South West London
Academic, Health and Social Care
Network

The importance of Health Innovation Education Clusters, HIEC, in supporting the health & social care interface in education

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The Vision

NHS Next Stage Review
A High Quality Workforce
June 2008

Key partnerships between NHS & Universities
'Clusters' can bring real advantages

• **attract more research funding & world class researchers**
• **innovations and improvements in patient care**
• **raise 'quality & pace' of development of healthcare professional education & training**
• **over time clusters able to be commissioned to provide healthcare education & training**
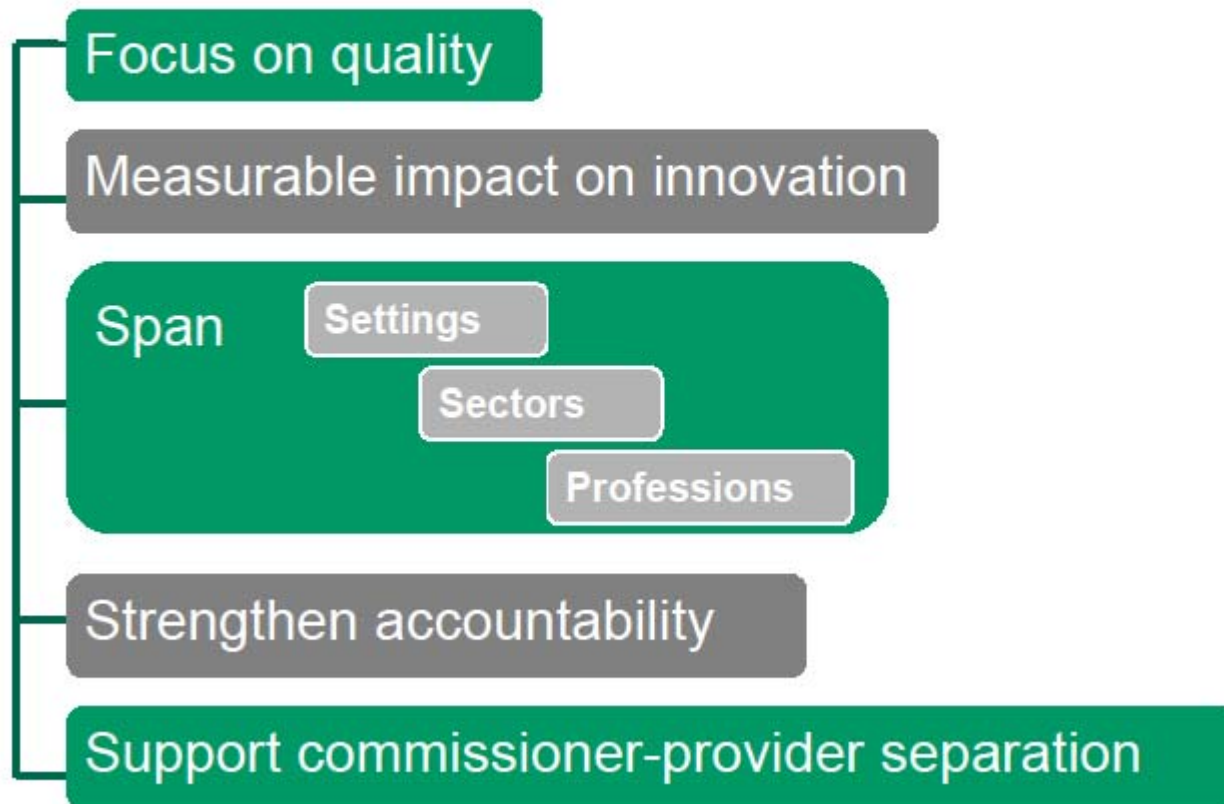
Health Innovation and Education Clusters

DH Department of Health

- Developed during NHS Next Stage Review, published in *A High Quality Workforce*
- High quality care through better trained clinicians
- Faster translation and adoption of research and innovation

DH Department of Health

Breakthrough to real change in local healthcare

A guide for applications to create
Health Innovation and Education Clusters (HIECs)

Published 7 May 2009

Principles for creating HIECs

DH Department of Health

- Focus on quality
- Measurable impact on innovation
- Span
  - Settings
  - Sectors
  - Professions
- Strengthen accountability
- Support commissioner-provider separation

What could we achieve?

- Shift in culture towards innovation
  - better quality care for all NHS patients
- Higher achievement from cross-sector partnership
  - broader thinking, faster progress
- Better training methods
  - better trainee experience, better clinicians
- Training aligned to care pathways
  - across all professions, breaking through traditional barriers

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Working together to improve South West Londoners' health and wellbeing

