

HDR UK Better Care Insight Sharing Day – 16th July

Meeting summary



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Executive summary

The first Better Care brought together a group of over 70 attendees from across the Better Care network and provided an opportunity to share experiences and insights, opportunities and challenges in delivering the Better Care approach. The event highlighted the progress being made by teams across the UK, progressing our vision of embedding the use of large-scale data and advanced analytics in routine care.

Discussions focussed around key areas which were highlighted by attendees and speakers throughout the day and reflect common priorities and key enablers for success.

Attendees agreed that generating system-wide change in an era when patients are increasingly suffering from multiple conditions will require us to bridge the data gap and create an integrated approach across clinical specialties and care settings. In the same way that patients do not experience conditions or services in isolation, the data infrastructure and our approach need to reflect this.

Building on this data integration, the Better Care approach is fundamentally dependant on access to near real time data from across multiple care settings. This will only be realised by communication, collaboration and the building of relationships which foster trust and confidence. Trust and confidence are also essential for developing an environment which fosters knowledge sharing and allows greater impact and more rapid progress, both of which are limited by working in isolation.

Core themes of patient engagement and training are essential, and attendees agreed that HDR UK is uniquely placed to drive the agenda to embed these activities as an integral aspect of routine, data-led care.

Future insight days will provide an important opportunity to explore these areas in greater depth and to continue to share the progress and impact of the programme.



Introduction

This document summarises the key discussion points and outcomes from the first HDR UK Better Care insight sharing day, 16th July 2020.

The event was held online, via Zoom, and is the first in a series of quarterly meetings for the Better Care Community planned throughout 2020-21. The events are designed to bring together the broader HDR UK Better Care Community including Better Care site and Catalyst projects, and provide an opportunity to share learnings and insights, identify opportunities for collaboration and consider how we can accelerate and enable the Better Care approach.

Feedback following this event will be used to inform future Insight Sharing days.

The **key objectives** for the first insight day were as follows:

- 1. Discuss the vision and priorities of the Better Care programme
- 2. Share an overview of the current HDR UK Better Care community and ongoing work
- 3. Consider how the Better Care community can adapt and show best practice in response to the long-term impacts of COVID-19
 - How have priorities changed and how can we best use the Better Care approach?
- 4. Consider how we can implement best practice in this area overcoming barriers and taking advantage of opportunities to:
 - Share insights and support collaboration to accelerate innovation and improvement
 - Effectively embed patient, public and practitioner involvement and engagement (PPPIE) in ongoing work
 - Drive the policy agenda to enable progress
- 5. Inform the development of a roadmap to set out next steps for the programme

A full agenda is provided in Appendix A: Meeting agenda

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Better Care programme strategy and vision

Speakers:

• Simon Ball, Better Care Research Director, University Hospitals Birmingham NHS Trust

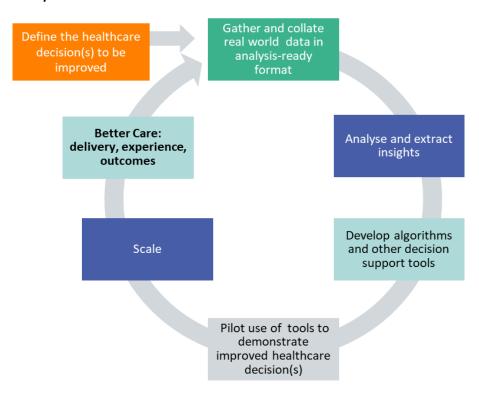
Objectives:

- Highlight the vision, shared aims and progress to date of the Better Care programme
- Layout our roadmap of next steps towards realising this vision
- Explore how our vision resonates with the broader community and identify future areas for development

- The <u>Better Care approach</u> aims to embed insights from health data research into personal, clinical and health system decision making through the implementation of Better Care loops (see **Figure 1**: **Better Care Loop**).
- This approach combines the implementation of data-driven improvement in front line health and social care with continuous evaluation to improve outcomes for patients, practitioners and systems leaders. It aims to address the problems that matter most to practitioner, patients, policy makers and the public.
- If successful the Better Care approach will allow us to deliver health and care which is safe, effective, transparent, patient-centred, timely, efficient and equitable.
- The Better Care approach requires an enabling environment which encompasses infrastructure, technological, behavioural and cultural factors.
- The ongoing COVID pandemic has exacerbated the need for this approach, intensifying the existing challenges facing the health and care sector and putting further pressure on limited infrastructure, funding and workforce.



