

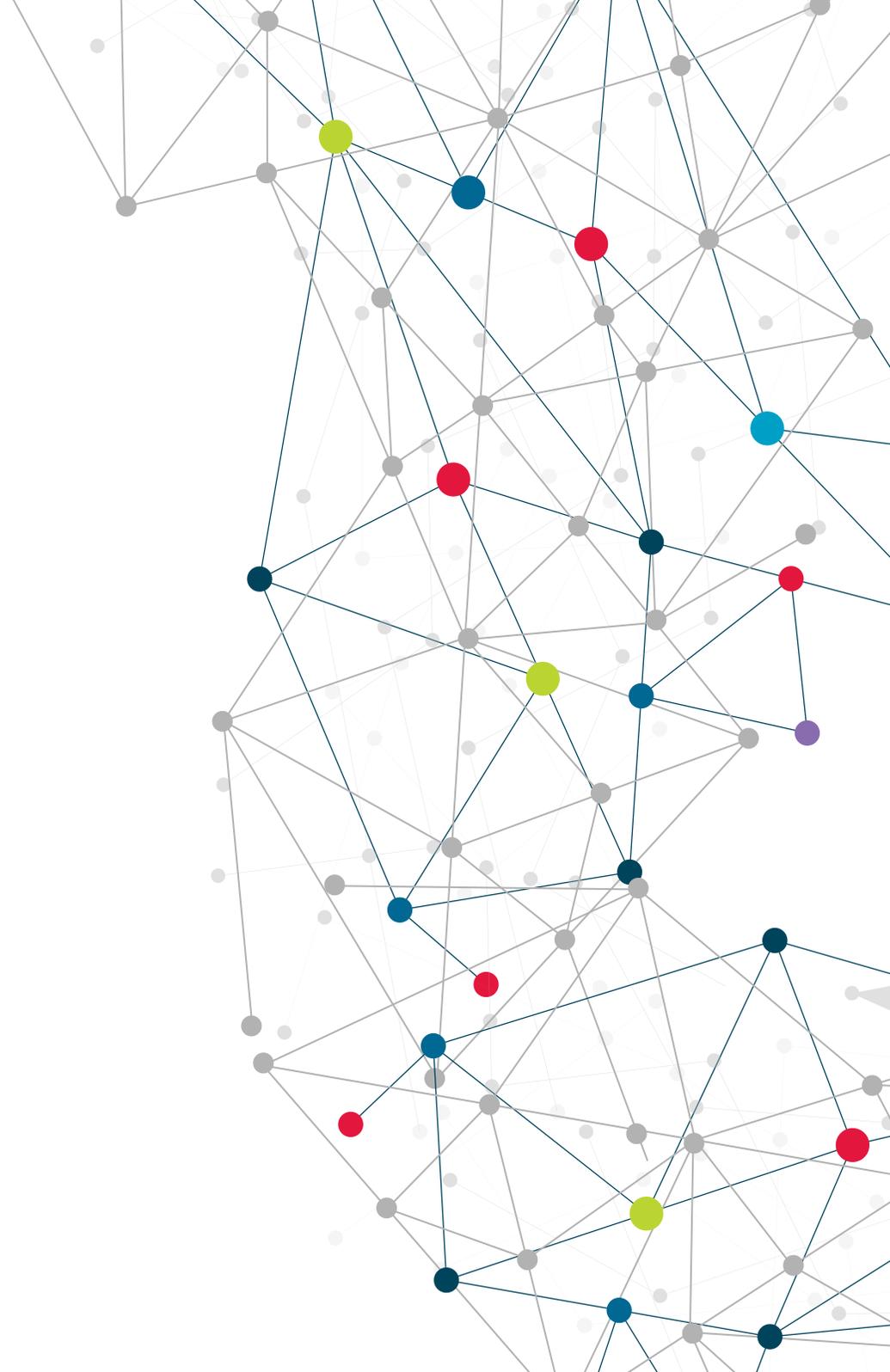
Agency for Clinical Innovation

Strategy

2023–2026



AGENCY FOR
CLINICAL
INNOVATION



Message from Board Chair and Chief Executive

Innovation is the lifeblood of a successful healthcare system. Each day, thousands of people across NSW Health strive to improve services for their patients. The Agency for Clinical Innovation (ACI) plays a pivotal role in those efforts – leading, connecting, fostering and enabling clinical innovation across the system.

We heard from hundreds of stakeholders as we created this strategy. Their counsel was crystal clear – be bold, be ambitious, be innovative in fostering clinical innovation.

This plan builds on our core competencies however, it does not represent a continuation of business as usual. Instead, it signals significant change in how we work as an organisation and how we partner with clinicians, consumers, system leaders and innovators across NSW Health.

Over the past year, the crucial role that innovation plays in improving the health of the people of NSW has become apparent. The pandemic response, the publication of the Future Health Strategy and the establishment of the new Regional Health Division each present opportunities to innovate.

The emergence of virtual care provides opportunities to significantly improve patients' access to healthcare. We will tailor our strategies to local needs, particularly in rural, regional and

remote communities, to bring about changes that will improve patient experiences and outcomes.

Enacting our new strategy will involve re-balancing the work we do to enhance our focus on projects that push forward transformational change. While we recognise that fully achieving all aspects of the strategy may not be possible in a 3-year timeframe, the ambitious agenda will provide impetus for the future. Recognising that change is disruptive, we will continue to invest in our people to enhance our organisational capability and in our partnerships to support system readiness for change.

We will build on our strong foundations of engagement, clinical evidence and guidance and in redesign and implementation to push the boundaries of innovation.

Our mission remains centred on helping clinicians and healthcare leaders to embrace innovation – supporting them to know, to act, to connect, to work towards better, fairer, sustainable healthcare.

Professor Andrew Wilson
ACI Board Chair

Dr Jean-Frédéric Levesque MD PhD FRCPC
ACI Chief Executive

Message from the Minister for Health

New South Wales has the biggest health system in Australia. Its size and complexity demand constant innovation to deliver change and transformation that improves the lives of citizens.

The ACI has an important function in bringing clinicians, patients and their carers, and leaders from across the state together to develop, test and embed new ways to deliver care.

The valuable insights that each partner brings to this working relationship ensures that changes to clinical care are evidence-based and drive value, meet the needs of patients and their loved ones, and provide an enriching environment for health workers.

I would like to acknowledge the doctors, nurses, healthcare professionals and managers for their enduring commitment to improving our health system and delivering high quality care to patients. Thank you for your dedication, it is what underpins our world-class health system.

The Hon. Brad Hazzard MP
Minister for Health

About the Agency for Clinical Innovation

Our mission and purpose

We are the lead agency for clinical innovation in New South Wales.

