Health Innovation
WEST MIDLANDS

Health
Innovation
East Midlands

Welcome to
Helping people with a Learning Disability, at risk of behaviour that challenges, to avoid harm from psychotropic medicines: Innovation Exchange

We ask that you turn off microphones to reduce background noise.
Please note this session will be recorded and will be shared on our website.

We will start promptly at 10:30am.

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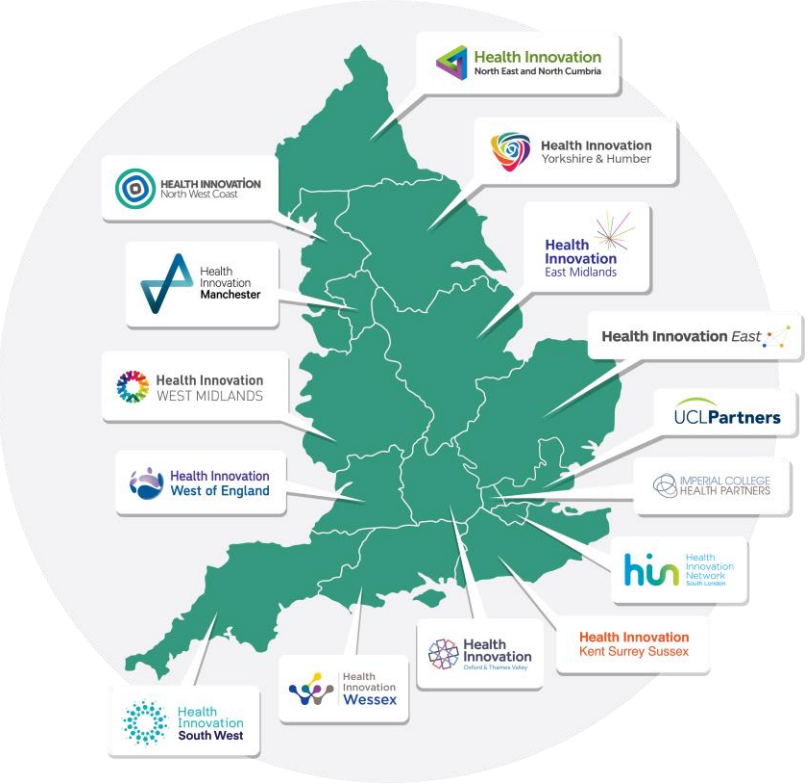
Introduction & Housekeeping

Michael Ellis

Senior Innovation Lead, Health Innovation East Midlands

An innovation ‘docking station’

- HIEM & HIWM are part of 15 Health Innovation Networks (HINs) – commissioned to bring together the NHS, industry, academia and the third sector to help drive health innovation across the NHS, at pace and scale.
- We tackle national problems, with local understanding.
- And local problems, with national expertise.
- Each health innovation network is fully-embedded in their local health and research ecosystem.



What is an Innovation Exchange?

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1. Engage with health and care	2. Define Needs	3. Showcase innovations to a health and care audience
• Establish common challenges based on the region's health priorities	• Create clear challenge statements with stakeholders that address the needs to be addressed.	• Source a range of innovations that directly address the agreed challenge statements and present these at a showcase event.

Introduction to the session

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- Today's session will last 90 minutes
- Each innovator will have 5 minutes to present
- Everyone should have received a digital event pack with more information on the innovators and a copy of the agenda for today's session
- We'll add a link to the chat so you can let us know which of the innovators you would like to hear more from
- AI note-taking tools may be used by delegates during this event

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The context for this Innovation Exchange

Gill Gookey

Head of Medicines Safety programme Delivery & Human Factors Specialist, Health Innovation East Midlands

Background to choosing the focus of this innovation exchange

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National Medicines Safety Improvement Programme (MedSIP)

- ***Helping people with a learning disability, who are at risk of behaviour that challenges, avoid harm from psychotropic medicines***

Whole system approach delivered at a **neighbourhood level**

Supports **quality improvement** in services and pathways

Innovation in ALL its forms and acknowledges **digital as an enabler**

Why an innovation exchange is important for people with learning disability

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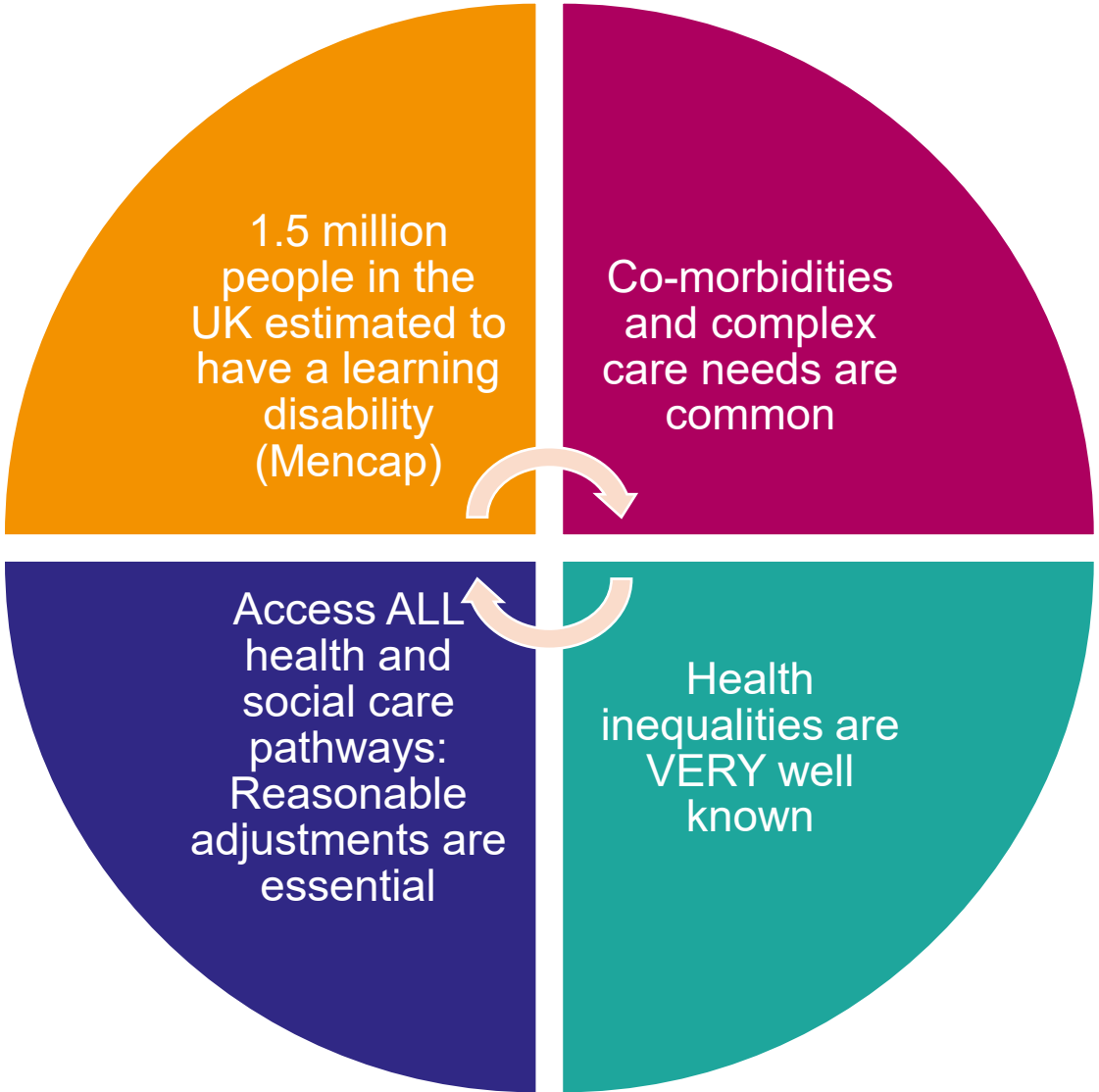

Examples of health inequalities:

- **Life expectancy 19.5 years shorter than general population**
- **42% of deaths are avoidable (LeDeR 2022)**
- **13.8% are prescribed antipsychotics (0.9% in the general population), often outside licensed indications**
- **Digital exclusion**
- Diagnostic overshadowing
- Impact of ethnicity
- Poor housing
- Limited employment opportunity
- Hospitalisation away from home

We listened to the learning disability community and you said…

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There are areas of challenge that innovation could support:	But remember, for people with learning disability:
✓Improve shared decision making and care planning	❖There are already high levels of digital exclusion
✓Enhance multi-agency system working	❖Digital is not always the right solution, and it is not always right for everyone
✓Support safe deprescribing of psychotropics	❖We should avoid exaggerating existing inequalities
✓Expand access to non-pharmacological support	❖Bespoke solutions may be needed for some communities

We listened to the learning disability community and they said…

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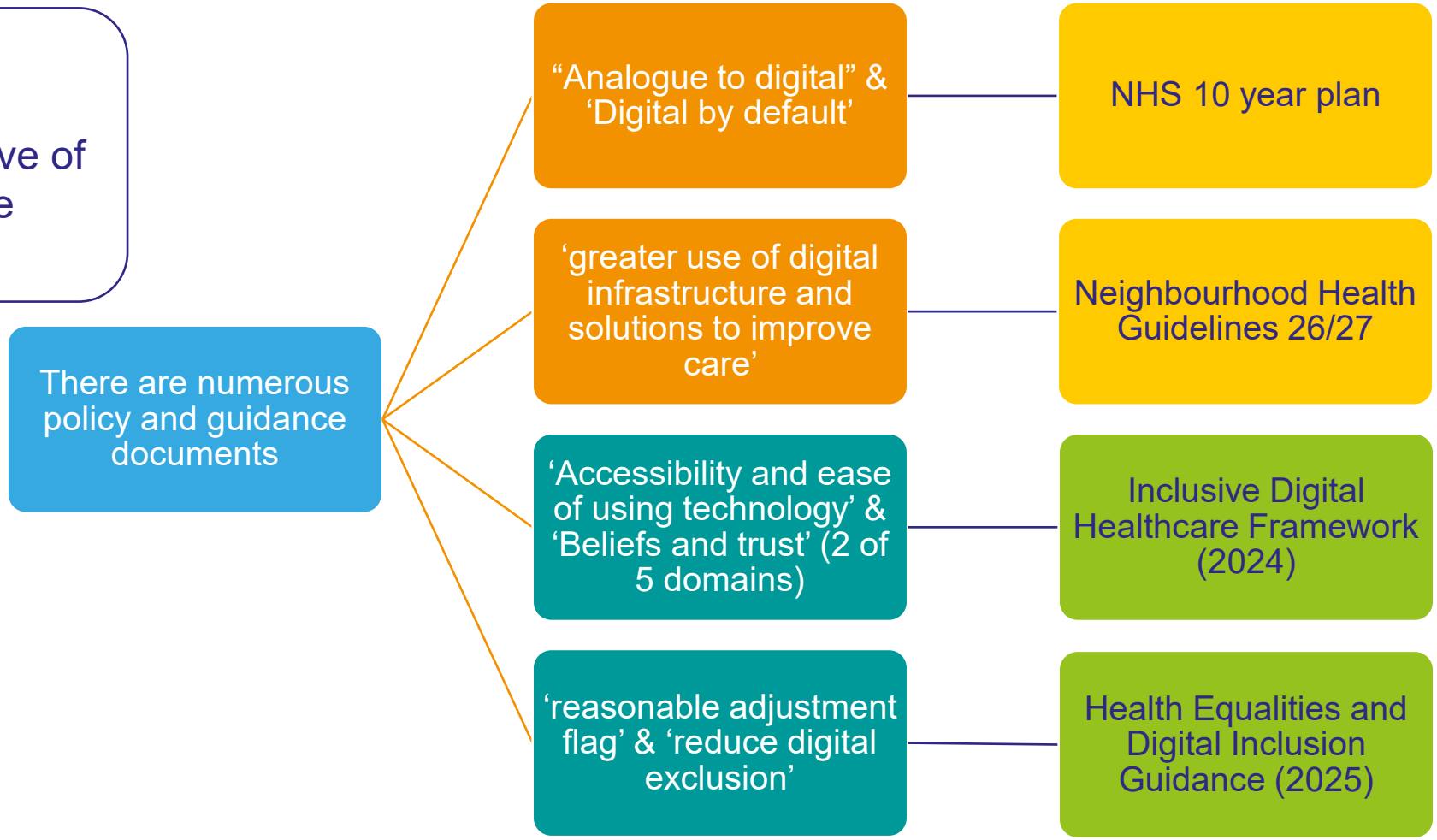
There are areas of challenge that innovation could support:
✓Improve shared decision making and care planning
✓Enhance multi-agency system working
✓Support safe deprescribing of psychotropics
✓Expand access to non-pharmacological support

But remember, for people with learning disability:
❖There are high levels of digital exclusion
❖Digital is not always the right solution, and it is not always right for everyone
❖We should avoid exaggerating existing inequalities
❖Bespoke solutions may be needed for some communities

The challenge statements we set for for innovators

The drive for digital innovation

Challenge:
How can we support innovation that is inclusive of the user needs of people with learning disability?



Human centred design and healthcare digital innovation

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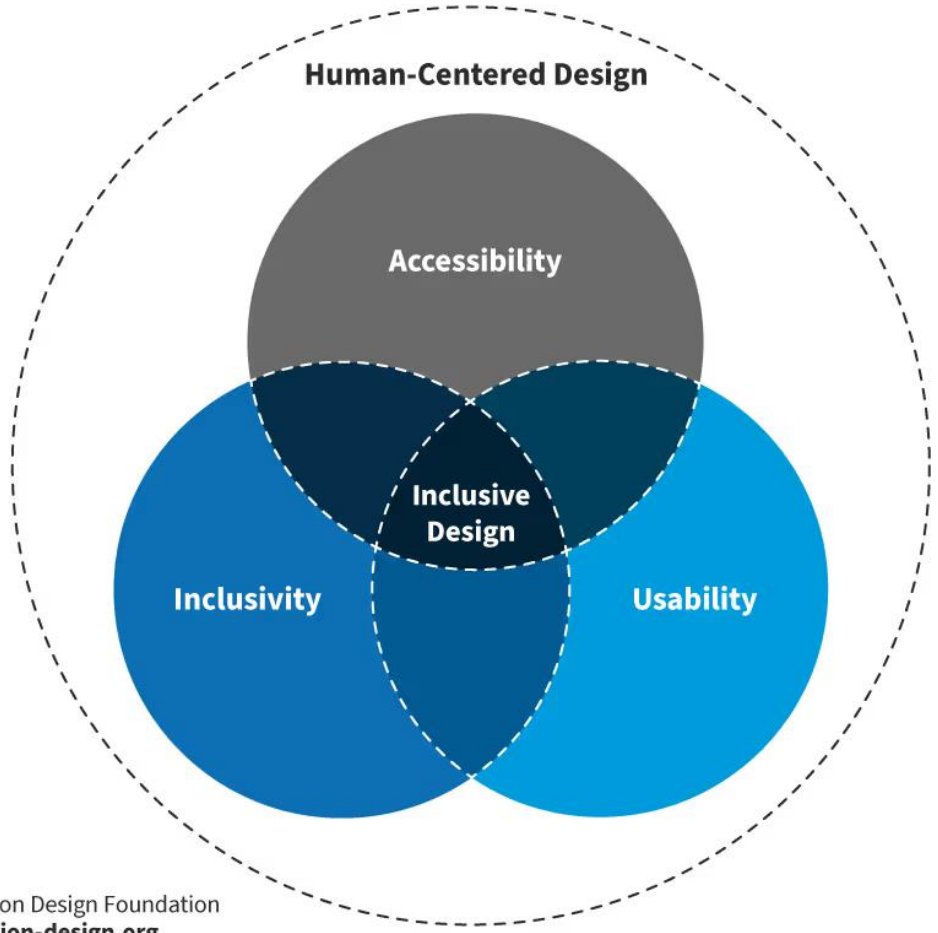

*"**Inclusive design** aims to remove the barriers that create undue effort and separation. It enables everyone to participate equally, confidently and independently in everyday activities."* (Design council)

Our reflections from horizon scanning

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Could ‘WE’ support innovators to:

- Better understand learning disability
- Design for, and then test innovations with, people who have a learning disability

Thank you to our presenters today

- They did accept the challenge
- Have considered how they can support people with learning disability
- Are open to improving their innovations further to be move inclusive

Come with us on a journey today…

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Patient/pathway agnostic innovations with adaptable/accessible functionality

Innovations that serve broader populations with specific content created for people with learning disability

Specialist innovations built for/with people with learning disability

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Innovator Presentations

Presentations from innovators part 1

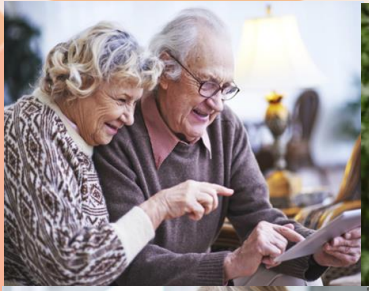
MDCOLL

IMPROVING PATIENT OUTCOMES THROUGH SEAMLESS CLINICAL PATHWAYS

Healum Digital Health platform

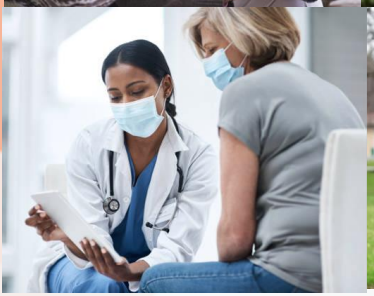
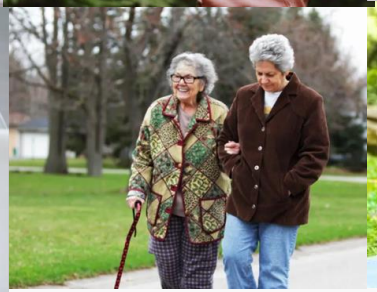
Custom built personalised digital services for managing long term conditions

Jonathan Abraham
CEO, Cofounder
8th January 2026









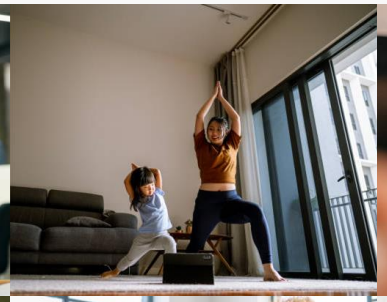
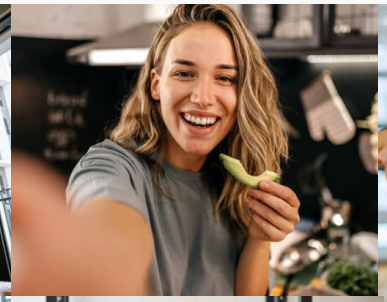

Choice and personalised care

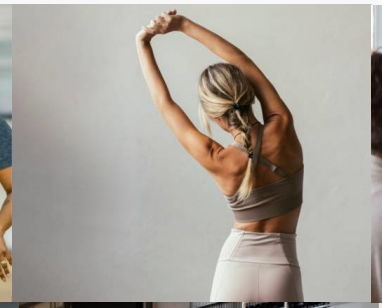
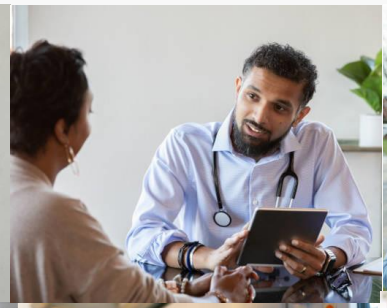
Reducing **health inequalities**

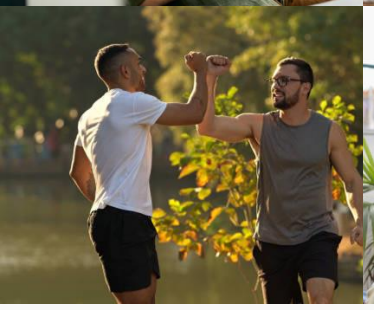
Improving health outcomes for people

Interoperable system across the NHS

Healthy lifestyles & population health

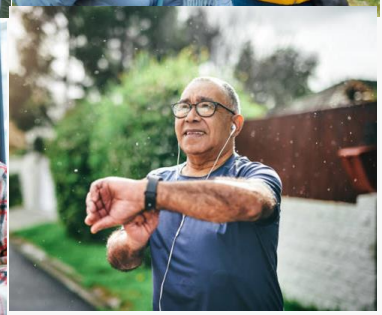












Who are Healum and what do we do?