Figure 1: Better Care Loop



- To progress and embed the Better Care approach in routine clinical practice, the HDR UK programme has three delivery priorities:
 - 1. Work with the NHS, industry, patients and researchers to deliver research programmes which develop and exemplify Better Care in action
 - Learn from these examples, to set out the national systems and processes needed to embed the Better Care approach at scale
 - 2. Support the development of data science & analysis skills to enable a workforce able to implement the Better Care approach
 - o Ensure everyone can consider themselves a health data scientist
 - 3. Provide a national forum to support wide-spread acceleration of the Better Care approach
 - Communicate what has already been achieved, its impact, lessons learnt and the current barriers
 - Convene the key enabling organisations to collectively agree priority areas, root causes, solutions and a resulting programme of work with delivery resources
 - Encourage and embed best practices:
 - developing a culture of openness, collaboration and transparency
 - embedding patient, public and practitioner involvement and engagement (PPIE) at the core of all initiatives



- fostering continuous learning and an environment which values both skills development for individuals and system-wide learning from the outcomes of innovation
- establishing the data standards needed to ensure a robust and rigorous approach which can be scaled
- These priorities provide the foundation for the current programme activities and will be used to direct the programme strategy moving forwards.
- The rest of the event provided an overview of ongoing activities and helped to identify opportunities for future development.

Demonstrating the Better Care approach in practice

1. Better Care portfolio round up

Speakers:

• Alice Turnbull, National Programme Director, Better Care, HDR UK

Objectives:

- Provide an overview of the current Better Care portfolio including Catalyst and site projects
- Consider how we can integrate the programme of work to support "sharing and learning" across
 the Better Care network
- Explain the format and programme for the day

- The Better Care programme has an ongoing, national network of initiatives designed to achieve our
 delivery priorities and crossing the broader health and care ecosystem (see Figure 2: Better Care
 portfolio overview crossing clinical specialties and processes). Initiatives include:
 - Partnership projects across <u>eight HDR UK partnership sites</u>. Partnership projects bring together teams in a specific geography with the diverse skills and expertise needed to implement the Better Care approach. The sites offer a route for scaling impact across geographies and embed the data, infrastructure, tools and approaches needed to implement the full Better Care approach.
 - Four Catalyst projects launched in May 2020 (in collaboration with the Health Foundation).
 These 12-month initiatives are designed to provide rapid insights into the Better Care approach. The projects focus on connecting the nodes of the Better Care loop and provide an opportunity to learn and share insights from implementation in practice.
 - Three Catalyst workstreams; training, knowledge management and policy and insight,
 underpin this work and bring together the project teams and broader stakeholders needed



to address system-wide requirements. The workstreams create a framework, strategy and deliverables to drive progress in these key areas.

- Discussion focussed on the key role training provides.
 - Attendees noted training for Better Care needs to be delivered flexibly, making use of online programmes, short courses and just-in-time delivery models.
 - Training must bring together the diverse stakeholders all of whom must be involved to implement the Better Care approach. By training clinicians, data engineers and analysts as a group we can promote system-wide understanding of the broader challenges and foster more effective data integration and collaboration.
 - Better Care training, which facilitates the use of large-scale data and analytics in routine practice, needs to be recognised both by system leaders and by setting out qualifications or standards. HDR UK can influence and set a direction that truly values the development of these key skills within the health and care workforce.

