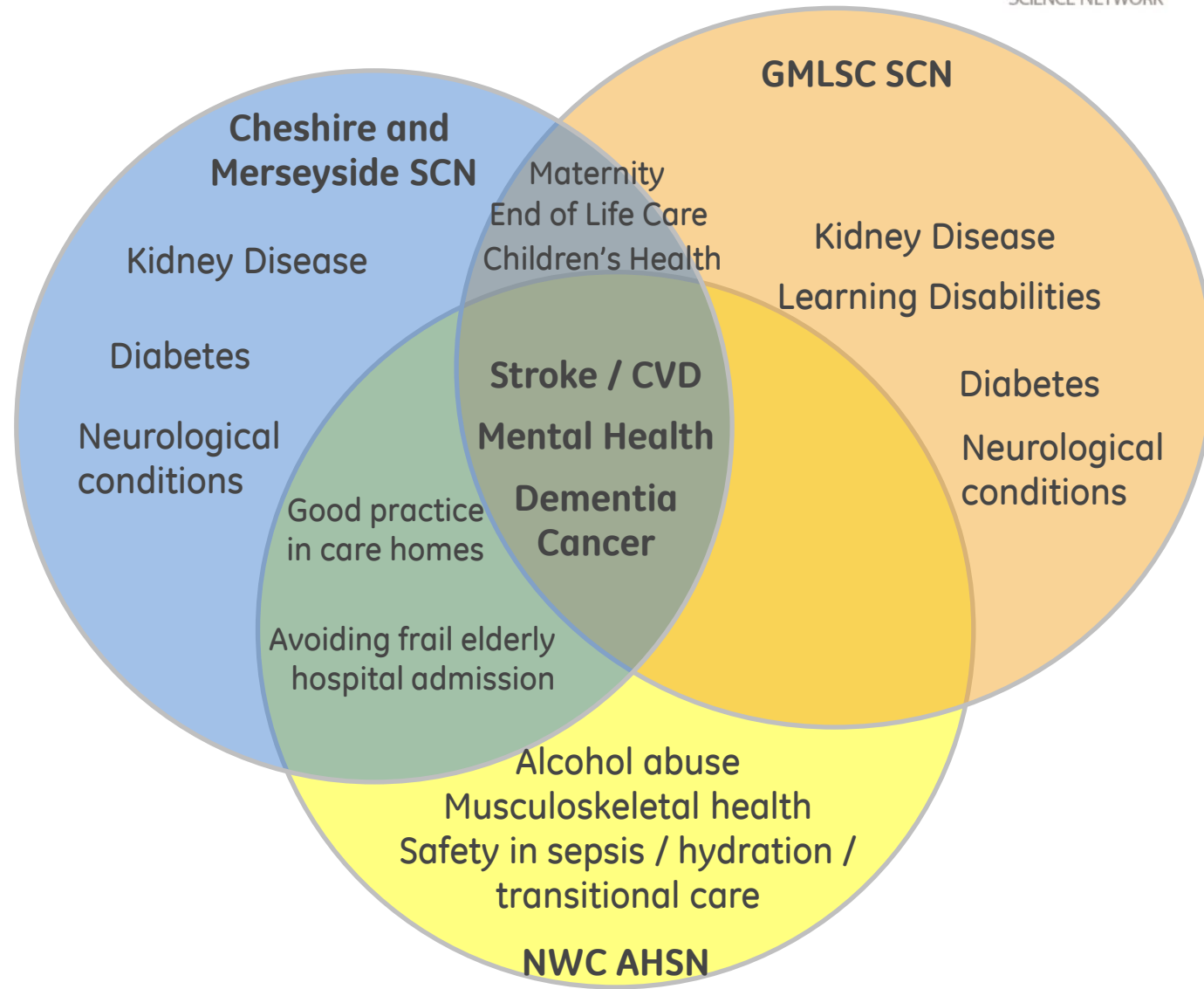
Key Partnerships – SCNs

Strategic Clinical Networks

The alignment of our health innovation priority areas with those of the two North West SCNs is depicted diagrammatically

SCN work to agree clinical pathways with commissioners and AHSNs put these tested pathways into practice.

The detailed projects which underpin each of these themes vary from SCN to SCN however due to national priorities influencing work programmes, there are many similarities, which reduce health inequalities across the region.