Principles

Partnership projects would have value independent of HIEC status

Builds on best practice in existing areas of expertise

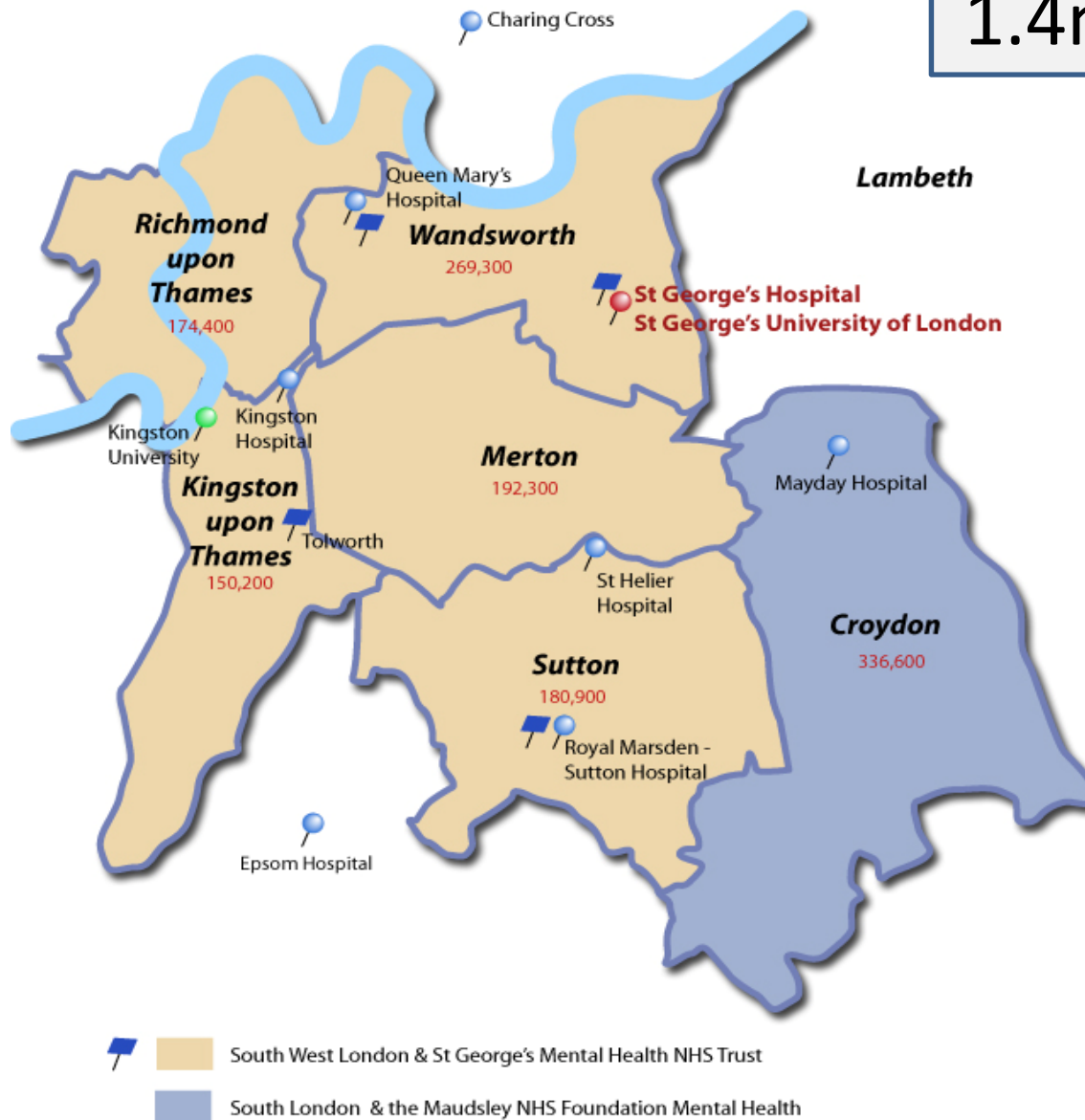**Promotes better collaboration between and across traditional boundaries**

What are the areas of greatest population health and social care need?

Which areas could partnership projects make the greatest impact?