Figure 2: Better Care portfolio overview crossing clinical specialties and processes

		Primary / Community Care 7 projects	1	Primary to Secondary Care 8 projects	Secondary/Tertiary Care 12 projects
CLINICAL SPECIALTY	•	Asthma Diabetes Genetic conditions Frailty in the elderly GP consults		Cardiovascular Frailty in the elderly	 Cardiovascular Rare diseases (generic) Ophthalmology Cystic fibrosis Epilepsy Paediatrics (generic) Critical care Radiology
OPERATIONAL/ PROCESSES	•	Medicines use / prescribing rates Testing rates Guideline adherence Risk assessment ` Remote monitoring		Data infrastructure Patient flow / operational management Testing rates Risk assessment	 Data infrastructure Patient flow / operational management Long term patient monitoring



2. Catalyst project showcase

Speakers:

- Alastair Denniston, Better Care Research Co-Director, University Hospitals Birmingham NHS Trust (Chair)
- <u>Charles Haworth</u>, Royal Papworth NHS Foundation Trust <u>Al-driven Improved clinical decision</u>making tools to manage a life-long chronic condition (Cystic Fibrosis (CF))
- <u>Tony Willis</u>, North West London Health and Care Partnership <u>RADAR (Risk Algorithms for Decision</u> support and Adverse outcomes Reduction) <u>Diabetes</u>
- Alvina Lai, University College London <u>Marshalling health system experience of 'patients like me' to</u> quide treatment decisions: a UK demonstrator of the Informatics Consult
- **NOTE**: The fourth Catalyst project, <u>Developing and deploying quality improvement dashboards for primary care</u>, will be presented at the next insight sharing day

Objectives:

- Provide an overview of the Better Care Catalyst projects to the broader community
- Consider how the projects will progress the Better Care programme vision
- Share early insights and lessons learnt by the project teams when embedding a Better Care approach into front-line clinical practice

- All Catalyst projects share the common goal of using large-scale data and advanced analytics to
 inform routine clinical practice and delivery and drive continual improvements to health and care.

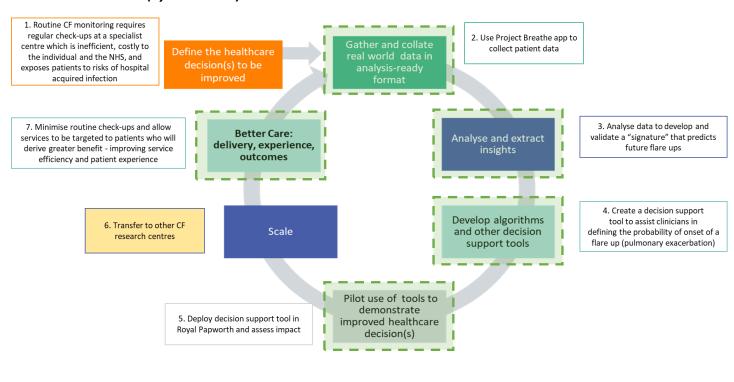
 Figures 3-5 demonstrates how the diverse initiatives which cross a variety of care settings, clinical
 specialties and geographies all map to the Better Care loop.
- Project teams reported an increase in demand for the tools and processes they are developing
 during the ongoing COVID pandemic and higher levels of stakeholder interest. The pandemic has
 clearly demonstrated the need for a data driven approach to inform rapidly evolving practice, a
 point which was covered again in <u>later talks</u>.
 - Attendees particularly noted the demand for technological solutions, which are not only
 designed and implemented with appropriate patient and practitioner engagement but can
 be evaluated to demonstrate their impact. Examples such as the remote monitoring of
 vulnerable groups by the Project Breath CF App were cited.
- Speakers highlighted that clear communication, which is tailored and appropriate to the
 audience, is a critical success factor for all initiatives. This point was also picked up in later
 sessions on PPPIE.
 - Data must be presented to clinicians in a way which can be easily interpreted and actioned;
 and explained to patients so that it simplifies complexity and allows an understanding of
 what the data means for them on a personal level. We need to consider how appropriate



