

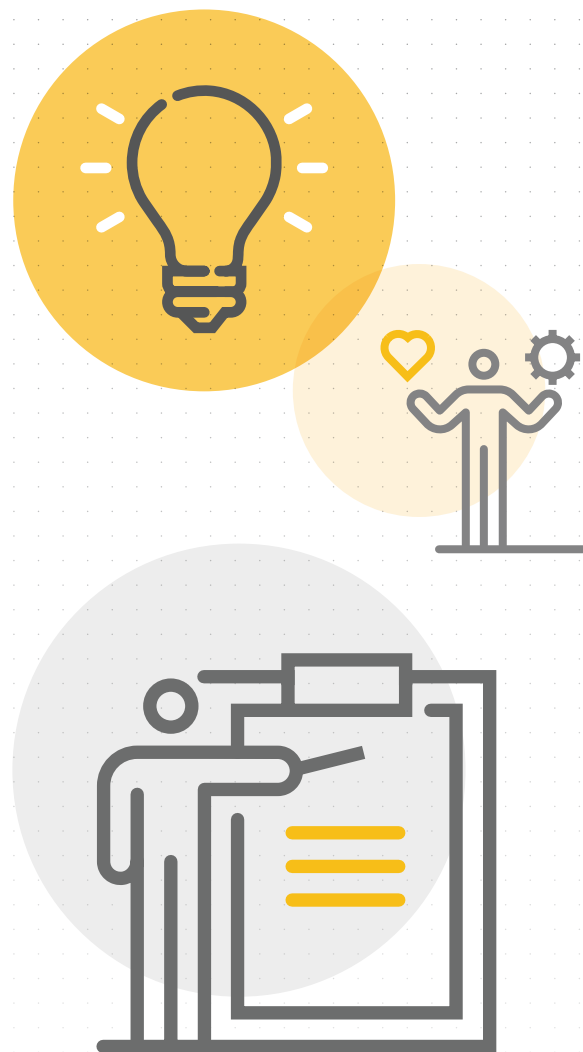
# Innovation and Evaluation in the NHS

A proposition for change and  
an offer of support





# Why are we working on this?



## Why innovation and evaluation matters...

**The challenges facing health and care services are well documented. So too is the centrality of innovation in addressing them. We need new ways of doing things and new things to use: more of the same is not an option.**

So we must encourage innovation. This means many things. Not least it means nurturing an enquiring, curious and experimental environment that supports people – and especially frontline clinicians – to put their ideas into practice. Only this way will we improve patient care, outcomes and the use of scarce resources.

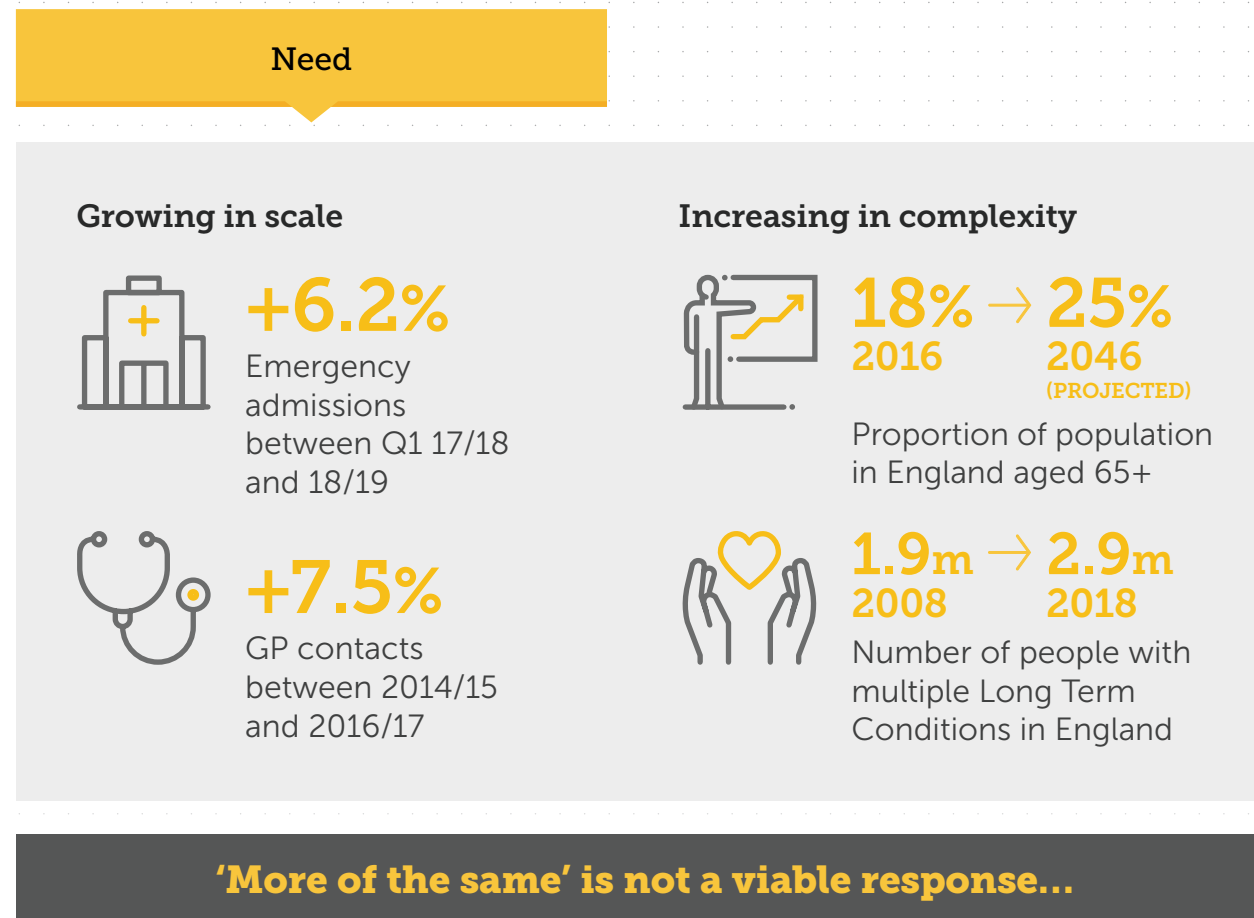
But innovation also needs evaluation. Without evaluative evidence, all we have is advocates and champions. Without evidence, we don't know whether an innovation should be scaled up and spread. Yet all too often innovation proceeds without the support and discipline of evaluation.

Our proposition is designed to address this need. In a sense, it is our manifesto! It was initiated by [Midlands and Lancashire Commissioning Support Unit](#) and produced by the [Strategy Unit](#). It begins with the need for and barriers to innovation; it then describes the vital role of evaluation. The proposition is supported by videos and case studies to give context, but also by an offer – including high quality training, tools and advisory support.

# The crisis facing health and care services in England is well documented...

Hear it from the team...  
What's the situation?

...arising primarily from the mismatch between **need** and **provision**.

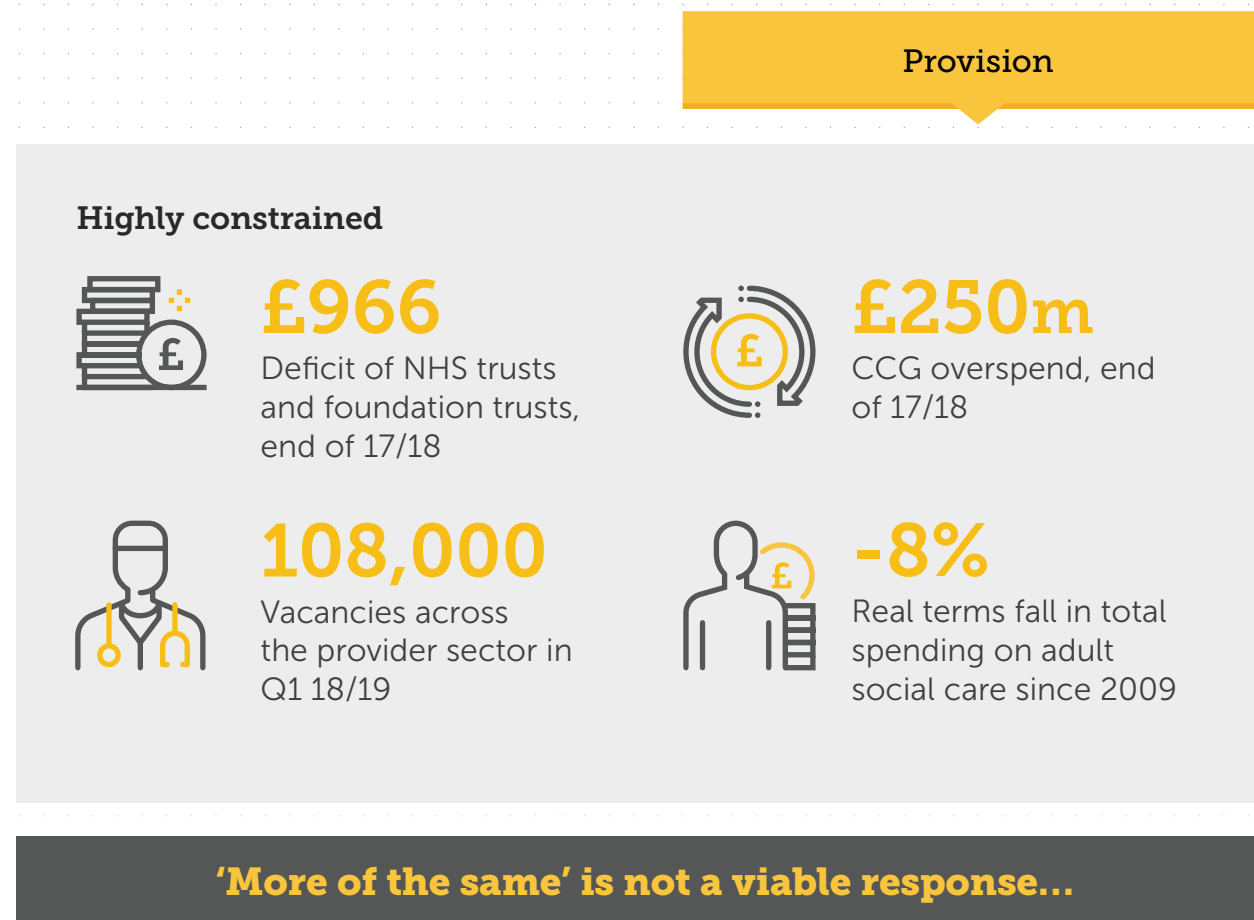


Source: NHS Improvement, Quarterly Performance Report of the NHS Provider Sector: Quarter 1 2018/19; The Kings Fund, June 2018 Quarterly Monitoring Report; The Kings Fund, June 2017 Quarterly Monitoring report; ONS, Overview of the UK Population July 2017; DH (2012), Long Term Conditions Compendium of Information; Institute for Fiscal Studies (2017), Public Spending on Adult Social Care in England

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# What do we mean by innovation?