Healum is a supplier of **digital health services and solutions**, that enable healthcare providers to deliver better outcomes for diverse patient population groups that have long term conditions.

Our mission is to promote access to proactive personalised care that addresses health inequalities

Designing, developing and delivering digital systems that enable healthcare professionals to motivate their patients.

Services that Healum digital solutions currently support

Tier 2 Weight management

Community wellbeing Services

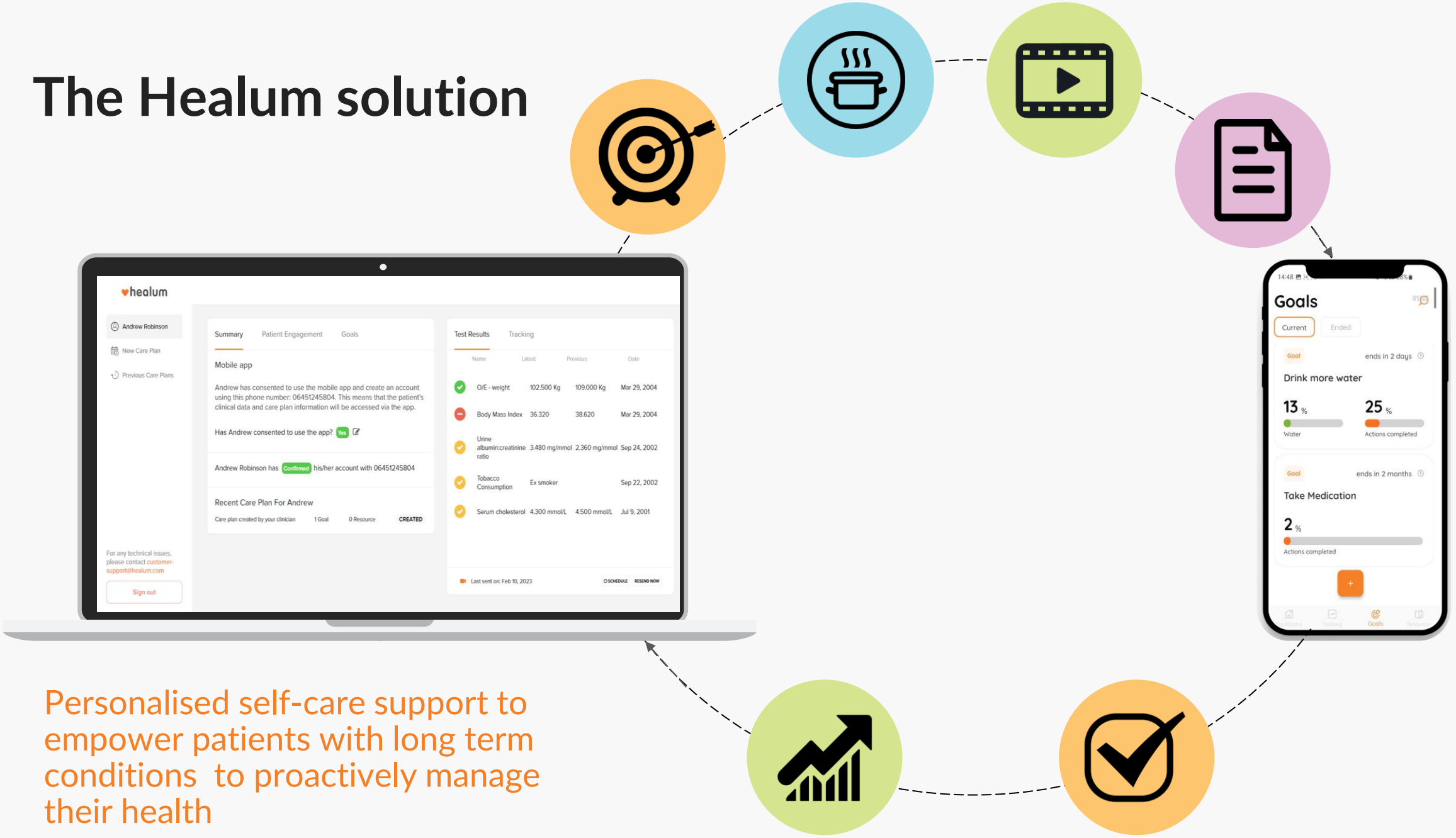
Diabetes Management

Integrated lifestyle services

Social prescribing

Mental health

The Healum solution



Personalised self-care support to empower patients with long term conditions to proactively manage their health

healum

Healum system overview broken down by user and function

Solutions broken down by stakeholders and users

For Patients/Clients

Mobile app offering for customer management

- White-label Mobile app
- Android and iOS
- Web-app
- Messaging solutions
- 22 languages

For delivery staff

Behaviour change & patient client management software

- Content management
- Behaviours and rewards
- Personalised plans
- Patient records
- Chat, messaging, email

For admin teams

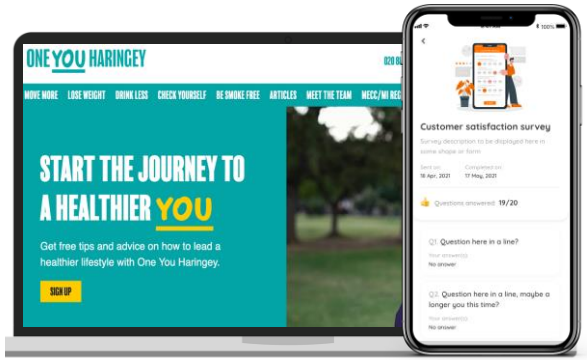
Cloud based admin portal for client management

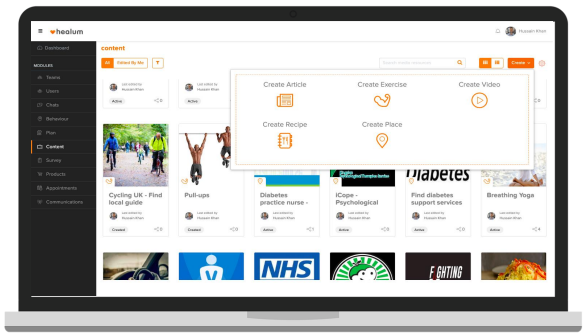
- Referral portal
- Appointments
- Assessments and forms
- Workflow automation
- Reporting and insights

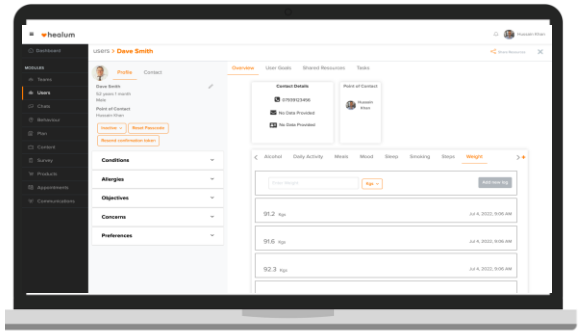
For ICB

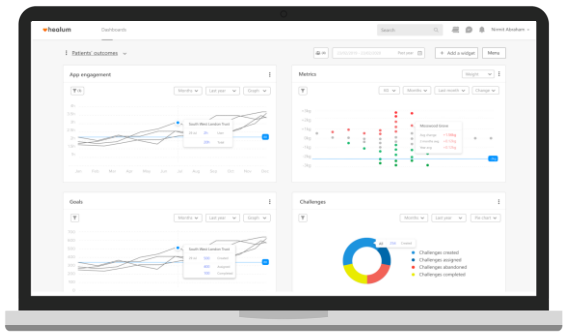
Reporting solutions and population health

- KPI reporting
- NHSE datasets
- Demographic, socioeconomic filter
- Service evaluation









Content services available in multiple languages

App now covers 22 languages:

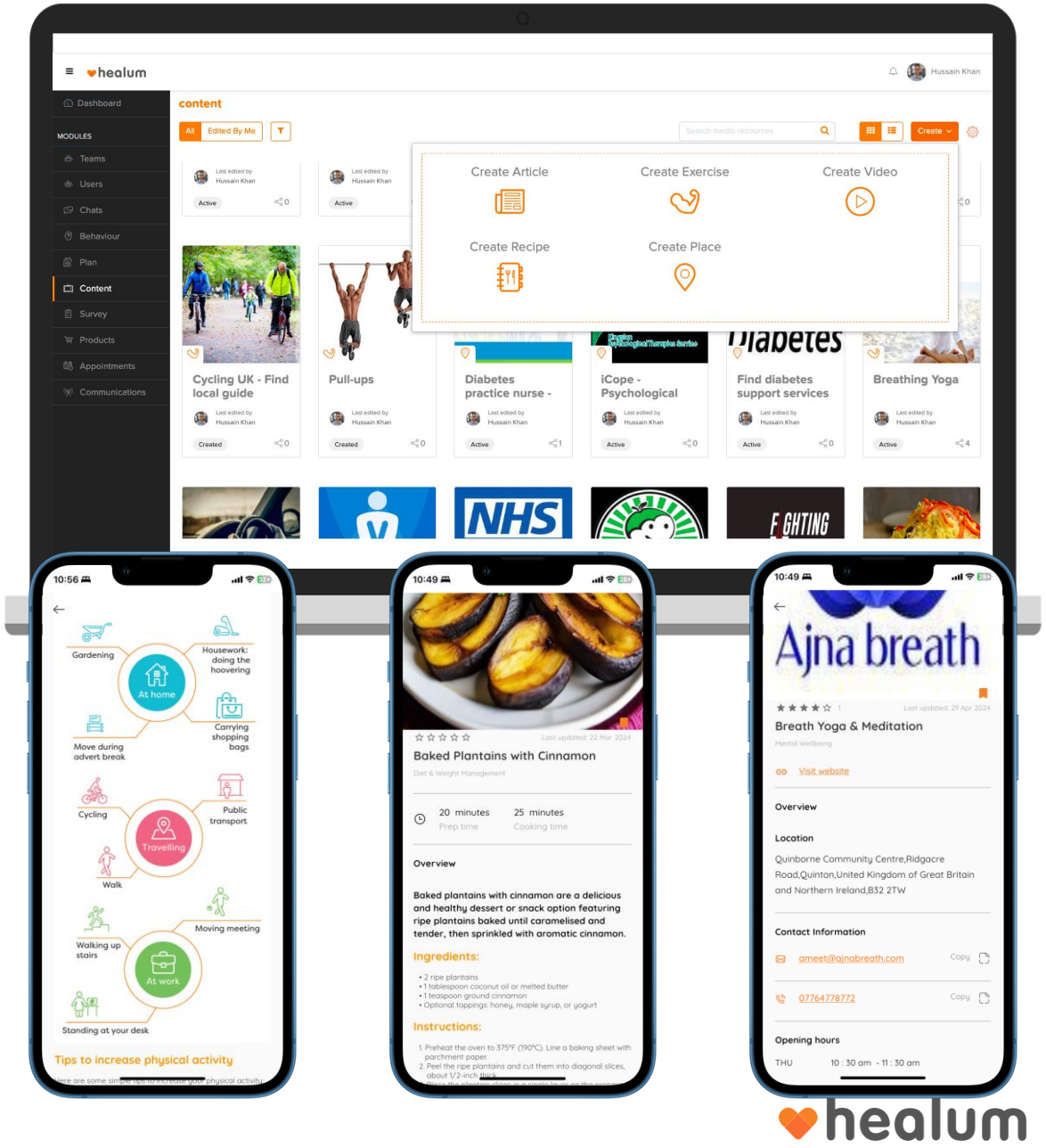
Bengali
Punjabi
Polish
Romanian
Turkish
Somali
Portuguese
Spanish
German
French
Italian

App now covers 22 languages:

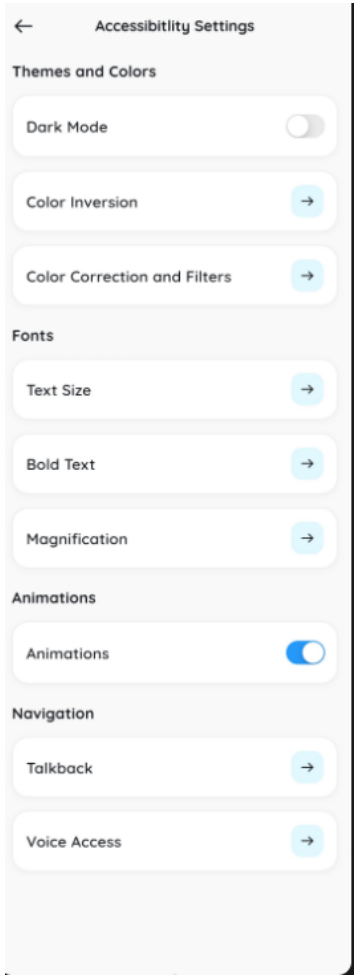
Bulgarian
Chinese mandarin
Chinese Cantonese
Japanese
Korean
Welsh
Hindi
Russian
Czech
Greek
English

Content Module:
Easy read and audio / video

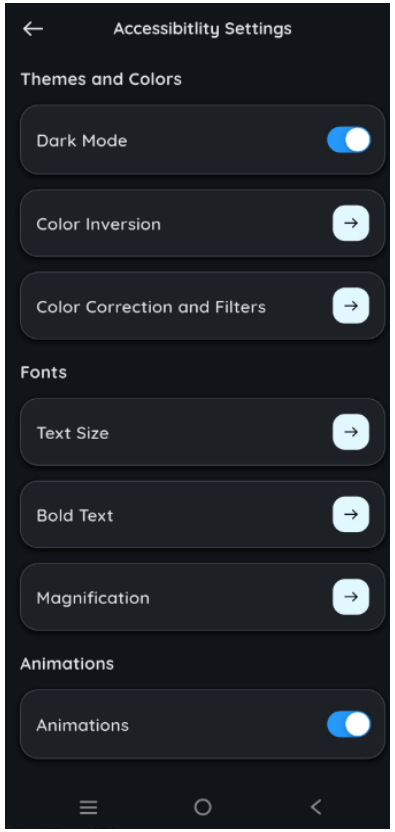
- Easy read functionality toggle in the app
- Videos and audio supported to help people
- Content partnerships with medical content creators
- Easy read large text artiles
- Save resources as favourites
- Filter resources by type / category



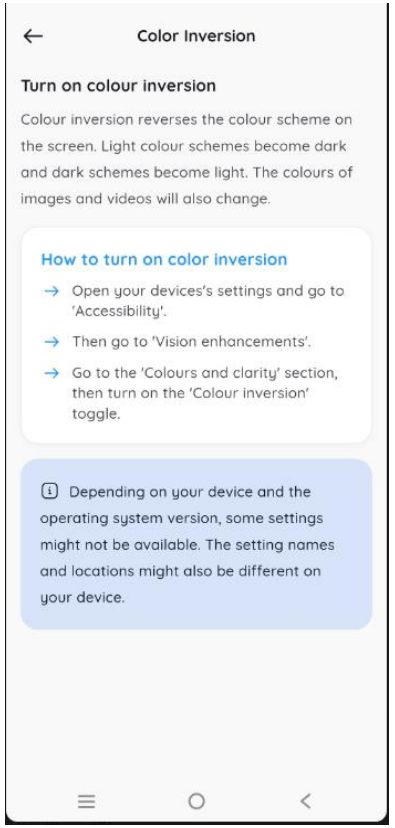
Accessibility features built into apps, websites