- communication can identify modifiable risk factors to patients and support behaviour change for example through decision support tools designed for patients and practitioners.
- If successful, the Better Care approach can allow us to make the risk and reward of health care decisions transparent to all those involved, facilitating a free information exchange between technologists, researchers, clinicians and patients.
- Data integration across the patient pathway and healthcare settings was flagged as an issue which often presents a barrier to progress.
 - Although there are some examples of effective data integration across the patient journey and different care settings, attendees were keen to explore the barriers in more detail and consider the standards and principles required to overcome these issues. A deeper exploration of this topic will be covered in future Insight Days.
 - Attendees discussed how data ownership fits into this paradigm and the role patients can
 play in the ownership of their own data. A full discussion of this topic was beyond the
 scope of the meeting but will need to be considered as the use of patient recorded data for
 example through apps, wearables and patient reported outcomes measures, increases in
 routine clinical practice and patients take a more active role in the ownership of their data.



Figure 3: Better Care Loop - Al-driven Improved clinical decision-making tools to manage a life-long chronic condition (Cystic Fibrosis)



Project focus

Potential future follow up



Figure 4: Better Care Loop - RADAR (Risk Algorithms for Decision support and Adverse outcomes Reduction) – Diabetes

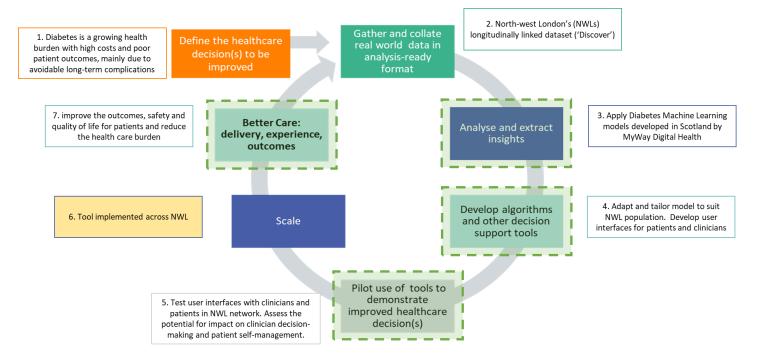
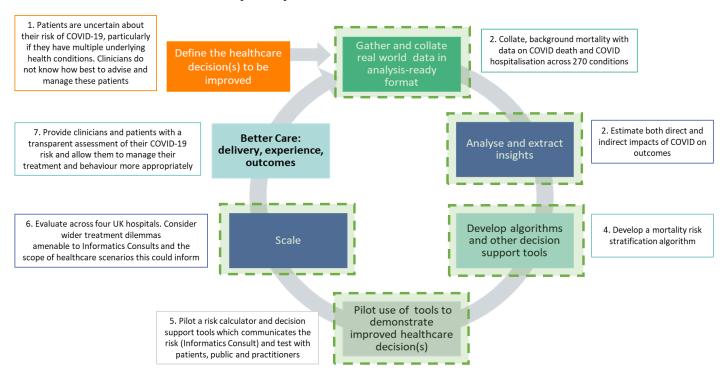


Figure 5: Better Care Loop - Marshalling health system experience of 'patients like me' to guide treatment decisions: a UK demonstrator of the Informatics Consult





3. Adapting the Better Care approach to the COVID-19 pandemic - managing the longer-term impact

Speakers:

• Clara Day, Assistant Medical Director, University Hospitals Birmingham NHS Trust

Objectives:

- Consider how COVID-19 has impacted the longer-term priorities of the Better Care approach, highlighting emerging issues which have resulted from the pandemic
- Discuss how we can tackle these emerging demands through an integrated system-wide approach
- Invite attendees to share wider demands for change across the health and care systems and consider how the Better Care approach can help to address these

