Living With

Living With Service Definition

Cloud Software / Healthcare

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Part of the agentis health group

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1. The Company

1.1 Introduction

This document provides a short summary on the company and a more detailed service definition. If you are interested in receiving more specific information on one or more of the individual products that exist on the Living With platform for supporting the treatment and rehabilitation of different medical conditions or symptoms then please get in touch on enquiries@livingwith.health

1.2 Company overview

Living With is a digital health company. Living With's virtual rehabilitation platform helps over 40 NHS Trusts, community providers and ICBs to assess, manage and rehabilitate more patients faster, with less resource, across symptoms and conditions.

The virtual rehabilitation platform is delivered as a Software as a Service (SaaS) solution on an annual subscription basis.

The single configurable patient app and clinical portal means hospitals and patients don't need 100s of different apps across services. We enable a hospital or provider to license as many products as they want for a fixed annual fee, meaning the more they use the lower their running costs and the associated regulatory burden.

Solutions currently exist in respiratory, rheumatology, maternity, urogynaecology, oncology, MSK, long covid, urology, colorectal, chronic fatigue, persistent pain and respiratory. Living With also owns Squeezy, the UK's most downloaded medical app in the paid category (e.g. 2019-2024 Apple app store sales), which has been a foundation for many Living With products developed subsequently.

The modular platform enables highly personalised care across the whole pre-hab/rehab pathway, from self-referral and self-management through clinic management and personalised discharge and offboarding.

Living With works across different types of care setting, in primary, secondary and community.

Living With was founded on a vision that healthcare providers would ultimately not want to buy single patient apps (solutions) from suppliers but instead would prefer to license multi-product, multi-condition platforms. This would reduce the cost of managing myriad suppliers, improve consistency within and across services and pathways, and speed up digital transformation of services. Accordingly, Living With works with customers and partners in 2 different ways. The majority of customers get started with a single licence fee for the platform and whatever combination of existing products they want to use. Some customers additionally want to co-produce new products on the platform. Customers can start with one model and move to the other.

Living With is now part of Agentis Health Group (https://agentis.health/), a newly launched parent company (2025) that brings together expertise in pharmacy, diagnostics, and digital healthcare. This enables us to offer new solutions and explore deeper collaborations. Customers are able to pull what they need from across the Group's growing capabilities including medicine management solutions (https://ashtons.com/) and Living With will underpin the digital health aspect.

2. The Service

2.1 Overview

Living With provides a hospital or clinic with a single, modular, virtual rehabilitation platform, and a catalogue of products and programmes and digital tools, which can be tailored to different pathways, symptoms and stages of treatment. The platform can be deployed at many stages of a patient pathway, including self-referral, self-assessment, triage, digital treatment, clinic management, and supported onboarding and offboarding or longer-term management. It can be used by a single clinic for small numbers of patients or at a population health level by an ICB or region.

One platform connects the hospital or clinic to one patient app for rehab management, which contains a range of products delivering a range of prehab and rehab treatments to different patient cohorts. Accordingly the hospital or clinic can use the same platform and app across multiple departments / symptoms / conditions – they don't need 100s of different apps.

Each clinician can manage patients in their department to their local pathways. Clinicians can see how adherent patients are to treatment and what can help boost their adherence, spending less time chasing patients.

An outpatient has a single front door, to one or more specific Living With products that they need. They receive clear and personalised direction from the different care plans that their clinics (NHS and / or private) set. Patients are engaged, which drives better rehabilitation adherence.

The virtual clinic environment facilitates digital transformation of services, enabling improved support for patients (higher compliance), increased throughput (lower waiting times) whilst simultaneously reducing load on healthcare professionals (better use of skills & experience).

The platform facilitates the creation of pathway-specific remote interventions; used to support patients so they are empowered to do more for themselves and can be supported with lighter-touch interventions from healthcare providers (saving time, encouraging and maintaining healthy behaviours, little and often, as required, PIFU etc.) It has been deployed in several pathway types: long-term conditions, treatable symptoms (pelvic floor muscle exercises), rehab, prehab, PIFU, self- management, assessment/triage), research; and in several condition areas (as below).

The virtual rehab platform consists of 4 core elements:

1. A configurable patient app that allows patients to understand and track their condition better, and to communicate with their clinic.
2. The clinician portal facilitating highly efficient management of large numbers of patients across all aspects of a condition (mental, physical and symptomatic), including onboarding, monitoring and treatment optimisation. Patient reported data is clearly displayed to clinicians allowing high quality, quick and efficient reviews both remotely and face-to-face.
3. The carer access allows a friend / family member to support a patient remotely, helping compliance (e.g. where language or technology are barriers).
4. The 3rd party dashboard enables providers to:
    - manage the remote set up of clinics for local clinician to patient condition management.