Key Partnerships - Others

NHS England

NHS England are the main funder of the AHSN and assure themselves on a quarterly basis that the AHSN is meeting its duties in accordance with the Innovation, Health and Wealth Principles. NWC AHSN has a close working relationship with NHS England North and the sub-regional teams and also a strong relationship with colleagues on a national level. The AHSN's vision of reducing health inequalities and contributing to a vibrant local and national economy are consistent with the principles of NHS England.

North West Learning and Development Collaborative

The North West Learning and Development Collaborative includes North West Coast and Greater Manchester Academic Health Science Networks, AQuA, the North West Leadership Academy and Health Education England.

The collaborative works together for the benefit of all its members across the region. This involves planning activities and inputs around safety, leadership, measurement and future workforce and being a single point of reference and oversight function for the benefit of members.

The collaborative has developed to ensure that there is no duplication of work and to maximise the supportive assets and energy of the organisations involved. Working together ensures that a full complement of support is available for organisations in the region.

Local Authorities

During 2014/15 the AHSN has been active with a small number of Health and Wellbeing Boards and features strongly in the forward plan for the Liverpool Health and Wellbeing Board. These contacts will be extended in 2015/16 as the AHSN extends its NHS work into more broader work across integrated care pathways with local authorities and their residents.



Having already established a robust, active and effective framework for joint working with all key sectors and organisations across the NWC, we shall continue to drive and promote strongly an integrated approach towards strategic planning and development by:

- Cross-representation on organisations' Boards, Management Groups and Advisory Groups
- Joint funding and bidding initiatives
- Commissioning specific projects and skills utilisation
- Joint events, conferences and workshops
- Staff secondments.

Organisations working with us on this basis are shown below.

Local	Regional	National	International
<ul style="list-style-type: none"> •All NHS Trusts •All CCGs •9 Universities •4 LEPs •Local Authorities •Research and Innovation hubs and partnerships •NIHR CRN NWC •NIHR CLAHRC NWC •NWC Genomics 	<ul style="list-style-type: none"> •Strategic Clinical Networks •Clinical Senates •Healthwatch •North West Procurement Development Agency •NW Leadership Academy •Health North •Well North •Northern Health Science Alliance (NHTSA) •Northern Industry Forum •BioNow •Medilink •Advancing Quality Alliance (AQuA) 	<ul style="list-style-type: none"> •UKTI •Healthcare UK •Medical Charities •Health Foundation •NHS Employers •Association of British Healthcare Industries •Association of British Pharmaceutical Industries •British In Vitro Diagnostics Association •Sepsis UK •NHS England •Health Education England (and Health Education North West) 	<ul style="list-style-type: none"> •European Connected Healthcare Alliance •China Connected Healthcare Alliance •Coral Network •Innolife Knowledge and Innovation Community •Stop and Go programme •Ensure AAL programme

International Partnerships

During 2014/15 the AHSN developed a European Strategy aligned with it's e-health and healthy-ageing agenda. The AHSN also joined a number of networks e.g. the Coral Network and the European Connected Healthcare Alliance (ECHA), which co-ordinates 25 ecosystems throughout Europe and the US . Increasingly the U S is interested in the UK delivery of Health and Social Care and the NWCAHSN can be their window to that experience .

This membership also provides NWCAHSN with immediate access to specific connections in many countries ,partners for European Projects and opportunities on International Speaking Platforms and allows the AHSN to compare work streams with organisations with the same priorities . This speeds up implementation and deployment in the NWCAHSN region .

The AHSN will continue to run it's very successful quarterly ECHA information exchange and networking events during 2015/16.

The AHSN has been successful in working on a number of European projects and securing a number of European grants – Stop and Go, Innolife, and the Ensafe Ambient Assisted Living Programme. As well as delivering on these projects the AHSN will support a number of its Trusts to develop their international presence in 2015/16.

China is now investing heavily in its Health & Social Care Infrastructure and through the China Connected Health Alliance specific projects have been identified which will provide opportunities for both the AHSN and its members.

The AHSN is a member of the sister body of the ECHA the China Connected Health Care Alliance (CCHA).

Liverpool and Lancaster University already have a strong presence in China and, working with key partners, the AHSN will develop a strategy for business development and innovation in China during 2015/16.



The following events will be among those sponsored by NWC AHSN in 2015/16.

