Social Innovation with NHS foundation trusts in north-west England

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Unlimited Potential

"Making the world a happier and healthier place to live."









Context

- NHS has 'wicked' problems needing new solutions
- NHS has a well-trodden technical innovation process
- Using Innovation, Health and Wealth (DH, 2011) 3 steps of "invention, adoption, diffusion", can we test and develop a process for social innovation?
- Understand sources of social innovation:
 - local people or fresh eyes?
 - "service users", community, staff or other disciplines?







- What we did-





- Programme delivered by Unlimited Potential (UP), supported by North West Social Value Foundation (SVF) and Voluntary Sector North West (VSNW), funded by Department of Health (DH)
- Sought a range of NHS foundation trusts (FTs) to take part:
 - √ acute teaching
 - √ mental health







NHS Foundation Trusts Taking Part, Location and Wicked Issue

"How do we give people with mental health problems in Wirral control, to enable them to live more meaningful and fulfilling lives" Cheshire and Wirral Partnership NHS Foundation Trust & Partners

"How do we ensure women and their families in Knowsley have a positive experience of pregnancy, birth and live with a new baby? Liverpool Women's NHS Foundation Trust & Partners

"How to give older people greater control and enable them to have more meaningful and fulfilling lives and in so doing reduce demand on the health and social care system' Salford Royal NHS Foundation Trust & Partners







- Approach -





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International Competition

Social Innovation in the English National Health Service (NHS) - A chance to win £1000!!!!



Competition

- International Competition
- Salford competition closed
- Wirral competition now open for entrants
- Knowsley -competition now open for entrants
- FAQs
- Crowd-sourcing socially innovative solutions from across the World for 3 wicked problems identified by North West NHS Foundation Trusts.
- Advertising a competition worldwide via internet, media and local promotions
- Recognises that people are the experts in their own lives and workplaces and can offer us new and often radically different ways to tackle problems.
- Requesting that solutions draw on resources/assets in local communities

Overview of the steps -



Step 1 - What's your problem?

Identify and reframe the "wicked issues" -

. . . .

Step 2 - Identify likely sources of innovation

- Identify the individual "bright sparks" within the local voluntary and community sector and social enterprises.
- · Clear criteria / rules for participation.



Step 3 - Enlightenment

- Promote the competition to potential "bright sparks", locally, nationally and internationally
- Entry form allows 300 words maximum to describe solution to the problem, or alternatively other media: film, story, poetry etc.
- · Shortlist up to 9 'Bright Sparks'



Step 4 - Co-production -Briefing Event

Bring NHS trust leaders and bright sparks together:

- . Overview of "wicked issues" by NHS Foundation trust & partners
- · 'Why' questions to delve deeper into the problem
- Use of creative thinking techniques to help develop the Bright Sparks ideas



Step 5 - Decision time - Marketplace Event

- · Each Bright Spark has a 'stall' to promote their idea
- · NHS Trust and partners spend 10 minutes at each stall, one to one
- The NHS trust decides which if any solution it wishes to pursue with the social spark(s).



Step 6 - Action

 NHS Trust develops clear action plan with progress and outcome measures, identify resources required and sourcing.



Step 7 - evaluation

Assess impact of solution for both NHS trust and the wider area.



Step 8 - mainstream

Option to implement solution more widely, if proven to be effective.

- What did we learn at each step? -



Step 1 – What's your problem?

What worked well

- Each NHS FT developed a multi-agency 'panel' of partner organisations
- Linked to strategic priorities and existing work programmes
- Some reframing of the wicked problem occurred e.g. "more home birth business flowing to Liverpool Women's" became "finding a positive experience of pregnancy, birth and life with a new baby"

What we learned

- Some examples of NHS FT fixing on a service problem
- Relationships between some partners weak - needed 'introducing' to each other
- Delayed start the urgent drove out the important
- Some shifting of leadership needs committed senior lead who understands social innovation, can steer partners and bring in new ones
- Needed to explore attitude to risk and how far on adaptationinnovation continuum the NHS FT was prepared to go

INVESTORS

Social



Step 2 - Identify likely sources of innovation

What worked well

- Local sources that came forward (had a personal interest):
 - NHS staff
 - "service users"





What we learned

- Asking local leaders to put us in touch with potential Bright Sparks was ineffective (few names emerged; none applied)
- Most "third" sector lacked spare capacity or showed poor understanding of the competition's objective
- This may have led to little interest from "third" sector organisations in applying

This step could be omitted.