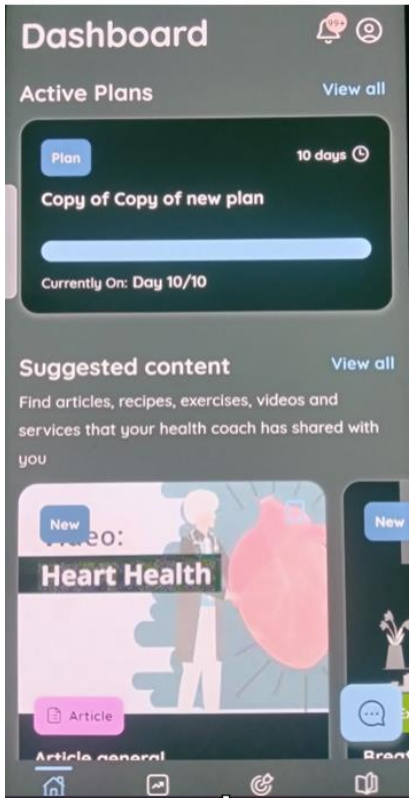


Dark Mode



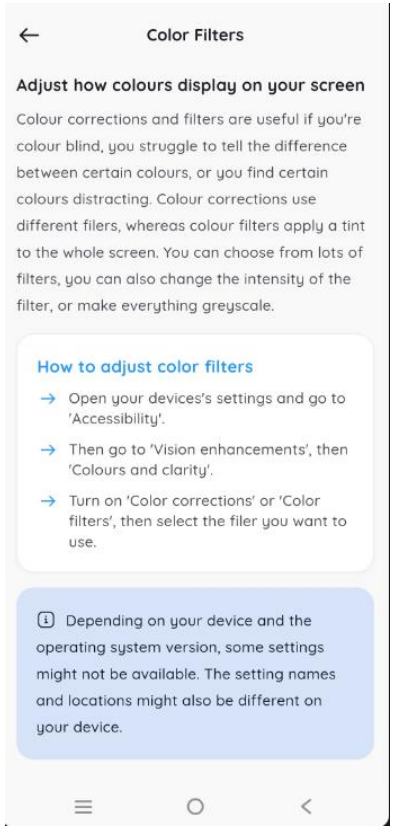
Colour inversion

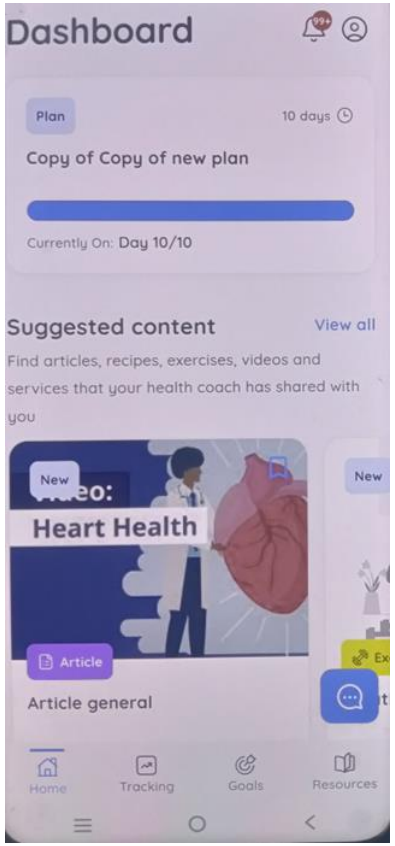




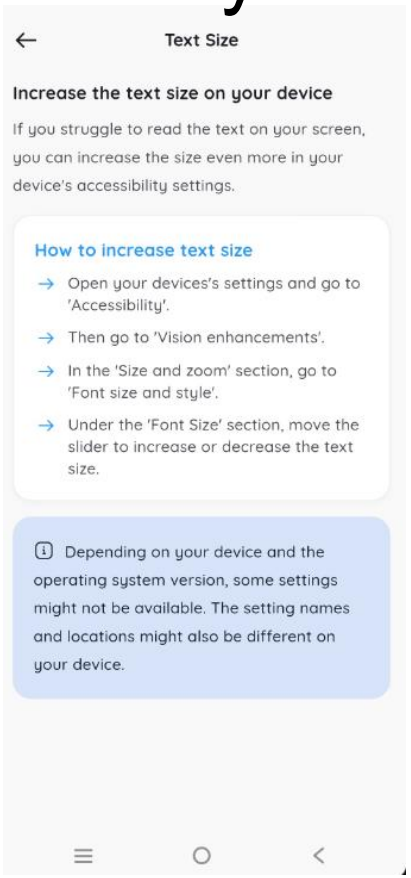
Accessibility features built into apps, websites

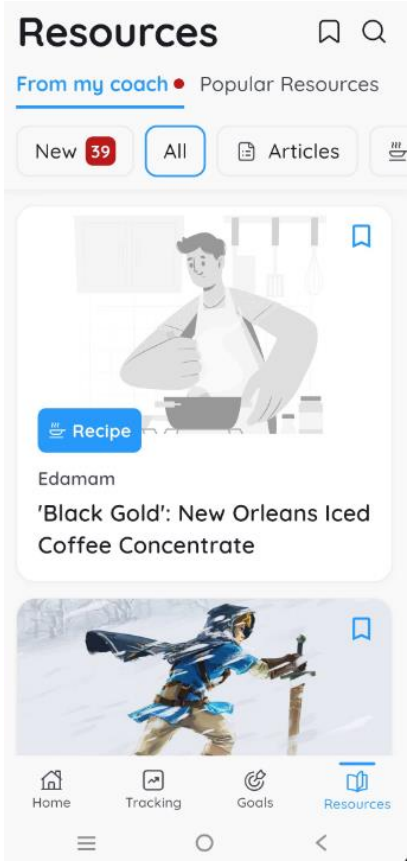
Colour Filtering





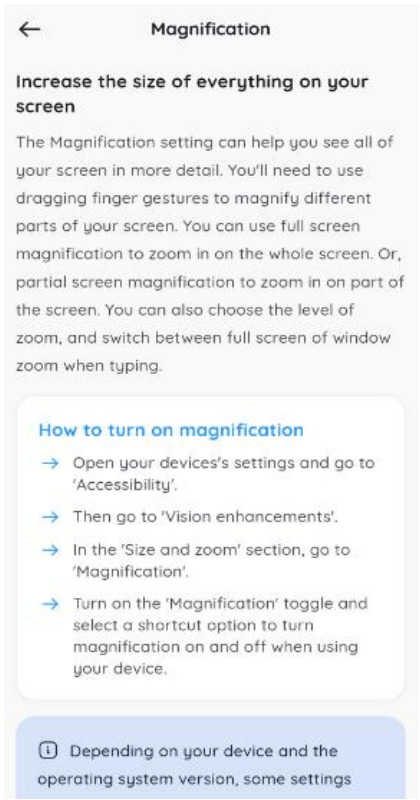
Easy read Bold

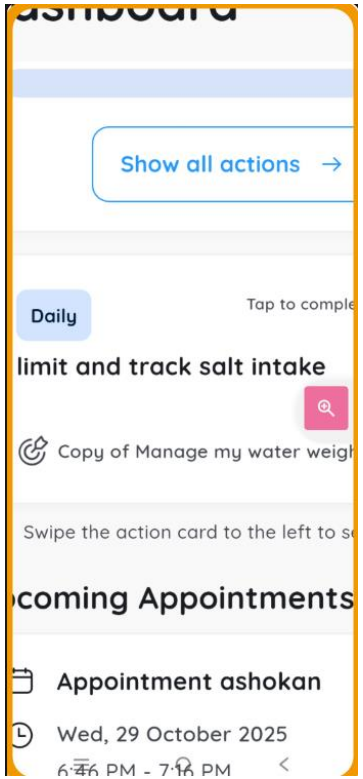




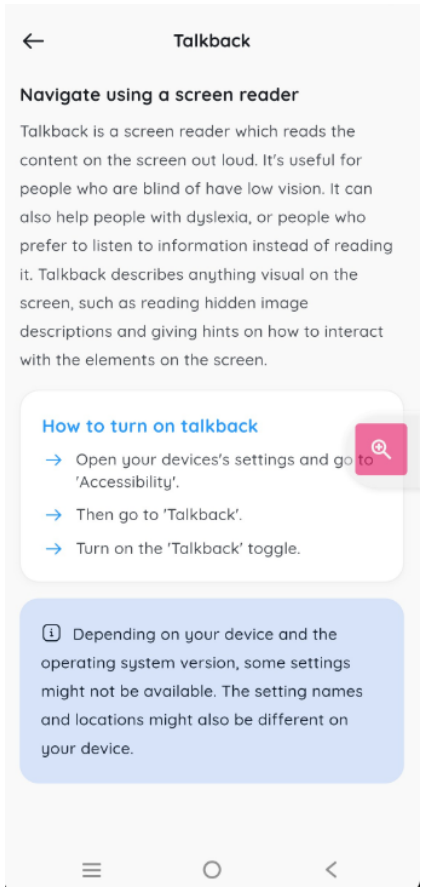
Accessibility features built into apps, websites

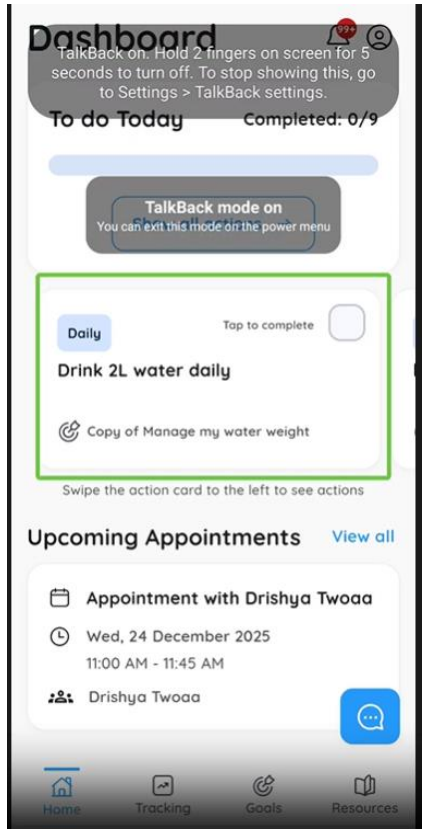
Magnification





Talk Back Voice Assistance





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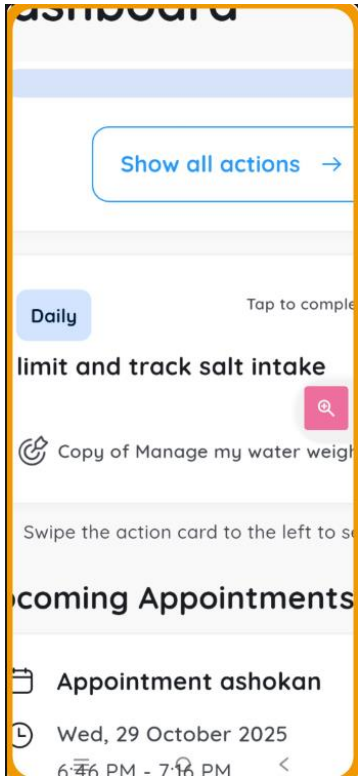
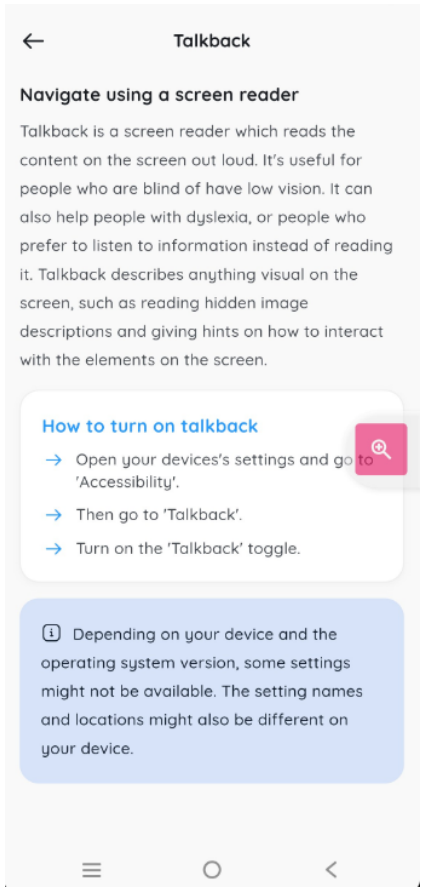
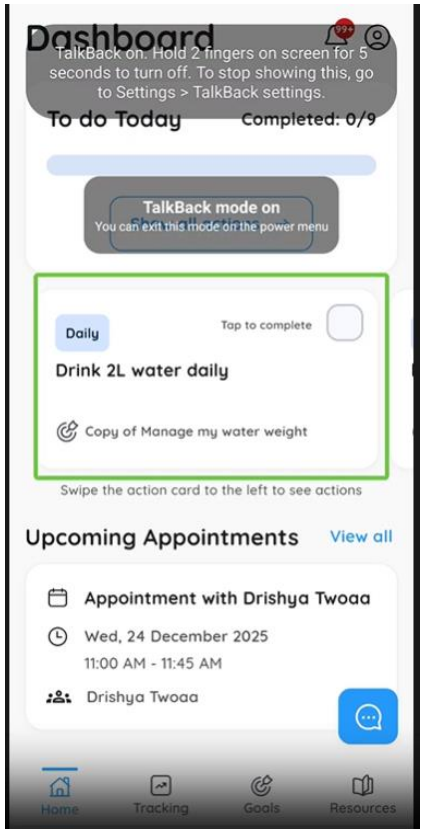


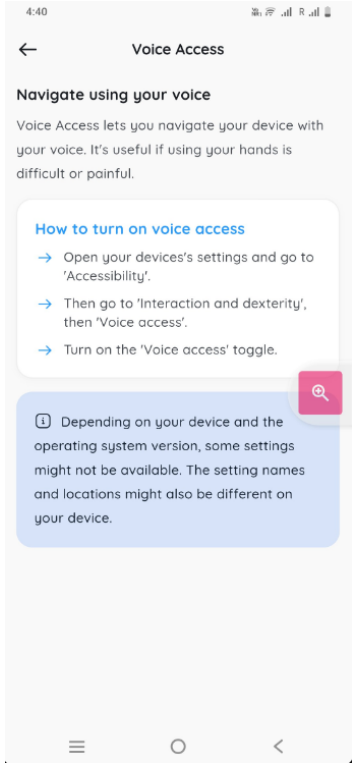
Talk Back Screen reader

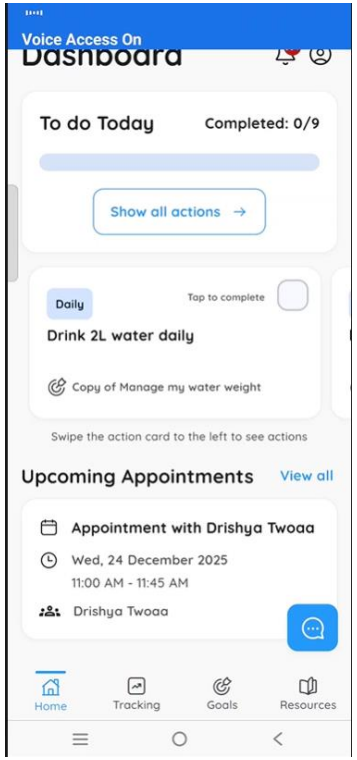




Voice access assistance built into the app

Enabling Voice Access in the device accessibility settings screen allows you to navigate through the screen with your voice.This option can be used if users find it difficult or painful to use their hands.





Healum Goals for 2026

Expand our functionality and services for people with different learning disabilities including Dyslexia, Dyspraxia and ADHD

Work with hospitals, trusts, healthcare professionals and clinical innovators to codesign and adapt and develop solutions that support them to improve care and accessibility for their patients

Email jonathan@healum.com

Thank you

www.healum.com

hello@healum.com

@HealumLtd

Healum Ltd

Salutare ONE

Jan 2026

Chris Dial
Co-founder and CEO

Professor Kevin Moore
Co-founder and Chief Medical Officer

Dr Amar Bhogal
Product Manager for ONE Referral

Salutare:

The Problem

How do care team members share information? How do they keep track of the patient's wishes?

How can a family and carers communicate with the care team and be confident it has been recorded?

How can new team members or shift changes see updates and understand the context?

How does a care team keep track of all their patients and know where to focus attention?

Salutare:

The Impact

Teams unable to communicate with context are uncoordinated and less effective

A client unable to communicate directly with their care team is **isolated**

Information that isn’t captured and acted on is **lost**

Salutare:

The Solution

Team members can communicate about a client whenever they want in a shared common space

Connect with the NHS and other UK digital services [such as the national Spine] to capture clinical context and history

Make it simple and easy to use. No training required

Customise the solution to capture the key needs of any care team with input from the client, their family or caregivers. e.g. “About me” “My education” “Home situation” “Healthcare and Diagnosis” etc

Family can upload a photograph and make comments.

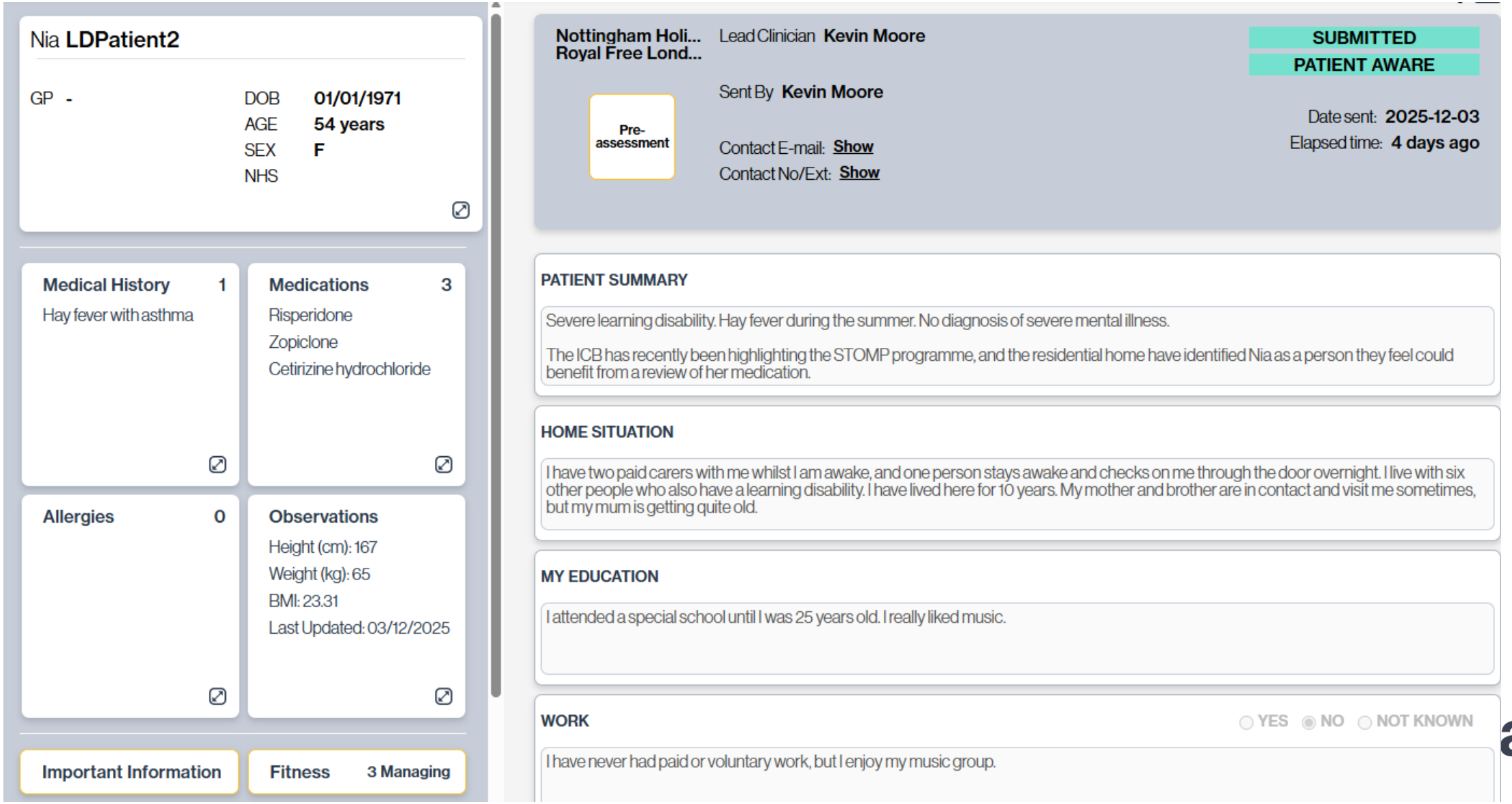
Carers can add a daily log.