South West London
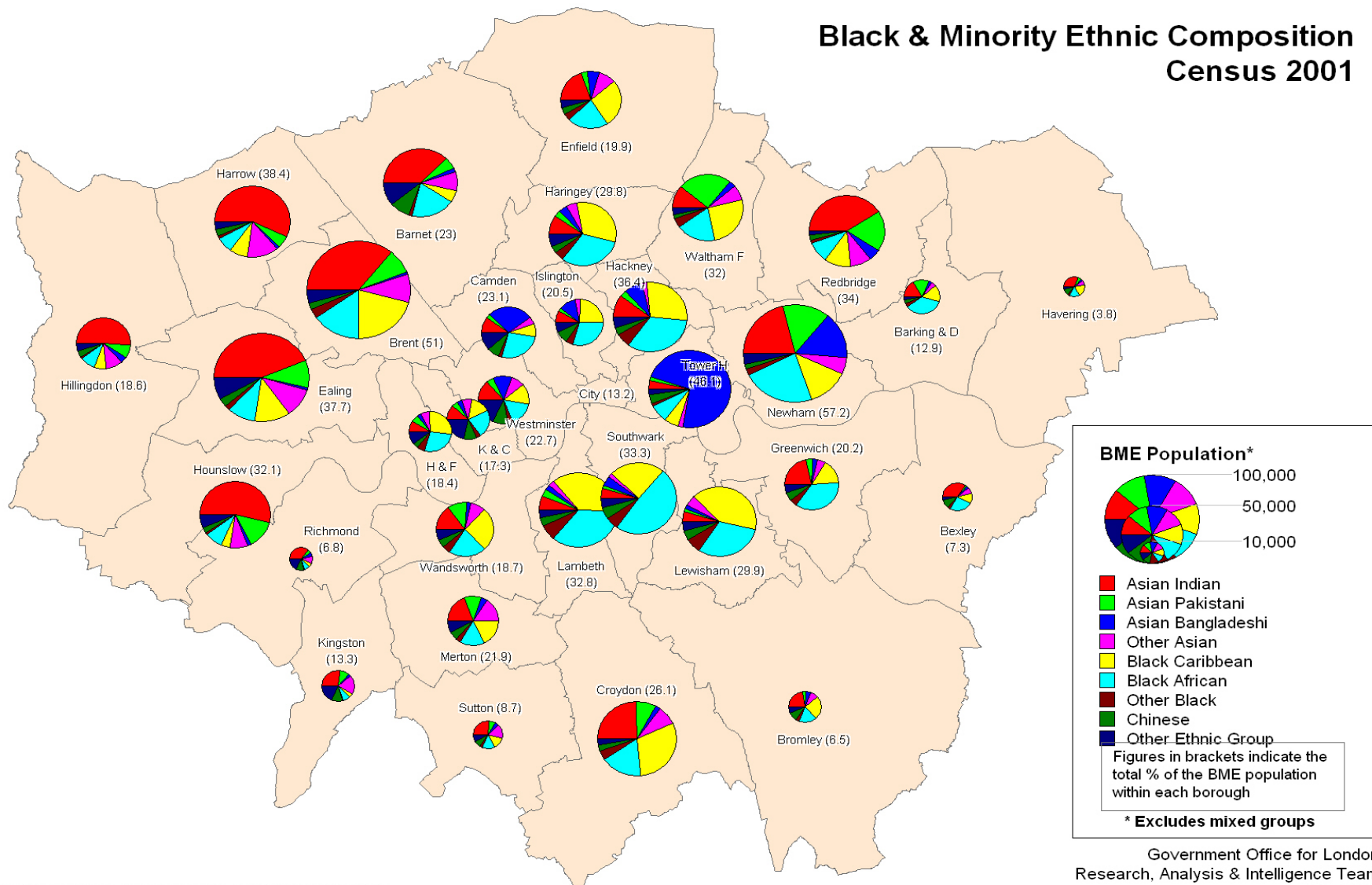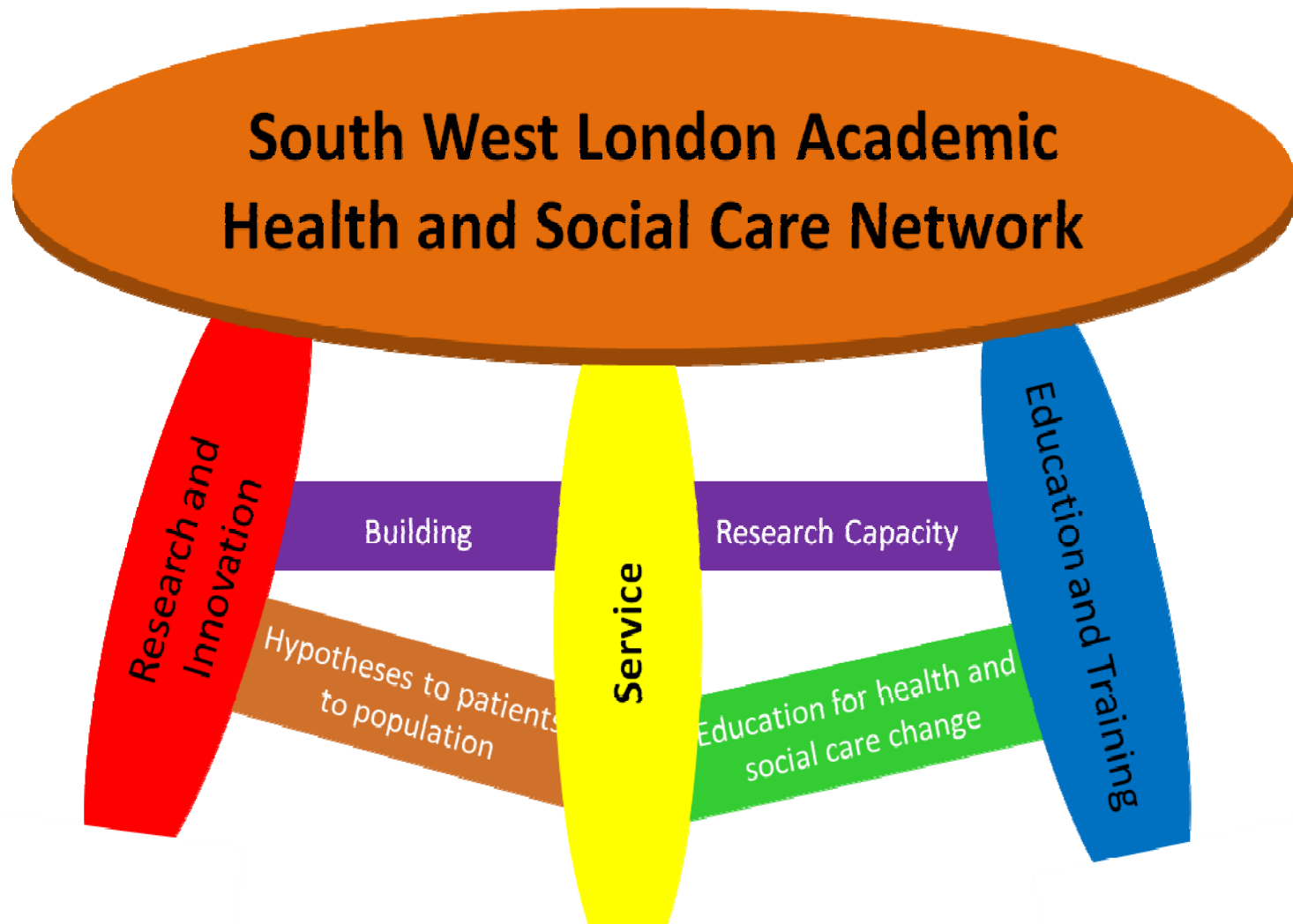**Academic, Health and Social Care**
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1.4m people

Charing Cross

Lambeth

Queen Mary's Hospital

Richmond upon Thames
174,400

Wandsworth
269,300

St George's Hospital
St George's University of London

Kingston University

Kingston Hospital

Merton
192,300

Mayday Hospital

Kingston upon Thames
150,200

Tolworth

St Helier Hospital

Croydon
336,600

Sutton
180,900

Royal Marsden - Sutton Hospital

Epsom Hospital

South West London & St George's Mental Health NHS Trust

South London & the Maudsley NHS Foundation Mental Health

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LONDON'S POPULATION AND DIVERSITY

Black & Minority Ethnic Composition
Census 2001

Enfield (19.9)

Harrow (38.4)

Barnet (23)

Haringey (29.8)

Waltham F (32)

Hackney (36.4)

Camden (23.1)

Islington (20.5)

Redbridge (34)

Barking & D (12.9)

Havering (3.8)

Brent (51)

Hillingdon (18.6)

Ealing (37.7)

City (13.2)

Tower H (16.1)

Newham (57.2)

Westminster (22.7)

K & C (17.3)

Southwark (33.3)

Greenwich (20.2)

H & F (18.4)

Hounslow (32.1)

Richmond (6.8)

Bexley (7.3)

Wandsworth (18.7)

Lambeth (32.8)

Lewisham (29.9)

Kingston (13.3)

Merton (21.9)

Croydon (26.1)

Sutton (8.7)

Bromley (6.5)

BME Population*

100,000

50,000

10,000

- 🟥 Asian Indian
- 🟩 Asian Pakistani
- 🟦 Asian Bangladeshi
- 🟪 Other Asian
- 🟨 Black Caribbean
- 🟦 Black African
- 🟫 Other Black
- 🟩 Chinese
- 🟦 Other Ethnic Group

Figures in brackets indicate the
total % of the BME population
within each borough

***** Excludes mixed groups**

South West London Academic Health and Social Care Network

Research and Innovation

Service

Education and Training

Building — Research Capacity

Hypotheses to patients to population

Education for health and social care change

How will HIECs influence Health Professional Training and be sensitive to Workforce needs?