# Innovation is a vital component of any strategy to 'bridge the gap'...

## We take a broad and permissive definition...

- It covers **product and process**... 'doing things differently', as well as 'doing different things'...
- It could be a **new technology, a new service, a new way of doing things**...
- It could involve an **innovative combination of existing ideas**, or implementing them **in a new setting in an innovative way**...

### Hear it from the team...

Why are we working on this?

### Hear it from the team...

What is innovation?

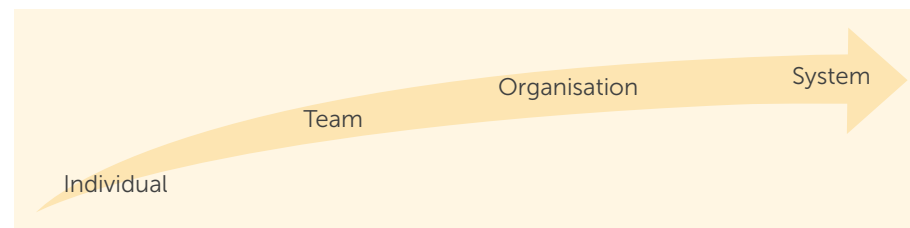


# It spans a spectrum of scale and involvement...

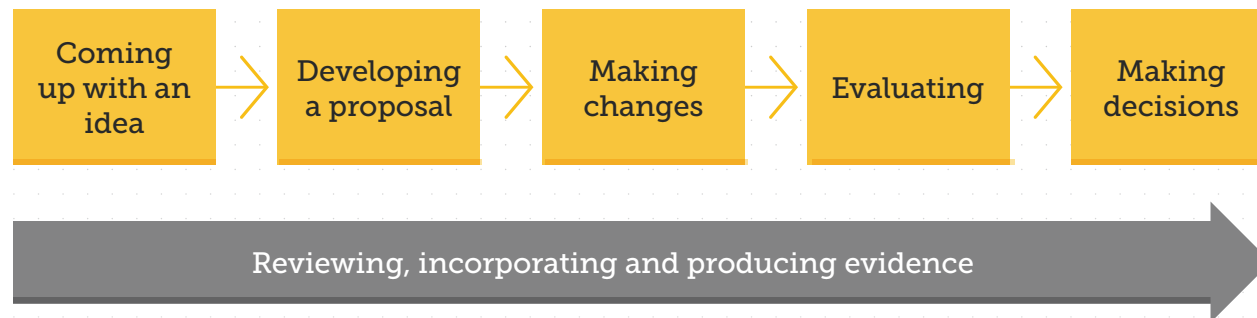
From small improvements, to revolutionary new ideas....



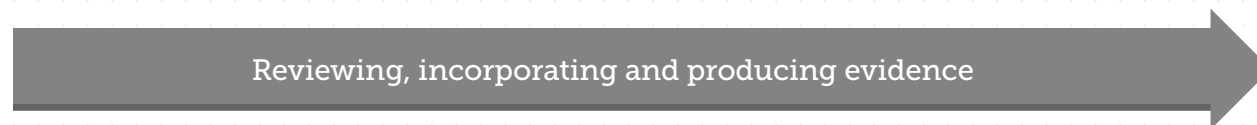
From one person making a change, to hundreds working together...



# It can be broken down into a process or set of activities...



Hear it from the team...  
What's the role of evidence?



...throughout which, a commitment to *evidence* acts as a core unifying theme



# Innovation needs the right conditions to flourish...

...but it doesn't just happen!



It can have internal and/or external drivers...

## Internal

e.g. to reduce costs, to improve staff turnover/satisfaction, to improve process efficiency.

## External

e.g. changes in policy, changes in demand, research findings, development of a new technology.

It needs to be nurtured and encouraged at every level...

### As a minimum...

- Understanding that the best ideas don't necessarily fall from the top
- Encouraging all staff to spot problems and suggest solutions



...to cultivate an **expectation** of innovation...

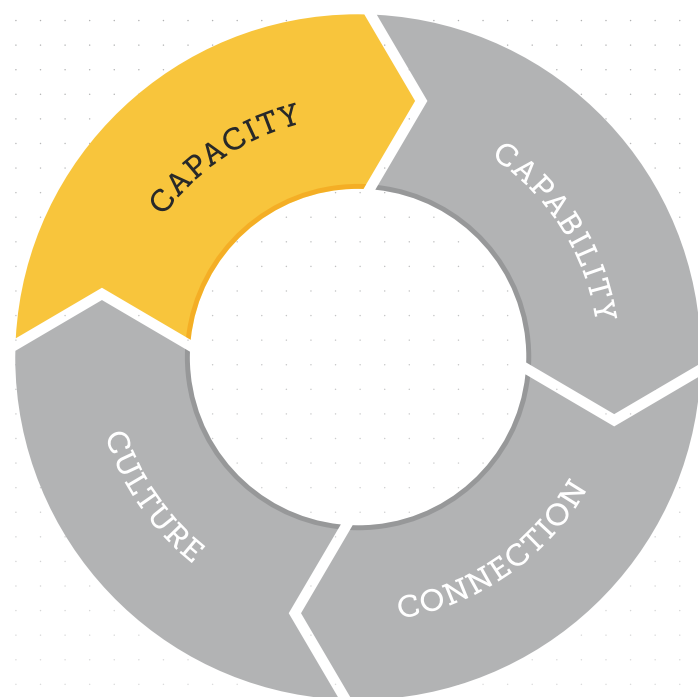
### More ideally...

- Equipping all staff with the skills, experiences and permissions to innovate and become self-improving
- Providing specific support in expertise or functions dedicated to innovation



...to enable a **permissive culture** of experimenting, learning and sharing, supported by a diffuse model of leadership

## But the NHS faces barriers to innovation, which can stifle the process at any of its stages...



### The capacity challenge

- › Staff are already delivering 'above and beyond', against a backdrop of increased demand and constrained resource.
- › There isn't the time, the money or the energy to try new things thoroughly in this overstretched environment – so good ideas end up fizzling out.
- › The people, services and systems who would stand to benefit most from innovation end up missing out.

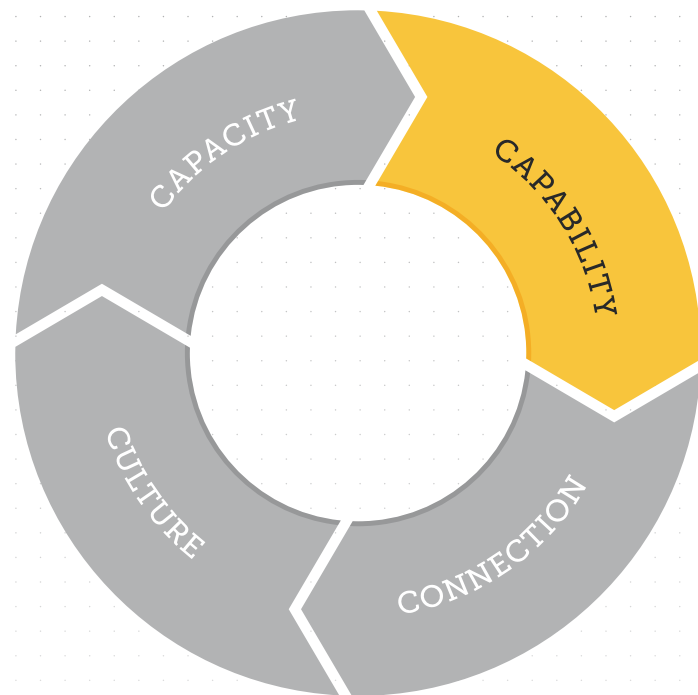
“

Out of clutter, find simplicity. From discord, find harmony.  
In the middle of difficulty lies opportunity

Albert Einstein

”

# But the NHS faces barriers to innovation, which can stifle the process at any of its stages...



## The capability challenge

- ✦ Specific knowledge, skills and experience to deliver each stage of the innovation 'process' are underdeveloped. Existing evidence is typically underutilised or misapplied.
- ✦ Frontline staff may have the enthusiasm, but frequently don't have the skills to work up and implement an initial idea effectively and in a way that supports ongoing learning.
- ✦ Furthermore, economic disciplines are typically not present in NHS organisations to sort the innovation 'wheat' from the pet project 'chaff'.

