

Kent Surrey Sussex  
Academic Health Science  
Network

# Next Level

Unlocking the power of health  
and care innovation for all



# Welcome

**Welcome to Kent Surrey Sussex Academic Health Science Network. We serve three counties and three ICSs with almost 5million residents, significant pockets of wealth and deprivation, a growing number of migrants, and a long coastline with all the health and care problems this brings.**

In this environment, acknowledging post Covid challenges and learning, we are an expert guide. We enable national programmes to be delivered locally by being a collaborative partner in NHS initiatives, and by supporting innovators, health and care managers, and system leaders to transform care outcomes and, thereby, lives.

We seek to understand needs and develop evidence to better understand what solutions should be spread. We know that it is not difficult to reach people who already prioritise their health; we are committed to understanding the ways in which innovation should be presented differently, for some communities, so it can be trusted, used, and bring better outcomes for all.

Transport links across our counties are difficult so we have brought people to you. You will hear from frontline clinicians, the public, industry and academics. You will see work we have supported in mental health, and in care homes enabled by remote monitoring. Innovators will describe their journeys and ICSs will debate how to take advantage of innovation. You will hear about gammaCore, a national programme led by KSS AHSN. And we will showcase three innovations being developed now, with clinicians at SaSH, that invite discussion of how NHS can be a better partner on the journey to the next level of care.

I look forward to spending the day with you.



**Des Holden**  
Chief Executive Officer

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Time	Presentation	Location
09:15 – 09:40	Arrival and refreshments	Postgraduate Education Centre, East Surrey Hospital
09:40 – 09:50	Welcome and scene setting	Lecture theatre
09:50 – 10:20	Next level: unlocking the power of health and care innovation for all	Lecture theatre
10:25 – 11:10	Discovering, developing and deploying digital mental health solutions for children and young people during Covid across Sussex	Lecture theatre
11:10 – 11:35	Working break and refreshments	Atrium
11:35 – 12:15	Respiratory programme: showcasing the success of the programme, looking to the future and the use of innovation	Lecture theatre
12:00 – 14:00	Lunch available	Atrium
12:20 – 12:30	The work of the Cancer Alliances	Lecture theatre
12:35 – 12:50	Mini-Expo showcasing cancer innovation	Atrium
13:00 – 13:15	Parallel sessions	Room 6
13:30 – 13:45	<ul style="list-style-type: none"> <li>• “Don’t walk past”: mental health awareness training app for staff</li> <li>• Supporting self-management and reducing anxiety for diabetes patients</li> <li>• Co-designing a new paradigm for medicines information</li> </ul>	Room 1
14:00 – 14:50	Supporting clinical entrepreneurs	Lecture theatre
14:55 – 15:40	The role of innovation to help address local system priorities	Lecture theatre
15:40 – 15:55	Working break and refreshments	Atrium
16:00 – 16:30	Digitalising the future of the care sector	Lecture theatre
16:35 – 16:55	gammaCore spread and adoption	Lecture theatre
17:00 – 17:10	Round up	Lecture theatre
17:10	Depart	

09:40 – 09:50

## Welcome and scene setting

### Summary

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- Welcome to Kent Surrey Sussex Academic Health Science Network (KSS AHSN) and Surrey and Sussex Healthcare NHS Trust (SASH)
- Agenda for the day and key themes.

### Speakers

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- **David Clayton-Smith**, Chair, KSS AHSN
- **Des Holden**, Chief Executive Officer, KSS AHSN
- **Angela Stevenson**, Chief Executive, Surrey and Sussex Healthcare NHS Trust.

### Facilitator for the day

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- **Peter Carpenter**, Service Delivery Director, KSS AHSN.

09:50 – 10:20

## Next level: unlocking the power of health and care innovation for all

### Summary

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It is easy for innovation to make the healthcare gap for access to care, and outcomes, worse. There is an argument for introducing innovation and handing it on to become business as usual, but in KSS AHSN we are trying to measure who innovation reaches and who it doesn't, so that we can modify the approach for some groups of people, and increase the benefit national programmes convey. We will use examples including PINCER, Alivecor, FREED and showcase physical health checks in serious mental illness work done by the Sussex Health and Care Partnership as models for national programmes and local population health improvement.

### Speaker

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- **Des Holden**, Chief Executive Officer, KSS AHSN
- **Marie-Anne Demestihis**, Chief Services Officer, Unity Insights.

10:25 – 11:10

## Discovering, developing and deploying digital mental health solutions for children and young people during Covid across Sussex

### Summary

- The co-production of e-wellbeing platform during Covid
- An overview of the review of children's digital mental health services, the findings, recommendations and digital ambitions co-created by young people
- Actively engaging young people in research and implementation – how were they involved and what difference did it make?
- KSS AHSN working in partnership with voluntary and community sector to involve young people in research and implementation
- Impact of the review – including the wider system and Sussex ICS.

### Speakers

- **Amaani Al-Azzawi**, e-wellbeing Youth Ambassador, YMCA DownsLink Group
- **Dr Sam Fraser**, Primary and Community Care Implementation lead, ARC KSS / KSS AHSN
- **Nicola Harvey**, Digital and Engagement Lead, YMCA Downslink
- **Dr Gurprit Pannu**, Chief Digital and Information Officer, Sussex Partnerships NHS FT
- **Becca Randell**, Children and Young People's Mental Health Implementation Lead, ARC KSS / KSS AHSN
- **Fiona Tilbury**, e-wellbeing Youth Ambassador, YMCA DownsLink Group.

11:35 – 12:15

## Respiratory programme: showcasing the success of the programme, looking to the future and the use of innovation

### Summary

- Background – reducing unwarranted variation, working collaboratively to improve the quality of respiratory services and address health inequalities
- Response to COVID-19 – rapidly adapting and disseminating and problem solving around key clinical themes
- Focus on innovation, including pathway redesign, peer support and learning to support best practice
- Highlighting the KSS Respiratory Network as a mechanism to support delivery
- How the KSS Respiratory Programme adapts moving forwards.

### Speakers

- **Julia Bott**, Respiratory Clinical Lead/Consultant Physiotherapist, KSS AHSN
- **Dr Jo Congleton**, Respiratory Clinical Lead, KSS AHSN / Consultant in Respiratory Medicine, UHSFT / Clinical Lead, SHCP Respiratory Network
- **Ellie Mason**, Programme Manager, KSS AHSN
- **Tom Myers**, Senior Analyst, Unity Insights
- **Hinal Patel**, Programme Manager, KSS AHSN.

12:20 – 12:30

## The work of the Cancer Alliances

### Summary

- The work of the cancer alliances in Kent, Surrey and Sussex
- Followed by mini-Expo focused on cancer care featuring solutions either in use at NHS Trusts in Kent, Surrey and Sussex or in development with support from KSS AHSN.

### Speakers

- **Keri Torney**, Managing Director, Surrey and Sussex Cancer Alliance
- **Ian Vousden**, Programme Director, Kent and Medway Cancer Alliance.

12:30 -14:00

**Mini-Expo showcasing cancer innovation – see separate guide**

12:40 -13:10

## Parallel sessions

### “Don’t walk past”: mental health awareness training app for staff

- Hosted by **Helen Routledge**, CEO, Totem Learning, and **Luke Champion**, Project Manager, Totem Learning.

Totem Learning Ltd, in collaboration with KSS AHSN, is creating a novel approach to mental health awareness training. Motivated by the “parity of esteem” agenda, Des Holden commissioned Totem to use “games-based learning” to encourage all NHS employees, from porter to surgeon, finance to physio, to engage in conversation with any patient or team member who they suspect may be suffering non-diagnosed mental health issues. These include anxiety, depression and alcohol / substance misuse.

The project is called “Don’t Walk Past” and delivers a narrative-based set of exercises that use branching storylines that players can explore and practice, aiming to build empathy with a range of different characters and sign-post them to more formal sources of mental health support. This is not about clinical diagnosis but about taking those extra few minutes to check on anyone that staff have concerns about to lend them a supportive ear. Players can practice in private and explore options without pressure. It is also possible to add friendly levels of

competition to encourage take up of the subject matter and collaboration in teams.

The game will be delivered to mobile phones to maximise the audience and ease of access. It can be played anywhere, in short episodes, to fit in around a busy working day.

### Supporting self-management and reducing anxiety for diabetes patients

- Hosted by **Prof Mike Baxter**, Independent Medical Adviser, Sanofi, **Ogi Batalveljic**, CTO, Virtual Health Labs, **Jamie-Leigh Williamson**, Diabetes Specialist Nurse, Surrey and Sussex Healthcare NHS Trust and **Jessamy Baird**, Managing Director/Country Lead and General Manager, General Medicines GBU Sanofi UK & Ireland.

As an innovative Global healthcare company, Sanofi has engaged with a tech company to develop a prototype of an intelligent, voice-based conversational agent “Coach in Your Hand” for people with Type I Diabetes with diabetes distress, as an initial step towards a possible managed service agreement supporting the continuous improvement and roll-out of the solution to growing numbers of people and groups.

### Co-designing a new paradigm for medicines information

- Hosted by **Natalie Bohm**, Medical Director External Engagement, Pfizer, **Melissa Ream**, Artificial Intelligence Adviser, KSS AHSN, **Dr Sam Fraser**, Primary and Community Care Implementation lead, ARC KSS / KSS AHSN and **Smita Robinson**, Director, Pfizer.

The World Health Organisation estimates that between 30-50% of patients do not take medicines according to prescription instructions.<sup>[1]</sup>

Join the joint Pfizer and KSS AHSN team to discuss their partnership over the years, including recent work engaging the NHS to reimagine the paper product information leaflet and package label that come with every prescription medicine.

Explore initial findings from a survey of over 2000 patients from across England, along with data from interviews and focus groups with patients and healthcare professionals; investigate how the same factors that drive health inequalities also impact patients’ abilities to understand written information; and discuss potential next steps to provide trusted medicines information in a variety of formats and distribution channels, linking with the interoperable medicines information standard.

<sup>1</sup>World Health Organization. (2003). *Adherence to long-term therapies: evidence for action* / [edited by Eduardo Sabaté]. World Health Organization. <https://apps.who.int/iris/handle/10665/42682>. Quoted in <https://www.nice.org.uk/guidance/ng5/chapter/introduction>



14:00 – 14:50

## Supporting clinical entrepreneurs

### Summary

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Round table discussion featuring five clinical entrepreneurs that KSS AHSN is supporting, that will cover:

- The backgrounds of clinical innovators and summary of their innovation
- Their journeys as clinical innovators
- The benefits of being a clinical innovator
- Their experience of doing so in Kent, Surrey and Sussex
- Tackling inequalities
- The barriers to success.