Three workshops in 2008-09 to identify key strategic themes.

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Early Years

Stroke

Infection

Recovery

Boundaries

Implementing New Models Of Care

Agreed set of working principles:

❑Acknowledged that the partners are autonomous organisations:

❑Accepted that an individual organisation working in partnership may not always receive immediate direct benefit from work that is for the common good

❑Recognised that, for an organisation to be involved, there will, at some stage, need to be a perceived benefit to that organisation

❑Accepted that, on occasion, an organisation may not wish to be part of some aspect of the work

❑Accepted that organisations may at the same time be in competition and working collaboratively **but** this is only effective if there is honesty as to where the boundaries of competition and mutual self-interest fall

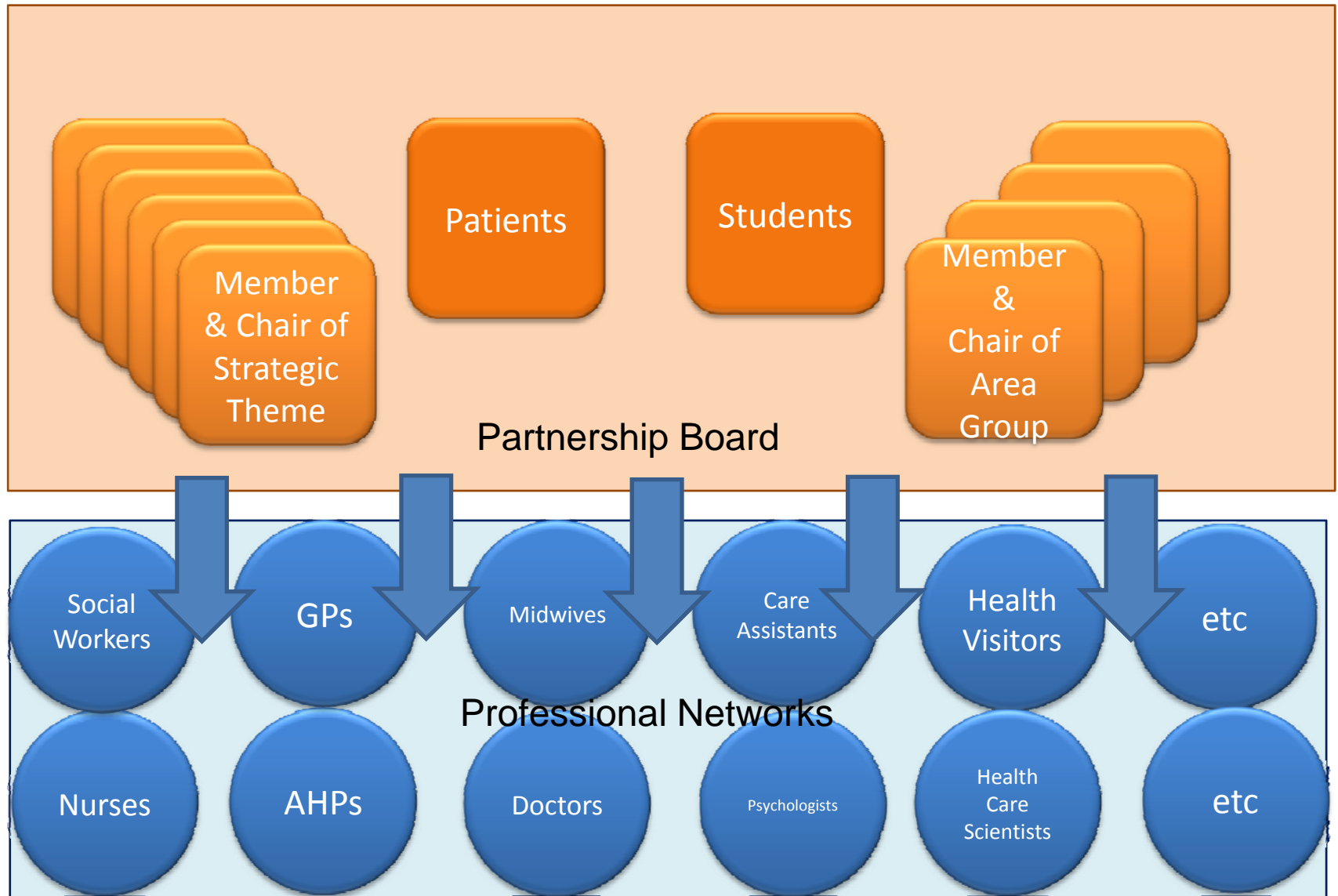South West London
Academic, Health and Social Care
Network
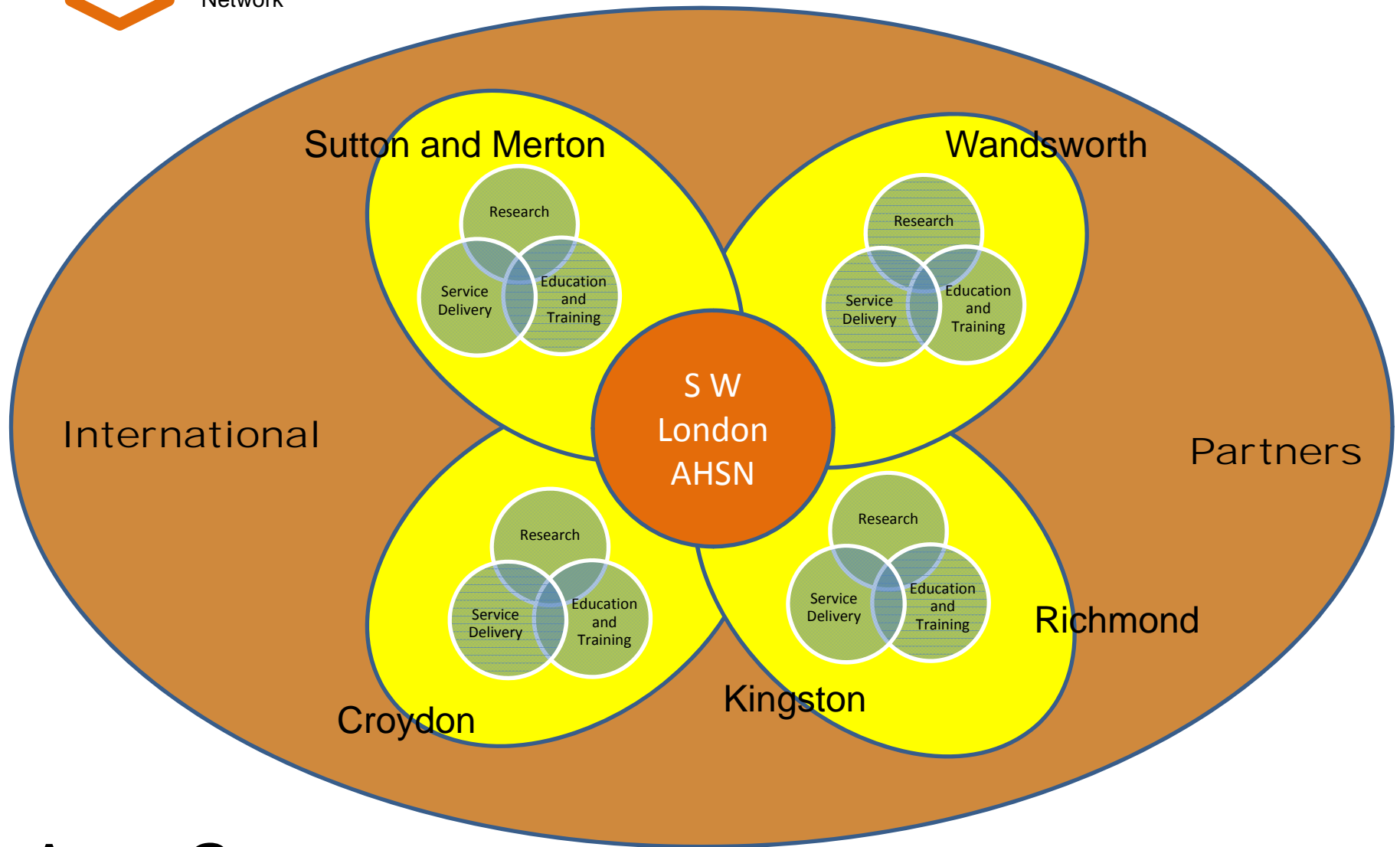
Sutton and Merton

