



Al for Urgent and Emergency Care Revolutionising Urgent and Emergency Care

Revolutionising Urgent and Emergency Care in the NHS

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Al for UEC Programme's anticipated impact



Reduced Hospital Admissions

We forecast saving 26,673 unplanned bed days in North East London hospitals.



Decreased A&E
Attendances

We expect a reduction of 13,000 A&E attendances annually



Improved Patient Outcomes

Based on our previous trials, we anticipate enhanced quality of life for patients, with more confidence in their own health management



System-wide Impact

This project will serve as a template for how the NHS can use modern technology to deliver predictive, proactive, and preventive care





Fostering innovation ecosystem



Knowledge sharing between partners



Providing safe, innovative solutions to processes



Contributing to the growth of the Digital Health Innovation Ecosystem

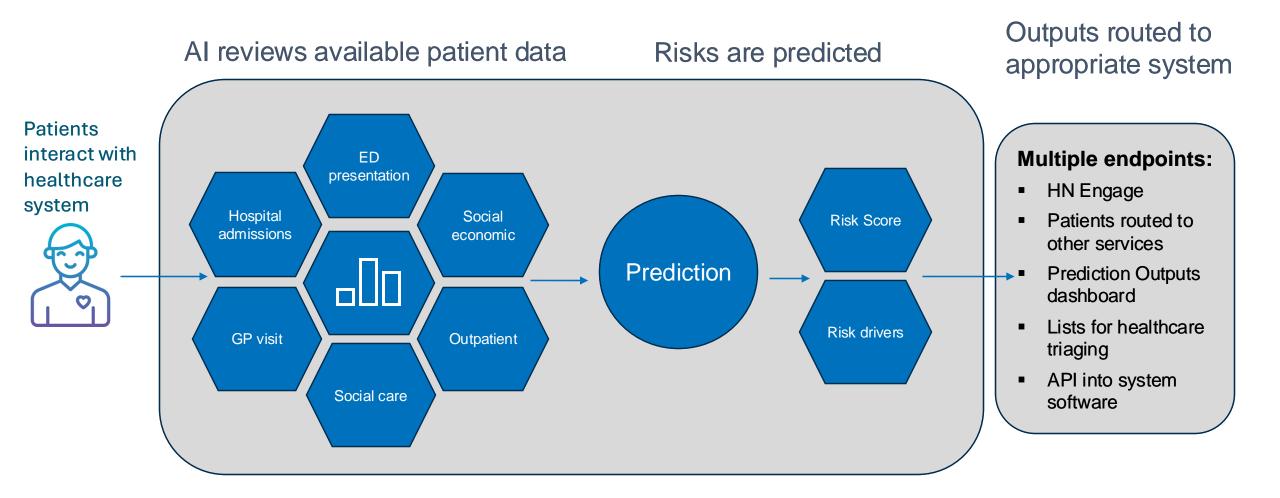


Focusing on health inequalities to deliver a fair system



Clinically validated prediction and prevention technology









Experience built on multiple deployments and strong NHS evidence base

Solution - Deployed in Different Geographies

Evidence - Published with the Nuffield Trust

- Largest study of its kind supporting +1,600 patients
- Reduced A&E Attendances: A 34% reduction in A&E attendance
- Improved Patient Outcomes: Patients reported increased quality of life, improved physical health, and better ability to manage their health conditions
- Mortality Reduction: A 46% reduction in deaths among men over 75

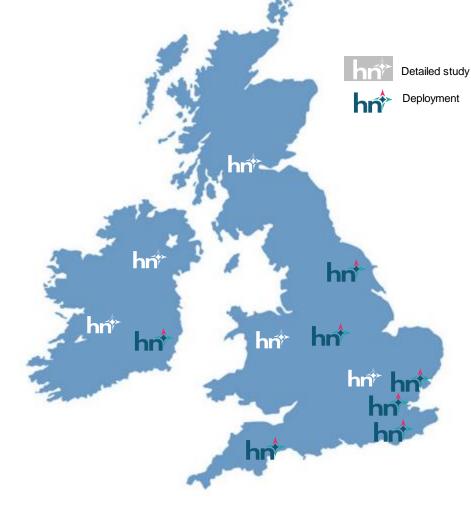










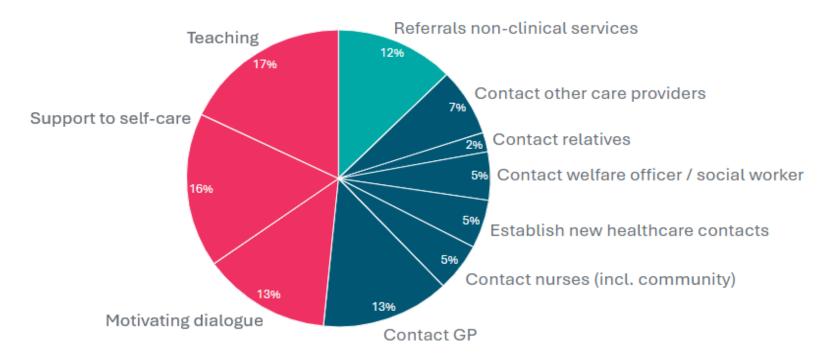








Remotely delivered clinical and psychosocial intervention that promotes health literacy, empowerment, and care coordination as required.