-  Bionow Awards
-  IFB Awards 2016
-  NHS North West Excellence in Supply Awards
-  Red Rose Awards
-  Medilink North West Awards
-  North West Coast Innovation Awards

Safety

- Leadership
- Paediatric/Adult care transition
- Hydration
- Sepsis
- Technology for safety
- Support to avoid frail elderly admissions
- Good practice Care Homes programme
- Health and wellbeing of staff
- Measurement
- Medicine optimisation across the system

Cross Cutting Workstreams

- Prevention & early detection of disease
- System integration
- Reducing health inequalities
- Use of technology
- Procurement
- Innovation culture
- Effective partnerships
- Digital health / data integration
- Resident involvement
- Business support
- Future workforce
- Using Greenspace in health
- Precision Medicine

Clinical

- Stroke
- Mental health
- Musculoskeletal innovation
- Reduce alcohol related A&E attendances

Core Platforms

Work with commissioners and public health	Build a culture of partnership and collaboration	Rapid Spread of Research and Innovation into Practice	Improving Economic Growth
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Section 5 – Leadership, Governance and Assurance

Governance

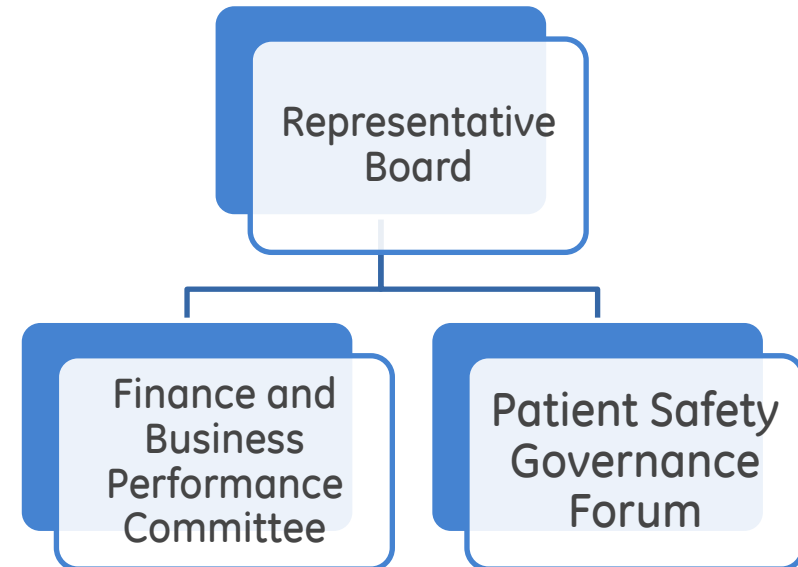
- The AHSN has a representative Board of c 40 members who are representative of their sector. This Board meets at least 5 times a year and members are expected to attend at least 3 out of 5 meetings.
- This Board is underpinned by a Finance and Business Performance Committee, and a Patient Safety Governance Forum, which meets at the same frequency as the Board.
- All finances for the AHSN including Patient Safety finances are monitored by the Finance and Business Performance Committee
- An internal weekly Executive Team meeting is held plus a monthly Executive meeting with Programme Managers to assess and support progress with individual work areas.
- Monthly one to one meetings are scheduled with all staff to offer support.

Assurance

- The AHSN completes a quarterly assurance report for NHS England, including a risk register
- An annual assurance report is completed for the host trust
- KPIs and measures of success are included in all individual work streams
- In 2014/15 an assurance report was commissioned from external auditors. Any actions will be completed in 15/16.

Leadership

The AHSN's leadership team possess a variety of backgrounds - NHS, academia, industry, economic growth and local authority. This mix of skills, experience and a collegiate approach, combined with strong governance systems, ensure that actions of the AHSN all contribute to building a strong collaborative health and social care infrastructure.



Appendix A – Programme Definition and Outcomes (see separate document)

Appendix B – AHSNs as market makers – Inward Investment Case Study

Evaluation of medical device to measure medication compliance: a collaboration with Proteus Digital Health

Key points at a glance

NWC AHSN seconded a project manager to Proteus Digital Health. This post is fully funded by Proteus and works with them on a programme of engagement with local healthcare providers to evaluate an innovative device for measuring compliance with medication. Following a 6 month programme it became evident that the device was generating significant interest and it was time to move beyond collecting performance data and to focus on generating the clinical and economic data needed to advance adoption of Digital Medicine. As such NWC AHSN was appointed as the lead partner to deliver a two year programme across 5 clinical areas to evaluate the clinical and health economic benefits of Digital Medicine. This involves the AHSN investing senior clinical and programme management resource into the project.