Wandsworth

Research

Service Delivery

Education and Training

Research

Service Delivery

Education and Training

S W London AHSN

International

Partners

Research

Service Delivery

Education and Training

Research

Service Delivery

Education and Training

Croydon

Kingston

Richmond

Area Groups

How will HIECs apply research & innovation into practice?

Possible
Legal Structures

	Executive Agency of UK Govt Dept	Non Departmental Public Body ('NDPB')	Limited Company	Joint Venture (Public / Private Co)	Charity	Company Limited by Guarantee	Trust	Trust Corporation	Unincorporated Association	Social Enterprise Model
Legal structure/ means of formation	This is a public sector established under a UK Central Govt Dept. As such it reports into the UK Govt Dept. The 'CEO' of the Agency would report into the particular Secretary of State and be part of the Executive of that Department. It is created by an	A public sector body which is established outside the control of the UK Govt Dept (contrasted with an 'Executive Agency' which is under a particular Dept). Such a detachment is in order to give the NDPB a degree of independence. NDPBs may be advisory only	For certain purposes the Government may establish a limited company to carry out certain functions. It is approved by an act of Parliament.	This is where a public sector body wishes to engage the private sector to manage and operate a particular service but also wishes to maintain an element of control over the service. A 'PPP', a public / private sector partnership model is used for such	A charity (a non profit making organisation – with special tax status) may be established for particular purposes which include:- - the advancement of healthcare - the advancement of education	A company limited by Guarantee is a special form of limited company. There is no subscription for shares. Members have a limited liability as per the amount of the Guarantee (e.g £1).	Formed with a donor of assets, trustees managing the assets for the benefit of beneficiaries.	Manages assets of trusts e.g. bank holding trust assets.	A 'club' formed for a particular purpose – cannot contract in its own name but through members – members have personal liability.	Social Enterprises use a wide variety of forms: Community interest company (CIC) Industrial and provident society (IPS) Companies limited by guarantee or shares Group structures and charitable status
Accountability	Reports directly to the UK Govt Dept under which it resides	Whilst not reporting directly to a UK govt dept, they report to the UK Parliament. As such they need to justify their functions and performance to the UK Parliament.	Reports to a UK Govt Department	Board of Directors appointed requesting shareholders	Has a Governing Board.	Board of Directors appointed requesting shareholders				A social enterprise's main purpose of existing is to fulfil its social and/or environmental goals. This is achieved by reinvesting the majority of the profits back into the business.
Funding	Has a budget allocation which is a sub-set of the overall budget of the UK Govt Dept within which it resides	Funded by the public sector with a specific budget allocation.	Has a specific budget allocation.	Funding can be by Govt but also through private revenue by charging for services	Funding is by way of donation from public or private or individual sources	Funding can be by Govt but also through private revenue by charging for services				Funding can be by Govt but also through private revenue by charging for services
Stewardship/ regulation	Regulation and governance is by means of an Executive (approved by a Minister). The level at which the Agency may recruit its own staff (without approval of UK Govt Dept) would be determined by the Dept under established terms of reference.	Regulation and governance is by means of an Executive (approved by a Minister). The level at which they can recruit their own staff. Governance, would be through an Executive which could delegate downwards to committees and staff in accordance with defined written	Regulation and Governance is by means of an Executive (approved by a Minister). The level at which the Agency may recruit its own staff (without approval of UK Govt Dept) is determined by the Dept under established terms of reference.	Regulation and Governance is by means of an Executive. The level at which the JV may recruit its own staff would be determined under JV shareholders agreement.	Regulation and Governance is by means of an Executive. The Executive can delegate to Committees under terms of written procedures.	Regulation and Governance is by means of an Executive. The level at which the company may recruit its own staff would be determined under company shareholders agreement.				Regulation and governance is by means of an Executive.
Ability to contract/ take on risk/ partner	Entitled to contract with the private sector who may deliver services in fulfilment of the Agency's functions.	Entitled to contract with the private sector who may deliver services in fulfilment of the NDPB's functions.	Entitled to contract with the private sector who may deliver services in fulfilment of the Company's functions.	Entitled to contract with the private sector who may deliver services in fulfilment of the Agency's functions.	Entitled to contract with the private sector who may deliver services in fulfilment of the Agency's functions.	Entitled to contract with the private sector who may deliver services in fulfilment of the Agency's functions.				Entitled to contract with the private sector who may deliver services in fulfilment of the Social Enterprise Model's functions.
Status of staff / Tcs& Cs (include Pensions)	Staff are be employees of the Agency on public sector established terms	Employees on NDPB specific terms (follows public sector practice)	Staff are employees of the Company							Staff are employees
Examples	UK Borders Agency Driving Standards Agency NHS Purchasing and Supply Agency	Natural England Boundary Commission Learning and Skills Council	Forensic Science Service The British Rail Board ('BRB') Residuary Body	National Air Traffic Services	University College and Admissions Service (UCAS).	trade associations (Travel Agents association)				The Big Issue, the Eden Project and Jamie Oliver's restaurant Fifteen are examples of social enterprises.
HIEC Suitability	Possible	Possible	Possible	Possible	Possible	Possible	Not considered	Not considered	Not considered	Not considered