- The COVID pandemic is continuing to have a dramatic impact on direct healthcare provision. As an external change factor, it has created an urgency and added to the demand for the Better Care approach.
- The healthcare sector is currently dealing with an increase caseload following cancelled
 appointments, postponed elective procedures and delayed referrals during the peak of the
 pandemic. This demand is being managed by a service which is working at reduced delivery
 capacity due to social distancing restrictions. Services were already working to maximum capacity
 under standard conditions, meaning there is a critical need for innovative approaches to help
 address the challenges.
- Across University Hospital Birmingham NHS Trust, several new approaches have been implemented to manage demand and capacity; these include triaging all interactions, setting up remote phlebotomy and spirometry services and ensuring system-wide resource management to match demand with supply.
- The rapid need to respond to the demand means operational changes have been deployed ahead of the data and analytics needed to inform implementation and evaluate effectiveness.
- The Better Care approach offers great potential to provide data-driven insights which can enhance and improve these innovations, for example supporting the triage process by identifying the patients who would benefit most from further management.
- To ensure this is realised we need to foster a culture which continues to embrace change and promotes collaboration and communication across disciplines.



Sharing and learning across the Better Care network

1. Knowledge sharing workshop session

Speakers:

- Melissa Lewis-Brown, Science Manager, HDR UK (Chair)
- Susheel Varma, Director of Engineering, HDR UK
- <u>Richard Dobson</u>, Professor of Biostats and Health Informatics, King's College London and Institute
 of Health Informatics, University College London *Multi-hospital analytics for understanding and*predicting risk for COVID-19 severity
- Jeremy Wyatt, Professor of Digital Healthcare, University of Southampton, Director of Wessex Institute of Health Research
- Philip Scott, Reader in Health Informatics, University of Portsmouth

Objectives:

- Highlight current routes for sharing Better Care outputs and insights
- Consider opportunities offered by the <u>HDR UK Innovation Gateway</u> to support knowledge sharing
- Understand how the community are currently sharing knowledge and collaborating
- Surface barriers to knowledge sharing and potential solutions

- To progress the Better Care approach two types of knowledge must be shared:
 - 1. Practical knowledge, skills, expertise and personal insights
 - 2. Computable knowledge (knowledge expressed in code as machine-executable instructions)
- Effective knowledge sharing allows us to learn from each other's successes and failure, enhance
 the reproducibility and robustness of research and innovation, avoid duplication, deliver on our
 core HDR UK value of transparency and build patient and public trust.
- Knowledge sharing is a priority area for the Better Care programme as we work to accelerate and scale a newly defined approach which brings together many diverse stakeholders.
- There are many channels to facilitate sharing and learning across both the Better Care network and broader HDR UK community, for example, <u>GitHub</u>, the <u>HDR UK Innovation Gateway</u>, Slack (#hdruk_bettercare), <u>HDR UK website</u>, <u>webinars</u>, <u>open access publications</u> and <u>case studies</u>.
- During the session, presenters explained how the development and validation of a supplemented
 <u>NEWS2 score for COVID</u> clearly demonstrates the value of this open collaborative approach.
 Generation of the enhanced score was dependent on transfer, application and adaptation of a data
 model across five NHS trusts which allowed inclusion of data from 6,500 patients. This was made
 possible by outreach and collaboration across the Better Care network.
- During the meeting, attendees highlighted that trust and openness are key enablers to promote
 knowledge sharing. This reflects the need to embed collaboration and communication as cultural



- and organisational values across disciplines and to challenge historic ways of working in isolation and competition.
- Barriers to sharing were cited as time, competition and fear, reflecting again embedded cultural
 "norms" in science and research and potentially the degree to which knowledge sharing is
 prioritised. To challenge this requires both top-down and bottom-up leadership to drive cultural
 change.
- Attendees reported that easy-to-use repositories and communities of practice were critical success factors allowing knowledge sharing. Both channels will be explored and facilitated by the Better Care knowledge management workstream.
- Communication skills were also highlighted as important, building on earlier discussions on <u>training</u>.
 Attendees discussed that <u>training programmes need to cover professional skills</u> such as communication and team working, <u>as well as data and analytical awareness</u>.