### Speakers

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- **Professor Mike Baxter**, Independent Medical Advisor, Sanofi
- **Dr Sandeep Chauhan**, Co-Founder, Definition Health
- **Nuala Foley (Co-chair)**, Portfolio Lead, KSS AHSN
- **Dr Rachael Grimaldi**, Co-Founder, CardMedic
- **Dr Julian Nesbitt**, Founder and CEO, Dr Julian
- **Dr Charlotte Roberts (Co-chair)**, Portfolio Lead, KSS AHSN
- **Dr Arron Thind**, Founder, Sim/EPR

14:55 – 15:40

## The role of innovation to help address local system priorities

### Summary

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#### ICS roundtable:

This session will look at how KSS AHSN works with ICS system partners to spread innovation and address local and system priorities. Each of the three ICSs within the Kent Surrey Sussex footprint will be represented by leaders of these health and social care systems.

### Speakers

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- **Peter Carpenter**, Service Delivery Director, KSS AHSN
- **Rachel Crossley**, Joint Executive Director for Public Service Reform, Surrey Heartlands ICS
- **Amy Galea**, Chief Primary Care Officer Designate, Sussex ICS
- **Des Holden**, Chief Executive Officer, KSS AHSN
- **Arjun Sikand**, Director of Innovation, Surrey Heartlands ICS
- **Ian Smith**, Chair, Surrey Heartlands ICS
- **Dr Mayur Vibhuti**, GP Associate Dean Lead for Training Hubs and Digital Clinical Lead, Kent and Medway ICS
- **Morfydd Williams**, Director of Digital Transformation, Kent and Medway CCG

16:00 - 16:30

## Digitalising the future for the care sector

### Summary

- Digitalising the care sector: challenges, progress to date, next steps
- KSS AHSN role supporting system partners, integration of RESTORE2
- Discussion.

### Speakers

- **Peter Carpenter**, Service Delivery Director, KSS AHSN
- **Kerry Dudley**, Programme Manager, KSS AHSN
- **Kim Gardner**, GP and former Frailty Clinical Lead for Kent and Medway CCG
- **Mark Needham**, Director of Contracting and Programme Director - Digital First, NHS Kent and Medway CCG
- **Rebecca Pullen**, Lead for Enhanced Health in Care Homes – Ageing Well and End of Life Care, NHS Kent and Medway CCG
- **Morfydd Williams**, Director of Digital Transformation, NHS Kent and Medway CCG.

16:35 - 16:55

## gammaCore spread and adoption

### Summary

- Recap: gammaCore
- Spread through AHSNs and national programmes
- Innovator journey
- What next
- Summary.

### Speakers

- **Michael Howard**, patient
- **Dr Charlotte Roberts**, Portfolio Lead, KSS AHSN
- **Iain Strickland PhD**, VP, Global Sales and Strategy, electroCore
- **Rebecca Stuckey**, Specialist Headache Nurse, University Hospitals Plymouth NHS Trust.

17:00 - 17:10

## Round up

### Summary

- Feedback from showcase sessions
- Reflections on the day – key themes and messages.

### Speakers

- **Dr Des Holden**, Chief Executive Officer, KSS AHSN
- **Angela Stevenson**, Chief Executive, Surrey and Sussex Healthcare NHS Trust.

# Biographies



## Amaani Al-Azzawi

**e-wellbeing Youth Ambassador,  
YMCA DownsLink Group**

Amaani is an e-wellbeing Youth Ambassador and MSc Psychology Student, passionate about youth mental health. Amaani has been involved in a range of projects for the charity including a digital mental health review, campaigns, and appearing on BBC Radio Sussex to discuss the impact of the pandemic on young people's mental health.



## Jessamy Baird

**Managing Director/Country Lead and General Manager, General Medicines  
GBU Sanofi UK & Ireland**

Jessamy is the Managing Director of Sanofi UK & Ireland. This Country Lead role aims to provide consistent leadership across the Sanofi Global Business Units to have a single strategy externally, to support our culture and talent internally, working closely with our global business units and core business functions. Jessamy is also the General Manager, UK & Ireland for Sanofi's General Medicines Global Business Unit, working alongside healthcare systems to deliver improved healthcare for patients with chronic conditions, such as Diabetes and cardiovascular disease.

Jessamy began her career in healthcare research/health economics following her BSc. (Hons) in Health Sciences/Health Economics from University of Aberdeen. Since then, she has worked in roles that span the pharmaceutical industry, academia and the NHS.

Jessamy's prior role within Sanofi was Director of Market Access, UKIE, supporting national and local healthcare access for patients to Sanofi medicines and vaccines. Before joining Sanofi in February 2015, she worked at Eli Lilly Ltd as Director, Real World Evidence (Australia, Canada, Europe) and previously as Director, Market Access Strategy (Australia, Canada, Europe). She has also held the post of Director, Health Technology Appraisal (Australia, Canada, EU, Japan) at Eli Lilly.

Jessamy has held Non-Executive/Board level roles in the NHS for more than 10 years, the most recent being Non-Executive Adviser for Hampshire and Isle of Wight Partnership, North Hants Clinical Commissioning Group, previously a Non-Executive Director at the Isle of Wight Healthcare NHS Trust, and also worked as Executive Director on the Trust Board of an NHS Foundation Trust providing mental health and community care across Hampshire.



## Ogi Batalveljic

CTO, Virtual Health Labs

Ogi is an experienced technology entrepreneur and executive with a long and successful track record in the creation and delivery of complex intelligent systems in the healthcare & wellbeing markets across UK, Europe, US and India. With a background in AI, machine learning, mathematical modelling and biological computation, he is passionate about building exciting, innovative, AI-powered technologies, especially those with a social benefit dimension.

Under his technical leadership, AXA PPP Health Services became the recognised leader in technology-enabled health services delivery within the UK occupational health and broader healthcare sectors. Before this, Ogi led Unilever's multiple-award winning iShakti project, a social and market development initiative adding value to rural communities in south India via AI-powered internet kiosk micro-enterprises and was the co-Founder and CTO of Imperative Health Ltd, a spin-out from Unilever Corporate Research.

He led the design, development and deployment of Imperative's Health behaviour change technology, including software platform (automated coaching

service) and hardware devices (wireless biometric monitoring). Under his technical leadership, Imperative Health developed arguably the world's leading automated health behaviour change system at the time, comprising a sophisticated, unique mix of social psychology, cardiovascular health strategies, biometric monitoring devices and adaptive machine learning algorithms.

The system was able to deliver consistently high user activation and continuing engagement as well as changes in significant health outcomes (e.g. increased physical activity, weight management, reduction in blood pressure, reduce CVD risk factor score) with studies were published in 3 peer-reviewed health journals. Ogi was previously also the Director of Client Relationships at Expert-24 (now Doctorlink), working with some of world's largest health systems (e.g. United Health, Optum, Mayo Clinic, BUPA) to shape and deliver advanced, patient and practitioner-facing clinical decision support systems, ranging from online triage to treatment pathway optimisation and medication management.



## Professor Mike Baxter

Independent Medical Advisor,  
Sanofi

Mike completed a BSc and PhD in biochemistry at Birmingham University 1973-1979. He published on the regulation of pyruvate dehydrogenase, an important enzyme in metabolic regulation, and went on to study medicine at Nottingham University 1979-1984. In 1992 Mike was appointed as a consultant diabetologist, endocrinologist and general physician to St Peter's hospital in Surrey.

He was Clinical Director of Medicine for 7 years before becoming Medical Director (MD), a post he held for 10 years, as well as being Deputy CEO for 5 years during this time. As MD, Mike was involved in the merger of St Peter's with Ashford hospital (Middlesex) to form the Ashford and St Peter's Hospitals NHS Trust (ASPH).

Mike retired from NHS clinical practice in 2012 to further develop a portfolio of skills and experience. He is currently in private clinical practice in Surrey, specialising in treating patients with Diabetic and Endocrine problems. He is an Independent Medical Advisor for Sanofi diabetes in the UK. He is a Non Executive Director of ASPH NHS FT and was recently appointed honorary associate Professor of Medicine at the University of Swansea.



## Natalie Bohm

Medical Director External Engagement, Pfizer

Natalie is a UK board certified ENT surgeon, having completed her surgical specialty training in the UK. Natalie also has a background in Law (Masters, University of Oxford) and ran her own business in Asia prior to completing her medical studies on the accelerated Graduate Entry Programme at St. George's Hospital Medical School in London. She was awarded the Darzi Fellowship in Clinical Leadership and Quality Improvement in 2011 and trained in Healthcare Management through the University of Manchester and the King's Fund, before completing a PhD in Health Services and Policy Research at University College London (UCL).

In 2012 Natalie was appointed as an Academic Clinical Lecturer at UCL. Her academic work spans collaborations with the Royal College of Surgeons, the Federation of Surgical Specialty Associations, NICE and the London School of Economics. Natalie is a Senior Associate Tutor at the University of Oxford, a Fellow of the Royal College of Surgeons, and an Associate Member of the Faculty of Pharmaceutical Medicine. She joined Pfizer in 2018 and was appointed Medical Director External Engagement in 2021.



## Julia Bott FCSP

Consultant Respiratory Physiotherapist; Clinical Co-Lead, Kent Surrey Sussex Academic Health Science Network (KSS AHSN) Respiratory Programme

Julia's held varied posts, and taught and lectured extensively, both here and abroad, over a long career in respiratory care, from ICU to community, and research.

She's sat on many committees, including BTS (first physiotherapist Council Member); Chair, Physiotherapy Group, ERS, initiating the HERMES-Physiotherapy curriculum, now complete; sat on the Respiratory HRG; DH 'Outcomes Strategy for COPD & Asthma in England', co-chaired the PR subgroup; contributed to the National Commissioning Toolkit for COPD (PR), Chair CSP 'Physiotherapy Works' COPD project group (PRIME tool).

Julia's published numerous papers and book chapters including a seminal NIV work (Bott et al The Lancet 1992), Guidelines for Respiratory Physiotherapy (Bott J et al Thorax 2009) and 'Physiotherapy for adult patients with critical illness' (ERS/ESICM 2008). Other topics include non-pharmacological management of breathlessness, PR, ambulatory oxygen, Singing for Breathing and quality of life.



## Luke Campion

Project Manager, Totem Learning Ltd

Luke has been part of the Totem team for over 2 years and manages all large projects (AR, VR, Serious Games and e-learning) including Don't Walk Past. No matter what kind of project we work on Luke is able to adapt and work closely with Totem's clients to ensure their projects are delivered on time and to budget. Luke has 10 years project management experience across the private and public sector in the digital learning, events and health and fitness industries.



**Peter  
Carpenter**

Service Delivery Director,  
KSS AHSN

Peter is responsible for delivery oversight of the portfolio of programmes for KSS AHSN, including the quality improvement and Patient Safety Collaborative portfolios, as well as the programme activity to spread and adopt innovation into practice.