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Member & Chair of Strategic Theme

Patients

Students

Member & Chair of Area Group

Partnership Board

Social Workers

GPs

Midwives

Care Assistants

Health Visitors

etc

Professional Networks

Nurses

AHPs

Doctors

Psychologists

Health Care Scientists

etc

What principles should underpin the governance structure of a HIEC & what will sustain this?

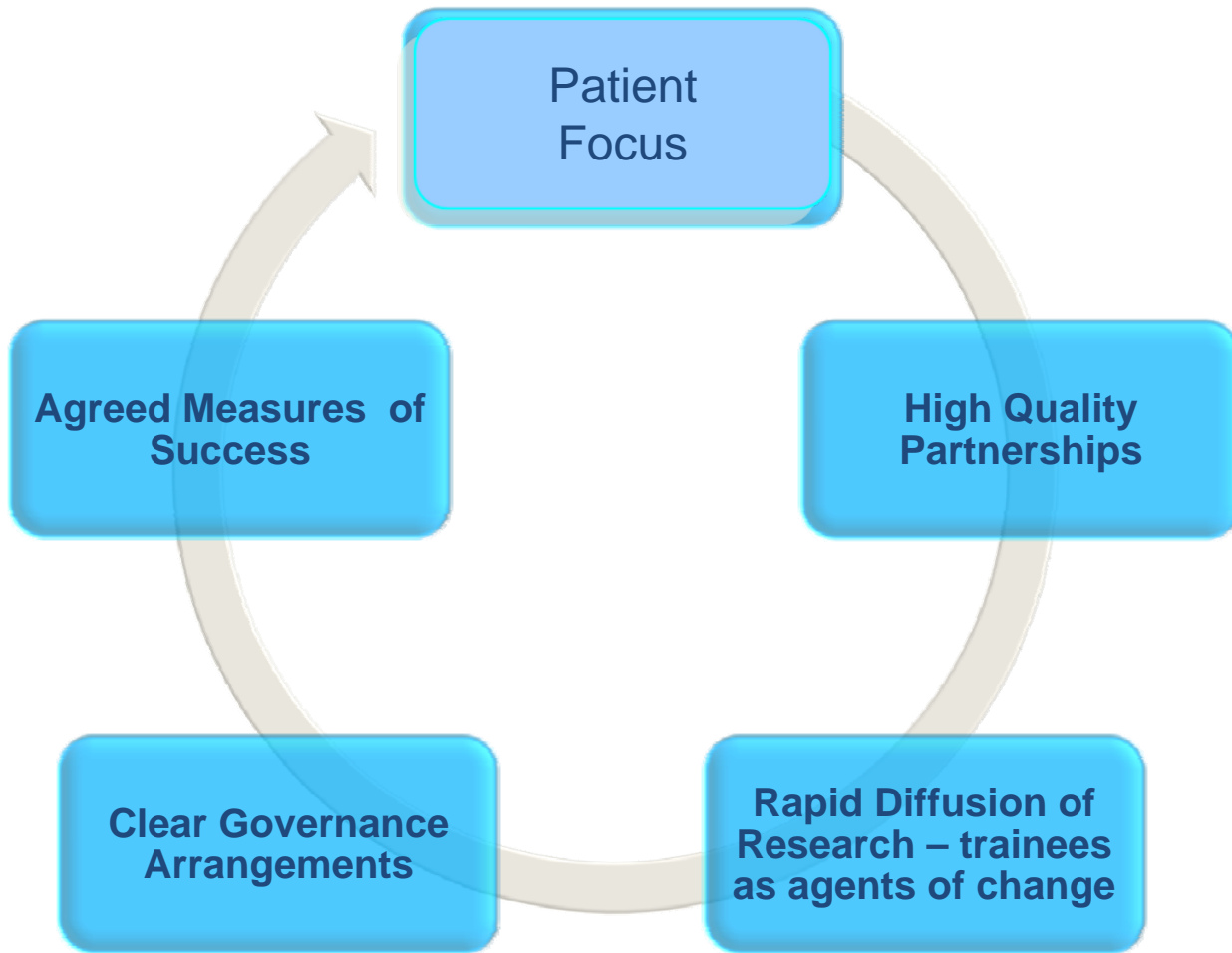# Working together to improve South West Londoners' health and wellbeing

To deliver outputs which are of direct benefit to South West Londoners .