2. Demonstrating best practice in patient, public and practitioner involvement and engagement for Better Care

Speakers:

- Sinduja Manohar, Public Engagement and Involvement Officer, HDR UK (Chair)
- Andy Gibson, Associate Professor of Patient and Public Involvement, UWE; Academic Lead, People in Health West of England What is Patient and Public Involvement?
- Angela Coulter, Chair of Public Advisory Board, HDR UK

Objectives:

- Consider what does good look like for PPPIE and Better Care
- Discuss novel approaches to PPPIE at all levels of Better Care work and engaging stakeholders on the front line of health and care delivery

- Patient, public and practitioner involvement and engagement (PPPIE) is critical to allow us to benefit from the insights and perspectives of all stakeholders, particularly those at greatest risk of being excluded from any innovation.
- By engaging and involving patients, the public and practitioners, we provide transparency, increase trust in the use of data and enhance the value and impact of outputs.
- One of the key challenges to effective PPPIE is communicating sometimes technical, complex information in a way which is clear and understandable to a wide diversity of audiences.
 - Communications need to be tailored to different stakeholders, within the wider patient or practitioner group, who may have different levels of technical and analytical literacy.
- Attendees highlighted that it is also important to use different channels for engagement, to avoid
 marginalising or excluding certain groups. During the COVID pandemic many innovative
 approaches to PPPIE have been shown to be highly effectively, using a variety of digital



- **approaches and targeting specific groups** with first-hand experience. In this way we can embed more effective PPPIE in both research and innovation but also routine clinical practice.
- Attendees reported occasional challenges working with organisations who play a gatekeeping role, regulating access to patient and public groups. Whilst it was appreciated that this helps to ensure appropriate contact, it should not pose a barrier to PPPIE. There are many groups willing to support in this areas for example the <u>HDR UK Public Advisory Board</u>.

3. Policy and Insight sharing, workshop session

Speakers:

- <u>Tim Horton</u>, Assistant Director, The Health Foundation
- <u>Tom Hardie</u>, Improvement Fellow, The Health Foundation

Objectives:

- Consider what are the biggest opportunities for developing learning health systems / Better Care approach at scale in the UK?
- Discuss what enablers would be most helpful and make the biggest difference towards realising these opportunities

- During the session attendees considered what are the biggest opportunities in the UK now, to develop and scale the Better Care approach.
- Key opportunities where we, as a Better Care community, can show leadership in include:
 - o The use of PPPIE to enable co-design of data led service changes
 - How to share and make best use of the skills, knowledge and capabilities already present in the system and support a free exchange of knowledge and expertise
 - The process for data integration across traditional boundaries; for example, working over primary and secondary care and facilitating data linkage and exchange across these areas
 - Using this data integration and knowledge exchange to tackle key burdens to the health and care system which cannot be addressed in isolation, for example management of multi-morbidity, long-term health conditions and the transition of patients between different care settings and between health and social care
 - How to most effectively leverage increasingly diverse forms of data and the digital technologies needed to collect these, for example using more established sources such as electronic health records, and newer inputs such as wearables
 - The role played by artificial intelligence and machine learning to analyse data and draw insights and the skills in this area across the UK health and research ecosystem
- Attendees also considered the key enablers which would support us to progress the Better Care
 approach. Enablers fell into several categories including cultural, technological, skills and training
 and resources. Specific points were as follows:



Cultural

- Ensuring PPPIE is a central pillar of the Better Care approach and embedding co-production with patients, the public and practitioners
- Demonstrating accountable leadership which prioritises and promotes our share values and is inclusive and engages all relevant stakeholders, including those with lived experience
- Promoting and enabling collaborative ways of working that cross traditional boundaries and integrate a variety of skills, knowledge and experience
- o Learning from implementation to set out best practice and to demonstrate impact