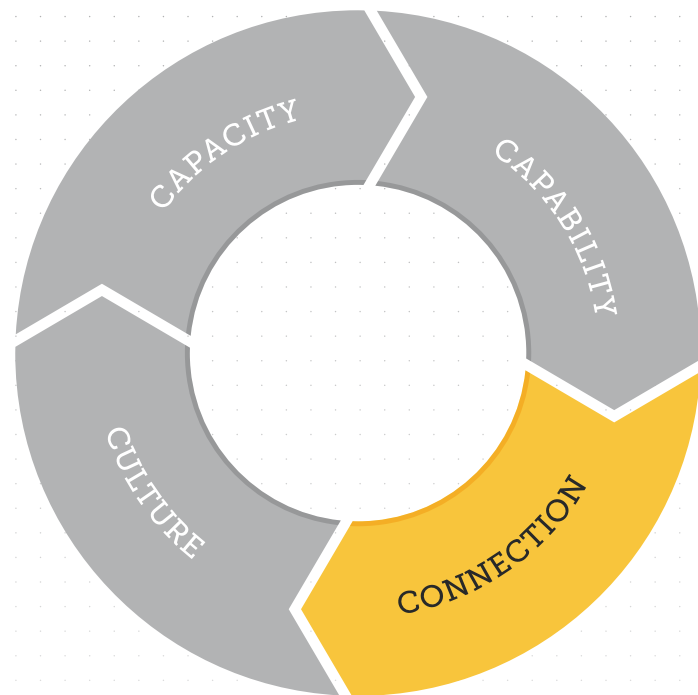
“

The challenge of modernity is to live without illusions and without becoming disillusioned... I'm a pessimist because of intelligence, but an optimist because of will

Antonio Gramsci

”

# But the NHS faces barriers to innovation, which can stifle the process at any of its stages...



## The connection challenge

- ▶ People with insight and good ideas are disconnected from support, which may be held at multiple points across the system.
- ▶ The innovation 'space' is fragmented and confusing, with a large number of national and local organisations (both public-sector and commercial) competing for attention.
- ▶ Organisational and system structure does not typically promote the spread of innovation and good practice across boundaries. Pockets of innovation can appear and disappear without wider gains being realised.

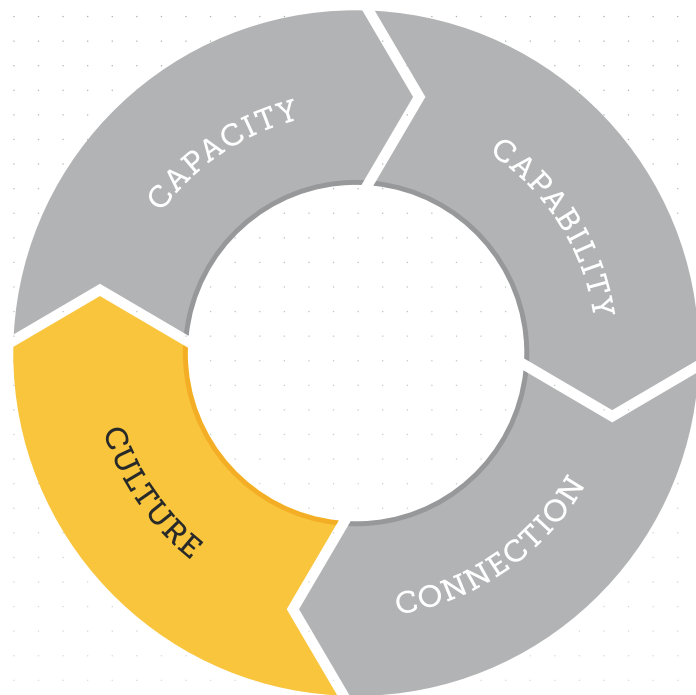
“

Though I do not believe that a plant will spring up where no seed has been, I have great faith in a seed... Convince me that you have a seed there, and I am prepared to expect wonders

Henry David Thoreau

”

# But the NHS faces barriers to innovation, which can stifle the process at any of its stages...



## The culture challenge

- ▶ Innovation is frequently seen as a 'nice to have', rather than a core function of the health service.
- ▶ Staff don't have 'permission to try' new ways of doing things, or 'permission to fail and learn' if something doesn't work. 'Command and control' is a more common operating model than 'licence and support'.
- ▶ Public services are built around accountability and value for the public pound – leaders and organisations often perceive the downside risks of innovation (being held to account for failure) to be greater than potential gains.
- ▶ Political culture and the dynamic of an external regulator can drive assertion and overstatement of the effects of changes, rather than encouraging careful and objective measurement.

“

I am not discouraged, because every wrong attempt discarded is another step forward.

Thomas Edison

”



# Why evaluate?

# Against this challenging backdrop, evaluation of innovations is essential – in order to...

Hear it from the team...

What is evaluation?



Evidence whether the innovation has been a success (or not)



## Evidence whether the innovation has been a success (or not)

- ▶ Without evaluation all you have is advocacy. This is a very poor basis for decision making, yet it remains common.
- ▶ Not all innovations work. But it is vital to provide evidence either way: open failures should be celebrated!
- ▶ Evidence should be robust enough for decision making. Should we continue? Scale up? Stop altogether? It also needs to show what was achieved – both intended and unintended consequences.



Identify the factors that facilitated any success



Identify what didn't work well

# Against this challenging backdrop, evaluation of innovations is essential – in order to...

Hear it from the team...  
What is evaluation?



Evidence whether the innovation has been a success (or not)



Identify the factors that facilitated any success



Identify what didn't work well



## Identify the factors that facilitated any success

- ▶ If innovations are to be scaled up, it is important to understand factors that led to their success (e.g. leadership of a senior clinician?).
- ▶ It is also important to understand the context in which the innovation was delivered...it may be that a pre-existing factor in the system was key to success, which could be unavailable in a different setting.



# Against this challenging backdrop, evaluation of innovations is essential – in order to...

Hear it from the team...  
What is evaluation?



Evidence whether the innovation has been a success (or not)



Identify the factors that facilitated any success



Identify what didn't work well



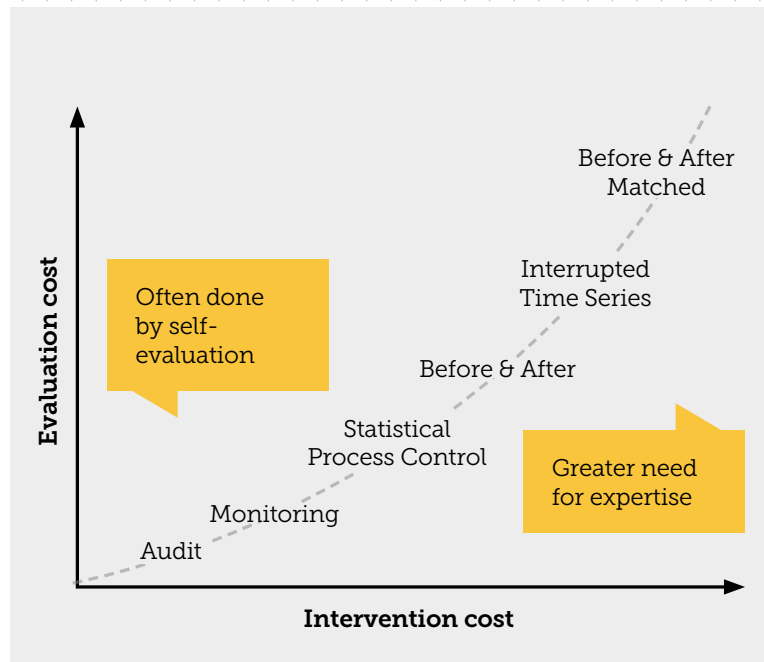
## Identify what didn't work well

- ▶ Even 'successful' innovations have elements that don't work well. It is important to identify and learn from these so the innovation can be refined if spread.
- ▶ 'Unsuccessful innovations' provide especially valuable lessons: not replicating failure is a quick way to save money!

# The 'level' of evaluation can be scaled to the innovation being explored...

The cost and complexity of the evaluation should be in line with cost of the intervention...

- Different approaches can be taken at different stages of the innovation life (e.g. audit data may be sufficient at the pilot stage, but would not be sufficient to scale up an expensive innovation across an STP footprint)...
- The approach should always provide enough evidence to move to the next stage of development...



It can draw on quantitative and/or qualitative evaluation methods...

Tell me about...

Quantitative evaluation

Tell me about...