❑Delivering projects which matter to Health and Social Care
❑Through partnership project working
❑Through active dissemination of innovation
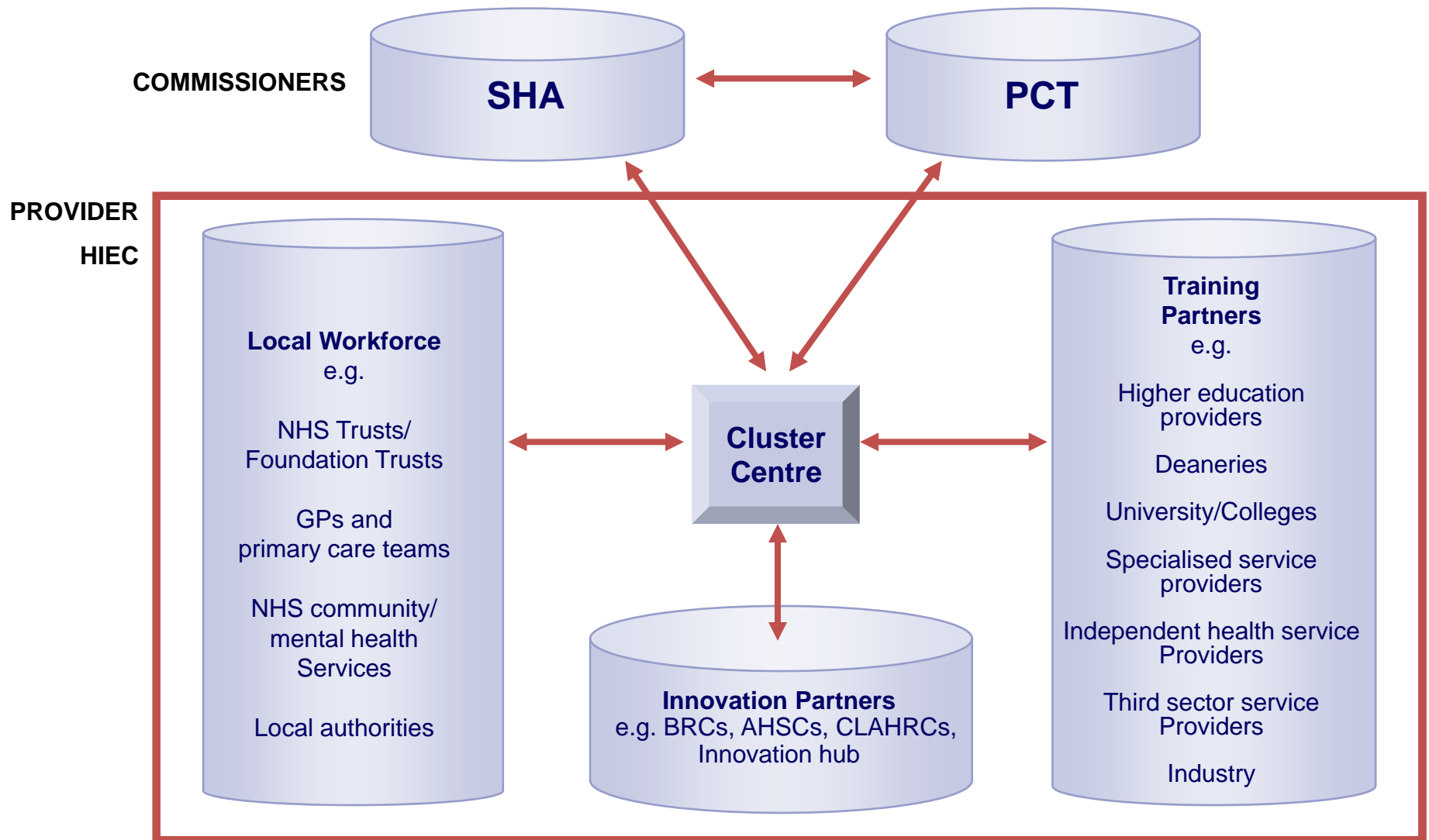❑Using the combined resources of South West London

Any project which is part of the SW London ASHN must have:
  ❑A clear Specification
  ❑ An evaluation of the potential impact
  ❑Means of Evaluating any findings
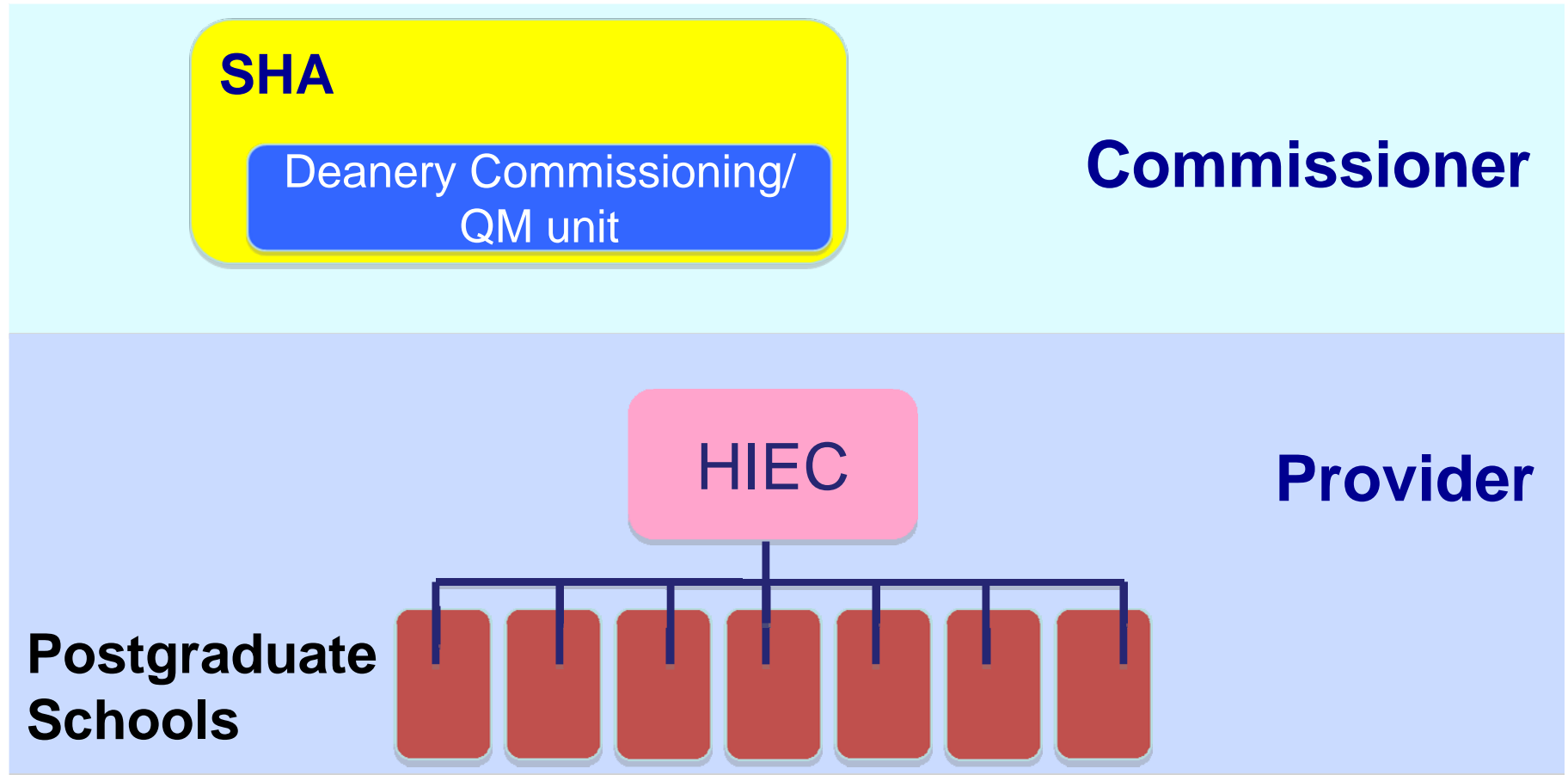 ❑How findings are to be disseminated locally and Nationally