We work with clinicians, consumers and system leaders to improve the health system in NSW.

We do this by designing and implementing new ways to deliver care for patients.

We partner with clinical innovators, other organisations and people within NSW Health, and patients and carers.

We work together to achieve better value in healthcare by improving patient and provider experience, improving patient outcomes and delivering efficient and sustainable healthcare services.

Our partners

As one of the five pillars in the health system, we work closely with organisations across NSW Health and beyond.

We collaborate on key initiatives to ensure the continuous delivery of quality healthcare to the people of NSW.

What is clinical innovation?

Innovation refers to something new, such as an invention, or the practice of developing and introducing new things.

In the health sector, innovation is often used to describe new technologies or treatment, renewal or transformation of clinical practice, or the introduction of new ways of working.

Our remit includes innovation as:

- the design of new models of care or their introduction into a new care setting
- transforming the way care is delivered to harness new technologies or therapeutics

We support, promote and implement innovations that are:

- person-centred: they consider the person, their context, their needs and their expectations
- clinically led: they harness the leadership and experience of clinicians in design and implementation
- evidence-based: they have a strong demonstrated or potential impact on people, clinical care or the healthcare system
- value-driven: they strive to improve healthcare effectiveness, efficiency and sustainability.

Our full role and functions are outlined in the [Determination of Functions](#).



About the Agency for Clinical Innovation

Our people

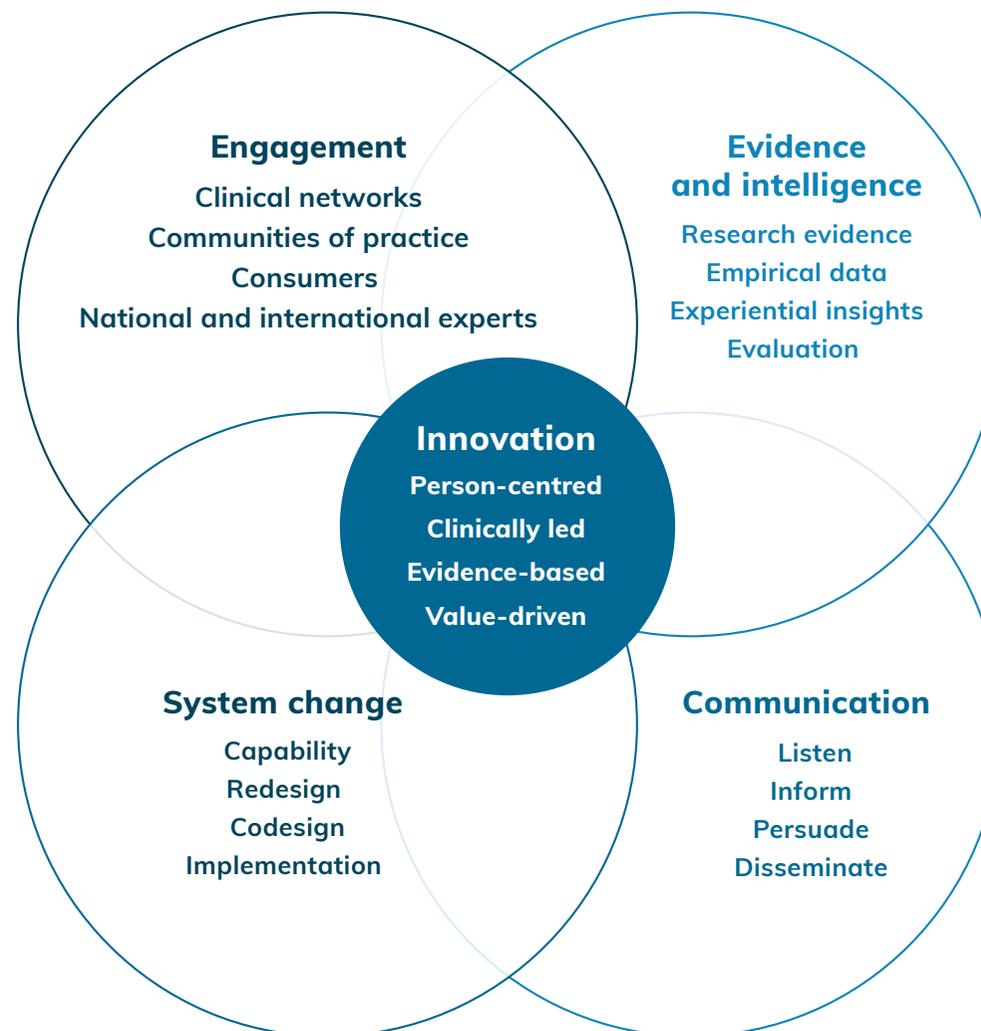
We have expertise that help drive innovation across **clinical and consumer engagement, evidence and intelligence, system change and transformation, and communication.**

Our clinical networks are core to our innovation remit and act as an important connector to engage clinicians and consumers. Our expert teams provide methods and insights to drive change in real healthcare settings.

Our people are vital to achieve this strategy. We will harness the diversity of expertise that makes innovation work. We will take care of our staff, focusing on wellness, capability development and diversity and inclusion.

Together, we aim to support innovation for better, fairer and sustainable healthcare.

Our key areas of expertise



Strategy map

We contribute to NSW Health's vision for a sustainable health system that delivers outcomes that matter to patients, is personalised, invests in wellness and is digitally enabled.



Our priority challenges

We will contribute to addressing priority challenges that our stakeholders have identified. These challenges support our mission for better, fairer, sustainable healthcare and align to the Future Health Strategy.

- 1. Integrating care for patients at the interface of hospital, primary, community and social care services** – implementing innovations that streamline patient journeys, supports providers’ connectivity and embraces the system’s complexity.
- 2. Reducing unwarranted clinical variation and promoting high-value care** – using analytics to show variation in whether, how, and how well care is delivered; and novel approaches to identify, assess and propose innovations to address variation.
- 3. Redesigning healthcare to facilitate the adoption of health technologies, including new therapies and clinical processes** – establishing pathways for rapid assessment, adoption and implementation of innovations; and ensuring clinical systems are prepared for emerging technology.
- 4. Implementing virtual care and digitally-enabled models of care** – supporting local services to embed digital healthcare approaches that enhance the delivery of care.
- 5. Supporting equity in access and outcomes of care** – identifying unmet need, disparities in access and outcomes across vulnerable groups and areas that innovative models of care can address; particularly for Aboriginal people and rural and remote communities.
- 6. Delivering person-centred and culturally appropriate care** – harnessing the power of patients, carers and families’ voices alongside clinician expertise to co-design innovations in healthcare; particularly focusing on partnering with Aboriginal communities to champion culturally appropriate models of care.
- 7. Fostering sustainability in healthcare** – systematically considering and addressing issues of financial and environmental sustainability in the identification, design and implementation of clinical innovations.

