

## Making the policy of supported selfcare a reality in the NHS today – a case study of AI-Guided Clinical Coaching

Professor Alf Collins – National Clinical Director of the Personalised Care Group, NHS England

Mark England – CEO HN

Digital Health Rewired March 16th 2022



**1. The Policy - The Case for Supported Self-Care –** Professor Alf Collins

## 2. Into Practice: Providing Supported Self-Care in the NHS – AI-Guided Clinical Coaching

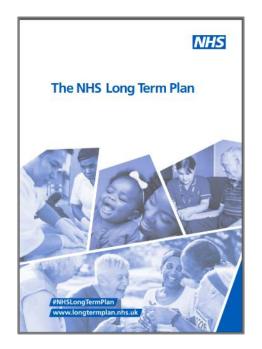
Mark England

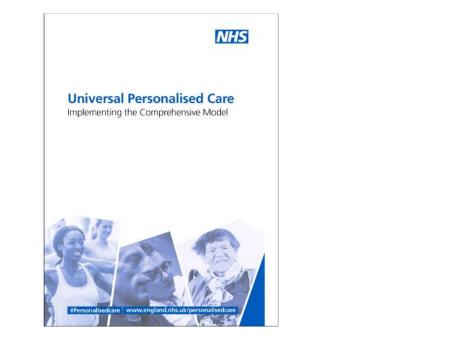


## 1. The Policy - The Case for Supported Self-Care – Professor Alf Collins



## **1.** The Policy Context - The Case for Supported Self-Care – Professor Alf Collins







NHS

England

Personalised Care Group system case study Proactive health coaching in the Vale of York 2. Into Practice: Providing Supported Self-Care in the NHS – AI-Guided Clinical Coaching – Mark England



## Intro to HN: 'Empowered Patients, Sustainable Healthcare'

#### What we do:

- Population health analytics
- Data-driven casefinding
- ✤ Remote monitoring
- ✤ Clinical coaching
- Virtual ward solutions

#### **Our focus:**

- Support patients to become activated and to selfmanage and enhancing their health literacy
- Enhance the efficient
   allocation of primary and
   secondary care resources

#### **Our Credentials**

- UK's largest RCT on clinical case management
- Supporting over 5,000 patients in 2020 & 2021
- 40 employees contacts with 5 ICSs
- NIA Innovation Accelerator fellows 2020 & 2021





## **Birmingham OwnHealth trial evaluated telephone coaching without data-driven case-finding**

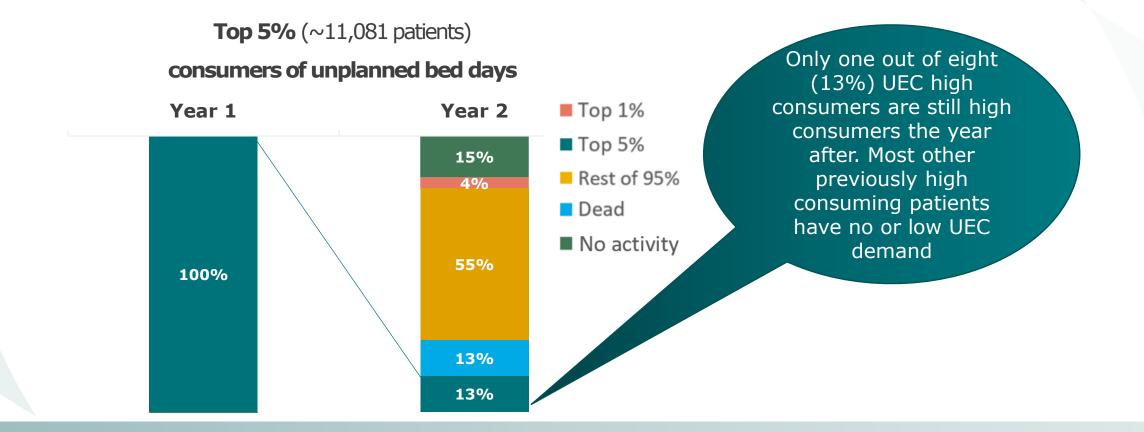
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BMJ 2013;347:14585 doi: 10.1136/bmj.14585 (Published 6 August 2013)	Page 1 of 12
	RESEARCH
Effect of tolowhows bealth cooching (	Birmingham
OwnHealth) on hospital use and asso cohort study with matched controls	-
Effect of telephone health coaching ( OwnHealth) on hospital use and asso cohort study with matched controls OPEN ACCESS Adam Steventon senior research analyst <sup>1</sup> , Sarah Tunkel director <sup>2</sup> , Ian Martin Bardsley head of research <sup>1</sup>	ciated costs:

#### **Conclusions:**

- No expected reductions in hospital admissions / secondary care costs over 12 months
- Could have increased care
   burden