Conditions for Success
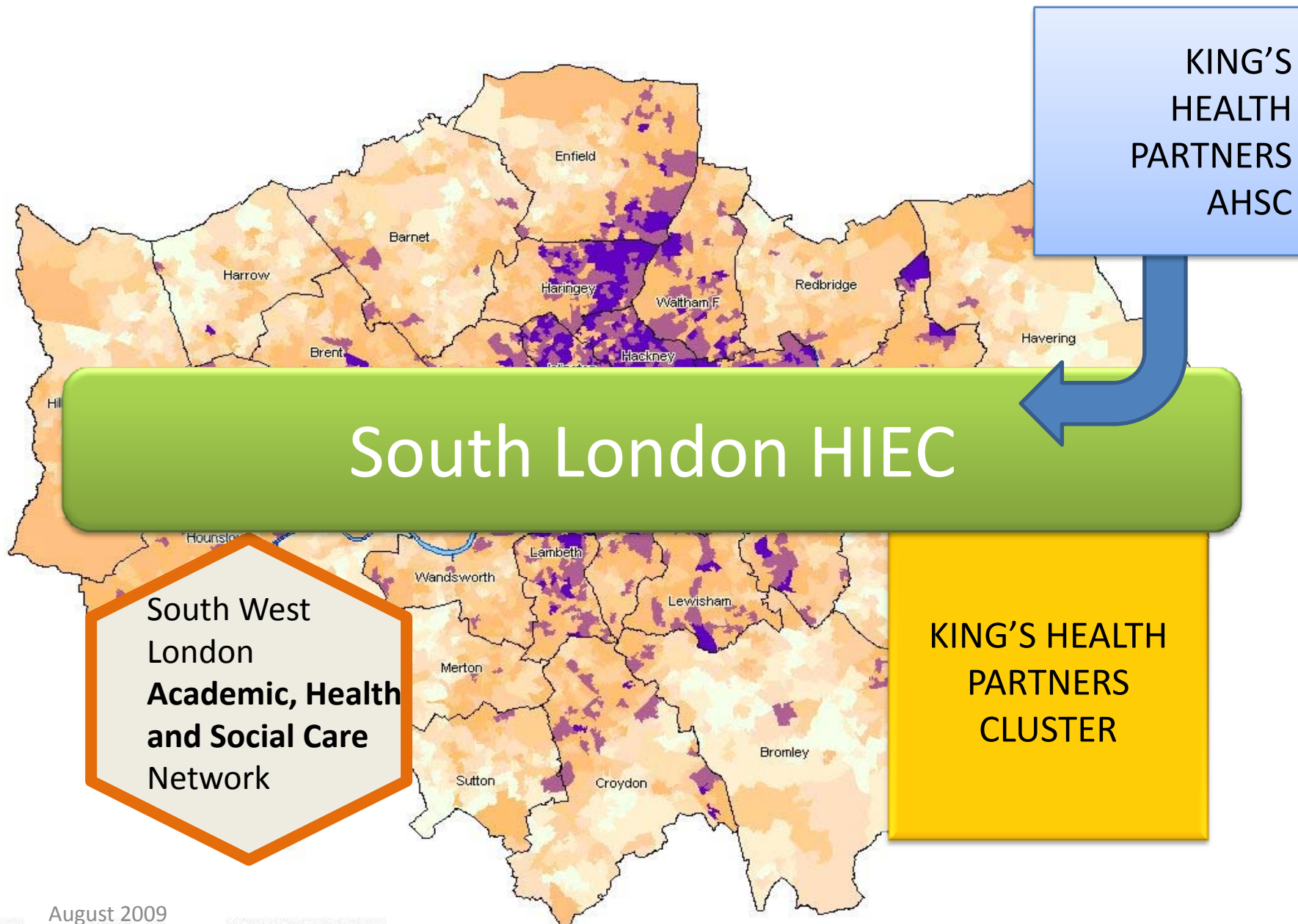
Figure 1 - Partnership Model

COMMISSIONERS

SHA ↔ PCT

PROVIDER

HIEC

Cluster Centre

Local Workforce
e.g.

NHS Trusts/
Foundation Trusts

GPs and
primary care teams

NHS community/
mental health
Services

Local authorities

Innovation Partners
e.g. BRCs, AHSCs, CLAHRCs,
Innovation hub

Training Partners
e.g.

Higher education
providers

Deaneries

University/Colleges

Specialised service
providers

Independent health service
Providers

Third sector service
Providers

Industry

Commissioner-Provider Split

Possible Model B

SHA

Deanery Commissioning/
QM unit

Commissioner

HIEC

Provider

**Postgraduate
Schools**

NHS
North West

The importance of Health Innovation Education Clusters, HIEC, in supporting the health & social care interface in education

- **How will HIECs influence Health Professional Training and be sensitive to Workforce needs?**

- **How will HIECs apply research & innovation into practice?**

- **What principles should underpin the governance structure of a HIEC & what will sustain this?**