Strategy 1: Taking a portfolio approach to clinical innovation

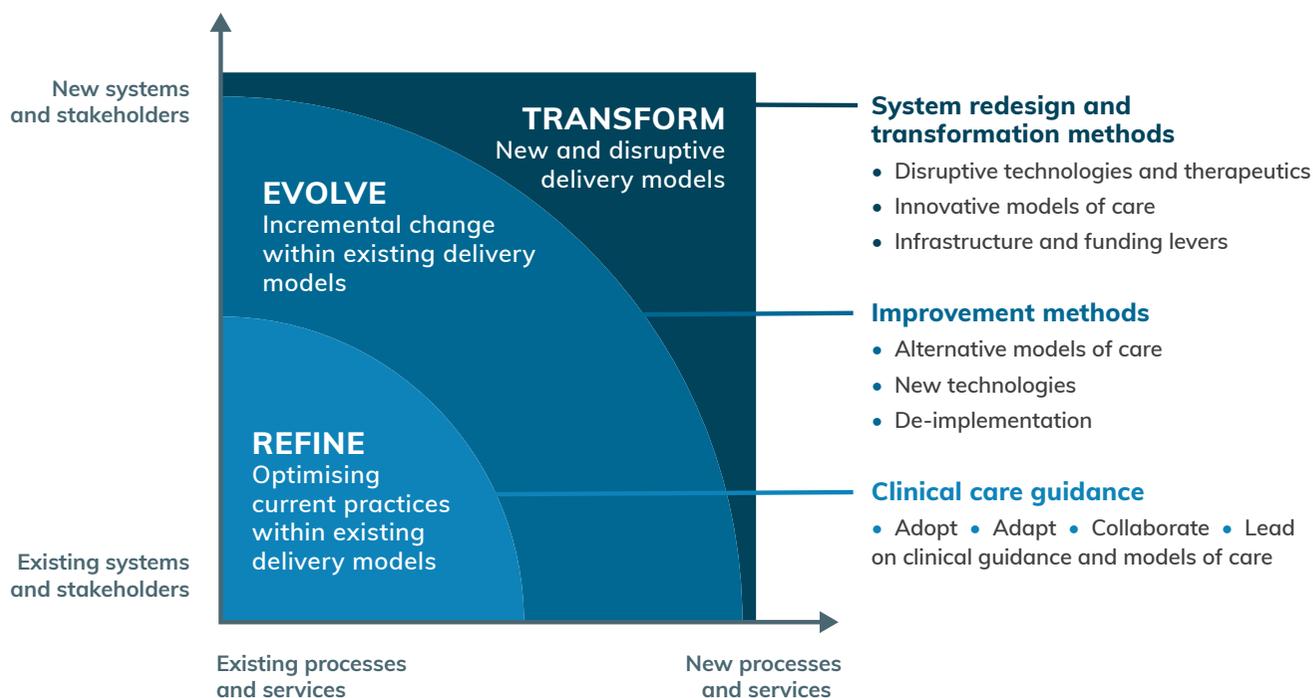
As an organisation, we will optimise the impact of our work by balancing resources across our portfolio of innovation initiatives. This will allow us to maintain our leadership in clinical care guidance whilst supporting incremental change to clinical practice and the introduction of transformational programs at a system level.

Building on our successes in developing clinical guidance and models of care, we will take a managed and purposeful approach to prioritising our projects and programs. We will focus on three tiers of innovation – refine, evolve, transform – and ensure we balance our portfolio of work across each tier.

Projects assessed to have high value potential will be carefully progressed from pilot projects to scaled programs using a pipeline approach to innovation.

Large scale programs are resource-intensive and require rigorous prioritisation, the establishment of partnerships, investment and extensive engagement across the health system.

A continuum of innovation



Adapted from Nagji B, Tuff G. *Managing your innovation portfolio*. Harvard Business Review. May 2012.

A portfolio approach means that we will support a range of projects and programs of varying complexity and scope. We will manage them in an integrated way to allow us to consider new opportunities and determine whether reprioritisation, hiatus or de-implementation is required to progress emerging high-value projects. This approach will support us to manage our activity within available resources, optimise the impact on clinical care and mobilise the right resources to achieve a balance of projects at an organisational level.

Strategy 1: Taking a portfolio approach to clinical innovation

Refine

For many years, the core business of our clinical networks has been the development of clinical guidance and models to enhance the delivery of care. We will seek to maintain these high standards while mobilising resources for new programs of work by leveraging the work of organisations with a similar mandate.

To ensure our teams and clinical networks can focus on *Evolve* and *Transform*, we will harness new methods of developing and updating our guidance. This will involve a systematic approach to look to:

- **adopt** – using rigorously developed clinical guidance and models of care that are successfully in place at the local level or in other jurisdictions, ensuring they meet appropriate standards for NSW
- **adapt** – making alterations to clinical guidance from local districts or other jurisdictions to ensure they fit with the NSW context
- **collaborate** – working with local partners or other jurisdictions that are leading the development of new clinical guidance
- **lead** – taking responsibility for the development of clinical guidance that is a priority across local areas or for NSW.

Evolve

Incremental change, through the introduction of innovation, represents modest but impactful shifts in clinical care. Practices change by incorporating new technologies, adopting new behaviours or modifying processes.

We will work in partnership with clinicians, consumers and system leaders to support services to integrate new ways to deliver care. We will do this by:

- **embedding alternative models of care** – working with local services to embed novel health technologies, incorporating therapeutics and processes that aim to provide care in lower acuity and less resource-intensive settings
- **supporting implementation and de-implementation** – working with local health districts to implement new models of care or emerging technologies into existing systems, while helping clinicians and local practices to reduce the provision of care not supported by evidence and standards of practice.

Transform

Technological advances, knowledge breakthroughs and step changes in healthcare environments all provide opportunities for clinical innovation. Harnessing those opportunities can disrupt established ways care is delivered and require fundamental changes in how care is organised, managed, funded or regulated. Realising their potential will demand considered and comprehensive service redesign.