Peter is the senior engagement lead with Surrey Heartlands ICS and Strategy Lead for the Surrey Heartlands Academy. Working closely with the Chief Executive Officer and leading the improvement team, delivery is built upon vibrant clinical networks who are keen to improve outcomes for patients and implement innovation. Peter is committed to the principles of change and improvement through partnership and collaborative working.



**Dr Sandeep  
Chauhan**

Co-Founder, Definition Health

Sandeep is the Co-Founder of Definition Health. He trained at St Thomas' Hospital and is a Consultant Orthopaedic Surgeon at University Hospitals Sussex NHS FT. He is passionate about the use of technology in health and pioneered the use of computers in knee surgery and has helped develop the latest robotic technology used in this field.

Frustrated by the repeated failure of the end to end journey for surgical patients which led to unnecessary appointments, cancellations of surgery and failures in follow up care within the NHS which often left the patient on the periphery of their care, he and Dr Rosie Scott founded Definition Health to put the patient in the centre of their care.



**David  
Clayton-Smith**

Chair, KSS AHSN

David was previously the Chair of NHS Surrey, Chair of NHS Sussex, a non-executive director at Frimley Health NHS FT and most recently Chair of East Sussex Healthcare NHS Trust. He is a member of the International Board of Fairtrade having been Chair of The Fairtrade Foundation in the UK. David is director and co-founder of Andrum Consulting which specialises in supporting entrepreneurial businesses.

David is a strategy, change, branding and M&A specialist; an invaluable mentor for senior teams; and also a powerful non exec director in businesses large and small. With over 25 years' business experience, working at Board-level for blue-chip organisations including Courage, Do It All, Boots the Chemist and Halfords, David understands what it takes to take successful businesses of any size to the next level.



**Dr Jo  
Congleton**

**MBBS MD Dip PH**

**Clinical Co-Lead, KSS  
Respiratory Network**

Jo qualified in 1987 undertaking speciality training in Leeds and London. She took up her first consultant post at Worthing General Hospital in 1997. She led the development of the respiratory department, creating sub-speciality services supported by respiratory specialist nurses in COPD, asthma, bronchiectasis, Interstitial Lung Disease and TB. In 2015 she moved trusts to take up the post of Consultant in Integrated Respiratory Care in Brighton and Hove, working closely with the community team.

She was appointed co-clinical lead to the then KSS SHA Respiratory Network (later adopted by KSS AHSN) in 2012. She is also Respiratory Clinical Lead for Sussex ICS as of 2021.



**Rachel  
Crossley**

**Joint Executive Director  
for Public Service Reform,  
Surrey Heartlands ICS**

Rachel has worked in Surrey since 2003, in a range of local government roles before being appointed to the Joint Executive Director for Public Service Reform role in May 2021. In this role, Rachel is accountable to both Surrey Heartlands Integrated Care System and Surrey County Council for driving the continuous improvement of a public service model that supports the delivery of our integrated health and social care strategies. Key areas within her portfolio include public health, population health management, reducing health inequalities, strategic business intelligence and analytics, estates and driving innovation through the Surrey Heartlands Academy.



**Marie-Anne  
Demestihias**

**Chief Services Officer,  
Unity Insights**

Marie-Anne oversees the development and delivery of specialised portfolios of research, evaluation, and analytics services. She has an interest in the human factor of data-driven solutions in healthcare and embedding social determinants of health and behavioural approaches to care models. She has led and conducted various evaluation and health economic projects, from solutions ranging from digital health applications to medical devices, to evidence impact across the healthcare system.

Prior to joining Unity Insights, Marie-Anne worked for a corporate strategy, governance and remuneration consulting company in Canada. She previously advised a Canadian research institution, focused on promoting technologies for healthy aging, in designing and implementing a network of innovation hubs, and provided commercial advisory services to an AI healthcare diagnostic company. Her educational background includes a Bachelor of Commerce in International Management and Economics from McGill University, as well as a MSc in International Health Management from Imperial College London.



## Kerry Dudley

Programme Manager,  
KSS AHSN

Kerry has extensive experience of working in health and social care through a combination of roles, including as an HCPC registered podiatrist, CQC compliance inspector, commissioning quality lead and most recently leading the implementation of a community Positive Behavior Support Service in Kent.

She works across the region and is currently supporting the Managing Deterioration and Mental Health Teams National Patient Safety Improvement workstreams. Kerry is an active faculty member of the South of England Mental Health Collaborative (MHC) and committed to sharing learning and best practice.

Kerry was awarded an NIHR funded Master's Degree in clinical research from the University of Brighton in 2015.



## Nuala Foley

Portfolio Lead: Commercial  
and Partnerships, KSS AHSN

Nuala leads on KSS AHSN's commercial and industry engagement with health tech companies and their networks to support them and their business with their route into the NHS and further growth and spread. She comes from an industry (mainly SME) background, having worked with companies across every sector with their innovation and commercialisation.

In her role at KSS AHSN she oversees the Office for Life Science commission and represents KSS AHSN in the Commercial Directors national AHSN Network. Nuala has vast experience in navigating the funding landscape and in supporting companies to develop their strategic plan and to understand their customer base and value proposition for their target customer.



## Dr Sam Fraser

Primary and Community Care  
Implementation lead, ARC  
KSS / KSS AHSN; Mental  
Health Lead, KSS AHSN

Sam is a Consultant Clinical Psychologist and Darzi Fellow, with expertise in mental health, applied research and system transformation. Particular interests are the development and implementation of innovative evidence-based approaches in primary and community settings with an emphasis on integrated and sustainable care focusing on people living with chronic conditions and seldom heard groups.

Recently she led the 'Practise Hope' project, which uses the view from primary care as a way to better understand the system and make changes at scale in how we treat children and young people engaging in self-harm behaviours and expressing suicidality. The project worked with 30 Primary Care practices in Kent, Surrey and Sussex, the third sector and young people to engage key stakeholders across the region and beyond.

As a clinician and researcher she has directly contributed to improving patient care, and as a Darzi Fellow she came to appreciate how to operate effectively in the wider system, exert influence, and be an active transformation agent.





## Amy Galea

Chief Primary Care Officer  
Designate, NHS Sussex  
Commissioners

Amy Galea is the Chief Primary Care Officer Designate of NHS Sussex Integrated Care Board, which will be established on 1 July 2022. With her appointment, Sussex is one of a small number of ICBs with a Board level Executive representing primary care.

Amy has worked within the Sussex system for the last two years and is currently Executive Director for Primary Care and Senior Responsible Officer for the Sussex COVID-19 Vaccination Programme, having led the programme since its launch in December 2020, and having led the development and transformation of general practice in its recovery from COVID-19.

Amy originally trained as a radiographer and has held senior healthcare roles leading system development including at NHS England and Improvement, the Department of Health and The King's Fund.



## Dr Kim Gardener

GP, Canterbury Medical  
Practice and Care Home  
Lead, Canterbury South  
Primary Care Network;  
Former Frailty Clinical Lead,  
Kent and Medway CCG

Kim qualified from UMDS of Guy's and St Thomas's in 1989 and immediately started her GP training. She moved to East Kent in 1997 and worked as a GP partner until stepping back to a salaried role in 2020. Throughout her career she has held various CCG or other management roles, focussing on patient improvement and service development. Her clinical interests are in women's health and frailty.

As part of the Vanguard programme she helped established the first frailty community MDT in East Kent 7 years ago which she still chairs. She went on to become the Kent and Medway, and East Kent frailty lead, and working with other providers developed acute response frailty services, particularly supporting Care Homes during the Covid pandemic.

Due to family commitments she has just relinquished her additional roles but continues as a part time salaried GP at Canterbury Medical Practice.



## Dr Rachael Grimaldi

Co-Founder, CardMedic

Rachael Grimaldi is an NHS Anaesthetist, Associate Medical Director of the Brighton Marathon, and CEO and Co-Founder of multi-award winning innovative digital health start-up, CardMedic. She is currently a practicing senior anaesthetic registrar in advanced paediatric anaesthetics at Great Ormond Street Hospital in London.

Rachael has a long-held interest in patient safety and human factors, winning several national and international awards for her quality improvement work over the last decade, including handover to intensive care units.

At the Brighton Marathon, Rachael leads on the integration of a roadside ECMO (Extra-Corporeal Membrane Oxygenation – 'heart and lung bypass') team into the Advanced Cardiac Arrest Team. Rachael also leads the Brighton Marathon Research Group, working on collaborative and cutting-edge research with universities, world-renowned sports medicine scientists, NHS Trusts and the Ministry of Defence.



## Nicola Harvey

Digital and Engagement  
Lead, YMCA Downslink

Nicola is the Digital and Youth Engagement Lead at YMCA Downslink Group. She manages the charity's digital wellbeing innovation projects, including [www.e-wellbeing.co.uk](http://www.e-wellbeing.co.uk). Nicola also oversees youth engagement and co-production to support the emotional health and wellbeing of children and young people.



## Dr Des Holden

Chief Executive Officer,  
KSS AHSN

Des has been with KSS AHSN throughout its first licence as Medical Director and became Chief Executive Officer in February 2022. He was a consultant and the medical director at Brighton and Sussex University Hospitals NHS FT and then joined Surrey and Sussex Healthcare NHS Trust (SASH) as Medical Director and member of the Board in 2011, a post he held until 2019 when the CQC awarded the trust an outstanding rating overall and in four of the six inspection domains.

Des is now Chief of Innovation at SASH and in addition to these two roles is a non-executive director of the Southeast Health Technology Alliance (SEHTA). He is an international advisor to Public Intelligence, the Danish organisation running citizen engagement and living lab co-design for new technologies. Des is a visiting professor at the University of Surrey, in the Faculty of Engineering and Physical Science. Within the Applied Research Collaboration Kent Surrey Sussex he has the role of Implementation Lead.



## Mike Howard

Patient

I'm married with four children and am a product manager in IT. I started experiencing cluster headaches in July 2006 and have suffered with bouts every 18-24 months for 1-3 months since then on a regular cycle. I'm fortunate enough that these are only for relatively short periods but when they do come it really interferes with my day to day life. Having tried many solutions official and unofficial, until I got Gammacore my only real option was a cumbersome oxygen tank.





## Stephen Lightfoot

Chair Designate,  
NHS Sussex Commissioners

Stephen Lightfoot is the Chair Designate of the NHS Sussex Integrated Care Board, which will be established on 1 July 2022, in addition to being Chair of the Medicines and Healthcare products Regulatory Agency. Before taking on the role, Stephen completed his eight-year term as Deputy Chair of Sussex Community NHS Foundation Trust and his term as Non-Executive Chair of Sussex Primary Care Limited.