Step 3 – Enlightenment and marketing

What worked well

- Videos clearly explaining problem and context (also helped clarify NHS FTs' own thinking)
- Marketing focus on contact with competition-owners and context:
 - 45% applications from local emails, attending mental health forum and local media coverage
 - 50% from Tweets and LinkedIn posts (276 clicked through to website from Twitter URL)
 - little/no response from group emails/website posts to partners, national/international innovation / entrepreneurship organisations
- Competition often described as 'genius', praised for simplicity of entry and support of entrants from diverse backgrounds

What we learned

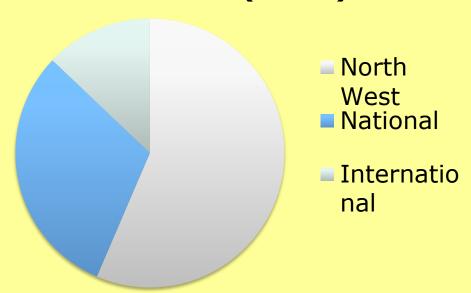
- Some coaching needed to ensure videos focused on showing assets of community before deficits
- Disappointingly few entrants from disciplines beyond health/care (engineers, artists, IT etc.)
- International entrants often 'ex-pats': how to get cross cultural learning?
- Background info on website often misread or ignored - often had to spell out to candidates
- Candidates and NHS FTs did not share same definition of 'innovation' – many took this to mean adaptation or incremental change
- Some technological innovation crept in







Breakdown of entries by location (n=62)



International entries n=8:

- China
- India
- Indonesia (entered twice)
- New Zealand (shortlisted)*
- Nigeria
- Portugal (shortlisted)*
- Spain
- 26 Salford entries 9 shortlisted (5 regional*, 2 national, 2 international)
- 23 Wirral entries 9 shortlisted (8 regional, 1 national)
- 13 Knowsley entries 6 shortlisted (4 regional*, 2 national)

^{*} Bright Sparks participating via the internet included a Knowsley participant on holiday in Egypt and a Salford participant touring the Americas









Step 4 – Co-production briefing events

What worked well

- Drop-out rate nil across all 3 competitions
- Filming of events and posting to YouTube helped recall and helped international entrants who were present virtually
- Skype use for international competitors to participate
- Reasonable adjustments for entrants, especially mental health "service users" in Wirral
- Clarifying the intention of each Bright Spark (commercial, altruism, public service)



What we learned

- 'GoToMeeting' webinar too complex Skype better
- Double check internet connection (failed after 1st check)
- Informal surroundings 'café style' encouraged playfulness and networking (Lego/toys next time!)
- Early briefing of Bright Sparks:
 - 'Why' questioning technique ensure it delves into problem rather than disintegrates into discussion and defensiveness
 - Bright Sparks often failed to use creative thinking techniques to further develop their ideas
 - Connect/introduce the Bright Sparks early to encourage synergies







Step 5 - Marketplace events and decision time

What worked well

- Marketplace idea praised for being simple, supportive and relaxed
- <u>Virtual' stalls</u> worked as well as 'physical' – using <u>video</u> and Skype
- Bright Sparks reported back personal growth and, for those with • mental health problems, increased confidence
- Bright Sparks, especially in Wirral, fed off each other and connections grew stronger, especially around film: personal stories, online soaps and cinema as therapy
- Every panel chose ideas to develop
- Original shortlisting criteria helped guide panel but did not restrict
- Early signs that ideas helped shift panel thinking