Issue alerts so that nothing is missed

Create a simple list of clients under a care team or region, and extract data in a compliant manner

ONE connects everyone involved in a client’s care; GPs, care home, social workers, and the client’s family and caregivers.

Simple interface that works with voice dictation



Team members, family, and caregivers can share information easily

Nia **LDPatient2**

GP -

DOB **01/01/1971**
AGE **54 years**
SEX **F**
NHS

Medical History 1
Hay fever with asthma

Medications 3
Risperidone
Zopiclone
Cetirizine hydrochloride

Allergies 0

Observations
Height (cm): 167
Weight (kg): 65
BMI: 23.31
Last Updated: 03/12/2025

Important Information

Fitness 3 Managing

Clinical Research CONSENT NOT GIVEN

Patient Goals and Preferences
1. Attend Music Group
2. To be involved in discussion about my care
3. Spend more time in garden with animals

PATIENT AWARE OF REFERRAL? ◉ YES ○ NO ○ NOT KNOWN

QUESTIONS TO SERVICE

Please review medication and suitability for the STOMP programme

MY SKILLS AND NEEDS

I have limited verbal communication and I prefer to interact with picture symbols or Makaton. I am independently mobile, and can eat and drink independently. I need prompts to help me with personal care and taking medication. I need support for all activities of daily living, and my care team support me to make my own decisions such as what clothes I wear. I am unable to live or travel independently.

WHAT HAS CHANGED RECENTLY?

Nia's healthcare team would like her medication reviewed as they have been learning about the STOMP programme and are due to have an inspection from CQC. They report Nia's health has not changed recently and she is very settled and happy.

WHAT I WANT TO SAY TO MY CARE TEAM

I enjoy music and like to dance. I really like Taylor Swift songs. I like to be around other people.
I enjoy watching television especially wildlife documentaries as I love animals. I also like being in the garden.
I need my carers to help me understand you and to help me tell you what I need. I want to be involved in the discussion, and I want to meet you, but I may not be able to stay in the room for a long consultation. I find GP surgery environments upsetting and I like you to visit me at home. Sometimes, I need my family to be involved in decisions about my health or care.

SEVERITY OF LEARNING DISABILITY

- ☐ MILD
- ☐ MODERATE
- ☑ SEVERE

Investigations and Attachments

Comments

Kevin Moore
Michael, if you would like to comment, please do

Type your comment here...

SUMMARY RECOMMENDATIONS

Salutare:

How we deliver value

Better communication
- Everyone can contribute and view – family, clients and care givers

Simpler client experience
– Being heard and issues addressed. Holistic care with practical, social and personal inputs so that needs are captured and addressed

Streamlined care team experience
- Simple to use, access to medical records integrated with social context and needs to make better decisions and follow up

Understand performance and improve quality
– Combine your analysis of team interaction and client data to learn about processes and improve excellence to reduce waiting times

Salutare:

The ONE pledge
No patients lost in the system

Simple – easy to use, quick to start, fast to learn

Accessible - by any clinician, when and where they need it

Accountable – the clarity of who, what, and when

Insightful - high-quality data that drives new clinical research and improves the service

Salutare:

Time to be Healthcareful®

Healthcareful means no patients lost in system

Chris Dial
Co-founder and Chief Executive

Professor Kevin Moore
Co-founder and Chief Medical Officer

Salutare:

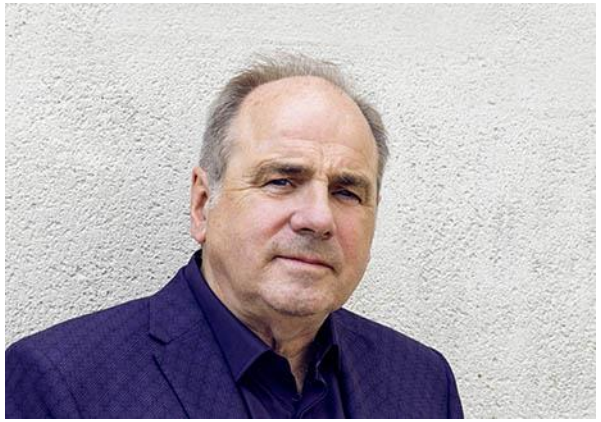
Team and Strategy
Executive team

Our clinicians and software developers understand technology's transformative power for healthcare.

Chris Dial
Co-Founder, CEO

An ex-senior executive from Microsoft.

Led the development of software companies across Europe and the US.



Prof. Kevin Moore
Co-Founder, CMO

A Professor of Medicine, hepatologist and clinical pharmacologist, and biochemist [B.Sc. and Ph.D]

More than 100 publications with an H-index greater than 65. Led teaching of therapeutics at UCL and course creator and director for Applied Medical Sciences.

Salutare:

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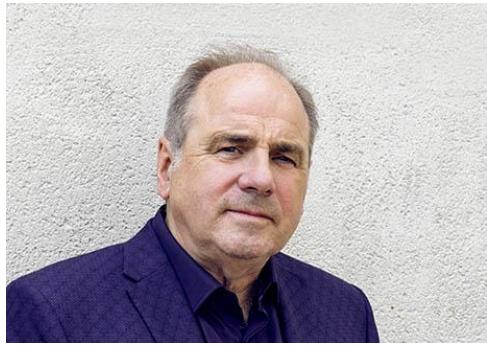

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Dr Dara Vakili
Head of Product

A nationally leading clinical researcher and cardiology consultant.

Experience in clinical trials and digital innovations in the NHS. A researcher with a history of change and innovation in the hospital and healthcare industry.

Dr Amar Bhogal
Clinical Product Lead

A clinical doctor in the United Kingdom and lead product manager for ONE Referral.

Amar has a robust background in medical research, exploring remote technology for acute inpatient and transitional care, particularly for individuals with chronic obstructive pulmonary disease (COPD).

Dr Christopher Ross
Clinical Product Lead

In charge of ONE Ordering and Monitor that streamline ordering and patient monitoring.

He began his career in clinical medicine before specialising in pathology, where he contributed to national-scale digital pathology programmes and AI-driven cancer diagnostics.

Salutare:

Current engagements in the UK
A variety of NHS engagements across the country

Several ICBs and international hospitals

Deployments

NHS Royal Free London NHS Foundation Trust

NHS Whittington Health NHS Trust

NHS North Middlesex University Hospital NHS Trust

North Central London Health and Care Integrated Care System

NHS University Hospitals Coventry and Warwickshire NHS Trust

Proof of value / evaluations / research

NHS South West London Pathology — Making every test matter

Herefordshire and Worcestershire Integrated Care System

NHS Staffordshire and Stoke-on-Trent Integrated Care Board

NHS Black Country Integrated Care Board

NHS Oxford University Hospitals NHS Foundation Trust

NHS Royal National Orthopaedic Hospital NHS Trust

Salutare:

Certifications
Our investment in standards and quality

Internationally recognised certifications confirm adherence

NHS

NHS Digital certifications on DSP Toolkit, SPINE access for patient records

Care Quality Commission

Passed certification and approval for private blood testing service with public offers: thePharmacyClinic

Cyber Essentials Certified

Core digital safety and privacy management in place

Crown Commercial Service

Accepted and approved both major products for purchase by UK public organizations

bsi ISO/IEC 27001 Information Security Management CERTIFIED

Salutare:

SimFlow

WWW.SIMFLOW.AI

Remote AI-Powered Simulation for Communication Skills Training

Improving holistic care for people with learning disability Innovation Exchange

Dr Jon Turvey
CEO & Founder of SimFlow.ai

NHS London Procurement Partnership
Dynamic Purchasing System Supplier 2025

CPD CERTIFIED
The CPD Certification Service

GDPR

CYBER ESSENTIALS
CERTIFIED

SimFlow

The Problem

Why communication matters:

- 55% of NHS patients report communication problems; **1 in 10** say care was affected
- Communication failures cost **>£1bn/year**
- Poor communication **contributes to ~24%** of patient safety incidents (median across 42 studies)

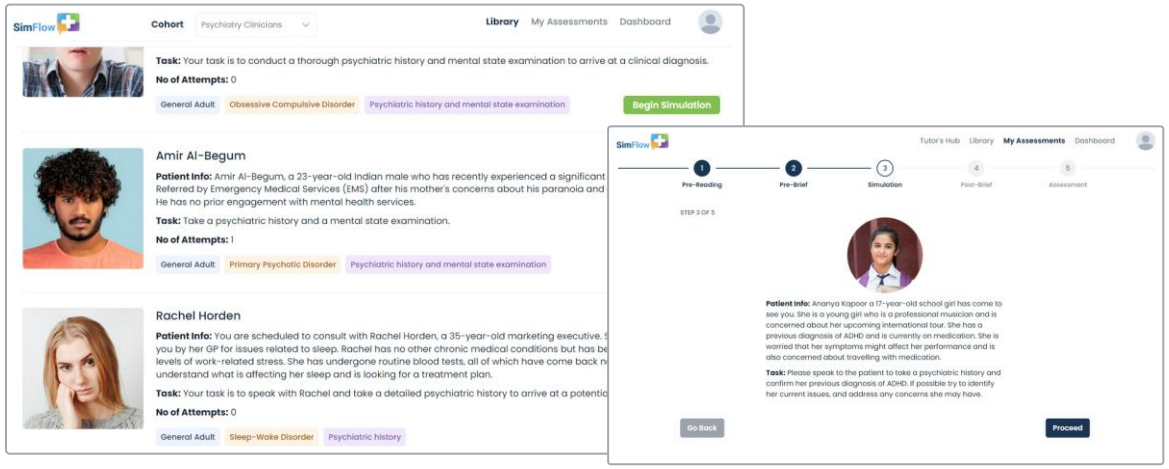
References:

1. The Patients Association (2023) '"I love the NHS, but…" Preventing needless harms caused by poor communication in the NHS', Patients Association Blog, 27 November. Available at: https://www.patients-association.org.uk/blog/i-love-the-nhs-but-preventing-needless-harms-caused-by-poor-communications-in-the-nhs.
2. NHS Digital (2021) Data on written complaints in the NHS: 2020–21 Quarter 1 and Quarter 2. Available at: https://digital.nhs.uk/data-and-information/publications/statistical/data-on-written-complaints-in-the-nhs/2020-21-quarter-1-and-quarter-2.
3. Keshtkar, L., Bennett-Weston, A., Khan, A., Mohan, S., Jones, M., Nockels, K., Gunn, S., Armstrong, N., Bostock, J. and Howick, J. (2025) 'Impacts of communication type and quality on patient safety incidents: a systematic review', Annals of Internal Medicine, advance online publication. doi:10.7326/ANNALS-24-02904.
4. Howick, J. et al. (2024) 'How does communication affect patient safety? Protocol for a systematic review and logic model', BMJ Open, 14(5), e085312. doi:10.1136/bmjopen-2024-085312.
5. Hurtig, R.R., Alper, R.M. and Berkowitz, B. (2018) 'The cost of not addressing the communication barriers faced by hospitalised patients', Perspectives of the ASHA Special Interest Groups, 3(12), pp.99–112. PMCID: PMC6402813.

SimFlow

What SimFlow.ai is

- Real-time **speech-to-speech** simulations (latency ~650 ms) with emotive, diverse AI patients
- **Anytime, anywhere:** 100% browser-based; no EPR integration required
- **AI feedback:** rubric-aligned scoring, audio playback, remote assessment



SimFlow

Evidence & Adoption

- In use across **NHS Trusts & UK universities** (e.g., NHFT, DPT, KCL, Aston). Ongoing research with University of Bristol, KCL, Aarhus University etc.
- **Independent academically published cost-benefit analysis:** high acceptability; **up to 84% lower cost** vs traditional actor-based training
- **CPD certified** for learners' portfolios

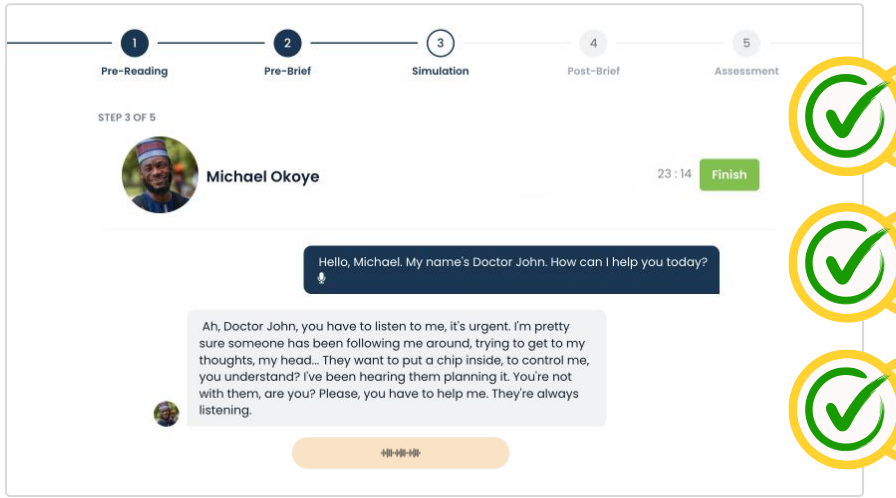
Refrences:

1. Jacobs, C., Kabbyo, H. and Singh, A. (2025) 'Enhancing GP consultation skills training: educational evaluation of a conversational AI innovation for simulated consultation assessment preparation', *Education for Primary Care*, pp.1–9 (online ahead of print). doi:10.1080/14739879.2025.2551207.
2. Yamamoto, A. et al. (2024) 'Enhancing medical interview skills through AI-simulated patients using large language models: cross-sectional study', *JMIR Medical Education*, 10(1), e58753. doi:10.2196/58753.

SimFlow

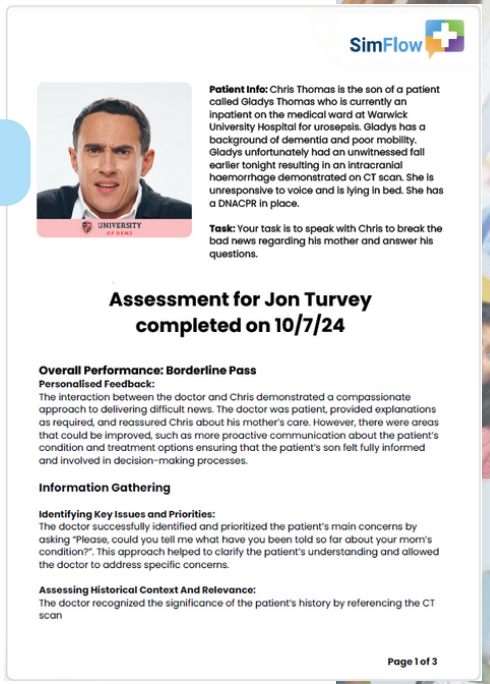
Educational Use-Cases in Learning Disabilities

- Any scenario and characteristic you can image
- Scale simulation hours - reduce reliance on actors
- **84% lower cost** vs traditional sim (complement, not replace)



Listen to your transcript

- **Speech-to-speech**
- **Voices culturally appropriate**
- **Emotional responses**


SimFlow

Patient Info: Chris Thomas is the son of a patient called Gladys Thomas who is currently an inpatient on the medical ward at Warwick University Hospital for urosepsis. Gladys has a background of dementia and poor mobility. Gladys unfortunately had an unwitnessed fall earlier tonight resulting in an intracranial haemorrhage demonstrated on CT scan. She is unresponsive to voice and is lying in bed. She has a DNACPR in place.

Task: Your task is to speak with Chris to break the bad news regarding his mother and answer his questions.

Assessment for Jon Turvey completed on 10/7/24

Overall Performance: Borderline Pass

Personalised Feedback:
The interaction between the doctor and Chris demonstrated a compassionate approach to delivering difficult news. The doctor was patient, provided explanations as required, and reassured Chris about his mother's care. However, there were areas that could be improved, such as more proactive communication about the patient's condition and treatment options ensuring that the patient's son felt fully informed and involved in decision-making processes.

Information Gathering

Identifying Key Issues and Priorities:
The doctor successfully identified and prioritized the patient's main concerns by asking "Please, could you tell me what have you been told so far about your mom's condition?". This approach helped to clarify the patient's understanding and allowed the doctor to address specific concerns.

Assessing Historical Context And Relevance:
The doctor recognized the significance of the patient's history by referencing the CT scan

Page 1 of 3

Refrences:

1. NHS England (Technology Enhanced Learning) (2018) *Simulation and immersive technologies*. Available at: https://www.hee.nhs.uk/our-work/technology-enhanced-learning/simulation-immersive-technologies

CPD CERTIFIED The CPD Certification Service
GDPR
CYBER ESSENTIALS CERTIFIED

Straight into a demo

SimFlow

WWW.SIMFLOW.AI

Ready to improve communication skills training within learning disabilities...

Let's talk.