Prior to these roles, Stephen had a 30-year career in the life sciences industry working in a wide range of therapy areas for UK and global healthcare companies. Stephen's most recent executive roles were General Manager of the global pharmaceutical diagnostics business of GE Healthcare, Managing Director of the UK pharmaceutical business of Daiichi Sankyo and Commercial Director of the UK pharmaceutical and medical device business of Schering Healthcare.

Stephen and his family have lived in Sussex for 28 years and he is passionate about improving the health and care of our communities.



## Ellie Mason

Programme Manager,  
KSS AHSN

Ellie manages the Respiratory Programme, running a multidisciplinary network with the aim of collaboratively improving respiratory care across Kent, Surrey and Sussex. A key part of Ellie's role has been sharing local experience and learning on a national scale, supporting the spread of effective and safe evidence-based interventions and practice for the Patient Safety Collaborative. Ellie has also previously worked on the Atrial Fibrillation 'Detect-Protect-Perfect' Project.

Ellie recently returned from a secondment to Sussex Health and Care Partnership as Respiratory Network Manager, establishing a new Respiratory Network and working closely with system partners to deliver the Long Term Plan's respiratory ambitions for the local population.

Ellie has an events management background, combined with NHS medical secretary and administrative experience.



## Tom Myers

Senior Analyst, Unity Insights

Tom has been part of the Unity Insights team for four years, having graduated with a degree in Forensic Science. He primarily focuses supporting the AHSN Network's metrics and reporting agendas for all national spread programmes, AAC RUPs and AHSN Network local programmes.

Tom also leads on the metrics delivery of the national NHSI COPD and Asthma discharge bundles programmes, and is a benefits coach in the NHSX Innovation Collaborative.



## Mark Needham

Director of Contracting  
and Programme Director -  
Digital First, NHS Kent  
and Medway CCG

Mark is an experienced NHS Director working in service transformation in London and South-East. He began his career as a Psychological Therapist and became involved in online support to promote outreach to young people. During lockdown, Mark was asked to take on leadership responsibilities for Digital First programme. This supported 205 practices to provide digital services for 1.9 million patients. He has also led other digital programmes including digital care homes, virtual wards and virtual care. Mark is a fellow of London Digital Pioneers Programme and has recently won a place on the Digital Health Leadership programme (Imperial College).



## Dr Julian Nesbitt

Founder and CEO, Dr Julian

Julian is an ex A&E, now part time GP Doctor and NHS clinical entrepreneur at NHS England with wide experience in working in the NHS. He founded Dr Julian Medical Group and is the current CEO due to his passion to improve mental health access for the country. He has previously published original research and has a passion for governance and evidenced based results.

Dr Julian is striving to bring regulation of online therapy into a previously unregulated market. With strong connections with the governing body for online therapists he is ensuring that therapists working online are appropriately trained and supervised to do so. The company is empowering patients giving them choice of access to a wide variety of therapists allowing appointments at any time of the day, from home and within a few days of being referred. The company has now been accepted onto the NHS digital accelerator program, is working with a number of IAPT provider companies and CCGs providing IAPT services through online video/audio/text consultations with excellent results. Dr Julian is also working with corporate companies providing support for employees and can be accessed privately.



## Dr Gurprit Pannu

Chief Digital and Information  
Officer, Sussex Partnership  
NHS FT

Dr Gurprit Pannu is a Cambridge University trained consultant psychiatrist who has moved into digital and data leadership as he believes getting this right will have widespread impact on patient care. He holds multiple roles within Sussex, which include Chief Digital Information Officer for Sussex Partnership Mental Health Trust and Digital Lead for the Mental Health Collaborative. Prior to this, he was the Chief Clinical Information Officer for the mental health trust. Gurprit also established senior digital clinical leadership across organisational boundaries in Sussex, through the influential Clinical and Professional Informatics Leadership Forum which he chairs. He is considered the foremost digital clinical leader in Sussex, delivering on the Shared Care Record Programme to connect clinical information for direct care, digitally connecting citizens to the health and social care system, and linked data for analytics. He has also successfully forged collaborations across health and social care leaders, public health, Sussex University mathematics professors, ARC and the AHSN with multiple funded projects.



## Hinal Patel

Programme Manager,  
KSS AHSN

Gurprit is an innovative and strategic system digital health leader, turning concepts and technology into safe clinical and practical change across organisational boundaries. He is trained, knowledgeable and practiced in system leadership, developing strategy, digital transformation, creating partnerships, leading for social justice, and robust governance in the pursuit of high quality sustainable outcomes. He is recognised for excellent communication, influencing skills, and relationship building across complex health and care environments, academia and industry. He recently presented nationally on the use of Artificial Intelligence for mental health services which is one of his many areas of interest.

Hinal has a Master's Degree in Pharmacy from the University of London, is an Independent Prescriber and registered pharmacist, and recently completed the Mary Seacole Programme from NHS Leadership Academy. She has previously worked in clinical roles in hospital and community pharmacy setting.

Before joining KSS AHSN she worked for the executive structure in a Local Pharmaceutical Committee as service development and implementation lead, and comes with experience of relationship building and management with various stakeholders within the NHS, Local Authorities, and private sector. She is keen in developing services and implementing projects with innovation that maximise patient benefits and outcomes.



## Rebecca

## Pullen

Lead for Enhanced Health in  
Care Homes – Ageing Well  
and End of Life Care, NHS  
Kent and Medway CCG

Becky began her career in the NHS as a Physiotherapist in South London and Surrey working across all clinical areas including Intensive Care, Musculo-skeletal and Paediatrics. She relocated to Kent in 2014, where she continued her physiotherapy career where she went on to specialise in community and frailty provision.

Becky is also now an experienced Commissioner working across the whole Community Care agenda in Kent and Medway, with a focus on Care Homes and End of Life Care. Becky is passionate about quality improvement and service transformation, with a focus on making meaningful change for patients and their loved ones.



## Becca Randell

Children and Young  
People's Mental Health  
Implementation Lead, ARC  
KSS / KSS AHSN

Becca leads on two national programmes for KSS AHSN – early intervention eating disorders and ADHD. She has over twenty years' experience of commissioning children's services. Becca has recently worked as Children and Families' Strategic Commissioning Lead for West Sussex, previously the Children's Mental Health Commissioner on behalf of the CCGs and West Sussex County Council and was Regional Manager for Children's Services for Government Office for the South East, overseeing Sure Start and Children's Fund.

She has also worked in regeneration through community development and neighbourhood renewal programmes, and is passionate about collaboration and integration, whilst improving the outcomes for children and young people through system-wide transformation and evidence-based research. Becca has recently represented UK on the European Social Network Advisory Group on co-production, speaking at international conferences and has also been a member of the national BEAT Eating Disorders Clinical Advisory Group.



## Melissa Ream

Artificial Intelligence Adviser,  
KSS AHSN

Melissa has a portfolio covering AI strategy as well as medicines information. A native Texan living in Canterbury, Melissa has over 15 years' experience engaging with partners across complex systems to deliver transformational change and improve outcomes. Over the course of her career, she has led programmes for numerous organisations, including NHS providers and commissioners, AHSNs, NHS England and Improvement (including NHSX, Health Education England, and the Trust Development Authority), the Department for Health and Social Care, trade bodies and the private sector.

Melissa also has authored national policy reports and guidance on a range of issues, including: digital and AI; patient safety communities of practice; assuring NHS mergers and acquisitions and the Foundation Trust Pipeline; procurement; commissioning; longevity; women's entrepreneurship and business broadband. Melissa holds a BSc in Biology and Medical Humanities from Davidson College in North Carolina and an MBA and a Master of Public Affairs from the University of Texas at Austin.



## Dr Charlotte Roberts

Portfolio Lead, KSS AHSN

Charlotte obtained her medical degree and BSc in International Health from UCL where her passion for population health and policy began. She completed the Foundation Programme at Oxford University Hospitals in clinical areas including respiratory, infectious diseases, ENT, neurosurgery, GP and paediatrics, followed by a NHS National Medical Director's Clinical Fellowship seconded to Public Health England.

Most recently she was Vice President for Standardisation at the International Consortium for Health Outcomes Measurement (ICHOM) driving value-based healthcare internationally through patient-centred outcome measurement. At KSS AHSN she co-leads the Industry and Technology Navigation team, and also supports ICSs with their clinical priorities to best serve the needs of their local population.



**Smita  
Robinson**

Director, Pfizer

Smita has over 20 years' experience in the pharmaceutical industry at Pfizer. Her career started within pharmaceutical sciences where she had the role of clinical supplies manager. Here she worked on delivery of clinical supplies demand, manufacturing, packaging and distribution for human health and veterinary medicinal products. She became team lead before moving to Regulatory Operations. There Smita was a labelling manager developing core labelling, USPI and EU CP labelling. She then took on the role of leading and developing the translations model and organisation for regulatory operations. This led to heading up the Investigator Brochure team, where she was able to develop and lead the team through RSI process and ICH compliance. Today Smita works with the Regulatory International Labelling organisation leading the Digital Labelling Centre. A current key focus is Digital Health for future labelling and skills for the digital workforce.



**Helen  
Routledge**

CEO, Totem Learning Ltd

Helen has worked in the serious games space since 2002 starting out in researching the effectiveness of games as learning tools before moving into product management, design and production management. Helen's background is in psychology and behavioural sciences, and when she learnt about the connections between game and design and psychology she helped form one of the first companies in the world offering a new approach to learning and development.

Helen is a multi-award winning serious games designer and author (*Why Games Are Good For Business*) with a background and passion in behavioural sciences and psychology. She has helped many organisations realise their ambitions of deploying serious games to drive the impact and effectiveness of learning solutions.

Helen is a mental health ambassador for the Inside Out Leaderboard and champions an open and supportive workplace environment where her team can openly discuss their mental health.



**Arjun Sikand**

Director of Innovation, Surrey Heartlands ICS

Arjun joined Surrey Heartlands ICS in May 2022 from Health Innovation Manchester, an academic health science and innovation system whose remit is to accelerate the introduction and adoption of applied research and innovations. As part of the senior leadership team, Arjun helped identify, develop, and provide oversight for projects that lie at the intersection between the NHS, academia, and industry. Particularly focused on multi-stakeholder collaborations that provided data-driven insights and new operating models for the redesign of care pathways, pushing the shift from ill-health treatment to a more preventative and wellness management approach.

Arjun has over 15 years of experience in the Life Sciences and Health & Care sector, developing and implementing business models and market entry strategies for both SMEs and multinationals.