To support transformative change in healthcare, we will:

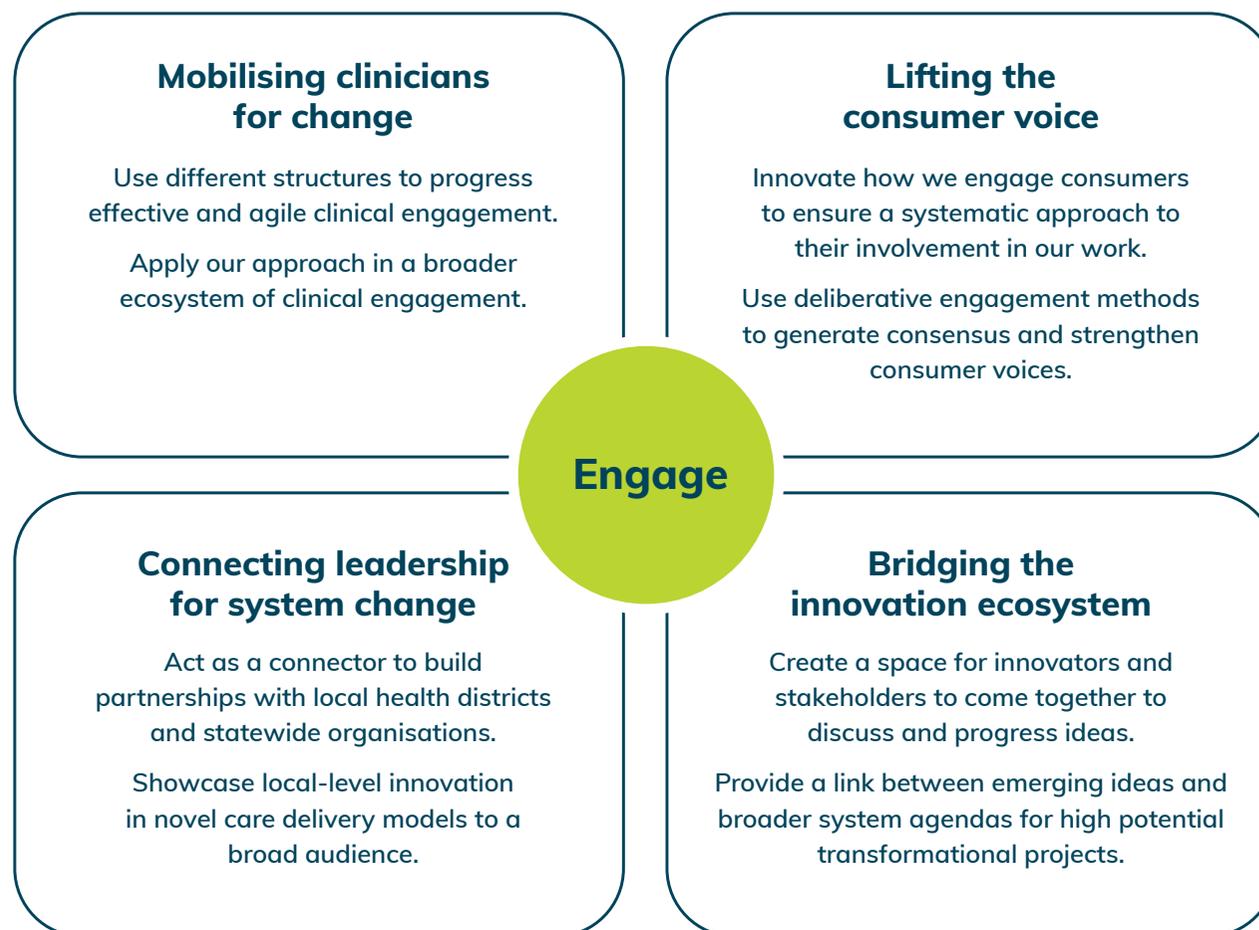
- **catalyse system redesign and innovation implementation** – supporting the design and implementation of statewide programs that fundamentally transform the way care is delivered, including digitally-enabled clinical care and innovative health technologies
- **support system-readiness for innovation** – working with local and statewide partners to redesign healthcare to better be able to integrate and harness the benefits of emerging innovations.

Strategy 2: Engaging – partnering with agility

Across our organisation, we will act as a connector to clinicians, consumers, system leaders and innovators to design, promote and implement change in clinical practice.

System change and innovation in a complex healthcare system requires building mutually beneficial partnerships with a cross-section of stakeholders and organisations. We will use rigorous and dynamic methods to draw expertise into our clinical projects and programs. We will:

- use a variety of models to mobilise expertise, including clinical networks, reference groups, consumer groups panels and time-limited taskforces.
- work with a wide range of stakeholders using different methods to foster meaningful and productive collaboration, including partnerships with priority populations and the Aboriginal health sector
- expand our engagement function by bridging health and innovation precincts, entrepreneurs and other elements of the innovation ecosystem required to cultivate dynamic change and transformation.



Strategy 2: Engaging – partnering with agility

Building on our legacy of clinical engagement

We have strong foundations, spanning many years, of fostering a clinical voice via our 40+ clinical networks.

Our model for clinical engagement identifies the principles, enablers, structures and processes to support clinical engagement across the NSW Health system.

The model seeks to:

- facilitate clinicians to work together to improve patient experiences and outcomes
- broaden clinical engagement to ensure vibrant networks with a sustainable and dynamic membership and leadership
- balance emerging and system-led initiatives
- strengthen our role in facilitating communication between clinicians and system decision makers
- enhance our reputation as a trusted and credible partner for health system improvement.

It recognises the range of engagement structures needed to support this important work.

Strengthening consumer voices and engagement

We are committed to strengthening the ways in which we partner and work with consumers, carers and communities.

Our guide for working with consumers provides a foundation for a partnership approach. As our approach matures, the methods we use to work with consumers will also evolve and change.

We intend to push the boundaries of consumer engagement, including:

- increasing our use of deliberative approaches to foster a stronger consumer voice in our work
- strengthening our collaborative work with consumers, promoting truly participatory design in our innovations
- involving consumers early and throughout the change process
- supporting consumers to co-lead or lead projects
- ensure cultural appropriateness by engaging Aboriginal communities and organisations.

Culturally appropriate care for Aboriginal people and communities

We acknowledge the significant disparities in health and healthcare between Aboriginal and non-Aboriginal people in NSW.

Designing culturally appropriate healthcare and improving health outcomes for Aboriginal people involves connecting with the community and embedding Aboriginal ways of being, knowing and doing into our work.

Many of our clinical networks co-design and implement initiatives that consider the unique needs of the Aboriginal community to ensure the delivery of culturally safe, trauma-informed and patient-centred care.

Our teams embed the *8 Aboriginal Ways of Learning* approach to inform clinical and community initiatives aimed at improving healthcare for Aboriginal communities.

We are committed to work in partnership with Aboriginal people to achieve the highest level of health for individuals, families and communities. This commitment means we will prioritise building respectful relationships with Aboriginal communities to deliver sustainable health outcomes, including contributing to Closing the Gap priority focus areas.

