

# A regional approach to facilitating local digital clinical safety

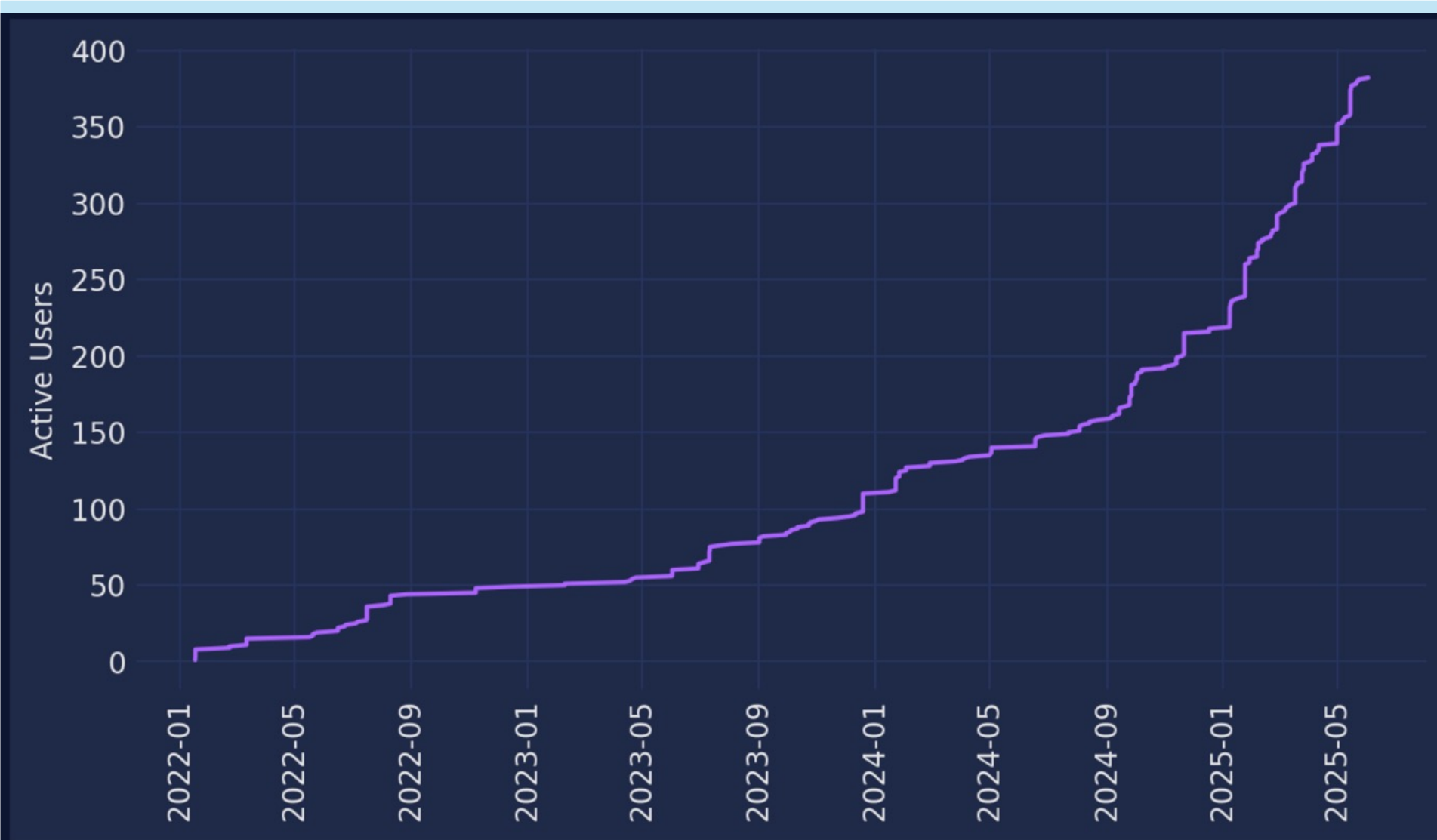
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## NHSE South West’s Digital Neighbourhoods Programme

The Digital Neighbourhoods Programme is rolling out an AI Personalised Risk Assessment tool (Brave AI), which uses an algorithm to look for patterns in patient’s records, assessing their individual risk of unplanned hospital admission in the next year. This information can be used to target offers of proactive, preventative and personalized care to support people to stay well and prevent hospital admissions.

Over 40 PCNs and individual GP practices in the South West are taking part in this regionally NHS-funded programme.