Technological

- Developing, applying and evaluating new digital technologies to understand their effectiveness and set out principles for best practice
- Optimising data systems and sources to allow linkage and establishing the standards and key steps needed to achieve this

Skills and training

- Providing the resources to build skills and knowledge in the Better Care approach and signposts to existing, relevant resources
- o Recognising and rewarding the development of skills in this area

Resources

- Provisioning appropriate resources, including IT and funding, to ensure data integration can be progressed
- Incentivising the collection and sharing of knowledge across the system for example ringfencing time and demonstrating value
- These enablers will be used to set out in a living set of action statements which will inform both the Better Care programme and provide a 'call to action' for wider stakeholders as we move forwards



Next steps

- The insight sharing day identified three areas where we will focus efforts across the HDR UK Better Care network to drive progress. Each of these areas have been qualified by action statements to set out our delivery priorities for the next three months.
 - 1. Through the Better Care programme, we will continue to bring together the wider network and diverse group of stakeholders needed to learn from implementation in practice, to demonstrate the impact and effectiveness of this approach and remove barriers
 - Sharing and communication across the Better Care network will be critical and future meetings will feature presentations from other project teams who are adopting the Better Care approach and surfacing learnings through their activities.
 - Future meetings will also provide an important opportunity to consider specific barriers in more detail (for example data integration and inter-operability, near real-time data access, clear governance frameworks for data access, patient engagement and empowerment), and to identify solutions to address these barriers. Topics will build on the key barriers already highlighted in this meeting, and additional areas which we will continue to surface through consultation across the network.
 - Through this we aim to support teams to come together around an area of interest and foster collaboration as an integral part of the project development process.

ACTION STATEMENT: we will provide opportunities for the Better Care community to interact and discuss ongoing work between Insight Sharing Days, for example through Lunch and Learn sessions.

ACTION STATEMENT: we will consult with the Better Care network, through the Catalyst Knowledge Management workstream, to establish what are the critical requirements for effective knowledge sharing.

- 2. By implementing in practice and exploring barriers we will work to understand **how we evaluate and define success** at both a local project-level and in a system wide capacity and validate this with system leaders and key stakeholders.
 - Defining success will be essential to demonstrating impact, understanding the incentives for change across all stakeholders and help us address cultural barriers to implementation.
 - O In doing this we aim to drive progress and create the case for sustained change.
 ACTION STATEMENT: we will work to identify "what does success look like for Better Care" considering both broader landscape in this areas and progress of existing projects. We will discuss a proposal with the wider network at the next Insight Sharing Day.
- Ongoing programmes of work will address areas where we can demonstrate best practice and develop system wide enablers, for example training, knowledge sharing and effective PPPIE.
 All these areas will be explored in more detail in future meetings.



ACTION STATEMENT: we will build on the landscape mapping which has already been conducted by the Catalyst Training workstream to develop and test materials for Better Care training which fulfil current unmet needs.

ACTION STATEMENT: we will support project teams to embed PPPIE within their Better Care work, including through the HDR UK PAB network and wider groups. We will use this to identify examples of best practice which demonstrates the potential impact of PPPIE and share progress at the next Insight Sharing Day.