SIM & SKILLS

NHS Supply Chain
Authorised Supplier

NHS London Procurement Partnership
Dynamic Purchasing System Supplier 2025

Email: jon@simflow.ai

Improving medicines safety

For

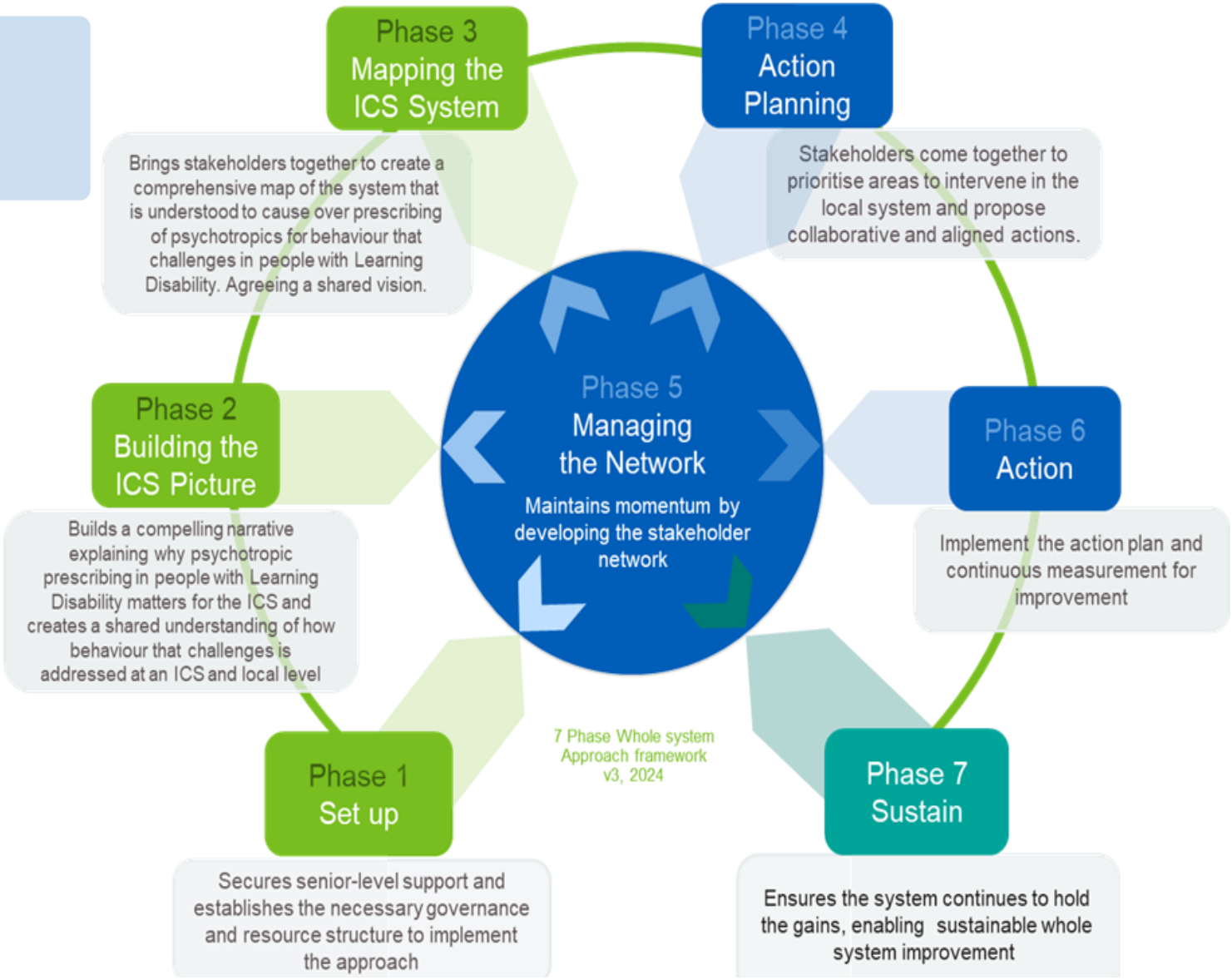
People with a Learning Disability

Presented by:
Tony Jamieson & Ruth Dales

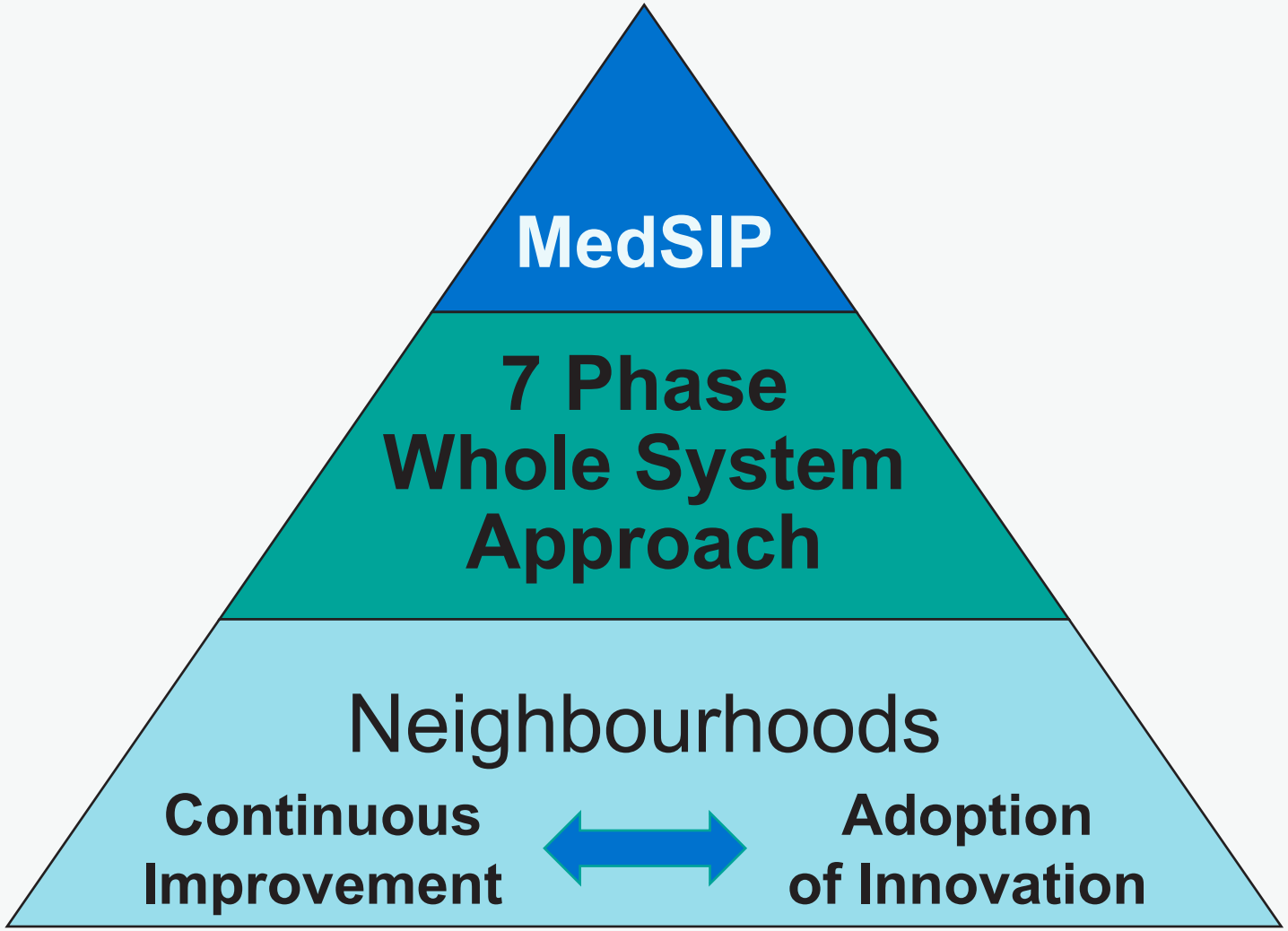
The medicines safety improvement programme aims to address the most important causes of severe harm associated with medicines, most of which have been known about for years but continue to challenge our health and care systems.

Helping people with a leaning disability who have behaviour that challenges to avoid harm from psychotropic medication.

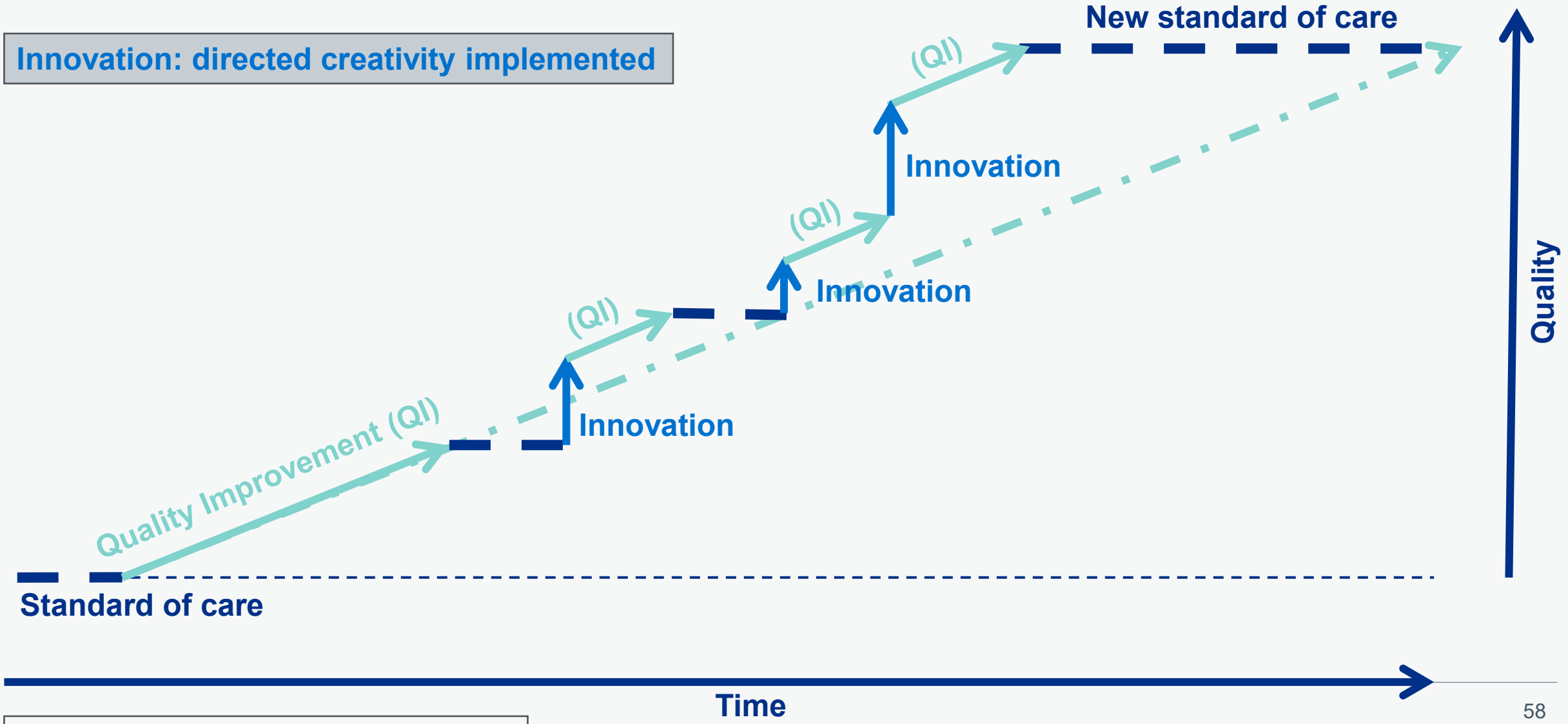
A 7-Phase, Whole System Approach for Integrated Care Partnerships to work in neighbourhoods with people with lived experience.



Improvement & Innovation



Interplay of Improvement & Innovation in Healthcare



Adapted from Paul Plsek 2014 by Tony Jamieson 2025

Our Key Principles

- Management of behaviour that challenges requires proactive care planning and shared decision making with patients and their carers/ advocates, that incorporates psychosocial-environmental management* to reduce overprescribing of psychotropics and the associated avoidable harm.

- Multi-agency, system working is vital to ensure a co-ordinated approach that enables holistic support and improved accessibility across the entire pathway of care.

- A recognised challenge is how to balance short-term and long-term health needs and goals in this patient group, weighing up the risk vs benefits of using psychotropics which is often complicated by a fear of destabilisation and variability in access to psychosocial-environmental support*.

*e.g. Positive Behavioural Support (PBS), sensory integration, social prescribing and psychological approaches including mindfulness and lifestyle interventions.

East Midlands
Patient Safety Collaborative

West Midlands
Patient Safety Collaborative

Part of the Health Innovation Network

NHS England

Prepared by

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future.nhs.uk/MedicinesSafetyImprovement

Health Innovation
WEST MIDLANDS

Health
Innovation
East Midlands

Innovator Presentations

Presentations from innovators part 2

HealthWebsites

New website for people with a learning disability and their supporters

HealthWebsites

NHS

Challenges in finding information

Many people often turn to the internet for quick health advice - often what they find is **unregulated, inaccurate and potentially harmful**.

Appetite for a compassionate, user-friendly digital space to empower **people with a learning disability** to access:

- Practical guidance
- Trusted support
- Real-live relevance
- Easy access

HealthWebsites

NHS

What people want

- **One website for everyone** – clear distinction for each group.
- Information in **different media formats** – text, video, animations, infographics, audio
- **Alternative versions** of written information – short summaries, detailed articles, easy read
- **Accessibility features** – text to speech, translation, adjustable font size & colours, screen reader

‘A lot of websites still don't cater for people with a severe Learning Disability and their good stories of lived experience is very rare to read about’

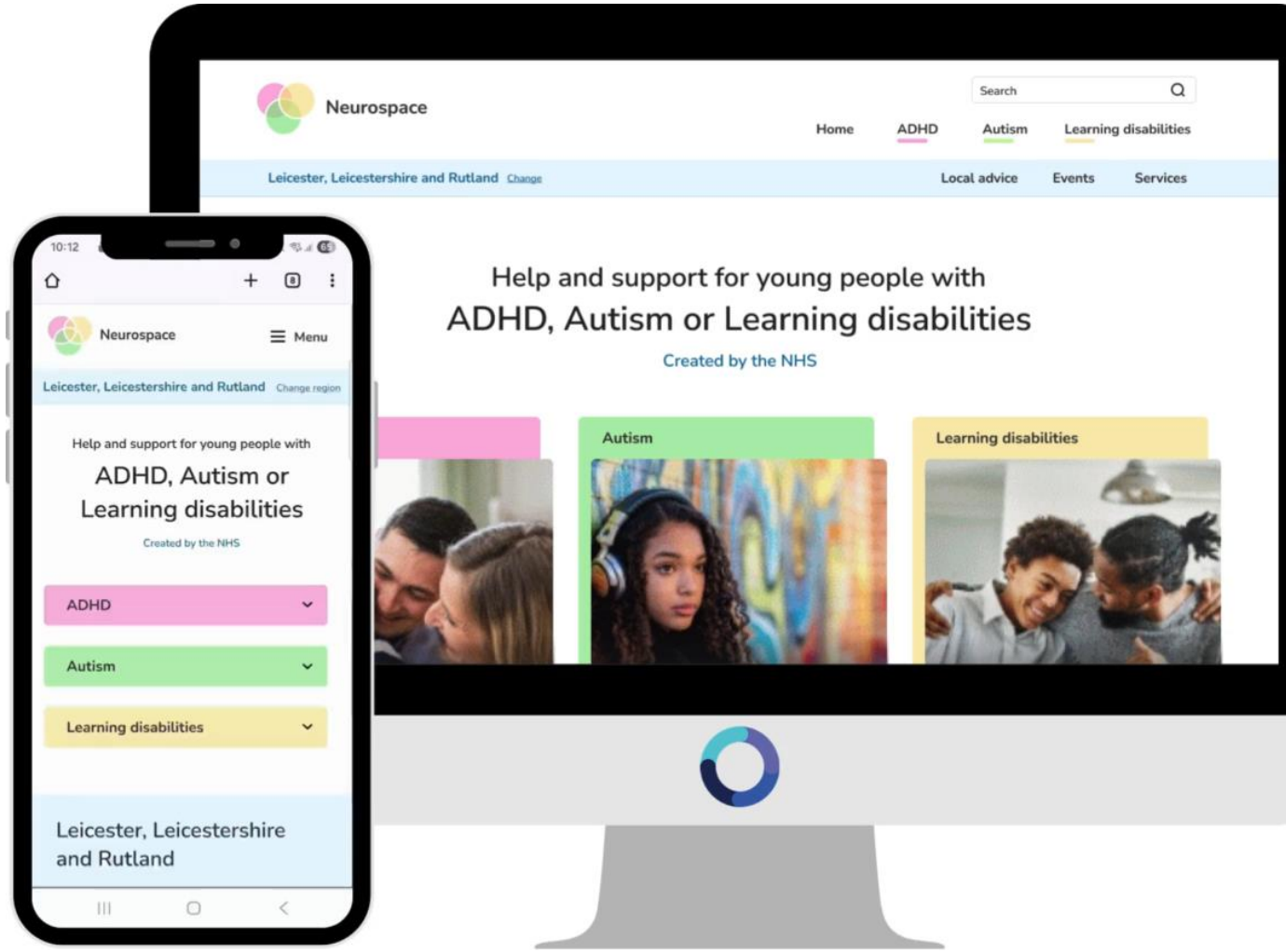
‘It is common for people with a Learning Disability to have co-morbidities of other Neurodevelomental diagnoses, therefore I feel one website would be easier for everyone to get the information and support they need.’

HealthWebsites

NHS

Coming soon (name TBC)

- Built by an **NHS Trust** with **commercialisation** in mind.
- **Co-designed** with service users, experts by experience and knowledgeable clinicians.
- **Established model** of engaging & trusted health promotion websites.
    - **National content**
    - **‘Local Area’** sections for local providers to ‘own’.



HealthWebsites

NHS

We’re looking to work with trailblazing Learning Disability service

- **Take ownership** of a local area and **contribute** to national content.
- **Empower service users** with accessible information & **reach** those harder to engage.
- Support **families and carers** with clear resources.
- Provide consistent, evidence-based advice and signposting to **support professionals**.
- Reduce demand and improve outcomes across the **health system**.
- Join a **national digital health network.**

ChatHealth

NHS Digital Solutions for Learning Disability services

ChatHealth

NHS

The issues to address

- Navigating healthcare can be complex
- Difficulty in accessing face to face care
- Fear of judgement
- Low engagement and rapport
- Lack of shared decision making and care planning

ChatHealth

NHS

ChatHealth - Confidential health & advice tool

- Co-designed with young people and families
- Enables people to communicate with health professionals via safe and secure messaging
- First ChatHealth service launched in 2013 and is now in 80 organisations.