Strategy 3: Informing – triangulating sources of evidence

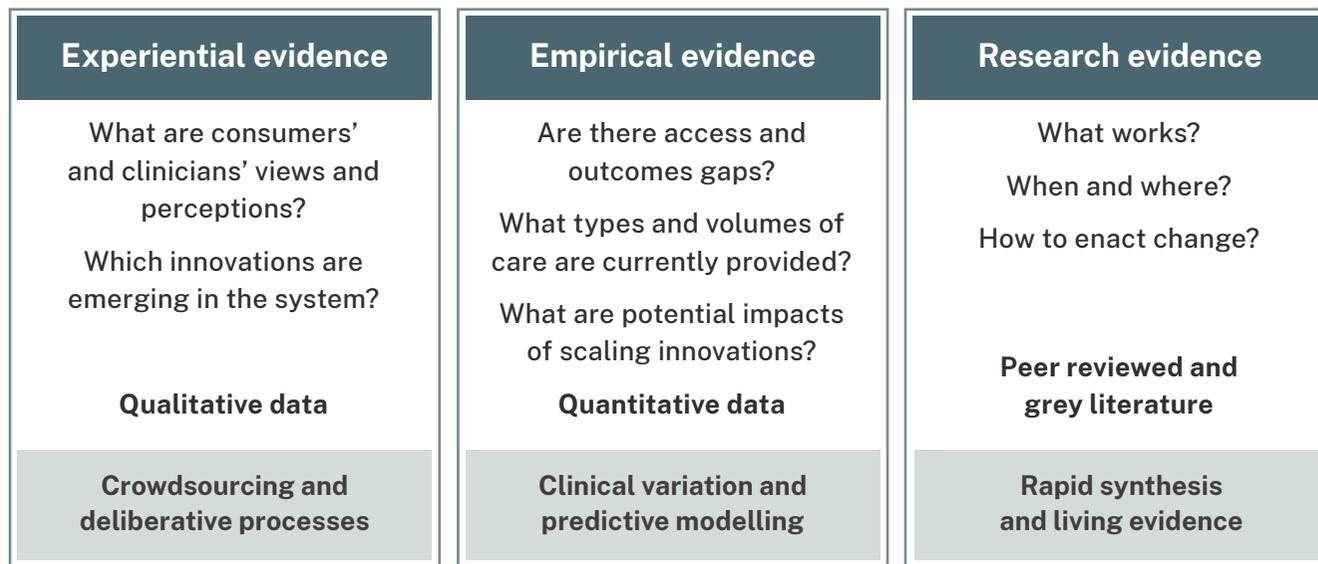
We will use innovative methods to generate evidence and intelligence to guide the identification, assessment, prioritisation and translation of innovation.

Innovation in healthcare is increasingly driven by rigorous and rapid evidence. Evidence is central to catalysing, assessing, shaping, adopting and evaluating innovations.

However, evidence is not uni-dimensional and encompasses clinician and consumer insights, data and analytics, and academic research.

We will:

- integrate various types of evidence, perspectives and contextual insights to create multi-faceted intelligence to inform decisions about innovation
- adopt agile and rapid synthesis methods to support production and maintenance of clinical guidance
- partner across the system to capitalise on emerging data sources, techniques and analytic approaches
- further the use of implementation science-informed approaches to translate evidence into practice.



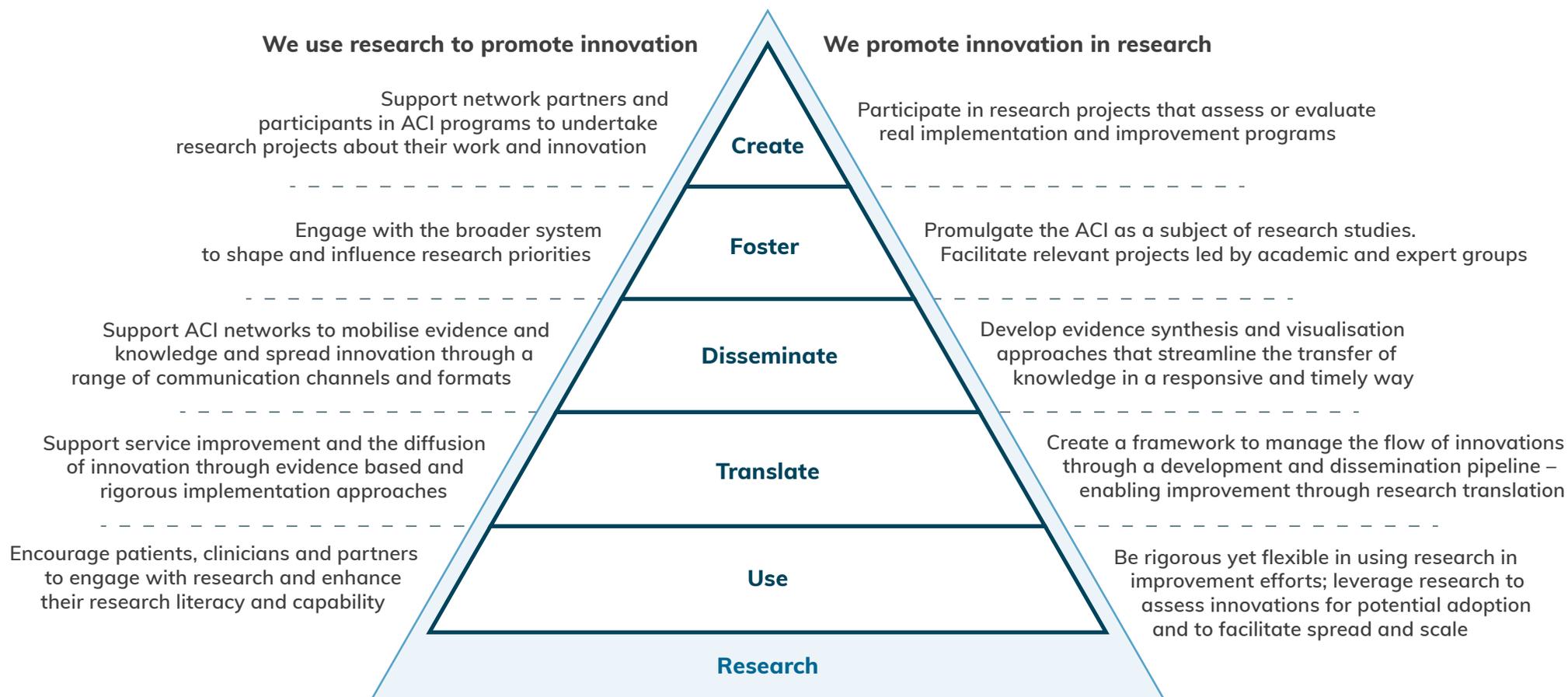
Our approach to informing through evidence includes:

- using automation to undertake rapid, but thorough, synthesis of academic literature and policy approaches in place internationally
- gathering experiential information via emerging methods such as crowdsourcing, and social media
- creating agile collaborative partnerships to streamline evidence generation across jurisdictions
- furthering rapid evaluation techniques to inform policy and clinical change
- developing novel approaches to build a multifaceted, accessible evidence base.