## **High users of UEC are transient**



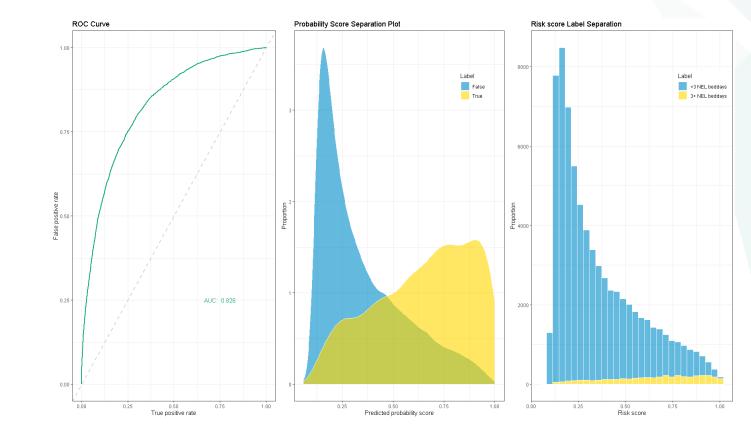
#### **Implications for Proactive Care Models to Reduce UEC Demand**

- Identify the right patients in the right "window of opportunity" e.g. Predictive Analytics in near real-time and intervene directly
- Evaluate against control group as "before and after" will give false positive results most patients naturally reduce their UEC demand over a 12 month time period



## **Our AI model can identify 8 out of 10 HIUs -before they become HIUs** (predicting >3 unplanned bed days) – Glasgow City Analysis

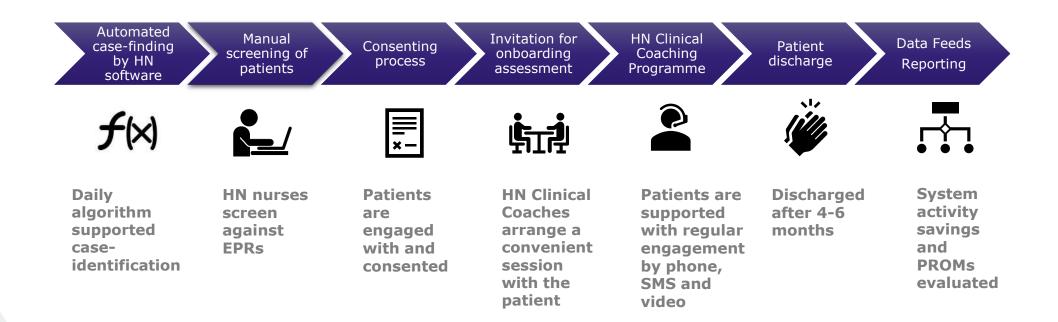
- Validated model performance ROC<sup>1</sup> = 0.826
   Sensitivity = 0.81 (81%)
   False Negative rate = 0.19 (19%)
   Specificity = 0.68 (68%)
   Balanced accuracy = 0.75 (75%)
- Tested for equality and fairness
- HSNC cloud-operated making it scalable and easy to re-train