Background Summary

The Proteus offering includes an ingestible pill and a wearable patch and tracks when a patient has taken medication and how they are responding to therapy. The Proteus offering enables more informed clinical decisions as it becomes clearer for the physician to differentiate between non-adherence and lack of response. i.e. the technology can identify whether it is a compliance issue or an efficacy issue.

As a company, Proteus believe in digital health for everyone, everywhere to allow people of all ages and cultures to power their own health, taking better care of themselves and each other. Their vision is to integrate medicines that treat chronic conditions with mobile technology- via an ingestible sensor- to make healthcare more accessible, manageable and innovative. By providing the right technology to individuals who deliver and receive healthcare a more effective healthcare system may be built with new care paradigm.

Challenge identified and actions taken

Proteus Digital Health and the NWC AHSN agreed to second a project manager to support the company in engaging and working with commissioners and providers via a commissioning through evaluation process. As the device is CE marked Proteus Digital Health had hoped that once the device was introduced into usual care, evidence within the care pathway could be achieved. The initial scoping project highlighted however, the need for even more informed evaluations, over and above the measurement of a patients medication taking behaviours.

NWC AHSN has worked in partnership with Proteus to develop clinical protocols, stakeholder mapping exercises and direct contact with targeted NHS organisations to build a network of 'first adopters' that could initially evaluate new technologies with the intent of subsequent advocacy based upon potential successes delivered. In addition the NWC AHSN has worked alongside Proteus Digital Health to engage senior leaders from other networks across the North of England to form a Steering Group. The Steering Group allows potential work streams to be reviewed and agreed and is supported by an Operational Group to drive delivery.

Objectives and outcomes

A 2 year evaluation programme across 5 clinical areas has now been agreed and NWC AHSN is the lead partner to ensure delivery. The Medical Director for NWC AHSN is Chair of the steering committee responsible for overseeing the various work-streams that will be implemented over the next 2 years. Whilst NWC AHSN is the lead partner it is envisaged that the work-streams will be carried out across the north of England to ensure sufficient patient numbers and engagement with key clinical leads. NWC AHSN has funded a post-doctoral fellowship who will be involved in both the design and the outcome measurements of the evaluation programmes.

Proteus Digital Health is working in partnership with the NHS and is committed to a value-based commissioning model that requires both clinical and economic benefits. Our goal is to ensure increased access and affordability and of high quality universal care provided by the NHS.

Appendix C– Partner Strategic Plans

The vision of Well North sits within the principles of Public Service Reform. It recognises that local authorities are driving transformational change in the redesign of services, partnership working and breaking down silos to deliver better outcomes and value for money. Well North will add value to this work by developing and testing innovative approaches to improve the outcomes of those with the poorest health and most complex lives, building from public service reform programmes already underway. The lessons from the initial pilot areas will inform the wider roll out and ensure the learning is captured within the wider context of public service reform. Against this context, Well North is based on the following key drivers:

1. The **ambition** by Public Health England **to establish a strategic programme of work** which supports the integration of health and social care at a scale and pace, never previously, attempted in the United Kingdom.
2. Health services are characterised by long-standing problems that are being **managed, not solved**, around the biggest determinants of health where the current situation is both unacceptable and unsustainable.
3. The high levels of **worklessness** amongst people with mental health conditions suggests that there are more complex social costs that may not have been included in the overall assessment of mental ill health. Many of these individuals will therefore have a complex, multi-layered dependency on public services. A focus on causes, not symptoms, flows from this.
4. The **excessive level of hospitalisation rates** and costs associated with these hard to reach communities recognising some 95% of health funding still goes on treatment of disease rather than on prevention and early intervention. Effective initiatives to both validate impact and demonstrate a reduction in service demand should pave the way for decommissioning of mainstream programmes.
5. High cost, poor outcome individuals, many of whom have multiple unexplained symptoms, with multiple low level complex morbidity are **not served effectively** by mainstream services. In line with Public Service Reform principles, significant cultural change will be needed to influence behaviours and attitudes among the hardest to help people and communities.
6. The **prevailing healthcare narrative** that shapes our public services has been so dominant for so long that many in the healthcare system do not notice the extent to which it shapes assumptions and behaviours and drives poor outcomes. The narrative has produced an industrialisation of healthcare delivery through division of labour with doctors and nurses increasingly specialised in relation to the components of the system which has taken them further away from holistic provision and there is a tendency to fit the patient to the system as best we can.
7. The social, economic and environmental determinants of health are critical to effective health outcomes, and yet our current responses are **disconnected, delivered by separate agencies, objectives and funding streams**. Integrated systems wrapped around the whole person/family need, not designed around the delivery system are required to effect achieve the best possible outcomes.