- review the aggregated and anonymised analytics.

Depending on the service providers local configuration, the patient can do 3 core activities with the app: communicate with their clinic, receive and send messages with attachments; assess and track their own symptoms, conditions and flares; and be supported in their own self-management or clinic-managed treatment with activities, exercises, goals, care plans, comprehensive sets of clinically validated patient information and treatment and education programmes.

The products can be prescribed in isolation or in combination, to match the patient's needs and the local clinical pathways. For example, one patient may be prescribed pelvic floor exercises and a bladder diary at their first appointment, then prescribed the OAB or constipation products later on if symptoms develop or persist; whereas another patient may be given a range of products at the first appointment or triage stage, and advised to look through all the clinical information and try things out for themselves (safely).

The platform provides clinicians with a 'virtual clinic' from which they can review exercise adherence, outcome measures, diaries, bladder/bowel/general symptoms, medication, progress through assessment, treatment or education programmes, compliance and inbound messages from patients. They can send messages individually or to groups requesting completion of diaries or PROMs, directing patients to specific clinical information and advice, or simply encouraging them to persevere with exercises or lifestyle changes. They can set care / treatment plans, directing patients on what activities to focus on and monitoring their adherence remotely.

The outcome measures, messaging and medication tracker are service options - they can be included or excluded at the time your service is set up. Messaging can be one-way (outbound only) or two-way (inbound from patients). The inbound messaging feature is highly valued by services that otherwise must provide telephone or email support for their patient cohorts. Some clinics prefer one-way messaging - enabling them to nudge patients efficiently but retaining existing protocols for inbound communication.

The solution provides a flexible library of patient information and patient self-management / treatment / education programmes that allows you to add content and deploy it to your users and patients.

Clinics can also decide how they want to access the data and use it for audit or better integration.

For clinical staff, the platform is accessed via a web-browser. It is scalable; there is no local technology required. It can be used from a desktop computer or a tablet. It is compliant with DPIA and other information governance and patient safety standards. The platform was co-developed with academics and NHS clinicians expert in their fields; this approach continues with new products.

2.2 Benefits

Overall, the benefits realised with the Living With rehab platform are in **patient adherence to treatment** and **clinical capacity**. The two reinforce each other: improved patient adherence to

treatment reduces the need for clinical intervention, increasing capacity to focus on patients who need more support with adherence to treatment.

A detailed list of benefits is below:

- Manage complex rehabilitation 10 times more efficiently than traditional therapy
- Increase adherence to treatment programmes (e.g. deliver an increase of over 50% in adherence to pelvic floor muscle exercise programmes versus treatment as usual)
- Enable multi-disciplinary teams to manage complex rehab across treatments and pathways, with optimised clinical contact time with patients
- Enable patient self-referral and assessment – providing clinics with better data to assess and triage waiting lists more effectively, pushing low value tasks onto patients or lower level administrators and reducing time spent in referrals
- Remote and virtual care - monitor and get patients to recover faster remotely in the community with less clinical support required and shorter treatment cycle lengths
- Reduce or increase the number of patients having surgery by providing patients with specific prehab or rehab programmes that they can carry out at home.
- Provide self-management support to patients including patient education and self-management tools, supported discharge and facilitating PIFU and SOS as required.
- Long-term condition management - keep patients in remission, out of A&E and unnecessary appointments. Maximise opportunities for remote management, including virtual reviews and dynamic waiting list triage.
- Carry out research – capturing data off your patients remotely to support a research programme or trial and sharing aggregated anonymised data with research partners.
- Join up multiple sites or clinics and ensure that clinicians can see and monitor the same data for any of the patients across sites
- Increase clinical throughput and reduce waiting lists and list times

2.3 Features

The core features of the platform are as follows:

- 1 patient app 1 clinician platform for personalised virtual rehab
- Tailor the choice of products to different pathways, symptoms and treatment stages
- A catalogue of products for respiratory, rheumatology, maternity, urogynaecology, oncology, MSK, pain, long covid, Post Viral and ME/CFS
- Whole pathway support - self-referral / assessment / management, triage, clinic management and offboarding.
- Comprehensive patient information across symptoms and conditions
- Enable patients to track outcomes, diaries, assessments, symptoms, exercises, medication, goals and to complete treatment programmes
- Care plan management including patient adherence to treatment plans
- Data analytics, export and reporting
- Enable individual and group messaging options, including 1 and 2 way, with attachments and appointment scheduling
- Clinic management of patients including invitations, onboarding, monitoring and treatment optimisation