**Ian  
Smith**

Chair, Surrey Heartlands ICS

With a career spanning healthcare, publishing, construction, strategy consulting and logistics, Ian has over 40 years' experience leading highly complex multinational companies including a number of chief executive roles. Previously Executive Chairman of Four Seasons Health Care and Chief Executive of the General Healthcare Group, he has an in-depth knowledge of the healthcare system and patient needs, particularly in terms of acute, psychiatric and elderly care. Ian was also Chair of King's College Hospital NHS Foundation Trust from 2017 – 2019 and is currently a Non-executive Director at the Ministry of Defence.



**Angela  
Stevenson**

Chief Executive, Surrey and Sussex Healthcare NHS Trust

Angela commenced as Chief Executive in December 2021, having previously served as Chief Operating Officer from September 2015. She was also the Associate Director of Clinical Services (medical division) for five years at Surrey and Sussex Healthcare NHS Trust, a role which included work with the emergency department where she played a pivotal role in the turnaround of the organisation.

Angela has 26 years' experience in clinical and general management roles across the NHS and private sector. She is highly driven and motivated to deliver excellent care to all patients. Angela is passionate about empowering staff at all levels to make a difference and improve patient experience.



**Iain Strickland**

PhD

VP, Global Sales and Strategy, electroCore

Iain is responsible for electroCore's commercial activities outside of the United States, which include HTA development, market access, direct to consumer sales and revenue generation. He has contributed to academic publications in pain and neurodegeneration research from his time as a research fellow at the University of Bristol and Oxford BioMedica.

Iain completed his PhD in Neuroscience and Pharmacology at the University of Edinburgh as part of a CASE studentship sponsored by GlaxoSmithKline. He obtained a 1st Class BSc Honours degree in Pharmacology from the University of Edinburgh.





## Richard Stubbs

Chief Executive Officer,  
Yorkshire and Humber  
AHSN; Vice-Chair, The  
AHSN Network

Richard is a leading health innovation expert with a career spanning over 20 years. As Vice-Chair of The AHSN Network and CEO of Yorkshire and Humber Academic Health Science Network, Richard is driving health innovation, contributing to economic growth and improved outcomes for patients, and steering major health innovation programmes. He is also helping shape the future of the NHS nationally as a member of the NHS Assembly.

For the last 2 years Richard has been named by the Health Service Journal as one of the Top 50 BAME health professionals exercising the most power and influence in English health policy.



## Rebecca Stuckey

Specialist Headache Nurse,  
University Hospitals  
Plymouth NHS Trust

Becky graduated from Plymouth University 15 years ago with a diploma in Adult Nursing. This to date is her biggest accomplishment as she was a single mother of a 2 year old daughter at that time so holding down university and two other jobs to make ends meet was and is the most difficult thing she has had to do.

She started her nursing career in amputation and orthopaedic rehabilitation then quickly became a junior sister on the stroke unit. Some years later she became a specialist nurse in syncope and falls. She then secured her degree in Nursing in 2014 graduating once more. A chance encounter with Dr Stuart Weatherby sparked a conversation about the post of a headache nurse specialist position; little did she know this would completely redirect her path.

Six years ago she headed up the nurse lead headache service serving the South West Peninsular and hasn't looked back since. In this time her patients voted her the Pride of Plymouth, she is on the Masters pathway and a prescriber. She is the sole prescriber of all CGRP treatments, has published her results in headache journals and presented posters advocating nurse-led services. She has since been asked to speak nationally at forums and internationally for both the EHF and IHS.



## Jamie-Leigh Williamson

Diabetes Specialist  
Nurse, Surrey and Sussex  
Healthcare NHS Trust

I qualified from Brighton University with a Diploma in Nursing in 2012 and my career started in A&E at the Royal Sussex County Hospital. After eighteen fast paced months I moved to the Hyper-Acute Stroke Unit at The Royal London Hospital where I spent a few years before transferring to a role in Primary care as Practice Nurse, where I found my passion for diabetes. Four years later I was successful in securing my current role as a Diabetes Specialist Nurse at SASH, where I am also now in the final year of completing a MSc in Diabetes Practice.



**Dr Arron  
Thind**  
Founder, SimEPR

Arron is a full-time GP trainee, a Clinical Tutor at Kings College London and former Deputy Lead of Emerging Technology at the Department of Health and Social Care. In addition, he is an NHS Clinical Entrepreneur, and completed the Digital Health London Digital Pioneer Fellowship last year.

Arron's mission is to digitally transform the delivery of medical education. He is the founder of SimEPR, a novel digital solution that augments medical simulation training for NHS staff whilst fostering the development of digital skills. Arron independently built SimEPR without programming support or investment, using programming skills learned alongside his clinical commitments.



**Fiona Tilbury**  
e-wellbeing Youth  
Ambassador, YMCA  
DownsLink Group

Fiona is an e-wellbeing Youth Ambassador and recent Psychology Graduate, with a strong interest in championing the voices of vulnerable young people. Fiona has been involved in a range of projects with the YMCA, including a digital mental health review, hosting podcasts, and research to explore young people's experiences of completing Routine Outcome Measures during therapy.



**Keri Torney**  
Managing Director, Surrey  
and Sussex Cancer Alliance

Keri Torney is the managing director of Surrey and Sussex Cancer Alliance, which works with partners to improve the diagnosis, treatment and care for cancer patients in the local area. The Alliance covers Frimley, Surrey Heartlands and Sussex.

Prior to her current role, she was deputy director of life sciences in the Research, Innovation, and Life Sciences group in NHS England. A civil servant by background, Keri has developed national government policy, negotiated at EU and international level, worked with local government, and led cross-sector programmes. She has a PhD in molecular biology from the University of Cambridge.



**Dr Mayur  
Vibhuti**

**GP Clinical Lead for Digital,  
NHS Kent and Medway  
CCG and Health Education  
England GP Associate Dean  
for Kent Integrated Care  
System Training Hubs**

Dr Vibhuti has previously been a GP partner for 10 years with varied experience of medical education, innovation and transformational roles in primary care. He is currently a GP Trainer and GP Clinical Lead for Digital at Kent and Medway CCG, HEE GP Associate Dean for Kent ICS, NHS England Clinical Entrepreneur Fellow and a Visiting Reader in Medical Leadership at Canterbury Christ Church University. He has run innovative training programmes for GPs and multi-professional delegates and also co-founded the Medway and Swale innovation Hub in 2019 as a cross-organisational, pan-system, 'wicked' problem-based innovation hub.



**Ian Vousden**

**Programme Director, Kent  
and Medway Cancer Alliance**

Ian is the Programme Director for the Kent and Medway Cancer Alliance and has been involved in Cancer clinical networks for the past 12 years across the South East of England. His career started working in a variety of acute trust operational based roles in East Kent before joining the Kent and Medway Cancer Network in 2010. His current role means he is responsible for implementing National Cancer Strategy (Long Term Plan) priorities working with a variety of clinical and non-clinical stakeholders across Kent and Medway. The Kent and Medway Cancer Alliance works co-terminously with the emerging Kent and Medway ICS.



**Morfydd  
Williams**

**Director for Digital  
Transformation, NHS Kent  
and Medway CCG**

Morfydd is the Executive Director for Digital Transformation and Analytics at Kent and Medway CCG. She has worked in the NHS for over 20 years, starting as a IT project manager in Cumbria, and has worked in a number of NHS providers, and at NHS England as a Programme Director. Morfydd is passionate about digital and data and has led a number of programmes which have brought significant change to the way clinical services are delivered to the citizens of Kent. Morfydd lives in Kent with her 2 rescue grey hounds.

# Innovation summaries

## CardMedic: overcoming communication barriers between healthcare staff and patients on the frontline

### Summary

Dr Rachael Grimaldi, an NHS Anaesthetist at Great Ormond Street Hospital NHS Foundation Trust, was inspired to create CardMedic after seeing an interview in the first wave of the pandemic with a UK patient who had survived COVID-19 and felt terrified at not being able to understand healthcare staff through Personal Protective Equipment (PPE).

It illustrated longstanding barriers to good communication in healthcare and the huge gaps in service provision. How could these be overcome? What if clinical conversations were made available on an app or website and staff could instantly flex the content to different languages, with sign language, videos, easy read, or read-aloud options? From concept to launch in 72 hours, CardMedic has had over 55K users in 120 countries and 22K app downloads since April 2020, garnering government support, awards, grants, investment and international press coverage.

### The challenge

Additional communication needs, including language barriers, visual, hearing and cognitive impairment, and literacy issues, affect access to

healthcare and impact between 35-50% of populations (35% in the UK). This is disproportionately exacerbated by socioeconomic inequality. Lack of understanding of healthcare information increases morbidity, mortality and mental health issues, and reduces compliance with medication, worsening outcomes and further burdening healthcare systems. Failures in communication are the most frequent source of patient dissatisfaction and directly contribute to 30% of medical litigation in the US.

### The solution

CardMedic is a unique, cost-effective and multi award-winning app-based 'Software as a Service' platform designed to reduce health inequalities secondary to communication challenges through improving communication between healthcare staff and patients, across any barrier – including foreign language, deafness, blindness, cognitive impairment, poor literacy levels, or PPE.

With content globally crowd-sourced from a multi-disciplinary team of frontline clinicians, CardMedic hosts an A-Z library of pre-written scripts replicating common clinical conversations between healthcare staff and patients, simply and succinctly. Staff choose the topic and display the screen (mobile, tablet

or desktop) to the patient to guide the clinical interaction. The content can be flexed at the point-of-care, to different languages, sign language videos, easy read with pictures for patients with learning disabilities or cognitive impairment or read-aloud for visually impaired or illiterate. An integrated speech-to-text translation tool supports conversations expanding beyond the content of scripts. CardMedic helps streamline patient care and improve staff efficiency; patients are better informed and feel empowered to engage in the shared decision-making process.

Clearer communication helps reduce the risk of misdiagnosis, mistreatment, mismanagement, prolonged length of stay and potential litigation. Involving patients in managing their healthcare improves medication compliance, reduces incidence of mental health issues and lowers morbidity and mortality. By making healthcare information more accessible and understandable, CardMedic gives a voice to those huge, underserved populations with communication challenges, reducing health inequities and improving health literacy.

## Impact

CardMedic has recently signed a five-year contract with University Hospitals Sussex NHS FT, as its beacon site for acute secondary care. Other clients include Norfolk and Waveney ICS, Mid and South Essex ICS, Lewisham and Greenwich, East Suffolk and North Essex Foundation Trust, Kent Surrey Sussex Air Ambulance, with a number of other trials and proposals with Trusts and ICSs underway across the UK, and US. CardMedic are delighted to have just signed a rural hospital beacon site contract with Nor-Lea Hospital District in New Mexico USA, a relationship fostered through the support of ScaleHealth. They will be undertaking a trial with Brigham and Women's Hospital in Boston USA and with Chelsea and Westminster Hospital NHS FT following winning the recent Digital Health Rewired national Pitchfest competition.