Strategy 3: Informing – triangulating sources of evidence

Harnessing research

We will support a strong evidence base to our work by enhancing our use, translation and dissemination of research. We will be proactive in our research approach, partnering with organisations and academic groups to foster and create innovative ways to research innovations and their implementation in real health systems.



Strategy 4: Enabling – a toolbox of improvement and transformation methods

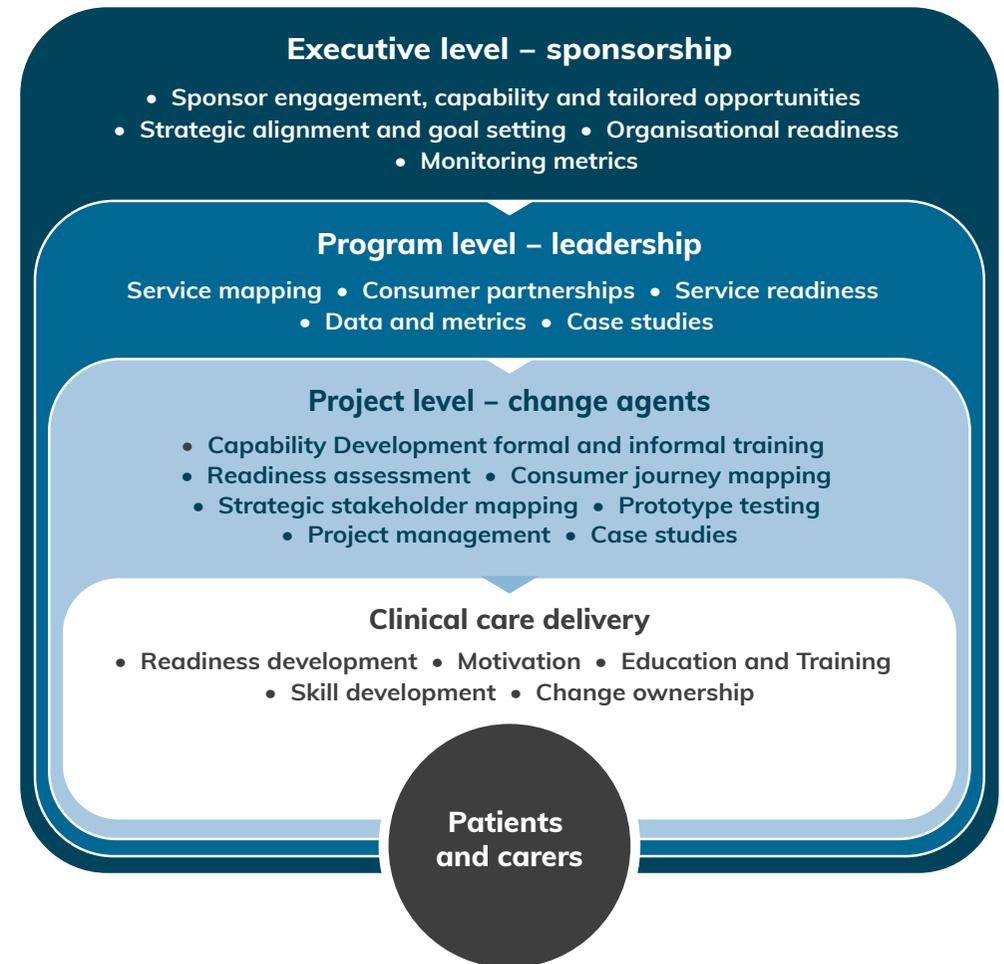
Our teams will focus on unlocking potential and building capability for redesign and implementation of change. We will use a variety of methods to enable innovation and change that is responsive to context and tailored to local needs.

We work closely with clinicians and consumers, change agents and leaders to implement and embed changes in clinical practice.

We will drive momentum for change by expanding – and giving access to – our toolbox of improvement and transformation methods. The toolbox encompasses flexible implementation approaches, utilises design and creative thinking approaches and leverages health services research expertise.

We will enable system change by:

- showcasing local innovations and connecting people with innovations
- creating space and opportunities to redesign for future-ready care delivery systems
- supporting culture and behaviour change
- promoting creative and ‘outside the box’ thinking
- partnering and collaborating with other agencies and across the system.



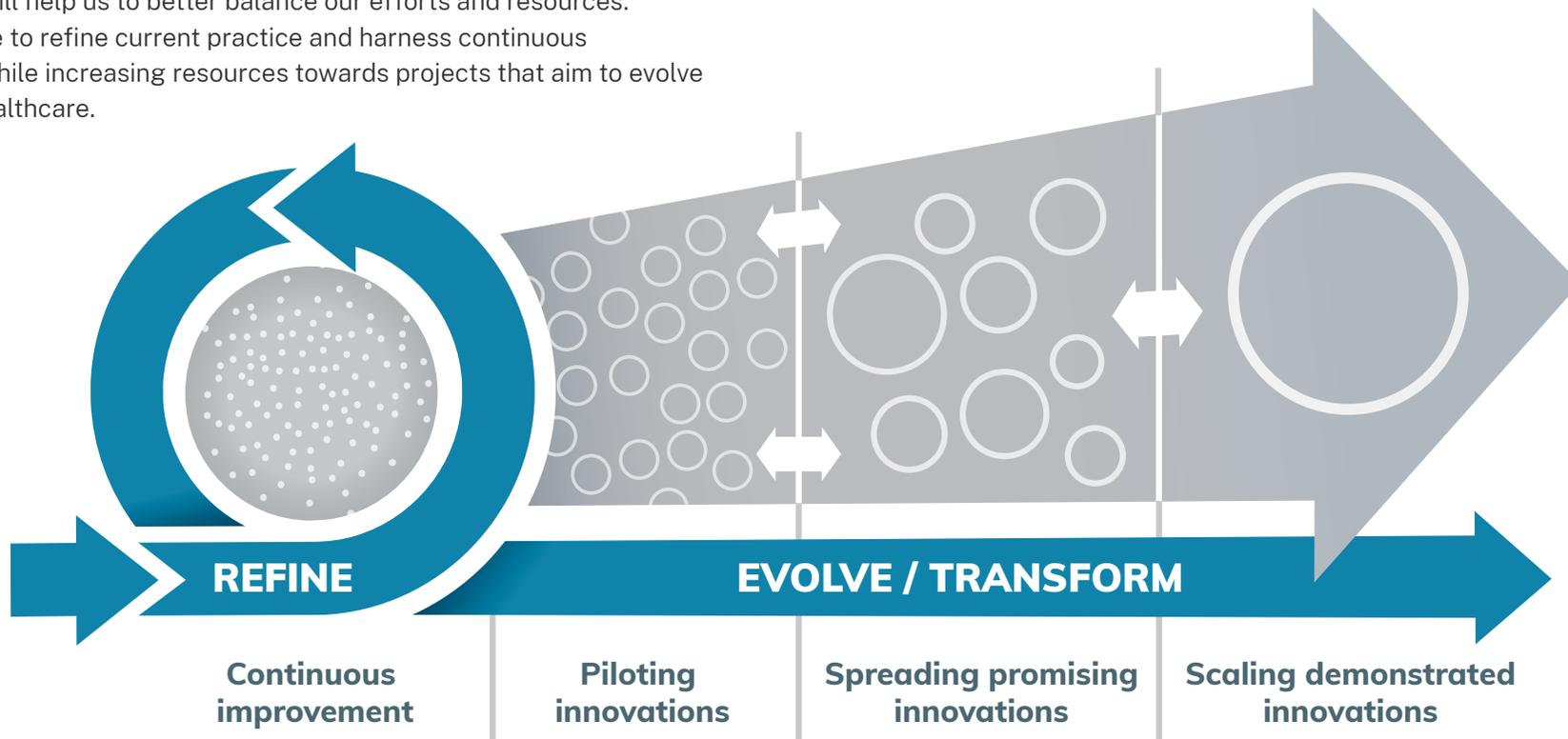
Bringing the strategy to life: managing the pipeline of clinical innovation