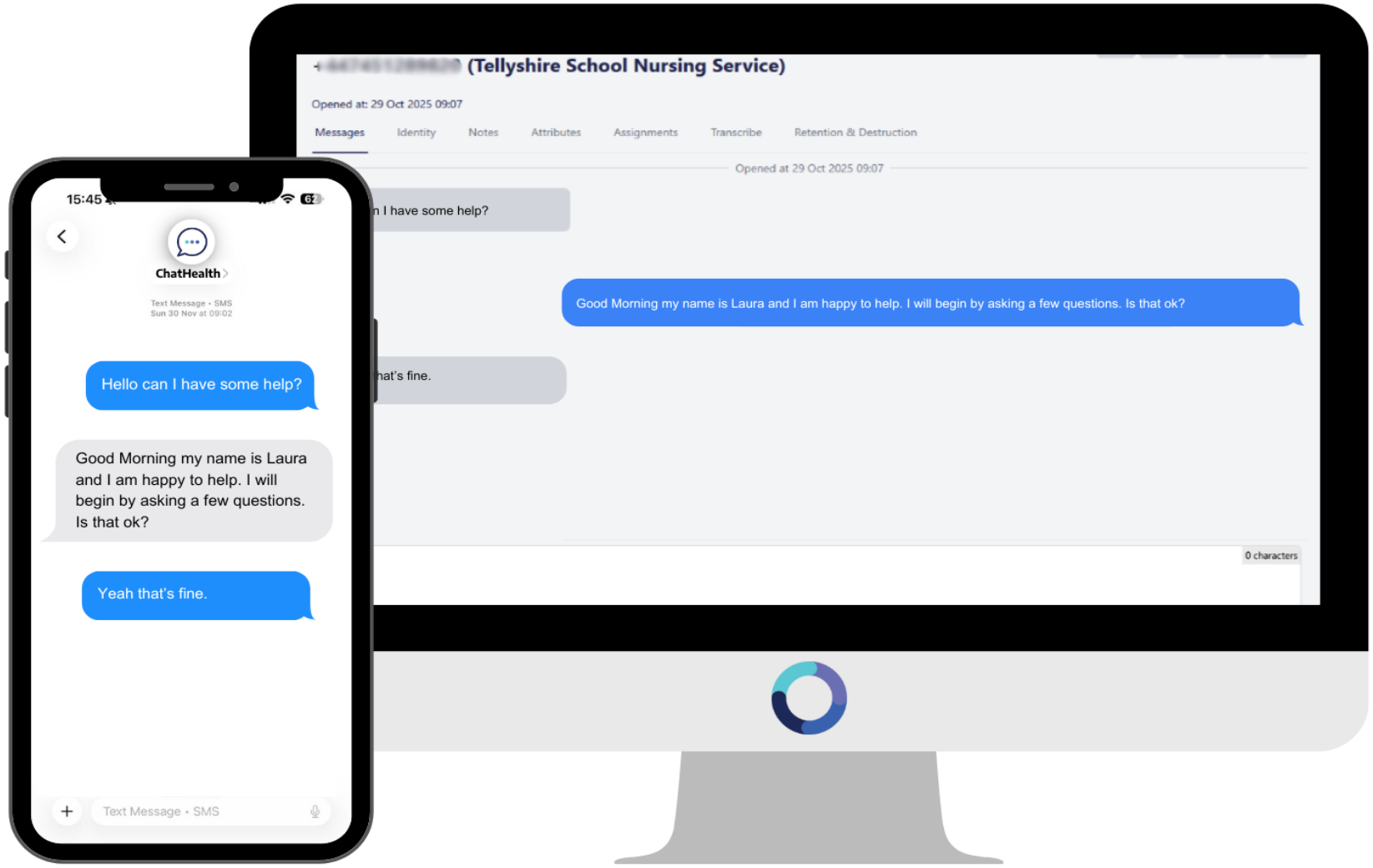
Health Innovation Network NHS England
NHS Innovation Accelerator

The AHSN Network Innovate Awards
Celebrating innovators in health and care
innovatehealthcareawards.co.uk
Winner Innovation Champion of the Year 2022

Nursing Times Awards 2020 30 YEAR ANNIVERSARY
WINNER

ChatHealth

NHS



ChatHealth

NHS

Safe and secure messaging

Conversation initiated by the service

Message sent by a service user

Messages received in and sent from a centrally managed inbox

Local healthcare practitioner **assigned to conversation** and responds to messages

One-to-one support holistically offered during real-time conversations

Appropriate signposting/ follow-up

> Positive patient journey

> Efficient access to local pathways

ChatHealth

NHS

Next steps

Contact our Client Relationship Manager, Julie Jones, to arrange a demo and discuss how you can set up ChatHealth messaging in your service.

Email: lpt.teamdhts@nhs.net

Website: chathealth.nhs.uk

Impact Report: impacts.dhtsnhs.uk

RIX. | University of East London

Rix Technical Director
Craig Wilkie

c.wilkie@uel.ac.uk

Today

- ✓Get to know Rix inclusive research and UEL
- ✓Know that the **Wiki** software is an effective solution in building relationships and delivering person centred support
- ✓Understand that the software is safe to use and approved by regulators

Focus

2. Enhancing Multi-Agency System Working

Innovations that support coordinated care across health and social care services, improving communication, transitions, and accountability throughout the care pathway.

Why is a Rix Wiki important ?

Supports person-centred care

Accessible co-production in action

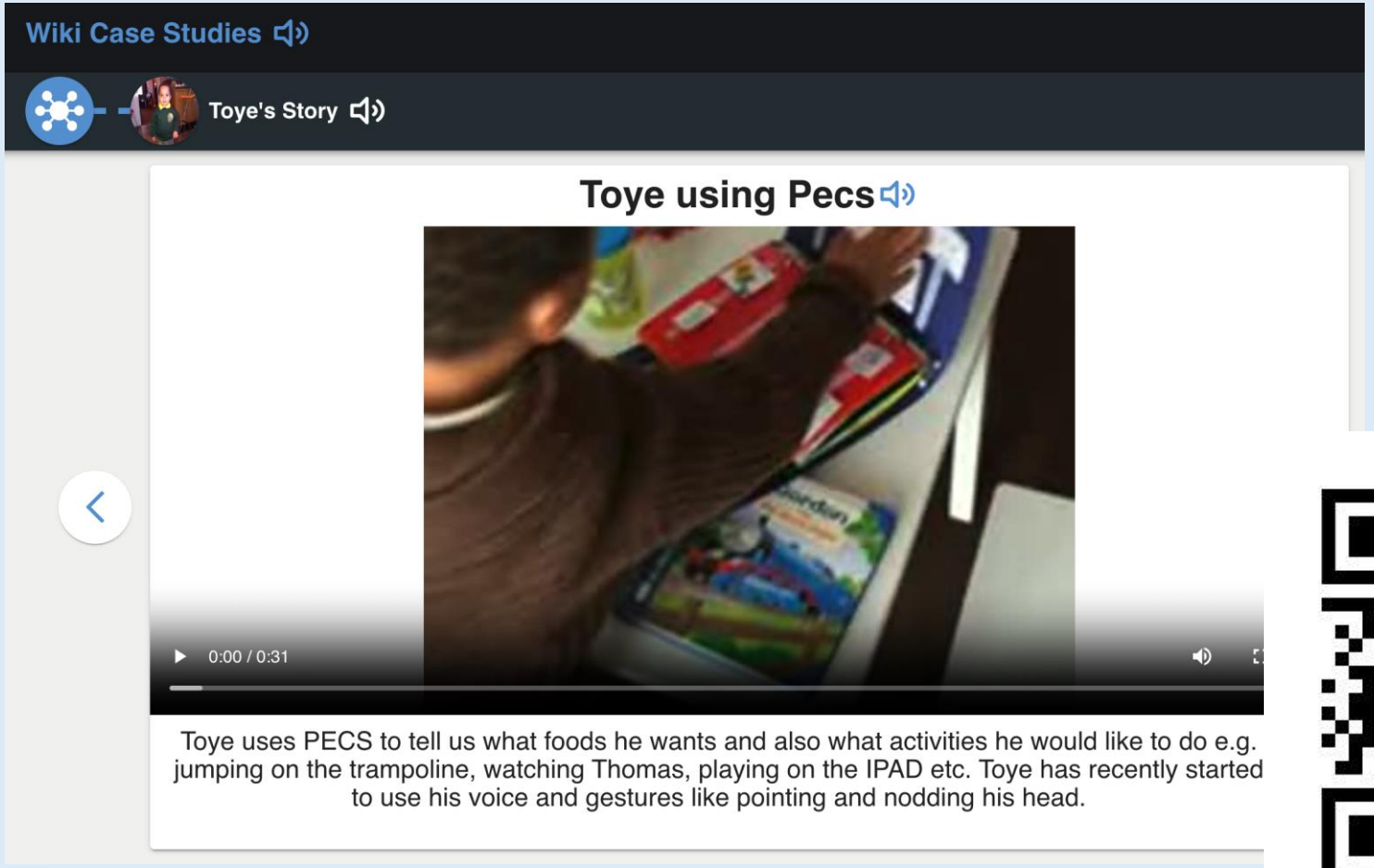
Includes disabled people’s voices

What is a Wiki?

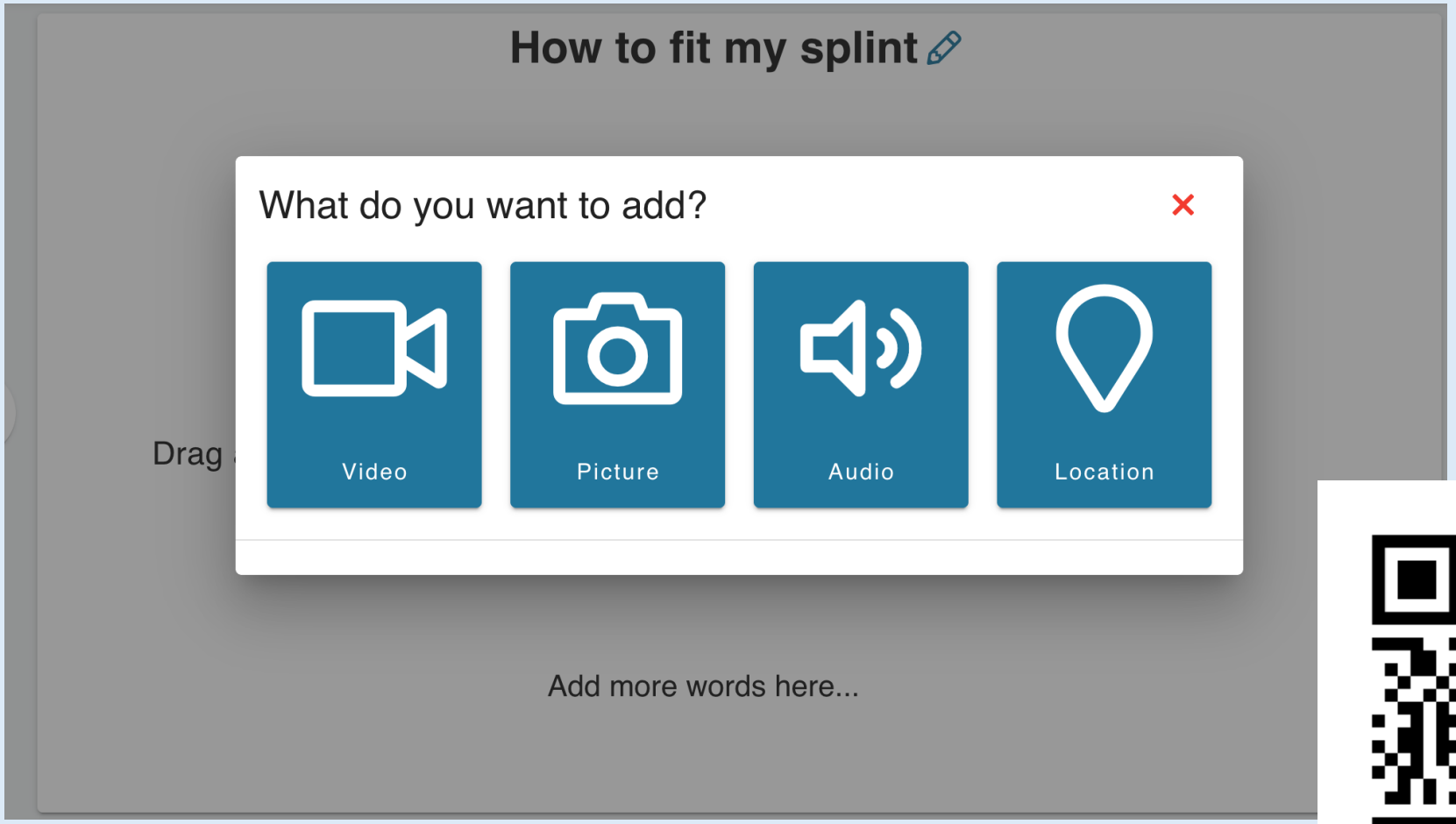
- In use over 15 years
- Digital *All About Me*
- Created by the person
- Use images, video and text from a phone, tablet or computer
- Accessible software design
- Person centred working in action
- Designed by people with learning disabilities

TRY IT NOW

Case study 1 - Improving communication

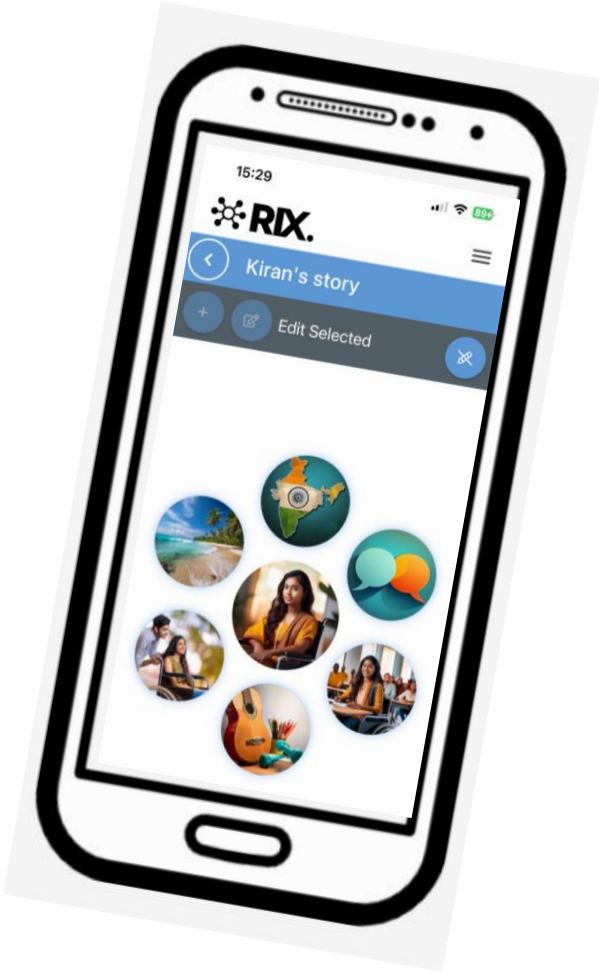


Case study 2 – Avoiding hospitalisation



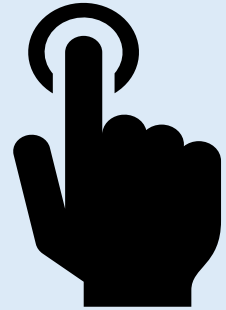
Why is the Wiki good?

- **Personal voice** – *MY health MY life MY voice – I am heard*
- **One place / view** for health, education and social care professionals
- **Multimodal** (sound, images, text and video)
- **Accessible** and easy to use
- **Memorable** useful for training and support for professionals



Strengths + How Wiki is used

- Accessible software
- Structured design
- Augmented experience
- Secure and safe technology



- At transitions
- To learn lessons or what is working & not working
- To reduce the need for hospitalisation & emergency care
- Annual health checks, education & care reviews

What is Wiki's value ?

- understanding of people and their needs
- healthcare outcomes for people with disabilities
- relationships between healthcare professionals and patient

Data security and online safety

Software

Rix Wiki – Digital All About Me

Rix EasySurvey – accessible survey maker

Rix EasyCourse – accessible training

Multi Me Toolkit – a digital circle of support

Purchase

rixsoftware.org

Learn more + start a conversation

rixinclusiveresearch.org

References

- Skills for Care (2025) *The state of the adult social care sector and workforce in England*. Available at: https://www.skillsforcare.org.uk/Adult-Social-Care-Workforce-Data/workforceintelligence/Reports-and-visualisations/National-information/The-State-of-report.aspx

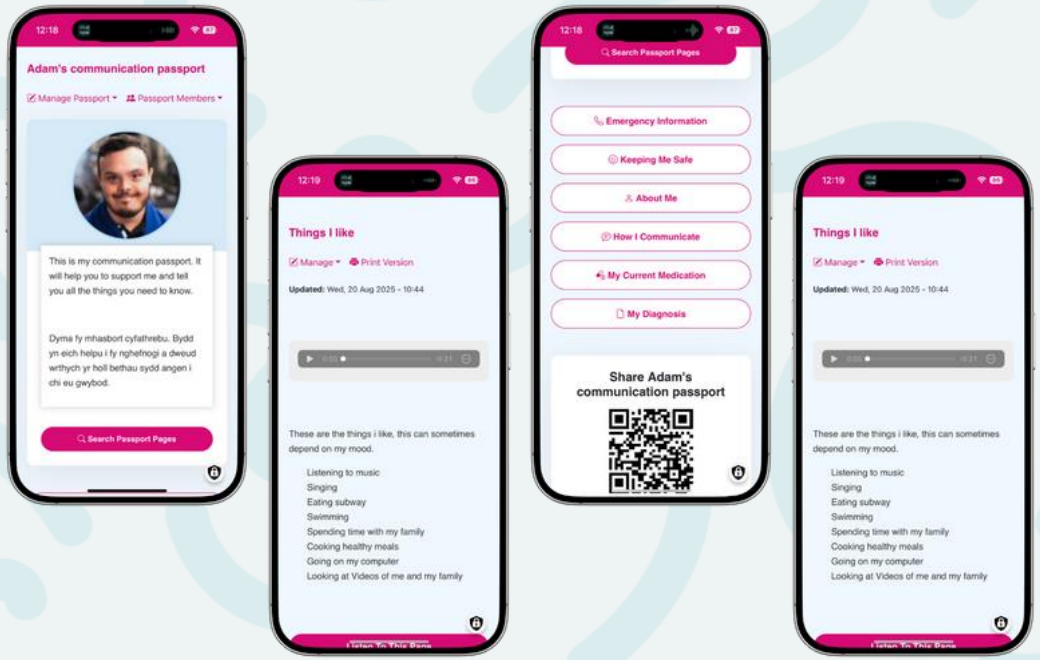
- Social Care Institute for Excellence (2023) *Co-production: what it is and how to do it*. Available at: https://www.scie.org.uk/co-production/what-how/

- House of Commons Library (2025) *UK disability statistics: prevalence and life experiences*. Available at: https://commonslibrary.parliament.uk/research-briefings/cbp-9602/

- Mencap (2023) *Learning disability statistics*. Available at: https://www.mencap.org.uk/learning-disability-explained/research-and-statistics

AboutMi

A digital Communication Passport that enables people to be #Seen, Heard and Understood



H2T here2there

North Wales **Together**
Gogledd Cymru **Gyda'n Gilydd**

Seamless services for people with Learning Disabilities
Gwasanaethau ddi-dor i bobl ag Anableddau Dysgu

When Information Is Fragmented, People Are Put at Risk

- Poor information sharing across settings puts people at risk.
- Missing or outdated information drives inappropriate prescribing and weak reviews.
- Unmet communication, social and environmental needs are misinterpreted as behaviour.
- Paper passports are lost or out of date, especially in emergencies.
- Dignity, autonomy and equity are undermined.
- Families and staff repeat information, creating delay and stress.