Qualitative evaluation

# To date, we've seen a range of problems undermining useful evaluation...

## Hear it from the team...

Testing your innovation in theory

### Insufficient thinking at the design stage...

...as to how 'doing x' should lead to 'outcomes y & z'

### A need for greater attention to detail...

...in implementation and in setting measures

### A lack of discipline in decision-making...

...as to whether innovations should be 'scaled or stopped'

### Far too much advocacy and far too little evidence...

...especially where advocates stood to gain commercially

### A gap between 'the inspired staff member' with a good idea...

...and 'the convinced manager/commissioner' (with a budget to support it)

### Too much 'supply-driven' thinking...

...being seduced by the new and losing focus on identified problems



# Our offer

# So, to innovate 'successfully' and get the maximum benefit from evaluation...

...systems, organisations and frontline staff must ask:



## Systems

## Organisations

## Frontline Staff

### Questions

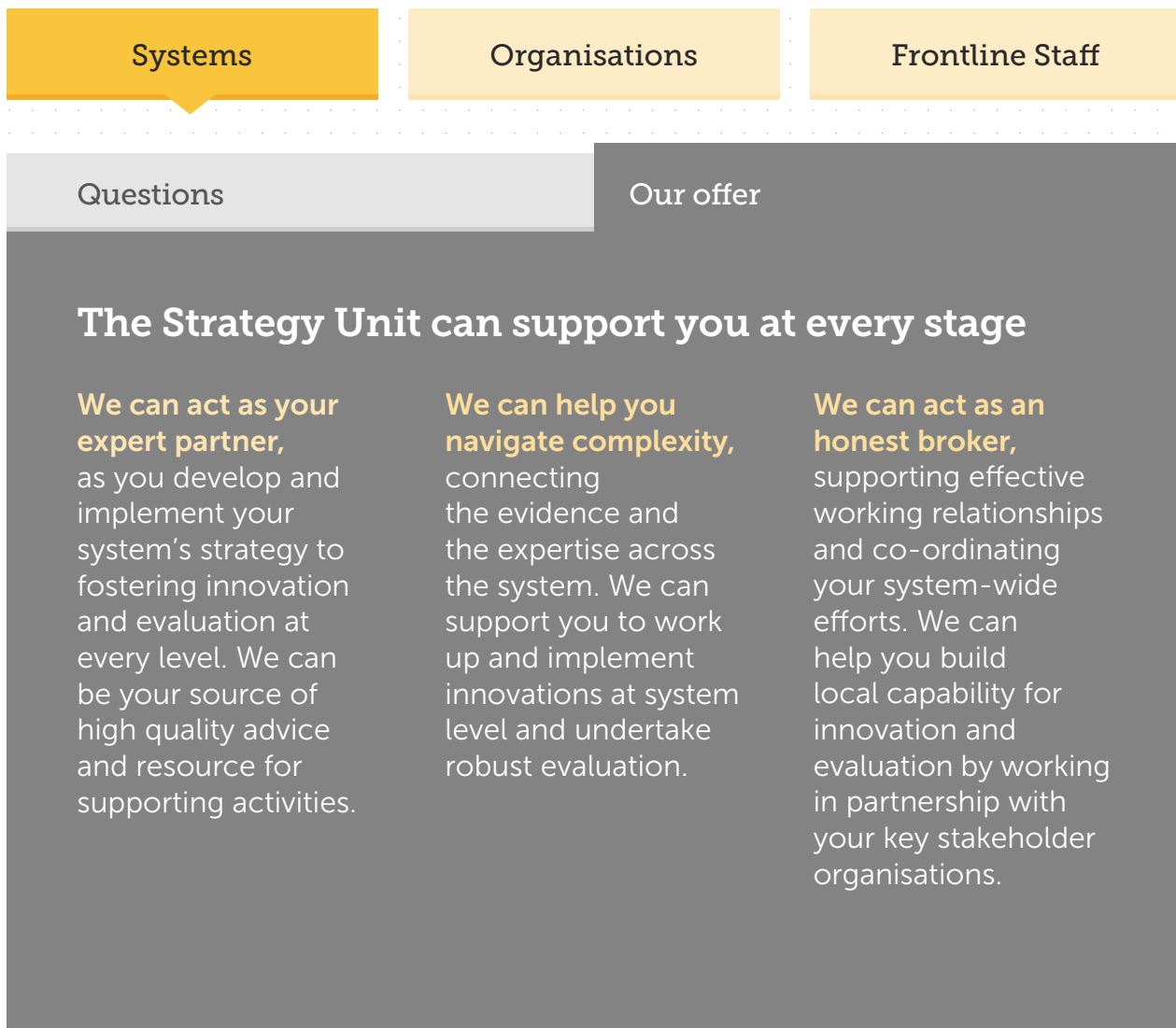
- › What can we do to support a culture of innovation and evaluation across a system?
- › **How do we co-ordinate activities at system level?**
- › How do we get the key stakeholders to work together effectively?
- › **How do we learn lessons from previous large-scale innovation programmes?**
- › How do we ensure drawing on and generating evidence is a core part of any innovation?

### Our offer

- › **What does 'good' look like for evaluation of innovations at a regional and local level?**
- › How do we ensure that when an innovation is piloted, it is done well enough such that success is determined by the 'quality' of the idea?
- › **How do we strike the balance between building local capability for evaluation and drawing on expert resource?**
- › How do we mobilise knowledge gained from these efforts for the benefit of the system?

# So, to innovate 'successfully' and get the maximum benefit from evaluation...

...systems, organisations and frontline staff must ask:



# So, to innovate 'successfully' and get the maximum benefit from evaluation...

...systems, organisations and frontline staff must ask:



## Systems

## Organisations

## Frontline Staff

### Questions

- ▶ How do we engage frontline staff to get their insight?
- ▶ How do we support them to develop their ideas?
- ▶ How do we decide which ideas to commit time and resource to?
- ▶ How do we understand and get other organisations to understand the potential impact of our innovations?
- ▶ How do we develop a consistent and controlled approach to the processes surrounding innovation/evaluation?

### Our offer

- ▶ **How do we strike the balance between pragmatism and robustness in our evaluations of innovations?**
- ▶ How do we develop competencies in our staff to support innovation and evaluation?
- ▶ **How do we communicate our findings in a way that is meaningful to our staff and patients?**

# So, to innovate 'successfully' and get the maximum benefit from evaluation...

...systems, organisations and frontline staff must ask:



Systems	Organisations	Frontline Staff
Questions	Our offer	
<p><b>The Strategy Unit can support you at every stage</b></p>		
<p><b>We can support you to make the case for innovation,</b> helping you to understand potential impact, articulate this internally and to other organisations in a compelling way and build consensus for decisions around investment and implementation.</p>	<p><b>We can help you design and adopt a consistently high quality approach,</b> to innovation, to evaluation and to the subsequent gateway/decision-making processes. We can show you what works well elsewhere and work with you to adapt this for your situation.</p>	<p><b>We can work in partnership with your staff at every stage,</b> providing them with practical development opportunities throughout the innovation process and providing them with bespoke tools to support them on an ongoing basis.</p>



# So, to innovate 'successfully' and get the maximum benefit from evaluation...

...systems, organisations and frontline staff must ask:



## Systems

## Organisations

## Frontline Staff

### Questions

- › How will any of this make a difference to me and my patients?
- › **Who else faces the same challenges that we do?**
- › How do we get inspired and enthusiastic to work together on a solution?
- › **How do we get support from our organisation?**
- › How do we draw on wider expertise available in the system to support us?

### Our offer

- › **How can we learn from what's been done before and elsewhere?**
- › How do we 'work up' the idea into something more tangible and decide if its worth pursuing?
- › **How do we make progress in the limited time we have to work together?**
- › What is evaluation in my context and why is it important?
- › **How could we tailor our solutions so they're useful for different settings?**

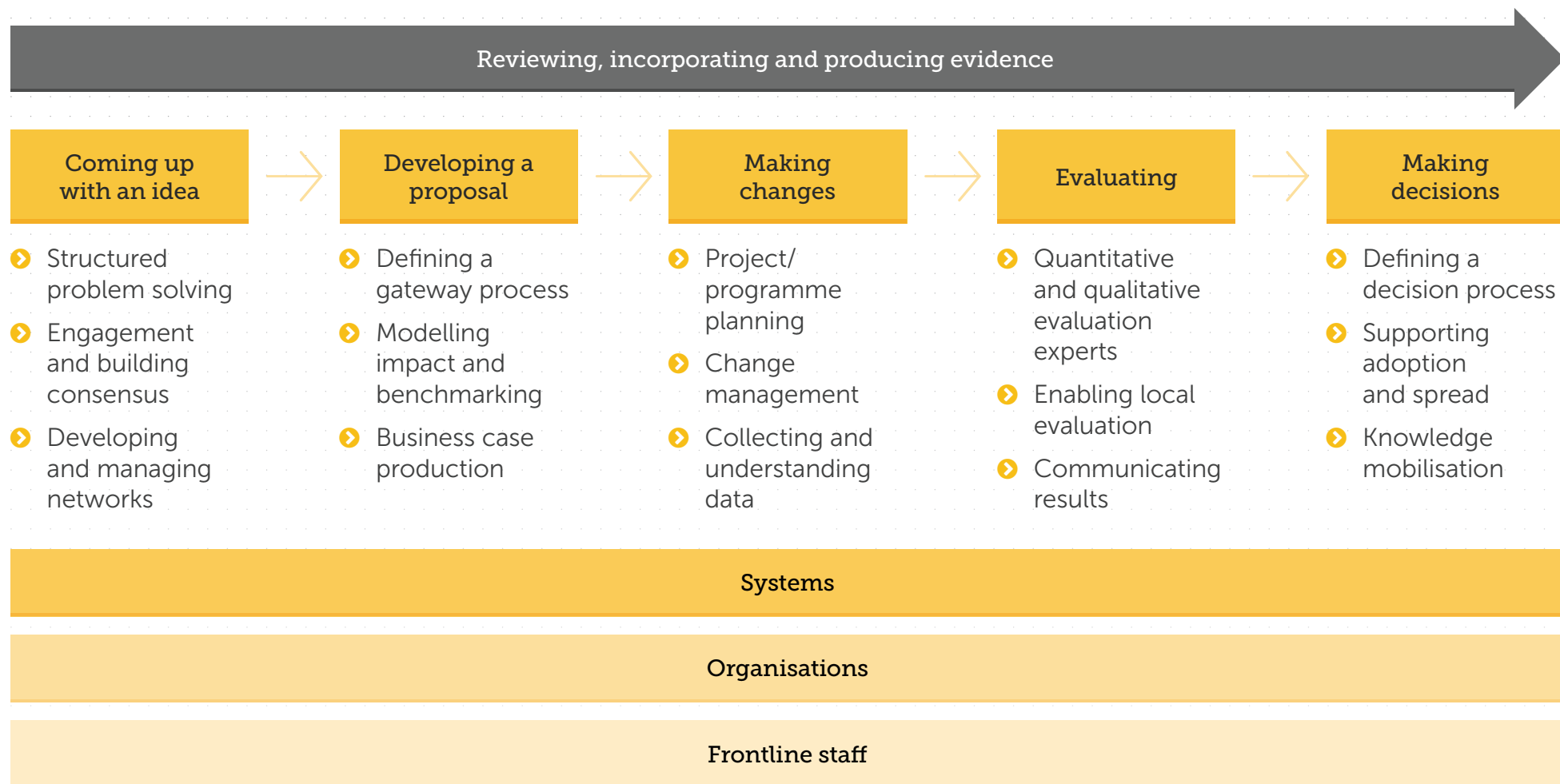
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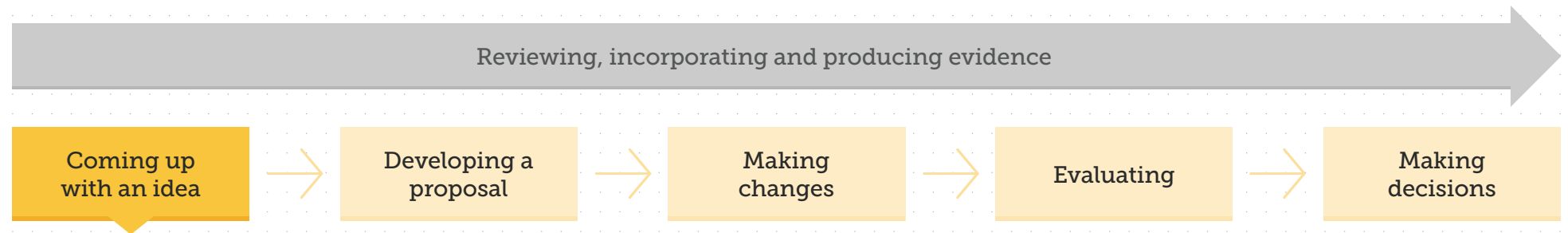