2.4 What can you do with the Living With platform

Living With enables clinicians to achieve one or more of the following service goals:

1. Improve outpatient treatment programmes and help get patients better and discharged.

2. Monitor the health of patients living with long-term conditions remotely.
3. Reduce or increase the number of patients having surgery by providing patients with specific prehab or rehab programmes that they can carry out at home.
4. Provide self-management support to patients including patient education and self-management tools.
5. Maximise opportunities for remote management of long-term conditions, including virtual reviews and dynamic waiting list triage.
6. Carry out research – capturing data from your patients remotely to support a research programme or trial and sharing aggregated anonymised data with research partners.
7. Join up multiple sites or clinics and ensure that clinicians can see and monitor the same data for any of the patients across sites.

Broadly the platform is supporting 6 different types of patient engagement and adherence.

1. Patients with long-term conditions (LTCs), e.g. rheumatoid arthritis. Ideal engagement is infrequent but continual over multiple years and ultimately for life. However, this only applies when a patient is in remission. In reality, within a regular caseload of patients with a long term condition some will be in remission and some will need intensive and regular support, so engagement may vary considerably. In addition and increasingly this would be overlaid with PIFU or SOS for when patients need urgent help.
2. Patients being treated for a defined period of time for rehabilitation, with varying symptoms, e.g. long covid or COPD (pulmonary rehab). Ideal engagement varies but may typically be weekly or monthly and could last from 3 months to 12 months.
3. Patients being treated for a specific symptom like stress urinary incontinence where the assumed pathway is 3 months and then discharge.
4. Patients being prepped for treatment (‘prehabilitation’), e.g. cancer operations. Ideal engagement may be a matter of days or weeks, but may extend post-op into rehab, or pre-op earlier in the pathway, depending on the condition.
5. Patients being assessed. They may only use the app once to perform a function, e.g. provide PROM questionnaires or diaries to a clinic.
6. Patients self-managing for extended periods for purposes of ‘prevention’, i.e. reduced likelihood of future problems. This can be prevention of new problems (e.g. prolapse or incontinence post childbirth) or prevention of relapses (e.g. rehab). Also an element of ‘watchful waiting’ - keeping an eye on a condition in case it worsens (e.g. prostate symptoms).

2.5 What products are currently available with the platform

Listed below are some of the products available to license with the platform

- Squeezy Connect
- Covid Recovery
- MSK
- Breathing Pattern Disorder
- Pulmonary Rehabilitation
- Asthma
- COPD

- ILD
- Complex Breathlessness
- Early Inflammatory Arthritis
- Rheumatoid Arthritis
- Ankylosing Spondylitis
- Oesophageal cancer
- Lung cancer
- Prostate Cancer
- Pregnancy Pain
- Overactive bladder
- Faecal incontinence
- Constipation
- Pelvic Organ Prolapse
- Living With Urinary Symptoms
- Pain management
- Chronic fatigue syndrome / ME
- Speech and language therapy
- Activity /Active Lives
- Type 1 Diabetes and eating disorders.

2.6 Co-production

Living With works with Services to co-produce new products. These can be discussed separately.

2.7 Integration

Living With provides a variety of integration services. These can be discussed separately.

3. Implementation

3.1 Overview

Our standard implementation includes the following steps:

1. Working with clinicians, commissioners and transformation managers to clarify requirements resulting in a clear scope which aligns with pathways and needs.
2. Finalising contract and procurement questions
3. Meeting IG and associated regulatory needs
4. Meeting IT needs.
5. Based on specific clinic requirements, configuring customisation options available for different condition or symptom management pathways, as well as self-referral / assessment as required and implementing set up
6. Onboarding and training for clinicians
7. Onboarding and engaging patients, this can be both clinic led invitations as well as self-referred patient access and activation
8. Ongoing support and help desk management.
    a. Living With has a dedicated support team to deliver this. Living With uses Zendesk to help manage the support process with user defined tickets and ticket priority. The support team has direct access to the technical support team (developers) who can triage queries to ensure technical issues vs user issues can be identified quickly and be prioritised for resolution.
    b. The support desk accepts issues from the client via phone, Zendesk or email. Each query is assigned a severity then handled according to a Service Level Agreement (SLA), a ‘ticket’ is created by a member of the support team. The ticket records all actions, responses and resolution times, and can also be adjusted as necessary.
9. Regular data analysis and reporting including appropriate levels of evaluation and auditing. We work with commissioners, service managers and clinicians to clarify reporting requirements. These can be met in different ways, whether through the clinician interface, or as reports from our analytics platform. The data can also be exported at agreed intervals during the project to support reporting requirements or on request via secure transfer, in an accessible format, in line with regulations.
10. After sales support is delivered via regular account management to ensure that services are maximising the value from the software to achieve their goals, leveraging all the products / features that they need and to resolve any usage issues.