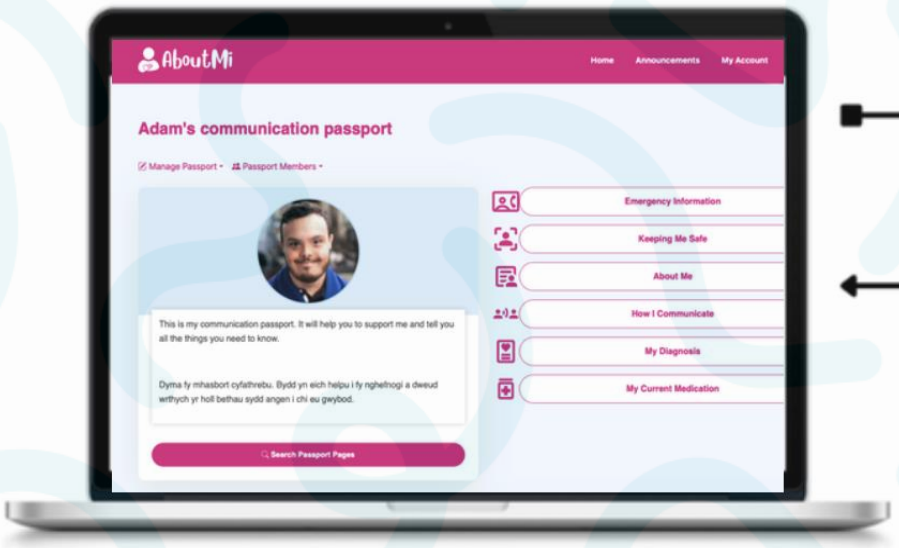
AboutMi

“My daughter no longer has to repeat herself. The app has given her confidence and independence, and she can record what is important to her in her own voice.”

Parent of an AboutMi User

- A secure, digital “communication passport” storing essential medical, social, environmental needs and preferences
- Co-produced with people with learning disabilities, families, carers
- Accessible via smartphone tablet or desktop
- Updatable in real time
- Accessible to those that matter

HOW IT WORKS

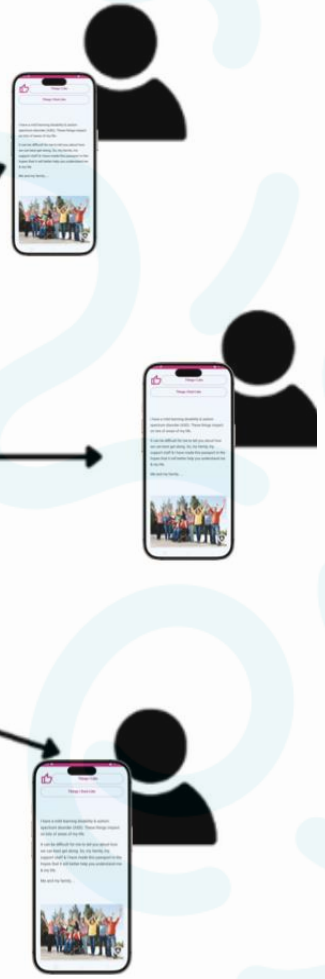


Web based control panel

Organisation admin user

Communication Passport App

Supported individual



Circle of Support

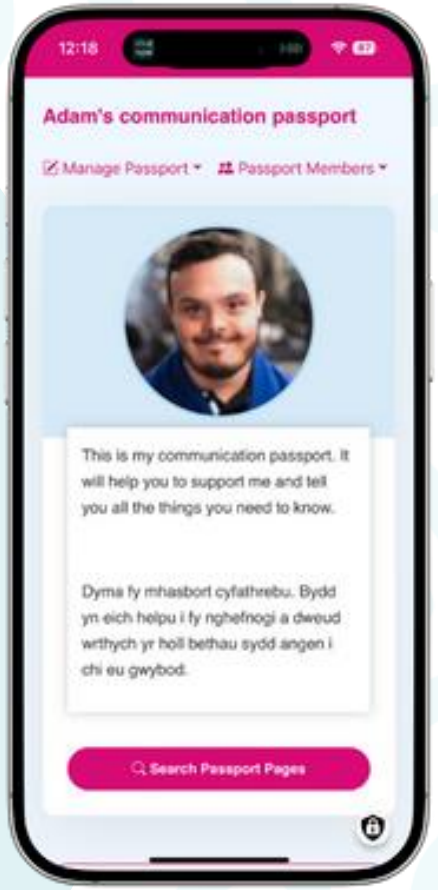
THE FEATURES

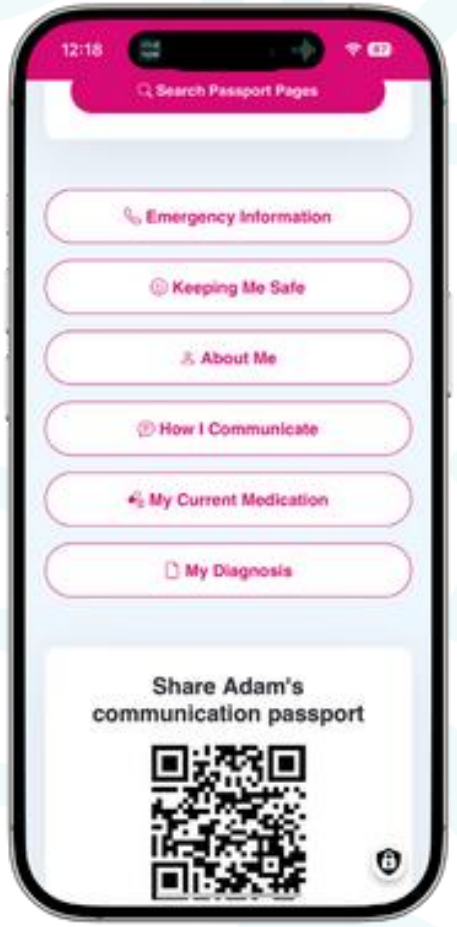
- **Personalised Profile Creation:**
  - Highlight the individual's preferred methods of communication, interests, needs and what matters most to them.
  - Each passport can be customised to each individual with person centred headings – in their words.

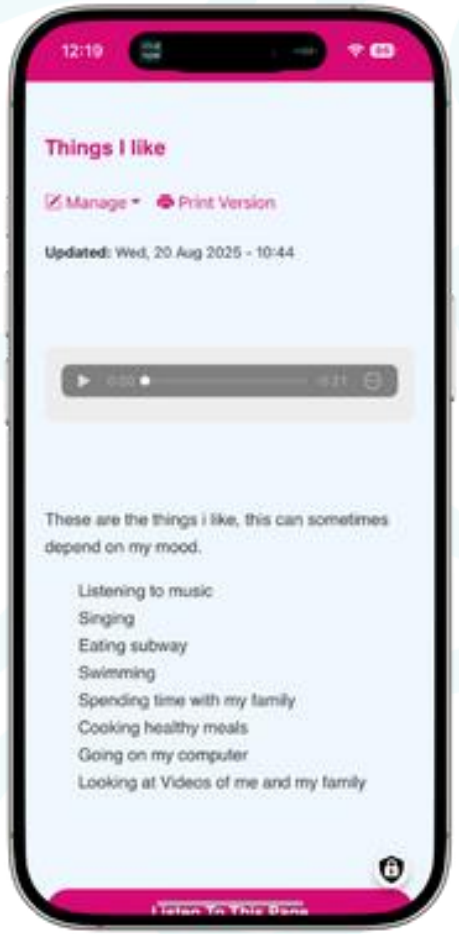
- **Real-Time Updates and Sharing:**
  - Facilitate better communication through real time updates.
  - Updates can be easily shared among a circle of support by inviting members into a passport

- **Permission controlled**
  - Different access levels controls protects sensitive data whilst QR code is available for easy sharing of emergency information

- **Accessibility**
  - Includes images, videos, voice recordings and audio for that personal touch
  - English and Welsh -Interface and content







How AboutMi Helps Address the Key System Challenges

1. Shared decision making & care planning
• Makes essential information visible to individuals, families and professionals
• Supports reasonable adjustments and holistic, person-centred planning

2. Multi-agency system working
• Enables consistent information sharing across health, social care and families
• Supports clearer transitions, accountability and continuity

3. Safe deprescribing of psychotropics
• Provides context to support safer reviews and informed decision-making
• Reduces reliance on fragmented notes and repeated information gathering

4. Non-pharmacological support
• Shares information about communication, sensory, social and environmental needs
• Supports PBS and other non-drug approaches alongside medication review

AboutMi – Fill in form

BURNING QUESTIONS AND FUTURE DEVELOPMENTS

Try it yourself

Share Adam's communication passport

AboutMi

90 day free trial

“Let’s work together to make essential care information safe, shared and centred on people.”

For more information or to receive this presentation in an easy read format than please contact us

Donna@here2there.me.uk **Kat@here2there.me.uk** **www.here2there.me.uk/aboutmi**

Medii platform

Supporting safer psychotropic use and shared care planning in learning disability services

Tritone Health

Our Mission

‘To coproduce technology for people with ***learning Disabilties*** *and* ***autism*** *to reduce health complications.’*

Medii

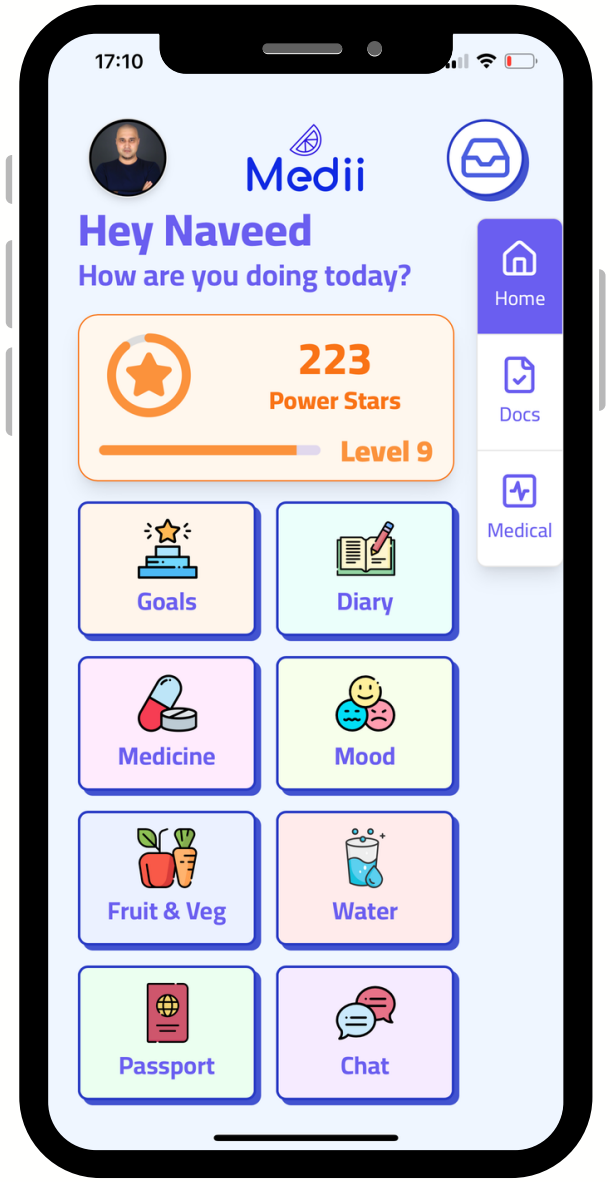
A dedicated digital platform designed for learning disability,
co-produced with lived experience, frontline staff and carers

Individual Diary

- Behavioral monitoring
- Physical activity & Food Diary
- Reasonable Adjustments

Medication

- Daily reminders
- Connected to rewards
- Track side effects



Family support

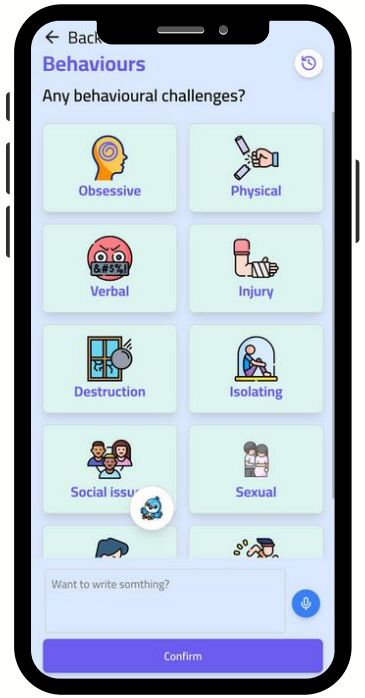
Family can monitor remotely to encourage compliance and promote positive health behaviors.

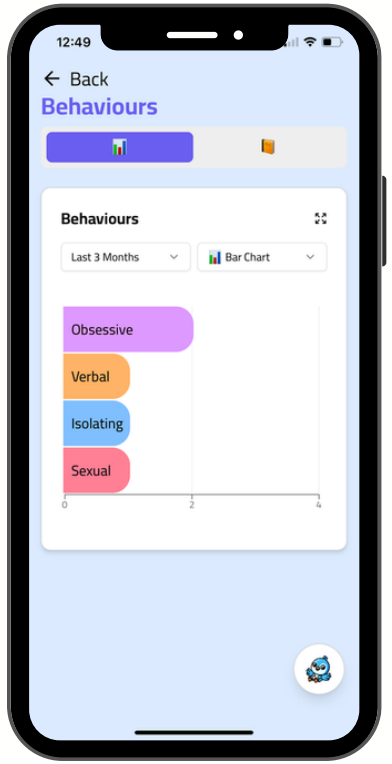
Connected to Healthcare teams

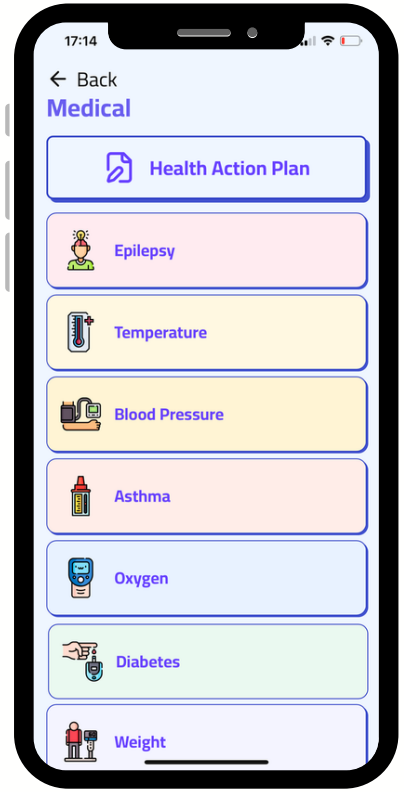
Information is sent to healthcare teams to provide better understanding of individual needs

Carers

Caregivers eg. family members can record readings, which includes complex behaviours and chronic disease.







- **Appointments**
- **Bowel charts**
- **Notes summary**
- **Complex behaviours**
- **Swallowing**
- **Weight**

AI Companion: Kiki

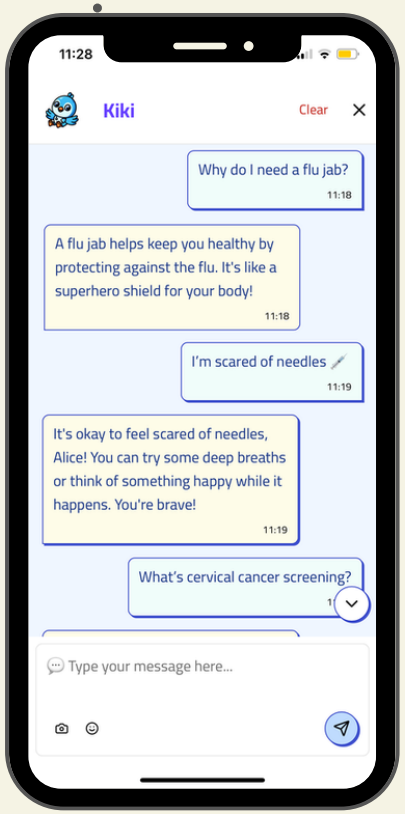
Helper bird that supports patients and caregivers to learn about health, understand medical conditions, offers friendship and encourage positive health and individualised goals to improve **education** and **mental health**

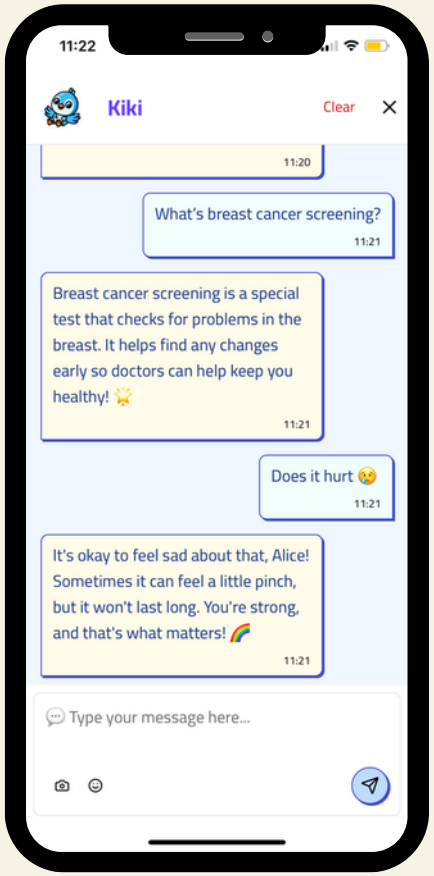
I want a new goal today.

What is a flu jab?

What is Paracetamol?

What does Diabetes mean?



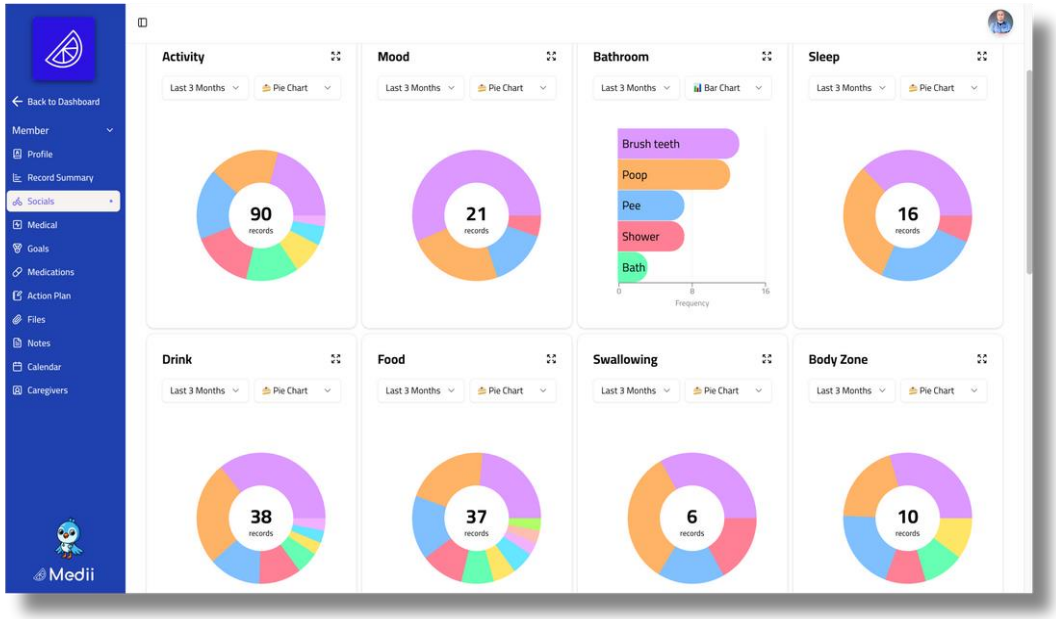


Safer Medication & STOMP Support

- Medication reminders & side-effects capture
- Structured summaries for reviews
- Supports consultations with patients and carers

Staff Dashboard

Allows multiagency system to track the progress of patients and carers recording in the Medii app at home.