Increase in Brave AI Active Users from 2022 to 2025

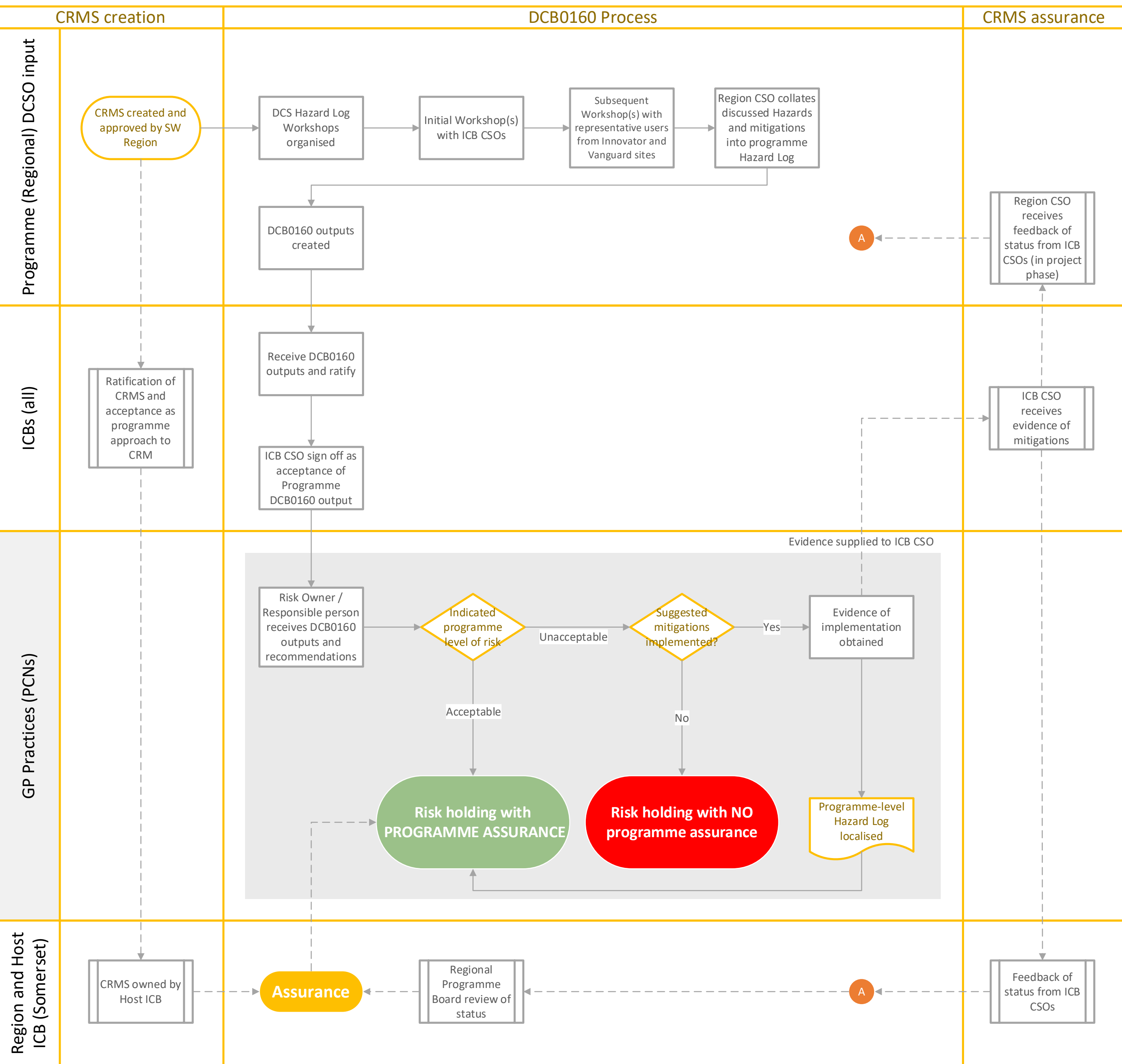
## The Challenge

Safe deployment of AI tools in clinical settings requires substantial time, specialised expertise, and access to relevant stakeholders to complete rigorous digital clinical safety processes and documentation. These requirements present significant challenges, particularly for local organisations, and can impede the safe implementation of clinical AI technologies.

## Regional Approach to Digital Clinical Safety

A regional approach streamlines the clinical safety process by minimising duplication of effort across local teams. It facilitates access to key stakeholders and digital clinical safety experts, thereby reducing the time and resource burden on individual organisations and supporting more efficient implementation of clinical AI technologies.

AI Fellows supported with the localisation of this Digital Clinical Safety approach in PCNs. This involved supporting the development of SOPs to align with local priorities and supporting the localisation of Hazard Logs to identify local mitigations, ensuring acceptable levels of residual risk.



## Reflections from Regional Team

- It’s a long but valuable process.
- The inclusions of SOPs in the approach made the process more understandable and real.
- Need to be clear of the necessary assurance feedback loop from the start (e.g. share completed SOPs?).
- There’s a balance between a prescriptive process that is quicker and easier versus a process that prompts more thought about the localisation of digital clinical safety but requires more time and therefore may be a barrier to deployment
- Local knowledge of digital clinical safety was variable .
- Approach could be scaled up or down.
- Approach could be applied to a type of tool, rather than a specific brand.

## Next Steps

- Final PCNs completing their SOPs and localisation of Hazard Log
- Evaluation of Brave AI deployed throughout the South West
- Applying this regional approach to Ambient Voice Technology

Swim lanes diagram outlining the Digital Clinical Safety Governance Process