This can then be supplemented depending on whether this is a standard customer licence and use of the existing platform and products or whether it involves co-production of new products and some of the additional steps that are entailed.

4. Onboarding and offboarding

Onboarding support is provided to services, clinicians and patients.

Services

- We work with the customer to understand pathways and how to support these optimally
- We then help establish exactly what the clinical and administrative staff requirements are and set up the Living With clinics to match these.
    - During the initial clinic configuration and set up, selected products, features, assessments, content, names, contact details, access to apps for patients will all be covered. The first clinicians will be invited. Basic training and invitation of dummy patients and pathways will be explored
    - Subsequent training with the wider teams will involve understanding all aspects of the solution
- As standard, clinic onboarding is provided as remote training for the service team. Onsite training can be provided (extra charge for travel outside UK).
- There is no restriction on the amount of training that is required to help you make the most use of our platform and solution.
- We provide “clinician” user guides

Patients / Users

- Patients can be prescribed the service in 2 ways:
    - By their healthcare professional. They are provided with an activation link which will allow them to set up their user account and then download the app from either app store and login to support their treatment.
    - Or through a self referral process using either a QR code or a URL. This takes the patient to a clinic specific landing page inside their browser. This page explains who is providing self referral, the benefits of using the apps and open a form where they complete personal details. Living With process their application and invite the patient to the clinic
- They can be provided with a range of supporting videos and materials
- We can provide additional patient activation and nudging to ensure compliance with assessment and / or treatment plans

Offboarding

We work with customers to agree their specific offboarding requirements for patients.

We enable patients to be discharged and then continue on a PIFU / SOS basis or via re-referral. We run a number of different models currently.

5. Service levels

5.1 Introduction

- The software is hosted securely in the cloud via Amazon Web Services.
- Our services are deployed into an AWS environment across multiple availability zones, with multiple stacks. Our stateless architecture ensures no interruption to service in the event a single instance is slow. Autoscaling is enabled where appropriate. Batch processing is isolated from the rest of the infrastructure. High intensity reporting queries are only ever via a read-only-replica. All features in the mobile apps work offline, guaranteeing no interruption to service for patients.

5.2 Performance levels and availability

Reasonable commercial efforts will be used to provide network service availability with a monthly uptime percentage of at least 99%.Upon incident notification by the customer or automated monitoring tool, the Recovery Time Objective will be: a) 4 hours during office hours and b) 8 hours during out-of-office hours relative to the deployment location. The IT team will actively monitor the service and apply corrective measures to it during business days. A team of IT professionals will monitor the system from 08:00 until 17:00 (UK time), from Monday to Friday, except Bank Holidays Our historical service availability has been consistently above 99.9%.

We monitor the service 24/7. Any outages are communicated with the client in accordance with agreed arrangements.

5.3 Support

Support and hosting includes:

- the day-to-day operation, management and maintenance of the Supported Assets
- UK working hours response and resolution times for all support issues
- email support for clinicians and patients via support@livingwith.health
- a first-line telephone helpdesk, monitored during UK working hours, and available on a 24 x 7 basis for messages
- identification and resolution of Incidents

Support for patients is for technical issues. Any clinical enquiries will be directed to the clinic. All support staff are DBS-checked and have received training in information governance and handling adverse event and product defect reporting.

5.4 After sales

The facility of after sales support is in place for both the healthcare professional and their patients using the service. We offer a technical support facility for any assistance needed when activating accounts or throughout the lifecycle of the service. This can be received by email or telephone. There is also a ‘how to use’ tile integrated within the app.

5.5 Security

The platform is Security governance certified (ISO/IEC 27001)

NHS DSPT Toolkit 'Standards Exceeded'

NHS DTAC 100% Compliance

Cyber Essentials Plus

MHRA registered

We have implemented comprehensive security controls policies and processes as part of our compliance with ISO 13845, ISO14971, ISO 27001. This includes:

- Compliance with all relevant data protection legislation and NHS best practice.
- The vetting of all staff who handle personal information.
- Technical and physical access controls.
- Regular penetration testing.
- The management of zero-day threats.
- Mandatory reporting of security incidents and near misses to the Chief Executive.
- Regular reviews of security arrangements.