Shared Care planning

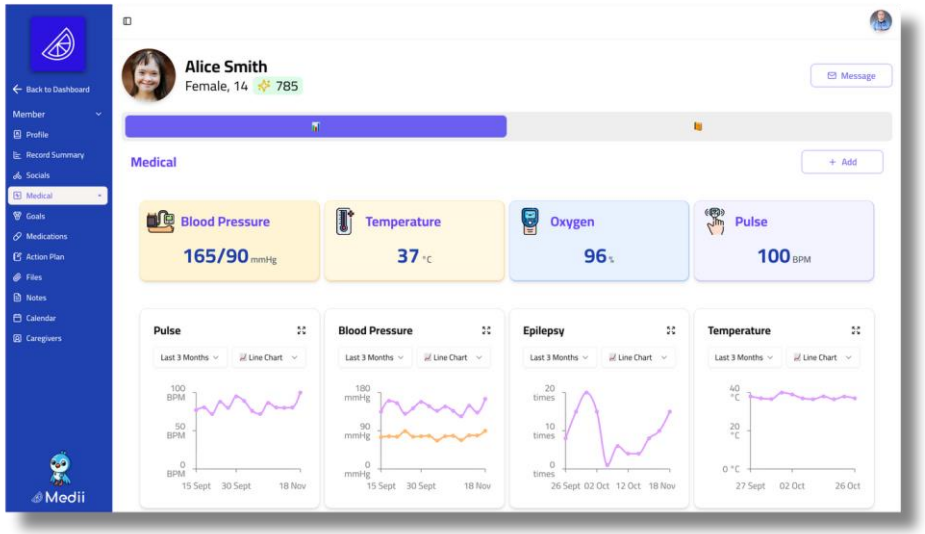
Early identification of needs

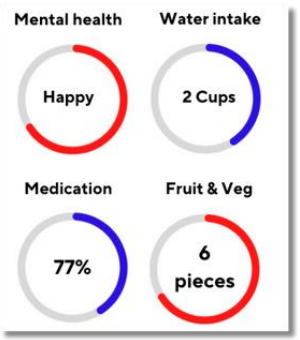
Telehealth

Direct video calls.

Social Prescribing

Pharmacist
Psychiatry
Behavioural Analysts
Dietician
Occupational Therapist
Nurse
Physiotherapist





AI: Easy Read

NHS
Blackpool Community Dermatology Service

Ref: /16637

Patient Name
Patient Address
Address
Address
Post Code

Glenroyd Medical Centre
Moor Park Health and Leisure
Bristol Avenue
Blackpool
FY2 0JG

t: xxxx xxx xxx

<date>

Dear Patient Name

Re: Blackpool Community Dermatology Service

An appointment has been made for you to attend the <Clinic Location> on <Appointment Date> at <Appointment Time>.

The appointment will be with <Clinician> - Dermatology.

Please report to Glenroyd Medical Centre Reception on the 1st floor.

Cancelling and rescheduling: If you are unable to attend this appointment please contact us as soon as is possible on <telephone number> to enable us to reschedule your appointment, and to allow another patient to have the opportunity to attend.

Non-attendance: If you do not attend the appointment without contacting us we will call you and arrange another appointment. If you do not attend the second appointment we arrange with you, you will be referred back to your GP who will then manage your treatment.

Please note that we will telephone you 2 days before your appointment to confirm your attendance and appointment details. Please feel free to ask any questions you may have during this telephone call. If we are unable to contact you we will leave a voicemail should the option be available.

We have also enclosed a Patient Information Leaflet on our service which should answer any additional questions that you may have but, if you require any further information, please do not hesitate to contact us on <telephone number>.

Yours sincerely,
On behalf of Blackpool Community Dermatology Service

Your Appointment Letter

Medii

Hello! You have an appointment at the Blackpool Community Dermatology Service. It is on a special day and time. Remember to go to Glenroyd Medical Centre Reception on the 1st floor.

If you can't go to your appointment, please tell us as soon as you can. We can help you pick a new day and time.

If you don't come to your appointment and we don't hear from you, we will call you to help you. You might need to see your doctor again.

We will call you 2 days before your appointment to check if you can come. If you have questions, you can ask us anytime.

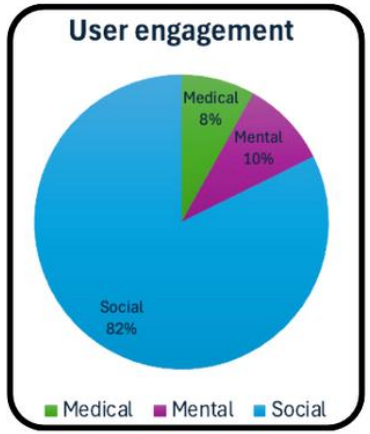
East London
NHS Foundation Trust

Case Study

Pilot: East London Hospital

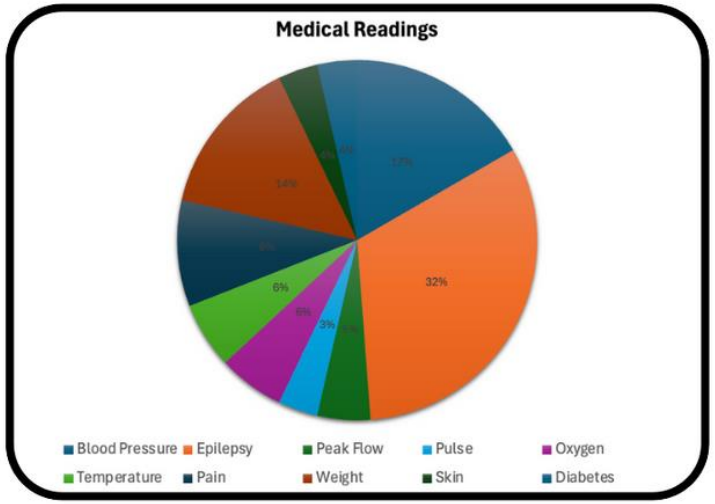
Length: 6 months.

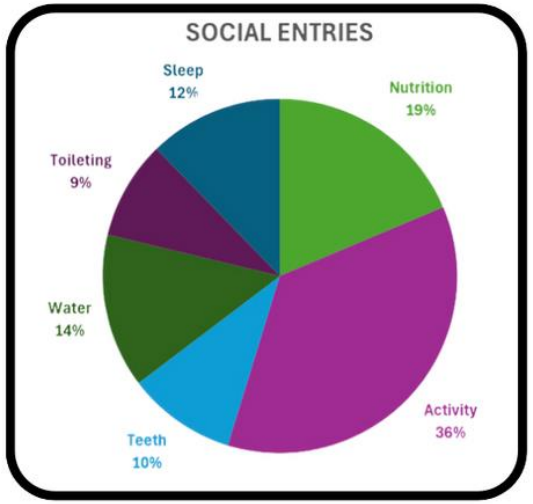
Cohort: **Mild Intellectual Disabilities**



10,120 total App engagements

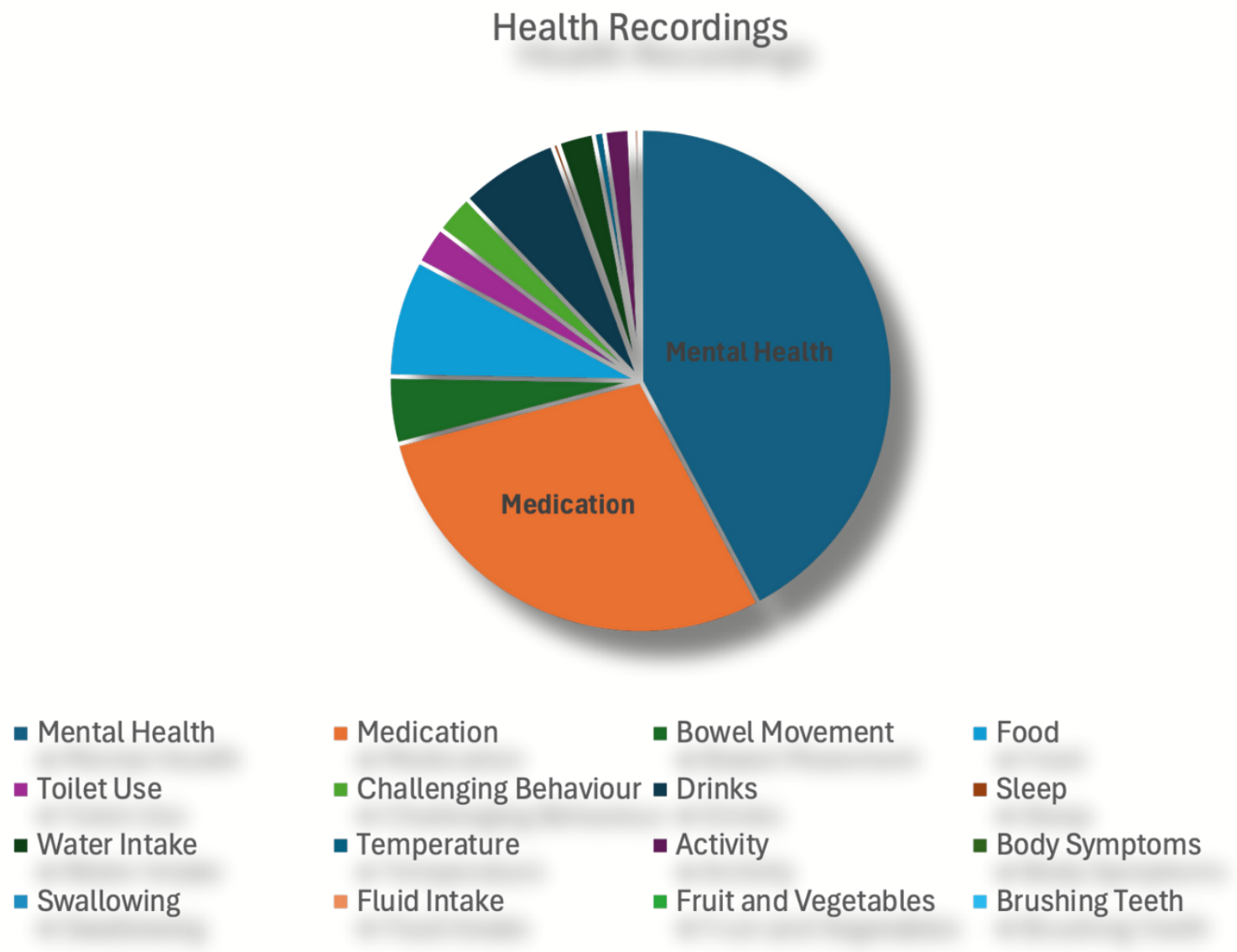
Each user entered the App 2.4 times/day





South London and Maudsley NHS Foundation Trust

STOMP Team



Partnerships

Black Country Healthcare
NHS Foundation Trust

England

East London
NHS Foundation Trust

South London
and Maudsley
NHS Foundation Trust

Lancashire &
South Cumbria
NHS Foundation Trust

SURREY
HEARTLANDS
Health and Care Partnership

We would like to partner with you.

contact@tritonehealth.com

EMPOWER PEOPLE > IMPROVE OUTCOMES > REDUCE DEMAND

the hope® programme

Hope Programme

Evidence-based self-management group and self-guided courses

hope for the community

CERTIFIED SOCIAL ENTERPRISE • BUSINESS FOR GOOD •

UK SOCIAL ENTERPRISE AWARDS WINNER

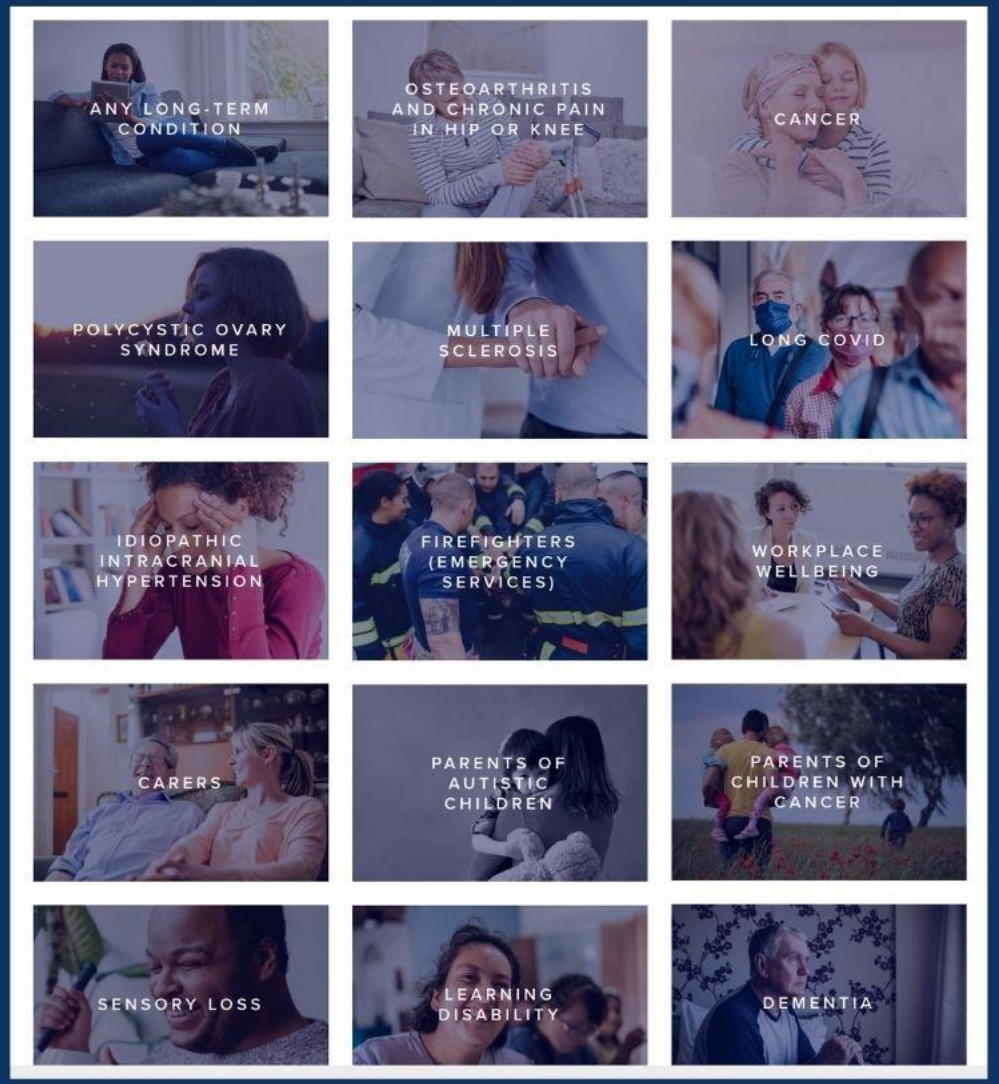
HOPE:

HELP OVERCOME PROBLEMS EFFECTIVELY

Coventry University

the hope programme®

- **EVIDENCE BASED** self-management courses rooted in 25+ years research
- **HOLISTIC** wellbeing, focussing on the person not their condition and what matters to them
- **CO-DESIGNED** with users, clinicians and academics
- **PROVEN** across multiple long-term conditions and carers
- **FLEXIBLE** in-person and digital courses adapted with different groups



33,000 PEOPLE BENEFITTED TO DATE

ONS - BMJ - HEALTH FOUNDATION -FOUNDATION FOR PEOPLE WITH LEARNING DISABILITIES

950,000

ADULTS WITH LEARNING DISABILITIES

- **90%** HAVE AT LEAST ONE DIAGNOSED LONG-TERM CONDITION
- **4 IN 10** HAVE A DIAGNOSABLE MENTAL HEALTH PROBLEM
- OFTEN HAVE LIMITED ACCESS TO HEALTH INFORMATION

IN-PERSON

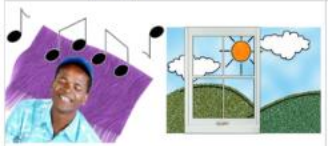
GROUP-FACILITATED COURSE ADAPTED FOR AND CO-DESIGNED WITH PEOPLE WITH LEARNING DISABILITIES

the hope® programme

Things we cover on the Hope Programme

- 4-6 sessions - 2 hours each - run over 2-6 weeks
- upto 12 participants, supported by 2 facilitators
- interactive activities, videos, take away booklet

	Welcome and ground rules
	Gratitude diary Things that make me happy
	Setting goals and feedback
	Managing stress
	Belly breathing
	Mindfulness

	Sleeping better
	How to relax
	Healthy lifestyles Getting active, creative, eating well and feeling good
	Communication Different ways of talking and listening to other people
	Ask for help when things are hard
	Remembering what you are good at

Prevention

Outcomes - Improved mental wellbeing, increased skills and confidence to manage.


Sharon
Hope Programme participant

Neighbourhood health model. Delivered in partnership. Sustained locally.

- **Community.** Delivered through trained local partners. Creating social value.

hope for the community

training & support
quality assurance

ongoing delivery
impact management

Life Path TRUST

Prices 2025/26:

- from £4,500 for local delivery partner training and set-up
- £1,000 annual licence and quality assurance for upto 200 participants

hope for the community

CERTIFIED SOCIAL ENTERPRISE • BUSINESS FOR GOOD •

QISMET CERTIFICATED

ORCHA ASSURED BRONZE VALID TO: AUG 2026

NHS CLINICAL SAFETY DCB0129 COMPLIANCE

NHS Collaborative Procurement Hub
Partnership with Purpose

Awarded Supplier
Social Impact

CONTACT:

Gabriela Matouskova, CEO

gabriela@h4c.org.uk - 024773 601 53

www.h4c.org.uk

powered by H4C

Hope For The Community CIC is an award winning social enterprise empowering people to manage their wellbeing and to flourish in their working and personal lives.

Thank you for your time today

Health Innovation WEST MIDLANDS

Health Innovation East Midlands

- Contact us at **healthinnovation-em@nottingham.ac.uk** if you have any queries.
- Please complete our innovator connection form to be put in contact with innovators that have presented today (link in chat).
- The event recording and slides will be added to the webpage over the next few days.

Scan the QR code to access the webpage

Health Innovation
WEST MIDLANDS

Health
Innovation
East Midlands

Further information

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- **Web:** healthinnovation-em.org.uk
- **X:** @Healthinn_em
- **LinkedIn:** Health Innovation East Midlands

- **Email:** opportunities@healthinnovationwm.org
- **Web:** healthinnovationwestmidlands.org/
- **X:** @HealthInnovWM
- **LinkedIn:** Health Innovation West Midlands

Office for
Life Sciences

NHS