



#NottinghamTogether
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Thank you for attending "The Future of Healthcare Technologies: What's the secret to getting better faster?" at [Nottingham in Parliament Day](#), on 25th October 2016.

On a day that celebrated all that's great about Nottingham, this one-day 'takeover' of Westminster was a festival of 45 events attended by over 2500 people and involving over 100 partners from the city and region. Led by the University Of Nottingham, the day highlighted the strengths of the region to policy makers.

Healthcare and life sciences played a big part in the occasion, showcasing the region's research, businesses, partnerships and healthcare teams. Together, these highlighted the strength of healthcare innovation in Nottingham.

In a climate where the demands on healthcare far outstrip resources, getting better value for investment is vital. Innovation and healthcare technology is widely considered to be the only way to address the NHS funding crisis.

With the [Accelerated Access Review](#) final report published just the day before the event, never was there a better time to show how the [Centre for Healthcare Technologies](#), based at Nottingham, is ideally placed to support the goal of getting patients quicker access to innovative healthcare.

About the Centre for Healthcare Technologies

The [Centre for Healthcare Technologies \(CHT\)](#) is a unique collaboration between The [University of Nottingham](#) and the [Nottingham University Hospitals NHS Trust](#). (NUH) Incorporating [CHEATA](#) – a one-stop shop for developers of medical devices - the Centre works with all stakeholders to address major healthcare challenges using technology and helps to speed up access to innovative devices and diagnostics for NHS patients.

So what is the secret to getting better faster?

At Nottingham in Parliament Day, **Louise Scull, Chair of the NUH NHS Trust**, chaired a panel of experts, from academia, healthcare and industry, to explore the challenge of speeding up access to technology and share some solutions, to the audience of policy-makers, funders and businesses.



Professor Steve Morgan, from The University of Nottingham, gave an overview of the latest in healthcare technology innovations. From [monitoring devices to help newborn resuscitation](#) and textile-based sensing to treat chronic wounds, to bacteria-resistant polymer coatings and the next generation of [Magnetic Resonance](#) scanners from our Nobel Prize winning research centre there is no shortage of new developments. So what is stopping these from being taken quickly to market and used by patients?

The panel was asked how companies wishing to introduce technology can navigate the complicated pathway to adoption, know who to talk to and access funding for research and trials. **Dr Darren Clark, CEO of Medilink East Midlands**, highlighted the services of [CHEATA](#), who offer guidance advice and expertise over the complete transition path into healthcare, and talked about the funding available through Innovate UK, NIHR, and through small business grants in addition to the range of the support available from [Medilink](#).

Dr Matthew Clemence, Senior Scientist at Philips Healthcare noted that new technology needs to change the patient pathway for it to warrant investment, and that the pull through of clinical need is vital.

This view was echoed by **Beth Beeson, Consultant Clinical Engineer, at NUH NHS Trust**, who said that where the clinical need is there, the technology will be adopted. **The University of Nottingham's Professor Ian Hall**, added that the new [Biomedical Research Centre](#) will help people access clinicians to shape the development of their technology.

Mark Campbell from the National Institute for Health and Clinical Excellence (NICE) advised that developers should collect evidence as early as possible when technology is used, to help inform its evaluation. Early input from health economists also helps build the evidence base. NICE is producing its guides faster, to help evaluate new technology.

When discussing how to overcome the regulatory hurdles, the panel was unanimous that the **regulations are there for our safety** and ensured high quality technology. Clinical trials can only be simplified if safety is maintained. Even in a Brexit Britain, we will still need to trade with Europe and the rest of the world, so similar regulations would be needed, and they warned against any knee-jerk reactions. Beth Beeson again emphasised that advice available through the [Centre for Healthcare Technologies](#) and [CHEATA](#) will help innovators navigate the path through the regulations.

On **Brexit**, the panel agreed that there could be challenging times ahead, both from a potential loss of an important funding source, but also through restrictions in accessing the expertise and networks across Europe. The panel hoped that the UK government will pick up any gaps in funding and were optimistic that through the strengths of existing international and local partnerships the NHS would retain its status as a world-leading research base for patient benefit.

Louise Scull drew the session to an end recognising that the NHS faces challenging times but was confident that, with the experts we have in Nottingham and elsewhere across the UK, we can rise to meet those challenges and continue to develop and adopt new technologies that bring important improvements to patient care and help the NHS provide efficient and sustainable healthcare.

For further information about the Centre for Healthcare Technologies and how it can support the recommendations of the Accelerated Access Review visit <http://www.healthcaretechnologies.ac.uk/>