An independent academic service evaluation in the UK by University Hospitals Sussex NHS FT and the University of Brighton using simulated patients demonstrated a 28% increase to 95% of patient confidence in understanding a healthcare worker in PPE with CardMedic than without. Results are likely significantly higher for unwell patients, or those with additional communication needs.

CardMedic has received numerous prestigious awards both in the UK and abroad, as well as winning Innovate UK grants and being recruited by the Department for International Trade for inclusion in their Digital Health Export Offer Top 100 Playbook and being fast-tracked through the Ministry of Defence's Clinical Research and Innovation Gateway COVID-19 Taskforce for rapid dissemination across the UK. It has been endorsed by NICE against their Rapid COVID-19 guidelines and by The Royal College of Speech and Language Therapists, ORCHA (the NHS app library), and two national patient safety bodies – Patient Safety Learning (UK) and Patient Safety Movement Foundation (USA). CardMedic has undergone NHS Digital Clinical Safety Standards, Data Security Protection Toolkit and DPIA clearance and is in the final stages of DTAC security clearance. It has been part of two accelerator programs run by Oxford University and Oxford University Hospitals NHS Foundation Trust.

Dr Rachael Grimaldi is part of the coveted NHS Clinical Entrepreneur program and recently won the global finals for She Loves Tech – the world's largest competition for women and technology.

## Contact

Rachael Grimaldi, Co-Founder, CardMedic  
[rachaelgrimaldi@cardmedic.com](mailto:rachaelgrimaldi@cardmedic.com)

## Definition Health: improving support for pre-operative patients

### Summary

Definition Health has created LifeBox, a digital tool which supports pre-operative patient assessment, hospital decision-making and personalised patient care.

It was developed by Dr Sandeep Chauhan and Dr Rosie Scott, both consultants at University Hospital Sussex NHS FT, who founded Definition Health to put the patient in the centre of their care. Their goals are to empower and engage patients from pre-assessment and throughout their hospital journey, offer a platform for clinician led digitally enabled care, work towards a more sustainable healthcare industry and realise huge cost saving benefits to hospitals and clinics in the process.

They lead a team of 10 NHS consultants, supported by software developers, who built Definition Health's surgery platform. The platform consists of a secure virtual clinic, ePOA and educational system, outcomes capture and recovery module which monitors patients after they leave hospital.

Sandeep was selected an NHS Innovation Accelerator Fellow for 2021 to support the further growth of Definition Health's solutions, including a digital assist programme aimed at reducing health and digital inequalities. It was specifically chosen to help hospitals recover from COVID.

### The challenge

Surgical patients often experience unnecessary appointments, cancellations of surgery and failures in follow up care. This diminishes the patient experience and is inefficient for the healthcare provider.

Around 9 million patients need a pre-operative assessment before surgery in UK every year, with pre-assessment costs for the NHS ranging between £35-72 per patient. Annually around 1.4 million planned NHS procedures are cancelled. There is currently a backlog of 5.2m patients awaiting surgery and this is expected to rise to 13m within the next year.

Traditional pathways require patients to attend hospital to complete their pre-operative assessment using a paper based system. LifeBox enables patients to complete their assessment from the comfort of their own home and at a time convenient to them.

## The solution

LifeBox is a web based digital pre-operative assessment (ePOA) app – accessible on phone, tablet or computer – that intelligently guides the patient to provide information that supports their entire hospital journey.

It offers patients a platform to complete part of their pre-operative assessment in their own time, at their own pace. The information provided is then available for clinicians to securely access, allowing for early triage and risk stratification which streamline workflows and support personalised patient care.

With a user friendly interface, LifeBox makes data inputting simple and stress-free for patients, allowing part of their pre-operative assessment to be completed at a time and place convenient to them.

When the COVID-19 pandemic caused widespread lockdown in 2020, LifeBox supported hospitals to continue working remotely and support patients while unable to treat them face to face.

## Impact

Definition Health was chosen for the NHS Innovation Accelerator 2021 as 'one of the companies that will deliver high impact innovations to help the NHS out of the COVID-19 crisis'.

Deployed in 10 UK hospitals with 50,000 patients registered, the system has been shown in 5 scientific presentations to validate improved patient experience, education, cost saving and better preparation of patients.

It has improved efficiency, leading to a 60% reduction in face-to-face assessments,

3,060 OP appointments avoided and an average time saving of 1.92 hours per patient. Lifebox has shown £150k in hospital savings in one year and a reduction in on the day cancellations and missed appointments.

## Contact

Sandeep Chauhan, Definition Health  
[sandeep@lifeboxhealth.com](mailto:sandeep@lifeboxhealth.com)

## Docobo®: technology to better support care services

### Summary

Docobo has been providing remote monitoring solutions to health and social care since 2001 and is extremely proud to be working in partnership with Kent and Medway CCG (KMCCG) and KSS AHSN on this new and innovative shared vision: utilising technology to better support services in proactively delivering more responsive and efficient care.

RESTORE2™ is a paper-based physical deterioration and escalation tool, which is used within care homes and was developed by NHS West Hampshire CCG. RESTORE2, together with the use of NEWS2, can provide a common language across healthcare and can be used to support carers to recognise deterioration, assess the risk, and act on the findings<sup>[6]</sup>.

Docobo has developed a digitalised version of RESTORE2 which can be used via DOC@HOME® in residential care settings, improving the safety and wellbeing of the residents, as well as reducing workload for both carers and GPs. KMCCG's aim is to implement digitalised RESTORE2 in as many care homes as possible across Kent and Medway, gaining the benefits of a secure and efficient model for managing deterioration at scale.

### The challenge

The care home sector already faced enormous challenges prior to the pandemic; ongoing financial pressures, a narrow provider market, resistance to scale innovation or engage community assets, a hugely undervalued workforce and increasing workforce shortages<sup>[4]</sup>. Brexit added uncertainty around the status of thousands of EU workers in this sector<sup>[1]</sup>, immediately followed by the pandemic, which magnified all these issues, while local authorities are financially exhausted. The need to support providers to operate safe and quality services has never been greater.

Current figures show more than 400,000 people living in care homes in the UK<sup>[7]</sup>, of which there are increasing levels of frailty, complex health care needs, dementia, and disability<sup>[1]</sup>. GPs have been enduring their own workforce and funding crisis which has had a negative impact on the provision available for care home residents, resulting in less accessible healthcare, more acute hospital admissions, and increased morbidity<sup>[1]</sup>. Those working within the sector have described the current situation as 'grim, difficult, and relentless'<sup>[3]</sup>.

This evidences the need for a radical reassessment of care pathways and the uptake of innovative new solutions to address these very real challenges. NHSE met this need with 'The Framework for Enhanced Health in Care Homes -version 2'<sup>[5]</sup> (EHCH) and the national recognition of the benefits of using RESTORE2 within care home settings<sup>[6]</sup>. Supporting care homes to effectively adopt these changes during such financial and operationally demanding times is essential, and technology can certainly offer some much-needed relief to the workload, now and for the ongoing business model.

### The solution

The aim of digitising RESTORE2 was to improve the reliability and efficiency of using the tool while reducing workload for carers and clinicians. Carers can answer the structured set of questions on a device which notifies a clinician within minutes of any deterioration or carer concerns, providing the clinician with relevant and real-time data which enables them to make better informed and timely clinical decisions and provide more meaningful interactions with the resident.



The DOC@HOME remote monitoring system is extremely flexible and can be applied to an unlimited number of service models. Carers use DocoboAPP™ on any smart device (Android or iOS) to capture the soft signs, vital signs and any other observations or concerns. The information automatically and securely transfers to the DOC@HOME system where it can be immediately viewed by monitoring clinicians and alerts are automatically generated as required; additionally, an alert email provides a flexible and reliable mechanism for notifying the primary care teams. Clinicians are automatically sent a report of any data that generated alerts and can seamlessly access the DOC@HOME 'vWard' (clinicians' portal) via EMIS, enabling them to immediately view previous readings which are presented in a format to easily identify trends.

## Impact

Care homes that have implemented this system have fed back on a wide range of benefits. A huge benefit of using DOC@HOME is that it saves time for the carer trying to contact the GP by phone, and for the GP who may have difficulty getting hold of the appropriate carer when returning a call (so called 'telephone tennis').

RESTORE2 is an extremely useful resource for encouraging more accurate and relevant information to be collected by the carer and presented to the GP, increasing the skills and confidence of the carer while avoiding the time-wasting task of being asked to collect additional readings to inform an appropriate clinical decision. Digitalising this process increases the reliability

and speed as well as reduces the paperwork, administrative tasks, and risks associated with paper-based systems.

Care homes that have implemented this system benefit from an increase in digital maturity, which also contributes to positive CQC assessments.

## Contact

Phil Mott, Project Manager, Docobo  
[phil.mott@docobo.co.uk](mailto:phil.mott@docobo.co.uk)

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4. <https://www.scie.org.uk/care-providers/coronavirus-covid-19/commissioning/challenges-and-solutions>
5. <https://www.england.nhs.uk/wp-content/uploads/2020/03/the-framework-for-enhanced-health-in-care-homes-v2-0.pdf>
6. <https://www.hampshiresouthamptonandisleofwightccg.nhs.uk/your-health/restore-official>
7. [https://www.ageuk.org.uk/globalassets/age-uk/documents/policy-positions/care-and-support/ppp\\_care\\_homes.pdf](https://www.ageuk.org.uk/globalassets/age-uk/documents/policy-positions/care-and-support/ppp_care_homes.pdf)

## Dr Julian: improving access to mental healthcare

### Summary

Practising GP Julian Nesbitt identified the need for a quicker and more accessible service for mental health referrals, having seen first-hand the difficulties that people face with mental health problems as well as an increasing number of people suffering with these issues.

He believes that waiting 6 weeks or even longer for a therapy session is inappropriate and made it his mission to try and provide quality therapy and mental healthcare in an accessible form. Having seen the likes of UBER® transform the taxi market by utilizing technology, he wanted to bring technology to the forefront of mental health care and therapy by making it more widely available.

To achieve this vision, he has developed a tool that supports current systems but with additional benefit - bringing therapy into people's homes and giving them the convenience of having an appointment with whoever they want, when they want and where they want.

The Dr Julian app aims to increase the accessibility of mental healthcare, by connecting patients almost immediately to mental healthcare therapists using secure video/audio/text appointments. The platform links into NHS Improving Access to Psychological Therapies (IAPT) services in England, providing an alternative to face to face therapy in person and offering therapist appointments at the time that suits the person.

Using data across four providers currently using Dr Julian, and the extensive public IAPT dataset, the health economic modelling showed an NHS return of £1.33, and a total return (including social benefits) of £2.83, for every £1 spent over five years. It also reduced the number of missed appointments by over 50%.