Systems	Organisations	Frontline Staff
Questions	Our offer	
<p><b>The Strategy Unit can support you at every stage</b></p>		
<p><b>We can support you to work on the toughest problems with your peers.</b> We take a pragmatic and highly practical approach, bringing together those with lived experience of a problem to intensively work on it with our support.</p>	<p><b>We can help focus your efforts –</b> providing you with valuable insight from our analysis of local data and drawing together evidence and best practice to inform your solutions. We can support you to communicate your successes and the key lessons for your wider organisation.</p>	<p><b>We can ensure you get the most from your time working together.</b> We can support you with the structure, the disciplines and the tools and act as a 'critical friend', as you move through each stage of the innovation process.</p>

# The Strategy Unit can support you at every stage

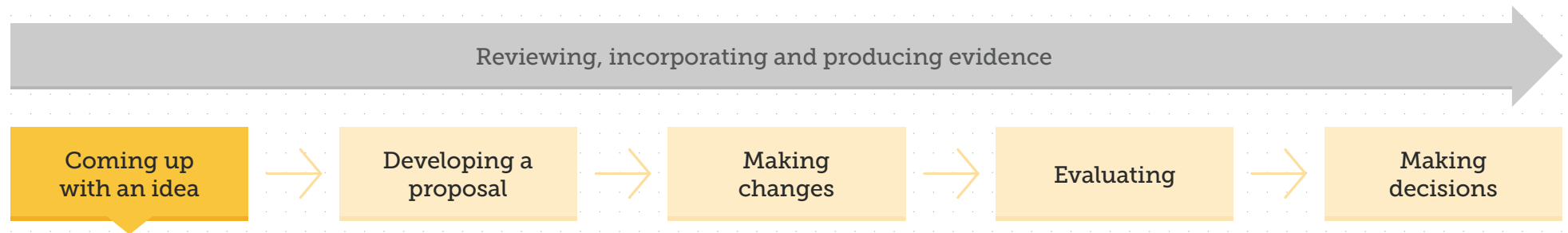


# The Strategy Unit can support you at every stage



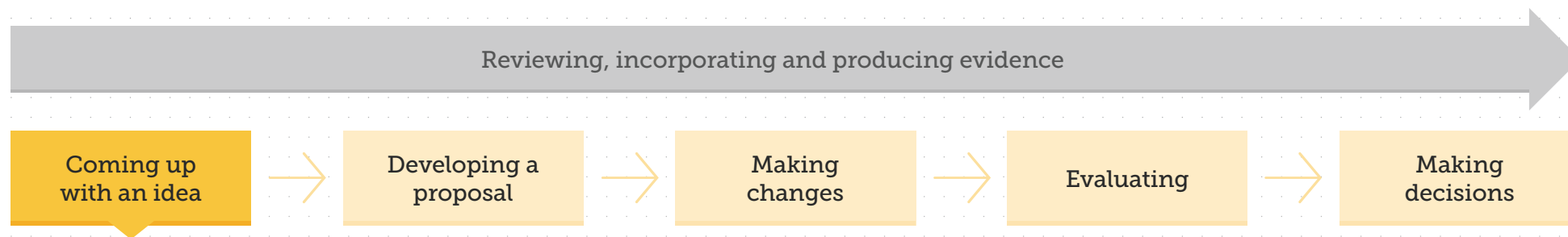
The challenge	Our approach	The outcome
 <p><b>The challenge</b></p> <ul style="list-style-type: none"> <li>▶ Innovation is a creative process which requires a degree of freedom of thinking, but a lack of structure to problem-solving efforts can stifle progress.</li> <li>▶ Individuals and groups with similar problems or complementary viewpoints and skillsets can be isolated from one another, thereby forfeiting the opportunity to collaborate on a solution.</li> <li>▶ Coming to an agreed understanding of a complex problem is challenging, with multiple competing perspectives that must be taken into consideration.</li> </ul>		


# The Strategy Unit can support you at every stage



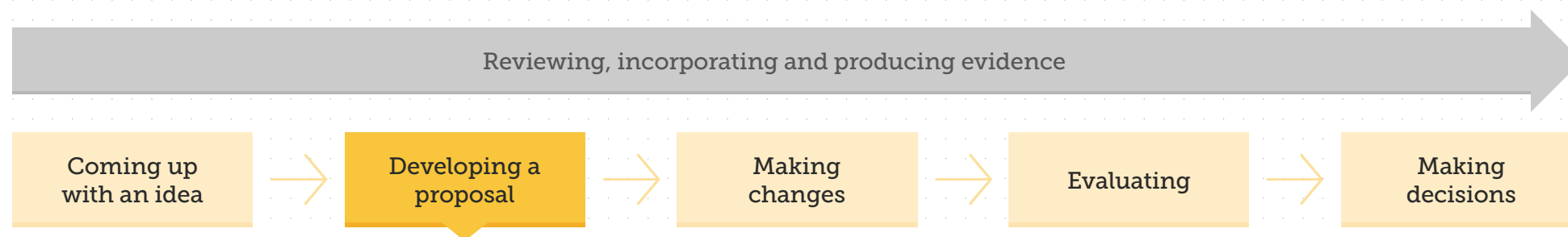
The challenge	Our approach	The outcome
	<h2>Our approach</h2> <ul style="list-style-type: none"> <li>▶ We can improve your understanding of the problem through qualitative and quantitative analysis – to build consensus between innovators and inform their problem-solving efforts.</li> <li>▶ We can bring the right people together to work on priority issues through problem-solving workshops, development programs or through developing and managing ongoing networks.</li> <li>▶ We can help structure and test your thinking throughout the idea generation process, providing tools and techniques to support.</li> </ul>	

# The Strategy Unit can support you at every stage



The challenge	Our approach	The outcome
		<p><b>The outcome</b></p> <ul style="list-style-type: none"> <li>➤ Solutions that are built on a thorough understanding of the problem are more likely to be effective.</li> <li>➤ Problem-solving efforts become more disciplined and productive, resulting in a greater number of high quality ideas.</li> <li>➤ Ideas take into account a wider range of perspectives, better representing those who face the problem and increasing the potential for truly innovative thinking.</li> </ul>

# The Strategy Unit can support you at every stage



## The challenge

## Our approach

## The outcome




### The challenge

- ▶ An idea isn't enough – it needs to be 'worked up' into a set of changes and the potential impact articulated, which the innovator may lack the capacity or capability to do.
- ▶ Getting the backing to try something new in a time of intense pressure on services requires a compelling case for change.
- ▶ The core concept behind an innovation frequently does not get the level of scrutiny required, leading to wasted efforts and potentially predictable failures.