Following formal confirmation of funding from Public Health England, the Well North Core Team will be established. The Core Team will consist of the Well North Director, Programme Director, Clinical Advisor and Administrative Coordinator. The Team will form the Hub of the programme supporting and coordinating the work of local authorities, which form the cogs of the Well North operation. The Hub will 'buy in' expert advice both locally and nationally and will commission training through the NHS Staff College. Four local authority pilot sites will be initiated in the first year and an additional five pilot sites in the second year. The duration of the programme for each pilot site is three years. The Hub becomes the enabling mobile core operation of Well North to facilitate the development of the pilot sites and overall delivery of the programme. The approach, underpins the philosophy of the

programme, which requires a fundamental change in mind-set to influence and change health behaviours in these hard to reach communities. The overall communication and dissemination of the programme across the North of England will be through the newly established Northern Health Science Alliance working closely with the respective offices of Public Health England, ensuring the programme provides a stimulus and is fully grounded in Local Health and Wellbeing Boards, given these bodies are statutorily responsible for health and wellbeing in each locality.

Each pilot will establish (concurrently) a local team with a Local Responsible Officer (LRO) from Public Health England who reports to the Hub Programme Director (HPD). The Well North Director will select

the LRO and one of their immediate priorities will be to scope the phase one programme. The Well North Board through a Memorandum of Understanding between the pilot local authority and the Well North Hub will agree the Plan. A number of metrics will be identified to assess the impact of the pilot schemes, which underpin the Well North goals.

Well North : Implementation



Membership Investment

A total of £603k has been invested in quality improvement by North West Coast AHSN members. *The following organisations are not included within the membership: Alderhey Children's NHS Foundation Trust; Calderstones NHS FT; Clatterbridge Centre for Oncology NHS Foundation Trust; Southport and Ormskirk Hospital NHS Trust; West Cheshire CCG; and, West Lancashire CCG.*

The existence in the Northwest of AQuA funded through its membership fee supports the AHSN to demonstrate delivery of its service improvement remit, including the building of capability in improvement science at all levels, and collaborative programmes of action to deliver demonstrable improvement in safety, effectiveness and patient experience. This is achieved through a range of programme offers summarised below.

Improving Safety of Care and Reducing Mortality

AQuA will be supporting AHSN delivery through, an extensive range of safety initiatives run across the year.

- **Capability building and action learning sets for safety**—from the frontline to board and senior leadership for safety and quality; and, topic specific e.g.- measurement, leadership/culture, system reliability, specific harm including:-
 - Patient Safety Champions
 - Advancing Team Training Programme for Safety (ATTP4S)
 - Improvement Practitioners modules.

- Learning sets and master classes with expert speakers
- Patient safety in Mental Health, including Safety Thermometer for Mental Health
- Don't Just Screen Intervene – Long Term Conditions.
- Zero suicides programme
- Mortality masterclasses
- Quarterly mortality reports
- Patient Safety Thermometer support.
- Further benefits will be derived from AQuA's **Partnerships** with Health Foundation for: the testing of Charles Vincent's 'Measuring Monitoring of Safety' framework; Community SAFE; and, reducing restraint in Mental Health settings: 'Restrain Yourself' (Closing the Gap).

Integration and System Leadership for Service Transformation

AQuA's programmes support the acceleration, the implementation and deepened learning of integrated care and transformation provided through:-

- A range of **masterclasses** supported by **spread events** to support implementation across the year.
- **Networking** events to support members who are delivering care for Frail Older People.

Evidence of the Consistency and Reliability of Care

AQuA's Advancing Quality (AQ) programme works to improve the consistency and reliability of healthcare, AQ's work originally focused on key acute conditions affecting the Northwest population; we are now expanding this into primary care.