All Clinical Coaches are trained Healthcare professionals, and have undergone our PCI Accredited Training Programme





Patient level impact

We anticipate significant improvements in patient outcomes, including:



Reduced frequency and severity of exacerbations in chronic conditions



Improved medication adherence



Better self-management of symptoms



Enhanced overall quality of life for patients with long-term conditions





Key ingredients of the programme

- HN's smart technology screening, predictive analytics and personalised clinical coaching
- Phased roll-out enabled through system engagement and collaboration
- System Leadership and collaboration
- Information Governance and data access
- Focus on Health Inequalities to deliver a fair system
- Public and Patient Involvement and Engagement strategy
- Clear messaging and communication with programme stakeholders, patients and the public
- Independent academic Evaluation of the programme
- Learning Health System to learn and improve in real time







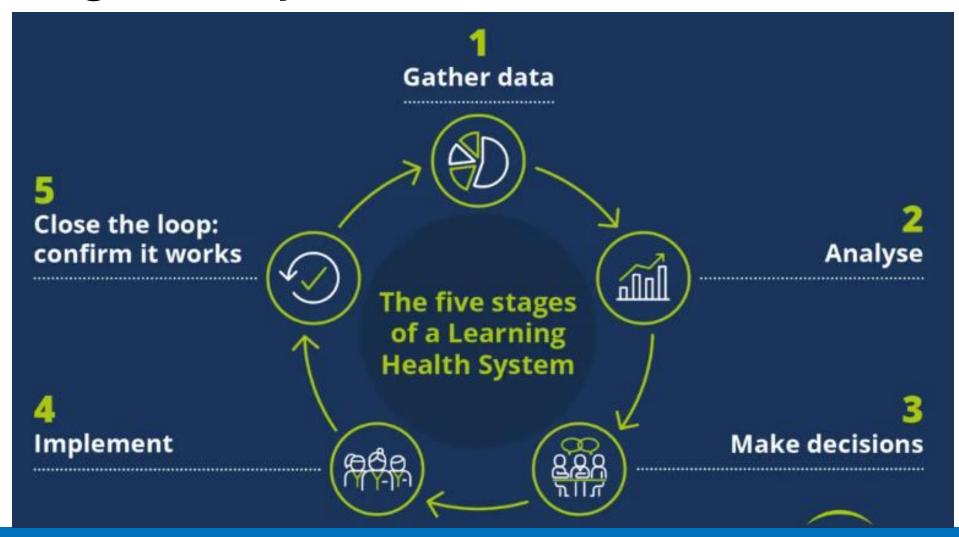
Evaluation aims and objectives

- Understand the effectivenessan AI-guided clinical coaching (AICC) intervention on non-elective hospital admissions, healthcare resource utilisation and clinical outcomes
- Understand the adoption, acceptability, and implementation of the HN health coaching intervention and its impact on patient recorded outcomes and health inequalities
- Understand the cost-benefit and budget-impact at system and national level for AICC
- Understand a system wide impact by capturing learning about implementing an AI programme at this scale and complexity.





Learning Health Systems







Thank you

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Academic Papers

- Bull LM, Arendarczyk B, Reis S, et al. <u>Impact on all-cause mortality of a case prediction and prevention intervention designed to reduce secondary care utilisation: findings from a randomised controlled trial.</u> Emergency Medicine Journal Published Online First: 12 October 2023. doi: 10.1136/emermed-2022-212908
- Cohen, J N. Nguyen, A. Rafiq, M Taylor, P. <u>Impact of a case-management intervention for reducing emergency attendance on primary care</u>: randomised control trial British Journal of General Practice 2022; 72 (723): e755-e763. DOI: 10.3399/BJGP.2021.0545
- Wieske, M. Poduval, S. Hamilton, F. Kirby, B. Werr, J. <u>Artificial intelligence enabled clinical coaching impact on patient health outcomes:</u> A prospective cohort study (2019) available here. Edgren, G., Anderson, J., Dolk, A., Torgerson, J., Nyberg, S., Skau, T., Forsberg, B. C., Werr, J., & Öhlen, G. (2016).
- Edgren, G., Anderson, J., Dolk, A., Torgerson, J., Nyberg, S., Skau, T., Forsberg, B. C., Werr, J., & Öhlen, G. (2016). <u>A case management intervention</u>
 <u>targeted to reduce healthcare consumption for frequent Emergency Department visitors: results from an adaptive randomized trial</u>. European Journal of Emergency Medicine, 23(5), 344–350.
- Reinius, P., Fjellner A., Johansson, M., Werr, J., Öhlén, G., & Edgren, G. (2013). <u>A telephone-based case-management intervention reduces healthcare utilization for frequent emergency department visitors</u>. European Journal of Emergency Medicine, 20(5), 327–334.

Wider Evidence

- East Kent Poster, 2019 Poster produced by East Kent NHS analytics team winners of Association of Healthcare Analysts' Team of the Year award.
- Yorkshire Humber AHSN, 2022. Patient feedback on the benefits of artificial intelligence guided clinical coaching.
- HETT Slides, 2019 Healthcare Excellence Through Technology (HETT) 2019 presentation of HN's RCT results.
- Sara Reis, 2020 Ensuring fairness and inclusion in Al-guided patient screening
- Prof. Matthew Cooke, 2021 Reducing the high healthcare demand of a few individuals
- NHSE Case Study, 2020 A case study of our York deployment, written by the NHS England Personalised Care Group.
- Policy paper, 2020 produced to explain the benefits of clinical health coaching.
- <u>Videos</u> Interviews with HN, our NHS partners and patients.
- North East London joint forward plan, June 2023