### The challenge

Mental health services face rising demand which they are struggling to meet as a result of poor access and infrastructure, and more recently, a rapid increase in severe and more complex presentations.

With this context, NHS England (NHSE) has set a commitment to expand access to IAPT services to cover 1.9 million adults per year by 2024; referrals in 2018/19 were 1.6 million. The 1.9 million target is estimated to cover only 25% of overall demand (NHSE Mental Health Taskforce, 2016), meaning that mental health services and IAPT will almost certainly continue to grow rapidly beyond 2024. This requirement for ever-expanding services, while maintaining performance standards, demands IAPT services are as efficient as possible in order to remain sustainable in the future.

### The solution

Dr Julian is an innovative mental healthcare platform that increases accessibility of mental healthcare. It connects patients almost immediately to mental healthcare therapists by secure video/audio/text appointments using a calendar appointment booking system. It is offered as a customisable 'white label' version of the platform to each organisation using the platform.

The tool can also be used by any mental health trust with their existing staff by utilising the benefits of the bespoke platform. It offers a CBT service with BABCP accredited therapists as well as counselling and psychology provision for most mental health issues on a personalised platform for both Mental Health Trusts and Mental Health providers enabling waiting list times to be dramatically reduced.

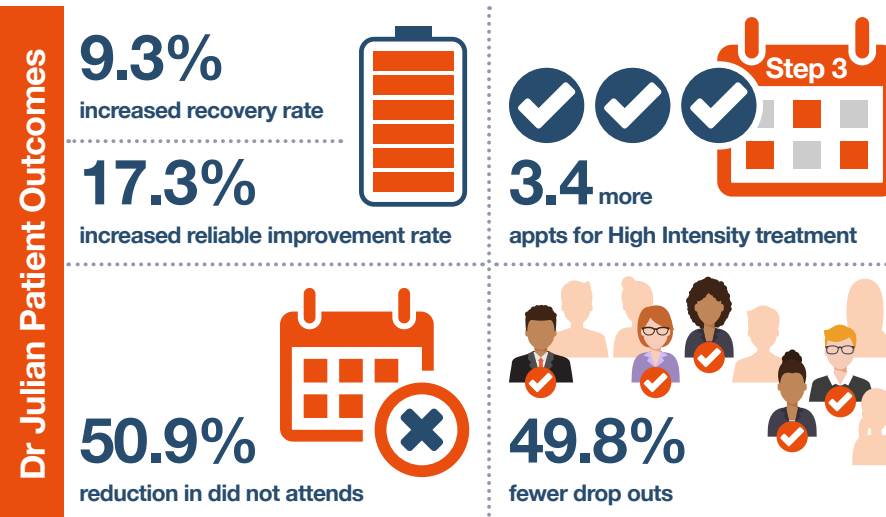
The system matches a patient to the correct therapist for them using filters via language/ issue and therapy type. Patients are offered choice of who they want to see a time convenient to them 24/7 in the medium of their choice (video/audio or instant message) and from the location of their choice such as the comfort of their own home. This helps address the inequalities of access that can be a challenge within existing pathways and the reduction in face to face appointments also supports the NHS Net Zero agenda by reducing “care miles” travelled by patients.

It improves the patient experience by offering choice and matching patients to the most appropriate therapist for them based on the issue they need help as well as taking into consideration their cultural and language requirements to find the specialist most suited. It provides self-help resources and homework that is tailored to that individual on the platform/ app which can augment the therapy and help the patient through their journey when not in a session. The platform also supports administrators and therapists with the technology, increasing the efficiency of online therapy delivery.

All sessions are provided by fully qualified and vetted counsellors and psychologists, with at least three years clinical experience. The platform is currently use across 20 NHS IAPT services as well as several charities and in the occupational health, corporate and private sector.

## Impact

In 2020, KSS AHSN released the results of its health economic model that compares outcomes between Dr Julian, an innovative mental healthcare platform, and the current NHS Improving Access to Psychological Therapies (IAPT) service:



## Contact

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## SimEPR: enabling clinical training to reflect digital transformation in the NHS

### Summary

SimEPR offers a novel digital solution that allows practical clinical training to more accurately reflect the digital transformations driven by the NHS Long Term Plan.

It addresses the 'digital gap' in medical simulation training, and equips future workforce with the skills to safely and confidently use electronic patient records.

In turn, this training solution aims to optimise patient outcomes by improving the quality of practical training and reducing the incidence of electronic system-related clinical errors.

### The challenge

Simulation training forms a core aspect of practical medical education that involves the use of a mannequin and hospital paraphernalia to create an acute or emergency situation. There are nearly 100 advanced simulation centres in the UK responsible for delivering NHS staff training.

While electronic systems are becoming increasingly common in healthcare settings, due to a paucity of bespoke training software, simulation departments across the UK continue to use outdated paper-based methods for training. This includes paper notes, paper drug charts and investigation results printed on paper handouts. Consequently, practical medical education is not representative of true clinical practice, and new staff complete their training with minimal experience using electronic systems in patient care.

### The solution

To address this problem, Arron Thind (a GP trainee in London) created SimEPR, an educational electronic patient record that features customisable patient scenarios and is designed to be used on a computer or tablet at the mannequin's bedside.

The technology is compatible with readily available hardware and software, and realistically replicates electronic notes, drug charts, observations and clinical investigations. In addition, the interactive software offers the ability to generate electronic prescriptions, electronic documentation and request investigations that update in real-time so trainees can review the results of tests they have requested.

Being a technology that offers benefits to the quality of the simulation learning environment, whilst supporting the development of a digital workforce, SimEPR is in line with Health Education England's National Strategic Vision for the role of Simulation and Immersive Technologies in Health and Care.

Furthermore, in recognition of the benefits SimEPR offers to the NHS, the product has been supported by KSS AHSN, the NHS Clinical Entrepreneur Programme, DigitalHealth.London and LSBU's Simulation for Digital Health Accelerator.

In under two years, SimEPR has progressed from an idea to an evidence-backed product, with early traction in the UK's medical simulation training sector. The next step is to expand SimEPR across other simulation centres to allow more trainees in the London, Kent, Surrey and Sussex region to benefit from the software. Feedback will continue to be collected throughout this process to build on SimEPR's functionalities and ensure the software continues to provide optimal teaching outcomes.

## Impact

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SimEPR has been piloted in four simulation departments (Brighton and Sussex Medical School, Croydon University Hospital, The Royal London and East Surrey Hospital) and more recently commercial agreements have been negotiated with NHS teaching departments to licence the software longer term.

In the past year, over 100 junior doctors and medical students have used SimEPR as part of their routine simulation training. By working closely with simulation specialists in teaching hospitals, SimEPR has evolved into a truly bespoke product for medical education. This is reflected in multi-centre data, which demonstrates clear benefits to clinical training: over 80% of trainees reported that SimEPR improved their clinical learning, created a more realistic training experience and would recommend that their department continues to use SimEPR.

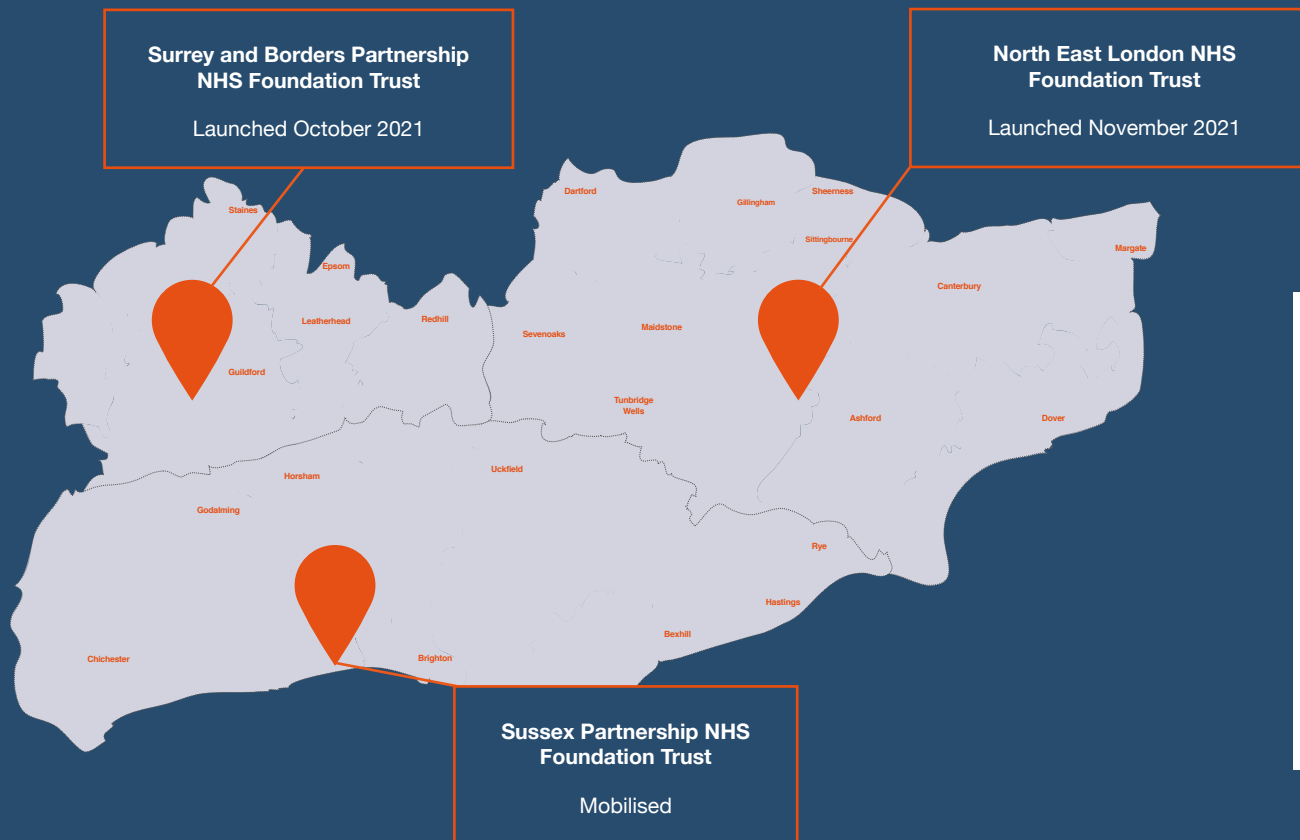
## Contact

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Arron Thind, Founder, SimEPR  
[arron.thind@nhs.net](mailto:arron.thind@nhs.net)

# National programmes

## FREED National Programme (KSS)



### Key Highlights

3 sites are now delivering/in progress to provide early intervention to speed up diagnosis and treatment of eating disorders for 18–25 year-olds

- **Kent and Medway FREED** – launched Nov 21 and delivering an enhanced Service
- **Sussex FREED** – relaunching Autumn 2022
- **Surrey FREED** – launched OCT 21 and piloting FREED Service.