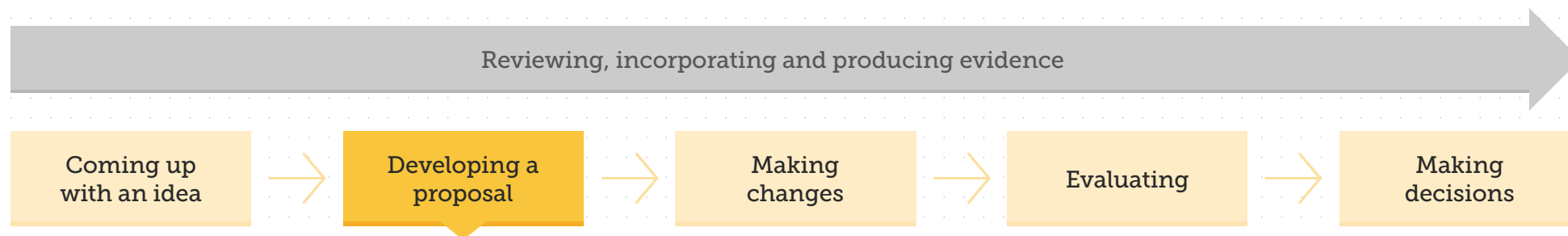
# The Strategy Unit can support you at every stage




The challenge	Our approach	The outcome
	<h2>Our approach</h2> <ul style="list-style-type: none"> <li>▶ We can support you to challenge and refine your idea, designing an initial set of interventions and developing your logic model. We can apply scenario planning to make these more robust.</li> <li>▶ We can help you to benchmark the current state and model the potential impact of proposed changes. We can build support for your idea and help you develop a persuasive business case.</li> <li>▶ We can support you to produce and implement a standard gateway process for your innovation projects, such that there is a consistent approach to working up ideas.</li> </ul>	



# The Strategy Unit can support you at every stage



The challenge	Our approach	The outcome
		<p><b>The outcome</b></p> <ul style="list-style-type: none"> <li>Constructive challenge improves the quality of ideas. Staff are enabled to develop ideas into a set of changes that can be practically implemented.</li> <li>Innovations most likely to lead to benefits are supported by decision-makers and given resources needed to progress.</li> <li>Innovation projects draw on available evidence, don't suffer from faulty logic and have an evaluation framework in place before they are pursued – reducing the risk of 'downstream' problems.</li> </ul>

# The Strategy Unit can support you at every stage



## The challenge

## Our approach

## The outcome



### The challenge

- ▶ A good idea with material support can still fail to deliver on its potential due to poor implementation.
- ▶ Truly innovative ideas are at a high risk of resistance from wider partners and stakeholders as they begin to be tested in the real-life setting.
- ▶ Innovative projects are frequently under significant pressure to demonstrate early impact to backers, or otherwise show how they have adapted to findings.


# The Strategy Unit can support you at every stage



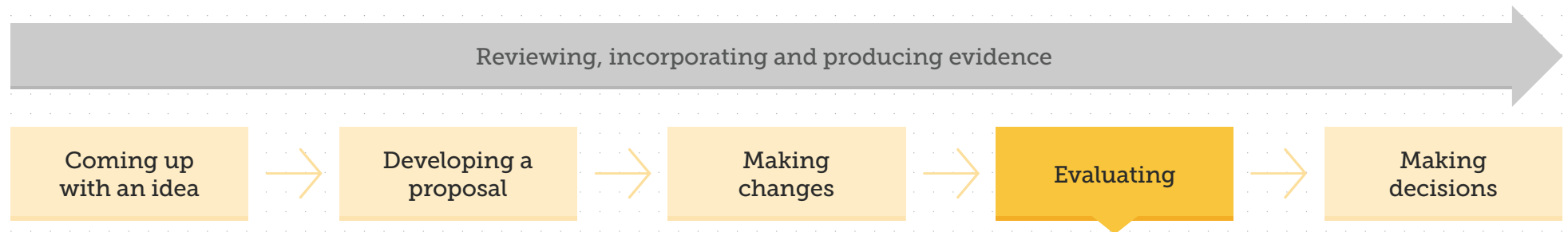
The challenge	Our approach	The outcome
	<h3>Our approach</h3> <ul style="list-style-type: none"> <li>▶ We can help you develop your proposal into a clearly defined project or programme of work, backed by our advisory support.</li> <li>▶ We'll work with you throughout the change management process, supporting ongoing engagement and adapting your case for change to a wider audience.</li> <li>▶ We can support you to collect and understand data as implementation progresses, so you can communicate early impact where present and make changes to approach as needed 'in real time'.</li> </ul>	

# The Strategy Unit can support you at every stage



The challenge	Our approach	The outcome
		<p><b>The outcome</b></p> <ul style="list-style-type: none"> <li>▶ Innovations are implemented in a logical and structured way, reducing the chance of failure due to issues of process.</li> <li>▶ The 'message' is not lost as the innovation moves beyond its initial backers. Projects gain a wider coalition of support and are able to refine their activities in response to feedback.</li> <li>▶ Implementation becomes more responsive, increasing the benefits that can be achieved within available resources.</li> </ul>

# The Strategy Unit can support you at every stage



## The challenge

## Our approach

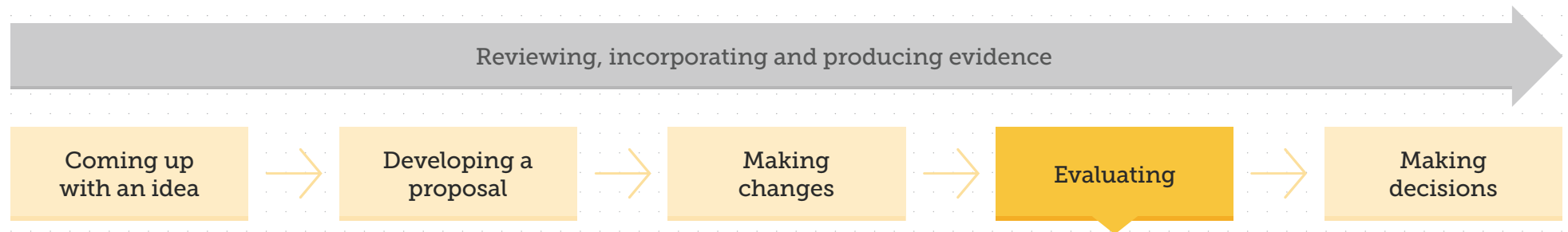
## The outcome



### The challenge

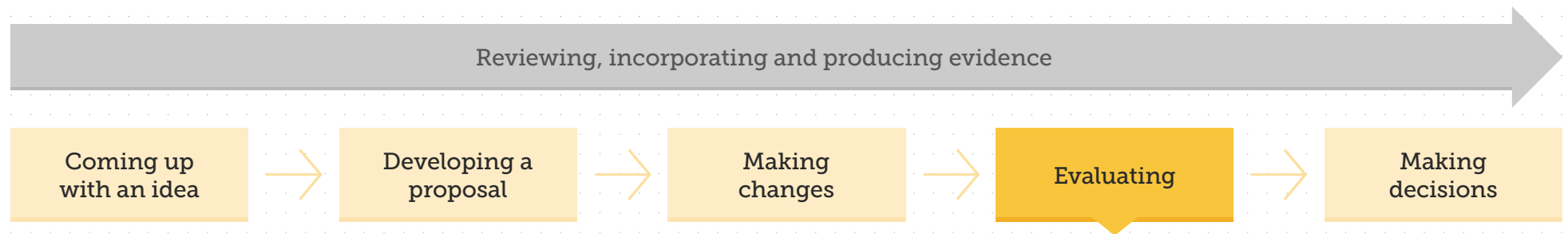
- High quality expertise in evaluation is scarce in the NHS – as is the capacity to deliver it as 'part of the day job'.
- Evaluations that are delivered solely in-house risk not being seen as independent and may lack a 'system' perspective e.g. in showing demand has not simply been shifted elsewhere.
- Evaluation must balance rigour, relevance and timeliness to reflect the emergent and evolving nature of innovations.


# The Strategy Unit can support you at every stage



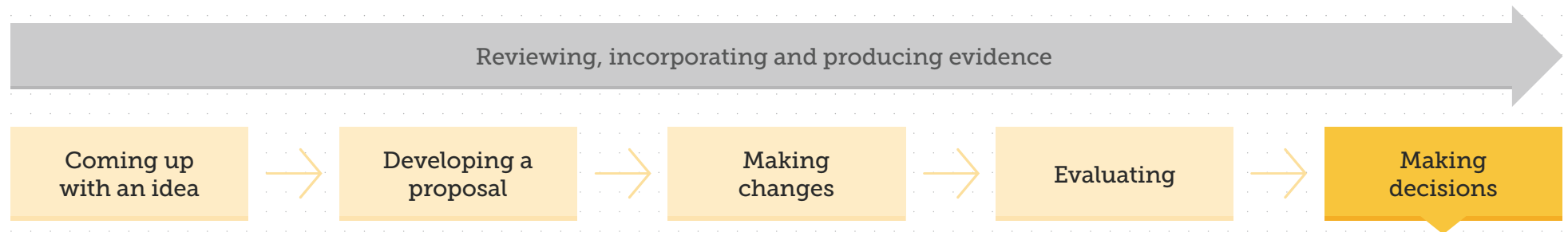
The challenge	Our approach	The outcome
	<h3>Our approach</h3> <ul style="list-style-type: none"> <li>▶ We can offer an expert and nationally regarded mixed methods evaluation service for your innovation projects, scaling our support to complement your local team.</li> <li>▶ We'll work with you to design and deliver a robust approach that is externally credible yet doesn't hamper ongoing innovation.</li> <li>▶ We take a multidisciplinary team approach to interpreting findings and developing recommendations.</li> <li>▶ We do with, not to. We partner with your staff to provide opportunities for developing their evaluation skills – including technical training, advice and guidance, tools and mentoring.</li> </ul>	

# The Strategy Unit can support you at every stage



The challenge	Our approach	The outcome
		<p><b>The outcome</b></p> <ul style="list-style-type: none"> <li>▶ An evaluation approach for innovations that is robust, pragmatic and timely, supported by a critical friend.</li> <li>▶ You'll be able to understand and articulate the impact of your changes and the conditions required to scale successful innovations, informing your subsequent decision-making processes.</li> <li>▶ Local staff will develop the knowledge, skills and experience needed to enable effective evaluation, drawing upon the support of our experts as needed.</li> </ul>