• Advancing Quality Programme

- **Acute Care** established conditions: Acute Myocardial Infarction (AMI); Coronary Artery Bypass Graft (CABG); Dementia; Heart Failure; Hip & Knee; Pneumonia; Psychosis; Stroke.
- **Acute Care** newly launched conditions in 2014: Acute Kidney Injury (AKI); Alcohol-Related Liver Disease (ARLD); Chronic Obstructive Pulmonary Disease (COPD); Diabetes; Hip Fracture; Sepsis.
- **Primary Care**, further development in 2015/16 includes the alignment of AQ with co-commissioning models for primary care applying the proven AQ method and success to General Practice.
- **Improving Outcomes Packs** updated in 2014/15: Asthma; COPD; Stroke.
- Parity of Esteem in **Mental Health**.

Building Capability

AQuA supports our members to transform the quality of care through the development of the skills and capacity for improvement at every level from frontline to board, achieved through an extensive range of capability building programmes available across the year:-

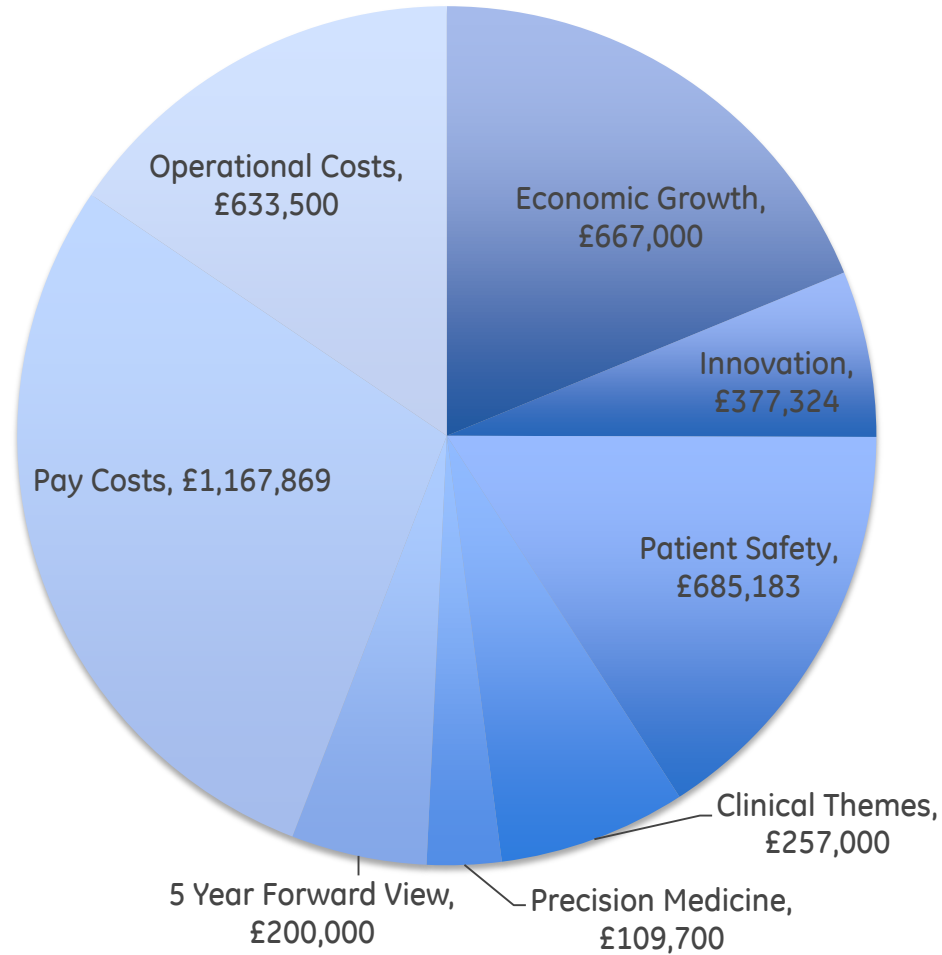
- Level 1: Introduction to Improvement (I2I)
- Level 2: Advancing Team Training Programme (ATTP)
- Level 2: Improvement Practitioner (IP)
 - Modules: Coaching; Culture for Improvement; Human Factors; Leading Complex Change; Measurement; Resilience; Spread & Sustainability.
- Level 2: Lean Fundamentals
- Level 2: Train the Trainer
- Level 3: Advanced Improvement Practitioner (AIP)
- Board Development to improve quality and safety
- Improvement Science Fellowships.