Staff screening conforms to BS7858:2019. Up to Baseline Personnel Security Standard (BPSS).

5.6 Data

- Data is stored in an AWS provisioned RDS Postgres database. There is a logical separation between authentication data and health data. The database is secured using certificates and networking rules. An additional read-only-replica is used for non-time critical operations thereby reducing the load and any risk of degraded performance.
- Data Collection: Clinicians and administrative staff can enter data using any modern browser that sends data over an encrypted connection (TLS 1.2) to web applications hosted on Amazon Web Service infrastructure hosted in the London availability zone (AWS London). Data is processed then encrypted again before being stored in a database hosted in AWS (London).
- Patients record data using mobile apps that are available on multiple platforms – iOS and Android. Data is stored on their local device (encrypted) before being sent to a secured API over an encrypted connection (TLS 1.2) to web applications hosted on AWS (London). Data is processed then encrypted again before being stored in a database hosted in AWS (London). Data is inputted in a patient app and automatically synchronised with Living With condition management platform, The clinicians view data on the platform
- Clinicians and administrative staff can access data submitted by their patients once they create an account from an invite which must be sent by another user within their clinic. The invitation and enrolment process includes a two-factor authentication process to ensure the security when inviting any users to access the Living with platform.
- Living with retains Personal Data for as long as is necessary to continue to operate our services. Processes are documented in the Information Governance manual for Living With Ltd, which has been certified as compliant by the Department of Health and Social Care with the NHS Data Security and Protection Toolkit. This data is used to provide information on the level of compliance with a treatment program, effectiveness of medication and or support treatment regimens given to patients. We also retain and use Personal Data to the extent necessary to comply with our legal obligations, resolve disputes and enforce our legal agreements and policies.
- Living With Ltd will also retain Usage Data for internal analysis purposes. Usage Data is generally retained for a shorter period of time, except when this data is used to strengthen the security or to improve the functionality of our Service, or we are legally obligated to retain this data for longer periods.

5.7 Service Constraints

The service interface supports Microsoft Edge, Chrome and Safari browsers.

It conforms to EN 301 549 accessibility standards.

The patient app works on iOS and Android smartphones. It also functions on many tablets.

Support is provided during UK working hours as standard unless agreed otherwise

We have a formal process for managing incidents as part of our implementation of our ISO 13485 quality management system. Users may report incidents by telephone, email , text or chat.

6. Technical Requirements and development

6.1 Overview

The platform can be accessed via a computer (PC or Mac)

The patient app can be accessed via a smartphone or a tablet device

The device requires the installation of at least one of the following variants:

a) “Living With” Android app obtained from the Google “Play Store”

b) “Living With” iOS app obtained from the Apple “App Store”

c) “Squeezy” Android app obtained from the Google “Play Store”

d) “Squeezy” iOS app obtained from the Apple “App Store”

e) “Squeezy Men”

f) “Squeezy Men”

g) “Squeezy Connect”

h) “Squeezy Connect”

Network requirements

- Wi-Fi, 4G or 5G internet connection (minimum 4.5 Mbps)

- Bluetooth enabled (mobile devices only)

- Geolocation access enabled (both in web browser and mobile devices)

The supported web browsers for clinician access are

- Microsoft Edge
- Chrome
- Safari

Required browser plug-ins and additional software

Browser plug-ins like Flash or Java are not required.

Additional software is not required.

6.2 Development process

Living With has a well-established and evolved agile development process.

The Living With platform is developed by cross-functional agile delivery teams. User Stories are refined with medical practitioners, researchers, and insights from patients. Agile development is done in short 3-week development cycles (sprints), with user feedback as part of the process. We have 6-week product release cycles. This development approach allows end users to always have the leading edge solution (no legacy systems), with the least number of bugs or issues, as well as end users not requiring re-training, that they may need with other solutions that have fewer but bigger updates. Living With continually re-invests into the solution, ensuring that there is a continuous development cycle. The assessment, feedback, review and adaptation approach informs each new deployment to create a robust and experienced process.

7. Regulatory and certifications

Living With has achieved the following regulatory milestones.

- DSP + IG toolkit + ISO 27001 compliant
- DTAC, Cyber Essentials and Cyber Essentials Plus
- Class 1 medical device / MHRA / CE

Living With undertakes the NHS Digital Data Security and Protection Toolkit assessment annually. The DSP Toolkit has been in place for several years (replacing the IG Toolkit).

Living With platform software carries out independent annual penetration testing to ensure security levels are maintained.

Living With is DTAC compliant and maintains this up to date at all times.

The company is ICO registered.

Thank you

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Living With