ROC<sup>1</sup> – receiver operating characteristics curve



# AI-guided Clinical Coaching (AICC) process to identify and support HIUs



#### hn-company.co.uk

Accreditations/ certifications: **NHS** DS&P Digital Toolkit

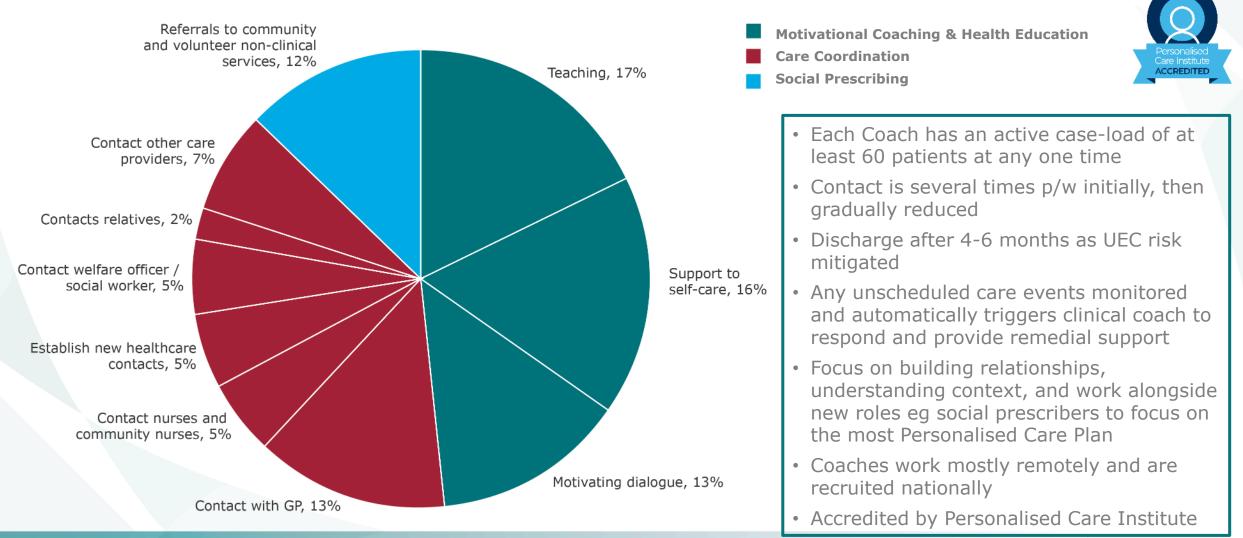






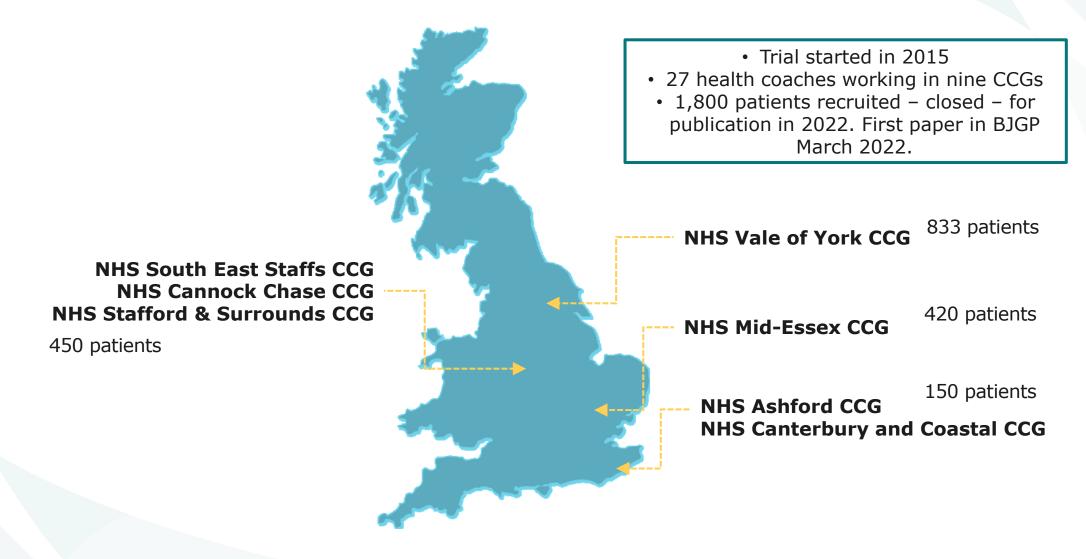


# Clinical Coaching – delivers complimentary support for self-care alongside existing teams



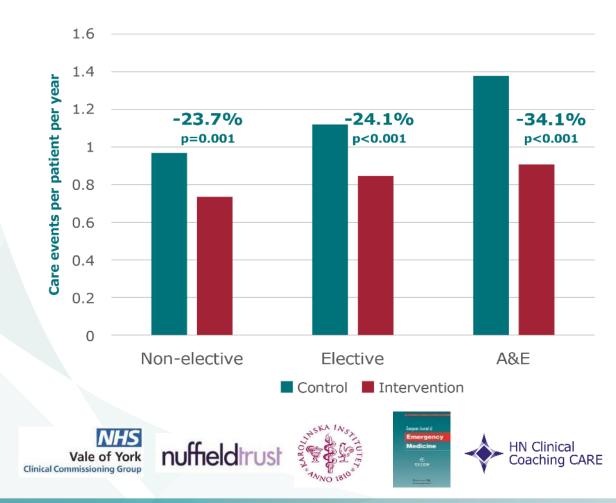


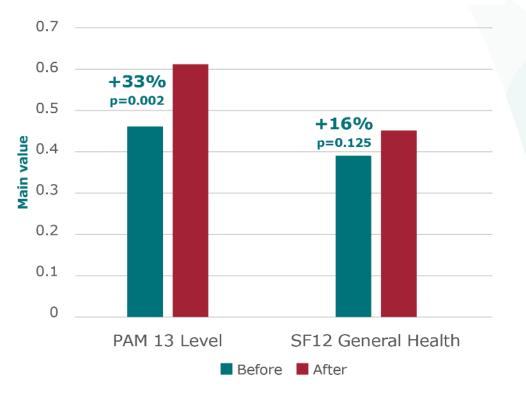
## NIHR portfolio-adopted RCT sites with 1800 participants