Appendix A: Meeting agenda

Time	Session	Who	Objectives		
OPENING SESSION					
09:00	Introduction and welcome	Simon Ball - Better Care Research Director, University Hospitals Birmingham NHS Trust			
09:05	Better Care Programme overview	Simon Ball - Better Care Research Director, University Hospitals Birmingham NHS Trust	 Highlight the vision, shared aims and progress to date of the Better Care programme Layout our roadmap of next steps towards realising this vision Explore how our vision resonates with the broader community and identify future areas for development 		
09:25	Better Care portfolio round up	Alice Turnbull - National Programme Director, Better Care, HDR UK	 Provide an overview of the current Better Care portfolio including Catalyst and site projects Consider how we can integrate the programme of work to support "sharing and learning" across the Better Care network Explain the format and programme for the day 		
09:40	BREAK				
CATALYS1	PROJECT SHOWCASE				
09:50	Introduction	Chair: Alastair Denniston - Better Care Research Co- Director, University Hospitals Birmingham NHS Trust	 Provide an overview of the Better Care Catalyst projects to the broader community Consider how the projects will 		
	a) Al-driven Improved clinical decision-making tools to manage a life- long chronic condition (Cystic Fibrosis)	Speaker: <u>Charles Haworth</u> - Royal Papworth NHS Foundation Trust	 progress the Better Care programme vision Share early insights and lessons learnt by the project teams when embedding a Better Care approach 		
	b) RADAR (Risk Algorithms for Decision support and Adverse outcomes Reduction) – Diabetes	Speaker: Tony Willis - North West London Health and Care Partnership	into front-line clinical practice		



	c) Marshalling health system experience of 'patients like me' to guide treatment decisions: a UK demonstrator of the Informatics Consult	Speaker: Alvina Lai - University College London	
10:50	BREAK		
BETTER C	ARE IN THE COVID ERA		
11:00	Adapting the Better Care approach to the COVID-19 pandemic - managing the longer-term impact	Chair: Simon Ball - Better Care Research Director, University Hospitals Birmingham NHS Trust Speaker: Clara Day - Assistant Medical Director, University Hospitals Birmingham NHS Trust	 Consider how COVID-19 has impacted the longer-term priorities of the Better Care approach, highlighting emerging issues which have resulted from the pandemic Discuss how we can tackle these emerging demands through an integrated system-wide approach Invite attendees to share wider demands for change across the health and care systems and consider how the Better Care approach can help to address these
11:30	BREAK		
SHARING	AND LEARNING ACROSS THE	BETTER CARE NETWORK	
11:40	Knowledge sharing Workshop session	Chair: Melissa Lewis-Brown - Science Manager, HDR UK Speakers: Susheel Varma - Director of Engineering, HDR UK Richard Dobson - Professor of Biostats and Health Informatics, King's College London and Institute of Health Informatics, University College London Jeremy Wyatt - Professor of Digital Healthcare, University of Southampton, Director of Wessex Institute Health Research Philip Scott - Reader in Health Informatics, University of Portsmouth	 Highlight current routes for sharing Better Care outputs and insights Consider opportunities offered by the HDR UK Innovation Gateway to support knowledge sharing Understand how the community are currently sharing knowledge and collaborating Surface barriers to knowledge sharing and potential solutions
12:30	LUNCH	Portsmouth	



EXTERNAL ENGAGEMENT ENABLING SUCCESS					
14:00	What does Patient and Public Involvement and Engagement look like for Better Care? Workshop session	Chair: Sinduja Manohar - Public Engagement and Involvement Officer, HDR UK Speakers: Andy Gibson - Associate Professor of Patient and Public Involvement, UWE; Academic Lead, People in Health West of England Angela Coulter - Chair of Public Advisory Board, HDR UK	 Consider what does good look like for PPPIE and Better Care? Discuss novel approaches to PPPIE at all levels of Better Care work and engaging stakeholders on the front line of health and care delivery 		
14:30	Policy and Insight sharing Workshop session	Facilitators: Tim Horton - Assistant Director, The Health Foundation Tom Hardie - Improvement Fellow, The Health Foundation	 Consider what are the biggest opportunities for developing learning health systems / Better Care approach at scale in the UK? Discuss what enablers would be most helpful and make the biggest difference towards realising these opportunities 		
MOVING	FORWARDS				
15:15	Closing remarks and next steps	Simon Ball - Better Care Research Director, University Hospitals Birmingham NHS Trust	 Review of day summarising key themes, insights and learnings Outline priorities and immediate next steps Invite feedback to determine the format for future events 		
15:30	CLOSE				