## Looking Forward 22/33

- Support further mobilisation FREED Programme across Kent, Surrey and Sussex
- Delivering FREED inequalities programme - KSS AHSN are working to analyse and review inequalities of access to eating disorders (FREED) services
- Southeast FREED Community of Practice meets regularly with NHSEI, clinicians and young people with lived experience to share good practice
- Support development of ED research through ED Research Clinics within MH Trusts.

## Find out more

To find out more about KSS FREED Programme, please visit:

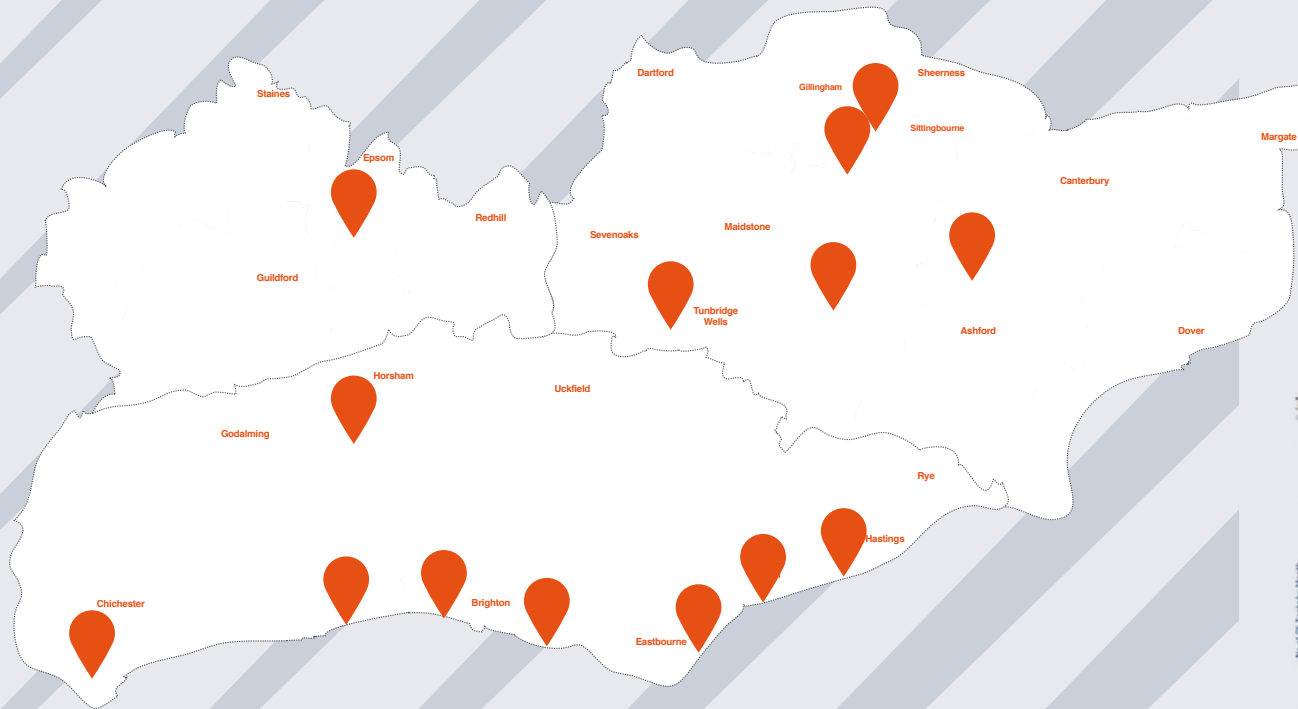
<https://improvement.kssahsn.net/our-work/eating-disorders>



## Video

Watch the young people who have gone through the FREED pathway explain their challenges faced living with eating disorder: <https://www.youtube.com/watch?v=nESDQdczL0w>

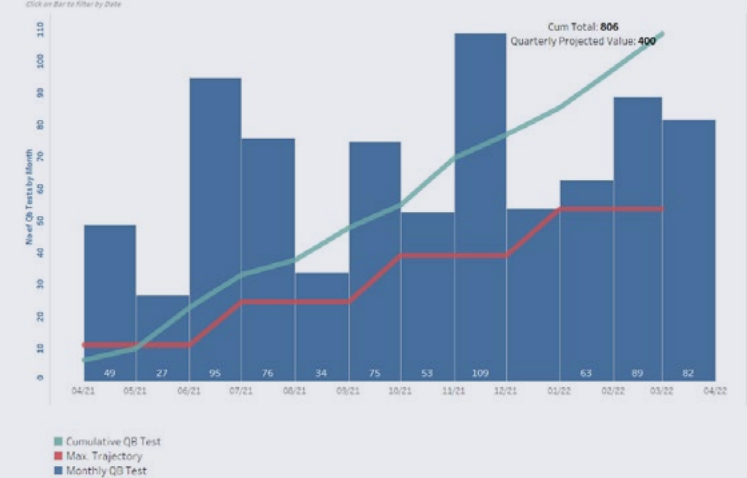
# Focus ADHD National Programme Overview



## Key Highlights

- 6 trusts across 13 sites are now providing QbTest an objective ADHD assessment
- 2,031 appointments saved since April 2020
- 1,398 tests completed since April 2021
- Medium time to diagnosis reduced by 5 Months
- approx. £700k saved since April 2020 (£343 per patient).

Total Monthly and Cumulative Qb Test Trend





## Looking Forward 22/33

- Further mobilisation of ADHD Programme across 22/23
- Piloting ADHD and Youth Offending in partnership with Cookham Wood Youth Offending Unit and NHSEI Health and Justice Team
- South East ADHD Community of Practice meets regularly to share practice.

## Find out more

To find out more about the Focus ADHD national programme, please visit:

<https://improvement.kssahsn.net/our-work/adhd/>



## Video

Watch the amazing children, their parents and clinicians from Medway, who helped us shape this video as they highlight 'What it's like living with ADHD'.

<https://www.youtube.com/watch?v=67m2t127ncY>

# Care home summary data

## EHCH Framework in Kent and Medway

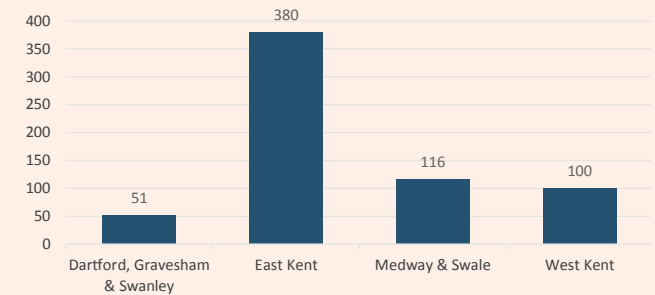


### Landscape of care homes

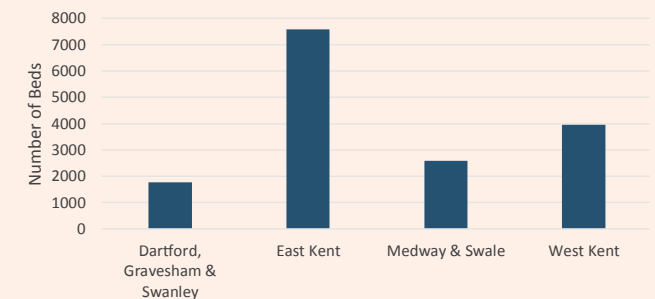
- **647** Care Homes in Kent and Medway – the largest of any ICS nationally
- Totals just under **16,000** beds – between 3 and 4x the number of acute beds in K&M.

HCP	Total Care Homes	Total Beds
Dartford, Gravesham & Swanley	51	1772
East Kent	380	7582
Medway & Swale	116	2588
West Kent	100	3958

### Split of care homes by HCP



### Split of total care home beds by HCP

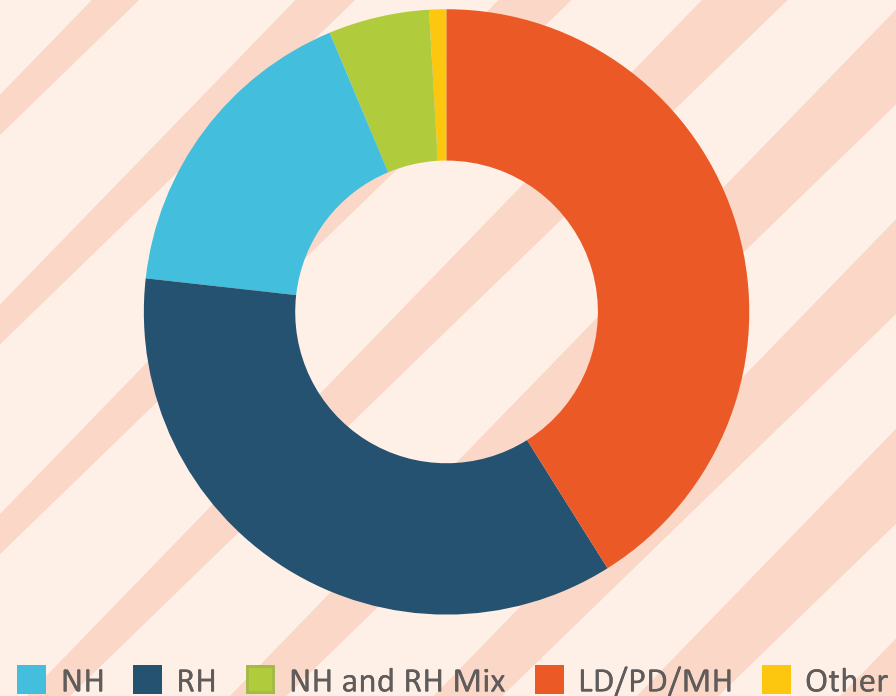


## EHCH Framework

- Achieved 100% mapping of all Care Homes to a GP Practice/PCN by October 2020
- Now in the process of developing plans to support the further embedment of the EHCH framework to all care homes across Kent and Medway
- Have a particular focus on workforce recruitment and retention due to instability of Social Care sector workforce (both in domiciliary care but also care homes)
- Governance route is via a Kent and Medway Enhanced Health in Care Homes Group which feeds into the Kent and Medway Ageing Well Steering Group. Strong links into Digital, Peoples Board, Dementia SIG, End of Life Care Group and others to ensure there is a joined up approach to workstreams related to Care Homes across Kent and Medway.

Type of Home	Number of homes
NH	110
RH	232
NH and RH Mix	35
LD/PD/MH	267
Other	6

## Types of care homes in Kent and Medway



# Kent Surrey Sussex Academic Health Science Network

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