Our pipeline of clinical innovation is a managed and purposeful approach to identify, test, spread and scale ideas which demonstrate a high potential to transform clinical care.

It represents the concentration of projects across the refine (continuous improvement), evolve (piloting promising innovations) and transform (scaling demonstrated innovations) stages of innovation.

The approach will help us to better balance our efforts and resources. We will continue to refine current practice and harness continuous improvement, while increasing resources towards projects that aim to evolve or transform healthcare.

Innovations that have high-value potential will progress through the pipeline to the evolve/transform paths based on evidence synthesis and evaluation, redesign, piloting, and planned spread and scale.



Bringing the strategy to life: managing the pipeline of clinical innovation

	REFINE Continuous improvement	EVOLVE / TRANSFORM Piloting innovative ideas Spreading promising pilots Scaling demonstrated innovations	
Engaging	<ul style="list-style-type: none"> Engage with a diverse and representative range of clinicians, consumers and other stakeholders to define gaps and build consensus on best practice models Leverage clinician and consumer expertise to adopt, adapt, collaborate or lead development of clinical guidance and models of care Support clinical leaders to promote models of care and support clinical adoption 	<ul style="list-style-type: none"> Clinicians, consumers and system leaders (including primary care) scan promising innovations emerging in the system ACI provide input, support and constructive critique to confirm promising innovations Clinicians select to pilot an innovation in their area with support of system leaders Partners support clinicians to design new models 	<ul style="list-style-type: none"> Harness clinician and system leader expertise (including primary care) in determining innovations to scale Establish clinical leadership and executive sponsorship Provide a broad, flexible and locally-tailored approach to implement at scale Partners support clinicians to implement across different areas
Informing	<ul style="list-style-type: none"> Experiential evidence informs development of clinical guidance and models of care Data is used to assess clinical practice and variation in care Evidence checks support development and review of clinical guidance and models of care Collaborative partnerships streamline evidence generation across jurisdictions Agile and rapid synthesis methods 	<ul style="list-style-type: none"> Formative and rapid evaluations Reviews of research evidence and data modelling demonstrate potential value Implementation of scientific approaches to piloting emerging innovations 	<ul style="list-style-type: none"> Implementation and impact evaluations Evidence to demonstrate value Prioritisation of high value innovations to spread and scale Implementation of scientific approaches to spreading and scaling demonstrated or promising innovations
Enabling	<ul style="list-style-type: none"> Facilitate rapid cycles of improvement Support use of a revised approach to providing clinical guidance and models of care (adopt, adapt, collaborate, lead) Develop clinicians' improvement capabilities 	<ul style="list-style-type: none"> Showcase local innovations Promote creative thinking Test prototypes Determine service readiness Support behaviour change Develop clinicians' innovation capabilities 	<ul style="list-style-type: none"> Promote creative thinking Assess organisational readiness Share flexible and tailored implementation approaches Support behaviour change Develop clinicians' implementation capabilities

Appendix 1: Key insights from consultations that informed our strategy

We conducted extensive consultation prior to developing this strategy. Below is a summary of the key themes that emerged from our stakeholders' feedback, and how we have used these insights to inform the strategy.

1. Identify a clearer strategic vision that outlines our value-add to the system

We contribute to the NSW Health vision of a sustainable health system that delivers outcomes that matter most to patients and the community, is personalised, invests in wellness, and is digitally enabled. We do this through the design and implementation of clinical innovation for better, fairer, sustainable healthcare.

2. Put focus on innovations that address priority challenges

We will focus our work on issues related to the integration of care, reducing unwarranted clinical variation, redesigning healthcare to facilitate the adoption of new health technologies and support the implementation of virtual and digitally enabled models of care. We will focus on addressing issues of sustainability, equity, person-centeredness and cultural appropriateness of care. These are priority challenges that align with our programs of work and where stakeholders identified we could make a valuable contribution.

3. Create more space for innovation and transformation

We will implement a portfolio approach to manage our resources and balance our work to create more space for innovation and transformative delivery models.

4. Leverage the work of local and jurisdictional partners and avoid duplication

We will purposefully avoid re-inventing the wheel and duplicating work by adopting available rigorous, evidence-based clinical guidance, adapting proven best-practice models to our context, considering each unique community's context, culture and needs, collaborate on or lead on new models of care and clinical guidance, in partnership with other organisations and jurisdictions nationally and internationally.

5. Showcase and promote emerging innovations to evolve healthcare

We will work in partnership with clinicians, consumers, system leaders and local partners to embed novel technologies, therapeutics and processes that provide value-driven care. This will increasingly occur in lower acuity and less resource-intensive settings such as in the home, virtual care, community-based organisations, primary care and non-admitted models of care, which will rely on multidisciplinary team collaboration.