# The Strategy Unit can support you at every stage



## The challenge

## Our approach

## The outcome

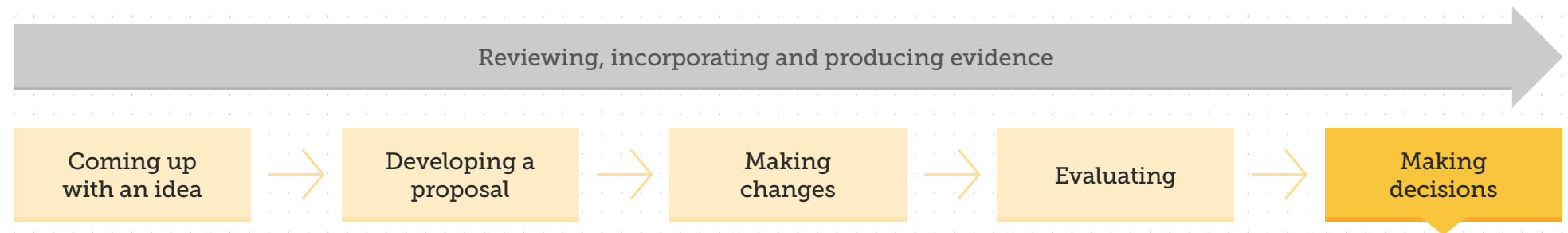


### The challenge

- There is an ongoing challenge in making defensible decisions as to which innovations to continue to support, which have the potential for wider benefits if scaled, and which to stop.
- These decisions are frequently made in an unstructured and inconsistent way – with a consequent risk of wasted resource or missed opportunities.
- Implementing an existing innovation in a new setting is not as simple as 'cut and paste'. Without planning and appropriate adaptation, great ideas can easily fail.

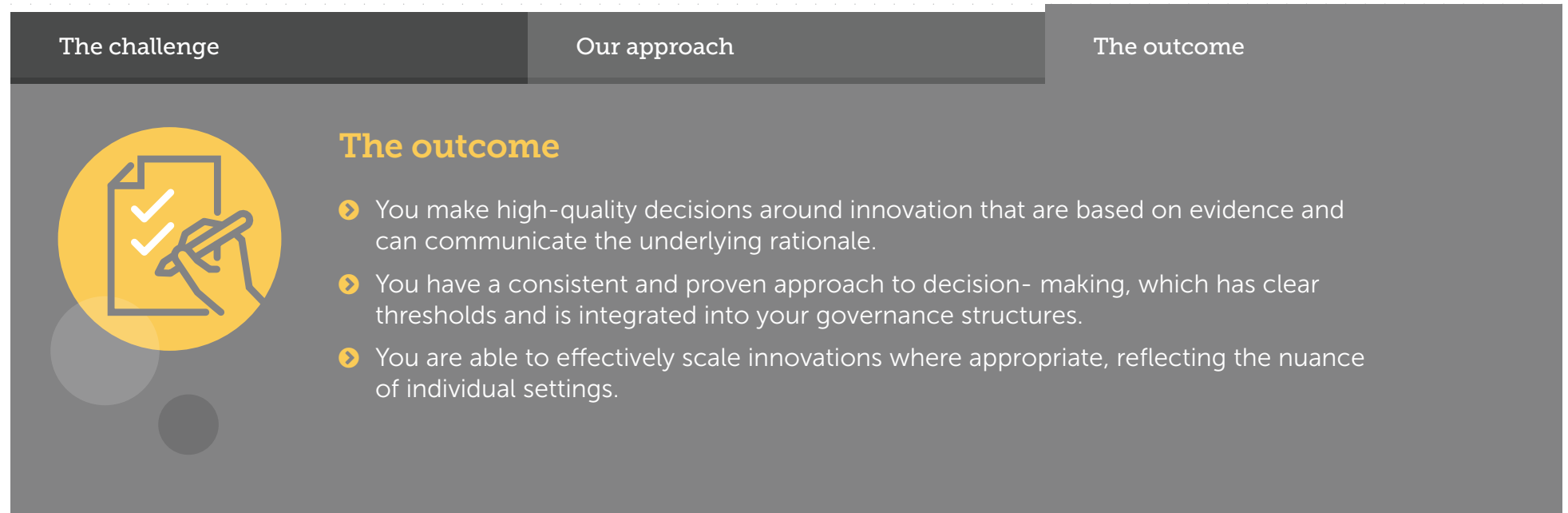
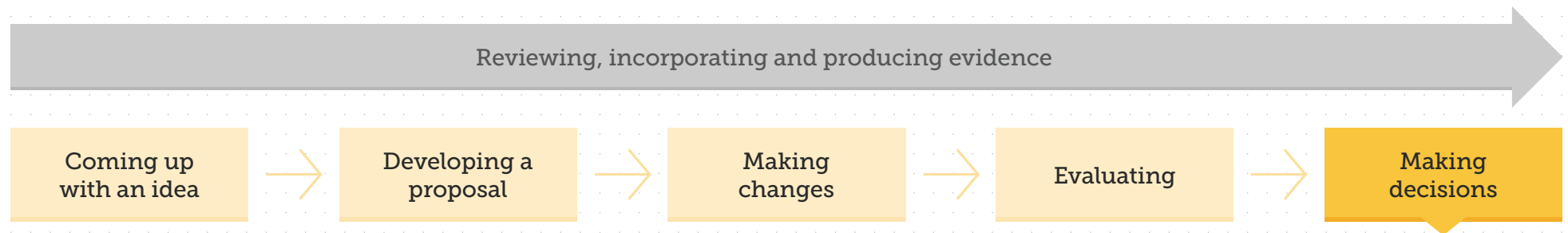


# The Strategy Unit can support you at every stage



The challenge	Our approach	The outcome
	<p><b>Our approach</b></p> <ul style="list-style-type: none"> <li>▶ We can provide independent support for your current deliberative processes, helping you understand the potential implications of each option available to you.</li> <li>▶ We can work with you to develop, implement and test a standard process for making these decisions – reflecting the level of evidence you need for decisions of different weighting.</li> <li>▶ We can help you understand the factors at play in new settings and their potential impact, supporting your adaptation process.</li> </ul>	

# The Strategy Unit can support you at every stage



# The Strategy Unit can support you at every stage



## The challenge

## Our approach

## The outcome



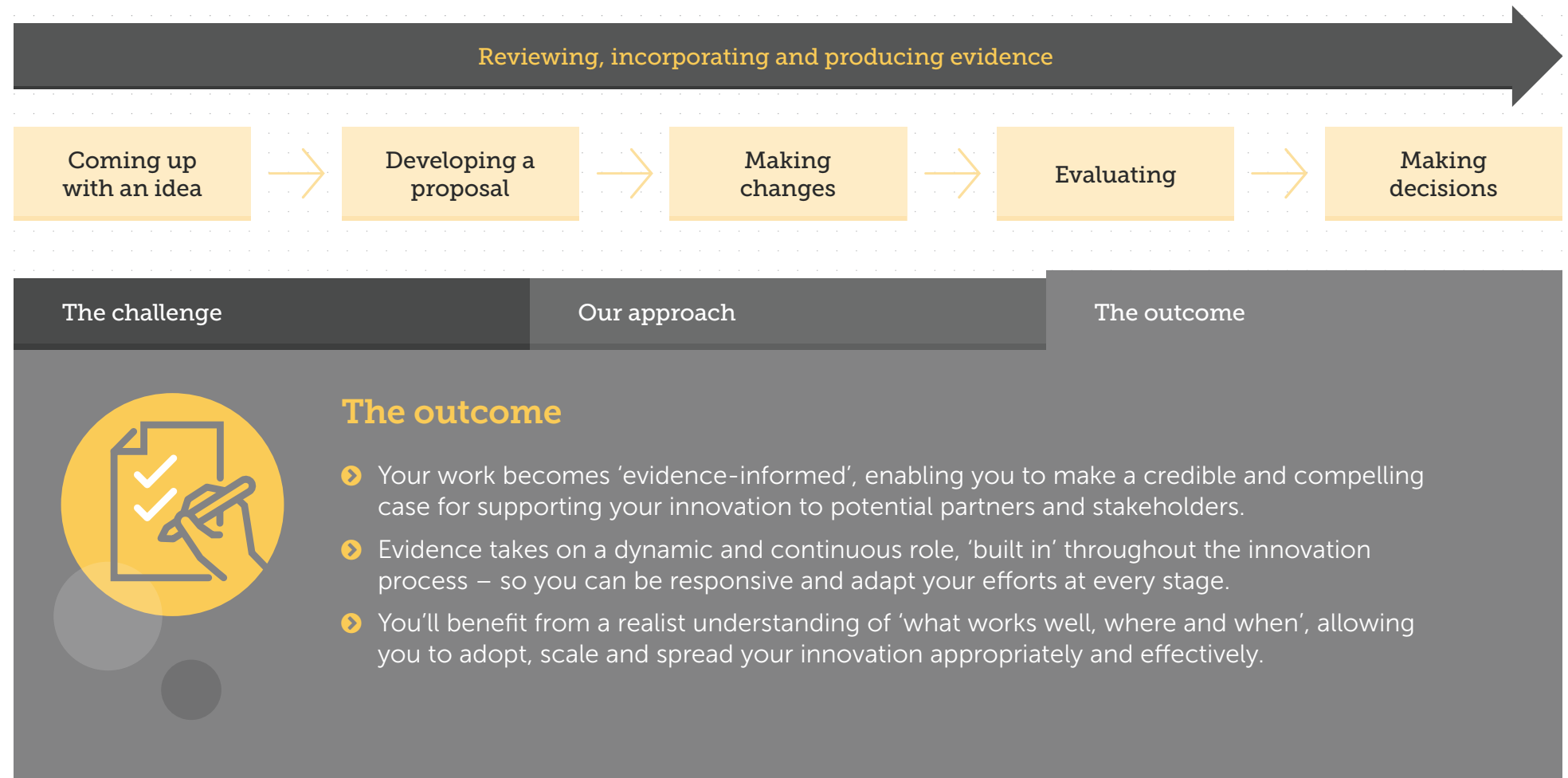
### The challenge

- Evidence is frequently given a limited role in the innovation process. Work being characterised as 'innovative' can be inappropriately used as a justification for not adequately reviewing and incorporating the existing evidence base.
- Learning is not always captured and articulated in a systematic way throughout the innovation process, limiting the potential for others to benefit from it in future work.
- A narrow range of sources are defined as appropriate 'evidence', with the potential for neglecting valuable insights.