Improving Patient Experience

A wide range of Patient Experience offers will be available to member organisations including:-

- **Networks** for improving patient experience and engagement. Demonstrable co-production of work through patient panels.
- **Capability building** through shared decision making / self-management support and exploration of patient led care
- **Programmes** to improve the qualitative measures of experience; and, experienced based design.
- Further benefits will be derived from AQuA's **Partnerships** with Health Foundation for: Transitions of Care (Closing the Gap).

Appendix D – Resourcing our Work



Appendix E – Infrastructure funding from 14/15 budgets for 15/16 delivery

Investment 2014/15	Amount invested by AHSN	Funding secured alongside AHSN investment
LEP support - Post for sector growth	£80,000	£80,000
Connected Health Innovation platform	£136,000	£189,000
Employment and Enterprise Hub	£125,000	£900,000
Innovation Hub for healthcare science technologies	£280,000	£925,000 plus £900,000 grant opportunities
City deal combined centre services	£36,000	Anticipated £250,000
West Cheshire Learning & Improvement Academy	£100,000	tbc
Leadership and project support for 100,000 Genomes Project	£59,703	£59,703
Digital Troubled Family Solution	£88,000	Free software given by commercial partner
Cumbria Rural Health Forum	£15,000	£15,000 from North East and North Cumbria AHSN
Patient Safety - Dissemination of Patient Safety Pilot	£38,854	£66,554
Patient Safety - Strata E-Referral Tool	£115,000	£315,000
Patient Safety - Reach Tool for Mental Health	£50,000	Anticipated £450,000
Cheshire Innovation and Research Centre	£26,000	tbc
Bid writing service	£50,000	In 14/15 £2,850,000 achieved

Appendix F – AHSN Members and Consultees for this plan

NHS Providers

- Aintree University Hospital NHS FT
- Alder Hey Children's NHS FT
- Blackpool Teaching Hospitals NHS FT
- Calderstones NHS FT
- Cheshire and Wirral Partnership FT
- Clatterbridge Cancer Centre NHS FT
- Countess of Chester NHS FT
- Lancashire Care NHS FT
- Lancashire Teaching Hospital NHS FT
- Liverpool Community Health NHS Trust
- Liverpool Heart and Chest NHS FT
- Liverpool Women's NHS FT
- Mersey Care NHS Trust
- Mid Cheshire Hospitals NHS FT
- Royal Liverpool and Broadgreen University Hospitals NHS Trust
- Southport and Ormskirk NHS Trust
- St Helens and Knowsley NHS Trust
- The Walton Centre NHS FT
- University Hospitals of Morecambe Bay NHS FT
- Warrington and Halton NHS FT
- Wirral Community NHS Trust
- Wirral University Hospital NHS FT
- 5 Boroughs Partnership NHS FT

Universities

- Edge Hill University
- Lancaster University
- Liverpool Hope University
- Liverpool John Moores University
- Liverpool School of Tropical Medicine
- University of Chester
- University of Central Lancashire
- University of Cumbria
- University of Liverpool

Commissioners

- Blackburn with Darwen
- Blackpool
- Chorley and South Ribble
- Cumbria
- Greater Preston
- Halton
- Knowsley
- Lancashire North
- Liverpool
- St Helens
- Sefton
- South Cheshire
- Southport and Formby
- Warrington
- Western Cheshire
- West Lancashire
- Wirral
- Fylde & Wyre
- Vale Royal
- Greater Manchester and Lancashire regional team
- Merseyside, Cheshire, Warrington and Wirral regional team

This plan has been the subject of wide consultation.

Stakeholders who have been consulted are outlined below.

Local	Regional	National	International
<ul style="list-style-type: none">• All NHS Trusts• All CCGs• 9 Universities• 4 LEPs• Research and Innovation hubs and partnerships• NIHR CRN NWC• NIHR CLAHRC NWC	<ul style="list-style-type: none">• Strategic Clinical Networks• Clinical Senates• Healthwatch• North West Leadership Academy• AQuA• Northern Industry Forum• Northern Health Science Alliance	<ul style="list-style-type: none">• Association of British Healthcare Industries• Association of British Pharmaceutical Industries• British In Vitro Diagnostics Association• NHS England	<ul style="list-style-type: none">• European Connected Healthcare Alliance• China Connected Healthcare Alliance