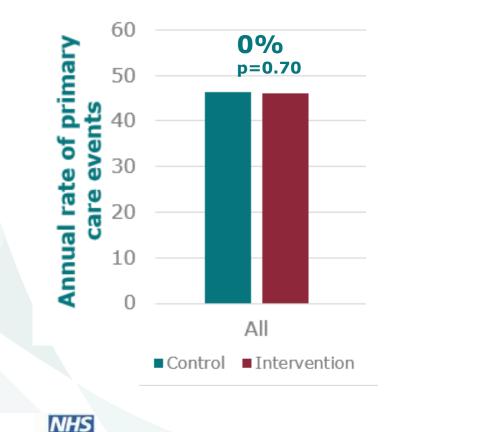
### **RTC results: Safely reducing demand and improving outcomes**

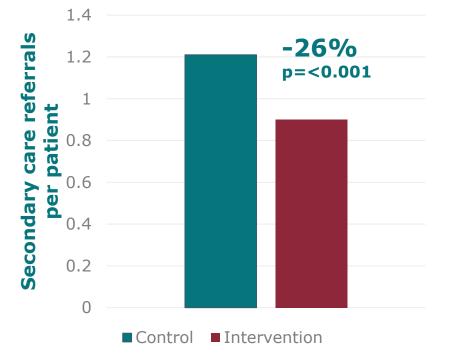






## AICC does not shift from hospital to primary care. Referrals to secondary care reduced by 26%.







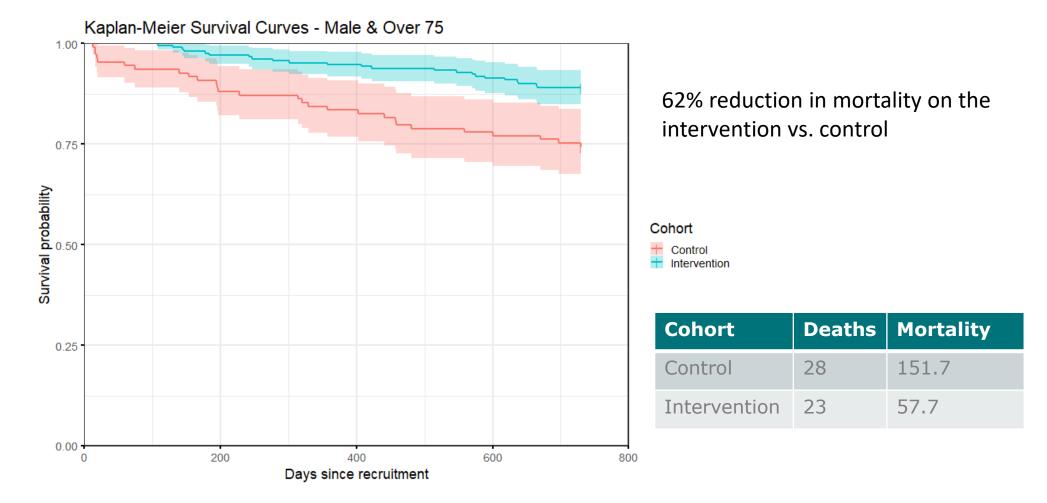
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Vale of York

### AICC RCT Mortality Evaluation – Males Over 75



Strategic Intelligence Unit



## The impact of AI-Guided Clinical Coaching Tim's story

If you are brave enough to take control with the help of the coach who helps you through this, you truly can make a difference to the immediate crises as they turn up...

In my case I went from being an asthmatic, to someone who happens to have asthma.

I went from 6 admissions to none within a couple of months.

 Tim, patient receiving the AICC intervention in York



## **Our evidence**

- + European Medical Journal, 2015 Edgren et al. (2016). 23(5), pp.344–350.
- + European Medical Journal, 2012 Reinius et al (2013). 20(5), pp.327–34.
- <u>East Kent Poster, 2019</u> Poster produced by East Kent NHS analytics team winners of Association of Healthcare Analysts' Team of the Year award.
- + HETT Slides, 2019 Healthcare Excellence Through Technology (HETT) 2019 presentation of HN's RCT results.
- + M. Wieske Thesis on PROMS, 2019 UCL masters thesis analysing the PROMS impact of Clinical Coaching.
- + Mark England, 2020 The NHS at Home
- + J. Cohen Thesis on Primary Care Impact, 2021 UCL masters thesis analysing impact of Clinical Coaching, concluding that activity is not simply shifted to other points of care. Published in BJGP, March 2022.
- Intensity and dynamics of the top 1% and 5% highest users of primary care, 2021 poster of our analysis from Attenborough Surgery in Hertfordshire
- Sara Reis, 2020 Ensuring fairness and inclusion in AI-guided patient screening
- + <u>HN Advisory Board, 2020</u> Hospital at Home
- 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.
- + <u>Policy paper, 2020</u> produced to explain the benefits of clinical health coaching.
- + <u>Videos</u> Interviews with HN, our NHS partners and patients.