# The Strategy Unit can support you at every stage



# The Strategy Unit can support you at every stage



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**Let's make innovation  
more than a buzzword.**

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# Case studies

- › 'Vanguard' innovations – Dudley CCG
- › IAPT-LTC Early Implementers – NHS England
- › The EPIC programme – Dudley CCG
- › RAID Mental health liaison service in Northern Ireland
- › RAIDPlus Test Bed Evaluation – BSMHFT

# 'Vanguard' innovations – Dudley CCG

Evaluating a diverse set of interventions in a high profile setting

The challenge

Our approach

The outcome

## The challenge

Dudley CCG was appointed as a 'Vanguard' in the NHS' flagship 'New Care Models' programme. Moving to a new care model meant innovating at pace – with a range of new services and new ways of working planned. But not all of these 'innovations' were expected to work; some would need to be stopped and some would be scaled. Evaluative evidence was needed to inform these decisions.





# 'Vanguard' innovations – Dudley CCG

Evaluating a diverse set of interventions in a high profile setting

The challenge

Our approach

The outcome

## Our approach

Working with our partners ICF, the Strategy Unit undertook a rapid evaluation of nine service innovations. These covered a varied range of interventions, from social prescribing, to enhanced pharmacy services, to virtual 'avatar' nurses.

To allow comparison across such diverse innovations, we gathered evidence against a common template. This looked at design, implementation, costs and benefits. Results were summarised in a comprehensive report and presentation to Dudley's Partnership Board.



# 'Vanguard' innovations – Dudley CCG

Evaluating a diverse set of interventions in a high profile setting

The challenge

Our approach

The outcome

## The outcome

The evaluation was highly well-received. We provided comparable evaluative information for each innovation. We helped the Partnership Board work through the findings of our work and make decisions about which innovations to stop, which to refine (and how) and which to scale.

Because these decisions were evidence-based, the Board could be more confident that better outcomes and a better use of resources would result.

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**The Strategy Unit ran a session on developing a vanguard evaluation strategy at our national new care models event. The presentation was captivating and insightful, and brilliantly articulated the challenges that almost all other vanguard evaluators were facing.**

Charles Tallack, Head of Operational Research and Evaluation Commissioning Strategy, NHS England

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# IAPT-LTC Early Implementers – NHS England

Providing expert support for local evaluation teams

The challenge

Our approach

The outcome

## The challenge

37 'early implementer' sites for the IAPT-LTC service required support for their local pilot evaluations. Sites needed help collecting and linking IAPT MDS data with secondary care data (and primary care data where possible), using local data systems. They also needed advice on IG procedures, how to access data, which healthcare utilisation measures to include in their evaluations and how to analyse their data. Furthermore, local services needed support to improve data quality/completeness, as well as practical guidance and training to help them design and run their evaluations.



# IAPT-LTC Early Implementers – NHS England

Providing expert support for local evaluation teams

The challenge

Our approach

The outcome

## Our approach

The Strategy Unit were commissioned by NHS England to undertake this work. We developed and ran five regional workshops covering evaluation methods, data quality, information governance, data linkage and healthcare utilisation metrics.

We provided 1:1 support for early implementer sites to develop their own local evaluations, supporting commissioners and providers to develop evaluation frameworks and run quantitative and qualitative studies.

We also developed 'user-friendly' guidance documents covering evaluation, data quality, data linkage methodologies, information governance and outcome measures.



# IAPT-LTC Early Implementers – NHS England

Providing expert support for local evaluation teams

The challenge

Our approach

The outcome

## The outcome

In delivering our approach, telephone or email support was provided to 21 of 22 'wave 1' sites and all 15 'wave 2' sites.

We ran five full day workshops that were attended by more than 100 people from 21 wave 1 sites and 11 wave 2 sites. The guidance documents were shared with all sites and we presented at 4 IAPT-LTC Early Implementer workshops and 8 IAPT-LTC Clinical Network meetings.

We also ran two webinar workshops, covering data quality and general evaluation queries.

Feedback received from attendees was highly positive – stating that the information shared was relevant and useful.



# The EPIC programme – Dudley CCG

Developing, implementing and evaluating staff ideas in primary care

The challenge

Our approach

The outcome

## The challenge

The Strategy Unit developed EPIC in response to national challenges facing primary care, informed by the GP Forward View and the 'Ten high impact actions'. EPIC is an evidence-based and experience-informed local primary care development programme.

The aim was to enhance the capacity and capability of general practice staff to develop and implement innovative ideas and to transform service delivery: focusing on quality and efficiency of care; patient experience and collaborative working.



# The EPIC programme – Dudley CCG

Developing, implementing and evaluating staff ideas in primary care

The challenge

Our approach

The outcome

## Our approach

EPIC had three workstreams:

- 1 'Business management', providing core business skills to every practice in Dudley, to improve productivity, workflows, data management and reporting.
- 2 'Performing as a team', supporting practices to improve what they do through ideas generated in joint learning sets, with bespoke support within individual practice settings.
- 3 'Transforming', facilitating practices working in partnership with external organisations to design and deliver ambitious new pathways, through a supported programme of action learning.



# The EPIC programme – Dudley CCG

Developing, implementing and evaluating staff ideas in primary care

The challenge

Our approach

The outcome

## The outcome

EPIC evaluated well. It received very positive feedback from practices. It showed improved skills and knowledge within the practice teams, hence empowering staff, as well as improving relationships with local partners.

Cost savings were demonstrated, arising from reduced repeat prescription processing, as well as reduced paper flow and document transfer – saving time. There were also reductions in GP appointments for pill reviews and a reduction in avoidable appointments, saving GP time.

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**The EPIC programme has created a format and an environment for change. The practice has been going through a lot of change, change is difficult. EPIC has given us some tools we will roll again and again to manage change in the future**

Practice participant, Dudley CCG

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# RAID Mental health liaison service in Northern Ireland

Using an innovative approach to overcome a technical challenge

The challenge

Our approach

The outcome

## The challenge

The Strategy Unit were commissioned by the Northern Health and Care Trust (Northern Ireland), to establish how effective their mental health liaison service (RAID) had been in reducing the chance of admission from ED and inpatient length of stay.

A quantitative evaluation was planned – however, the data that was available to the team contained no diagnostic codes by which to identify patients within cohort. Instead, a written description of the triage complaint was all that was available.



# RAID Mental health liaison service in Northern Ireland

Using an innovative approach to overcome a technical challenge

The challenge

Our approach

The outcome

## Our approach

In order to overcome the challenge presented by the lack of diagnostic code, the Strategy Unit team innovated: using text mining to extract meaning from the unstructured textual information.

Working closely with the team from NI, they established eight patient classifications and associated indicators. By applying these to the text, we were able to categorize patients, hence identifying the appropriate cohort for the evaluation.



# RAID Mental health liaison service in Northern Ireland

Using an innovative approach to overcome a technical challenge

The challenge

Our approach

The outcome

## The outcome

Using text mining as a technique to extract data, we were able to undertake a quantitative evaluation to assess the effectiveness of the Northern Ireland RAID programme in reducing chance of admission and inpatient length of stay.



# RAIDPlus Test Bed Evaluation – BSMHFT

Formative, mixed methods evaluation of an innovative programme

The challenge

Our approach

The outcome

## The challenge

RAIDPlus was one of seven national 'Test Beds' set up in 2016. It aimed to reduce the number of mental health crises and for better management of any crises that do occur, through a combination of technological innovation and service redesign. It was led by Birmingham and Solihull Mental Health Foundation Trust (BSMHFT).

Our evaluation aimed to provide a clear understanding of the combination of innovations being tested and an assessment of impact.



# RAIDPlus Test Bed Evaluation – BSMHFT

Formative, mixed methods evaluation of an innovative programme

The challenge

Our approach

The outcome

## Our approach

We undertook formative evaluation supporting the development of RAIDPlus, ensuring that any lessons learned as part of the process were fed into the programme. We used a mixed methods approach including process and impact evaluation work.

The evaluation has supported the scaling and spread of RAIDPlus locally and nationally by: showing the impact delivered on a set of outcome metrics, including an assessment of cost effectiveness, and by documenting and assessing the process of change to improve any future implementations.



# RAIDPlus Test Bed Evaluation – BSMHFT

Formative, mixed methods evaluation of an innovative programme

The challenge

Our approach

The outcome

## The outcome

The RAIDPlus evaluation is on-going. To date it has provided BSMHT with a robust evaluation framework detailing the programme and logic model. We also produced a detailed baseline report, establishing RAIDPlus' starting position both qualitatively and quantitatively.

As well as an interim evaluation report detailing initial findings on the development and implementation of RAIDPlus from a rapid evidence synthesis, strategic interviews, front line staff experience, service user experience and quantitative evaluation methods.



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**The Strategy Unit are inspiring in their commitment, dedication to evidence and use of innovative analysis as a way to improve health and care.**

**Professor Sir Bruce Keogh - National Medical Director, NHS England**

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