Appendix 1: Key insights from consultation that informed our strategy

6. Be bold and catalyse transformative innovation

We will support the design and implementation of statewide programs that more fundamentally transform the way care is delivered and support the redesign of healthcare to better integrate and harness the benefits of emerging innovations. These will include adaptations to specific regional health care needs, including cultural adaptations for Aboriginal people and communities.. As part of transformative innovation, we will consider diversity, equity and inclusion elements of the workforce.

7. Innovate and be more agile in how we engage clinicians and consumers

We will use a variety of engagement models, ranging from clinical reference groups or panels to clinical networks, taskforces and consumer groups or councils to ensure we can mobilise clinical and consumer expertise purposefully. We will ensure that diversity and inclusion elements are addressed in our engagement with communities / consumers.

8. Create stronger partnerships and respond to the needs of local health districts and specialty networks

We will work with a wide range of stakeholders and organisations using different methods of engagement and support to foster meaningful and productive collaboration. We will expand our engagement function for innovation by proactively connecting system leadership for innovation and bridging various parts of the innovation ecosystem required to foster clinical innovation and transformation.

9. Leverage critical intelligence and predictive methods

We will use innovative methods to generate evidence and intelligence in order to guide the identification, assessment and translation of innovation. This will involve further mobilising research evidence, using data to better understand clinical variation and gathering consumers' and clinicians' insights about innovative models.

10. Support disinvestment alongside innovation

Innovation often requires disinvesting in previous ways to deliver care – making space for the new. We will work with partners to identify the required changes to how care is planned, organised and delivered to facilitate the adoption and implementation of new models.

Appendix 2: Alignment with the Future Health Strategy

The Future Health Strategic Framework is the roadmap to achieve NSW Health’s vision of a sustainable health system that delivers outcomes that matter most to patients and the community, is personalised, invests in wellness and is digitally enabled.

Our strategy aligns to the Future Health Strategy and supports other key system plans around rural health, virtual care, workforce, health technologies and closing the gap to reduce Aboriginal health inequities.

NSW FUTURE HEALTH STRATEGY						
	Patients and carers have positive experiences and outcomes that matter – We codesign, collaborate and consult to ensure our innovations deliver outcomes that are important to patients.	Safe care that is delivered across all settings – Our core activities that relate to optimising current models of care and clinical guidance contribute to the safe delivery of care.	People are healthy and well – Our innovations consider social and emotional wellbeing, mental and physical health across key stages of life.	Our staff are engaged and well supported – We foster an environment where staff work with agility, responsive to the needs of our stakeholders. We build a collective skillset, enabling capability for change systemwide.	Research and innovation, and digital advances inform service delivery – We work with our partners to identify, assess and translate innovations with a strong evidence base that enables the delivery of health technologies.	The health system is managed sustainably – We support our partners to design, deliver and implement value based and environmentally friendly models of care.
Strategy 1: Portfolio approach						
Refine • Evolve • Transform	•	•	•	•	•	•
Strategy 2: Engaging						
Partnering with agility	•	•		•	•	
Strategy 3: Informing						
Triangulating evidence	•	•	•		•	•
Strategy 4: Enabling						
A toolbox of methods	•	•		•	•	•

Appendix 3: Our contribution to strategic partnerships

The ACI contributes by:	
Ministry of Health	<ul style="list-style-type: none"> • Using clinical expertise via network and community advocates in the provision of trusted advice • Delivering statewide program and policy review in collaboration with relevant Ministry divisions • Partnering on the development of initiatives, in conjunction with other pillars and agencies, including the Office of Health and Medical Research, the Centre for Aboriginal Health and the Office of the Chief Health Officer, that address key system challenges and priorities • Partnering on the development and implementation of initiatives and evaluation of impact • Collaborating on ACI involvement in future health service and infrastructure planning and proposed new health infrastructure developments in line with the New Health Technologies and Specialised Services guideline • Linking with critical governance / authorising functions that will enable successful and sustainable implementation of clinical innovation • Identifying opportunities to align ACI work with NSW Health and NSW Government policy priorities
Local health districts and specialty health networks	<ul style="list-style-type: none"> • Working together to showcase local innovation, adopt and adapt local innovations for scale and spread across the system • Identifying and designing new models of care together • Supporting capacity for local innovation of frontline staff via redesign and capability • Supporting implementation of statewide innovation programs
Bureau of Health Information	<ul style="list-style-type: none"> • Investigating clinical variation highlighted in reports and supporting improvement efforts in the system • Partnering on aligning patient reported measures for clinicians, patients/carers and informing system priorities
Cancer Institute NSW	<ul style="list-style-type: none"> • Utilising cancer reporting to identify areas of clinical variation and improvement • Partnering on education and capability resources required to support the delivery of cancer services in the system • Partnering on aligning patient reported measures for clinicians, patients/carers and informing system priorities
Clinical Excellence Commission	<ul style="list-style-type: none"> • Providing clinical expertise to support responses to safety and quality matters • Partnering on work with shared priorities that have system-wide reach • Partnering on models of care and clinical guidance that require the expertise of specialist safety and quality input
Health Education and Training Institute	<ul style="list-style-type: none"> • Supporting training and capacity-building through clinical expertise and redesign school • Developing training and education resources about new clinical practices • Partnering on work with shared priorities with system-wide reach

Appendix 3: Our contribution to strategic partnerships

	The ACI contributes by:
eHealth NSW	<ul style="list-style-type: none"> Identifying the clinical drivers and business needs for digital technologies Harnessing clinician expertise in design of appropriate digital technologies to support clinical care and improve patient and clinician experiences Supporting adoption of technologies in clinical care and preparing the clinical environment for new technologies to harness their potential
HealthShare	<ul style="list-style-type: none"> Working together to support the delivery of nutrition and food services in NSW Health services Providing expert clinical advice to support key functions including procurement, linen and food services
NSW Health Pathology	<ul style="list-style-type: none"> Developing a shared approach to investigating variation in acute care settings and redesigning processes of care Collaborating to support the delivery of statewide services, including blood and marrow transplant services
Health Infrastructure	<ul style="list-style-type: none"> Supporting and facilitating clinical input into proposed new health infrastructure developments via clinical services plans and infrastructure plans Identifying sustainable and emerging models of care to inform future health service and infrastructure planning
NSW Ambulance	<ul style="list-style-type: none"> Working together to support integrated care services, including areas such as critical care and trauma Partnering on improvements in care in the pre-hospital setting
Academic partners e.g. universities, health and innovation precincts, and the Office for Health and Medical Research	<ul style="list-style-type: none"> Collaborating to support translational research and implementation science research as a way of ensuring clinical innovations are evidence-based Partnering to assess new ideas and support the translation of innovations into practice

Agency for Clinical Innovation

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