What we learned

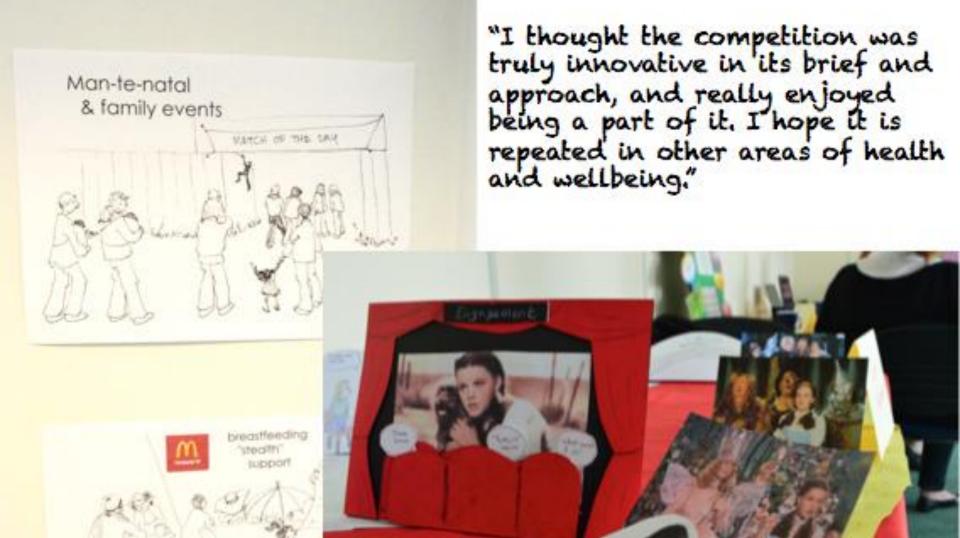
- Panels are used to 'commissioning' naturally drawn to more developed
 ideas at later panels we addressed
 their expectations and advised on how
 to support prototyping untested ideas
- Possibly provide a structure for panel decision-making (left to them)
- Decisions slow to be relayed back to Bright Sparks, who were left uncertain
- One example of direct selling of an existing service
- Some difficulty in minds of some Bright Sparks employed by NHS in separating themselves from their employers
- Intention of Bright Sparks pointed out to panels (commercial / giving them an idea / willing to help or not), but mostly forgotten or ignored











How panels handled ideas

Panels generally divided ideas into 3:

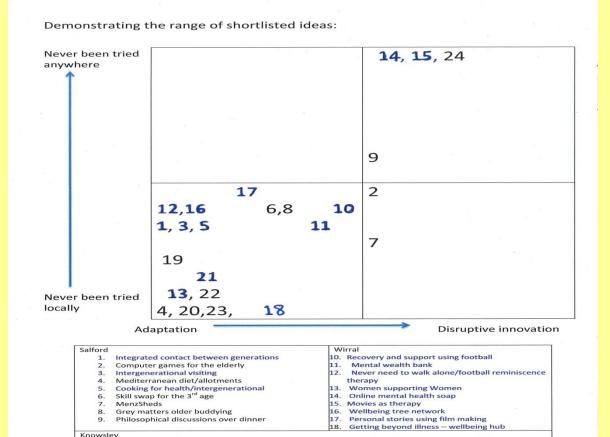
- 1 Ideas they choose to take forward themselves (usually more developed and tested)
- 2 Ideas they feel need to be embedded within the community or given to other partners such as housing (still to be actioned in most cases and a definite opportunity going forward example: Men's Sheds)
- 3 Ideas they rejected as unworkable, already in place or too costly

- Salford: chose 3 interlinked ideas around intergenerational working
- Wirral: to support all 9 ideas, to be brought together within one lead idea (a new premise already at the early stages of planning that would house a range of user-led activities to support mental wellbeing)
- Knowsley: chose one idea which was to mainstream a course to support women with post-natal depression

All 3 panels put in place arrangements to support the Bright Sparks to grow ideas. These arrangements are still at an early stage at the time of writing.



Innovation or adaptation?



19. Vox pop video walls

20. Tongue tie tools for breastfeeding21 Time for you PND course22 Young parent buddying23. Knowsley bosom buddies

24. Baby hubs – Gran-te-natal, man-te.natal Ideas in blue font are being taken forward by FTs









Step 6 - Action

What worked well

- Political 'air cover': social innovation can be tricky to `sell'
 - CEO backing, partners 'in it together', regular board briefings used
- Panel learned from each other
- Monthly 2-page flash reports covering progress in each competition enabled this (described as succinct and unobtrusive)





What we learned

- Discuss at the start what assets / resources might be available to support innovation: not just money, but connections, skills, Bright Sparks working together
- Make this explicit to all
- External sources of support not yet brought in such as UnLtd, School for Social Entrepreneurs
- One side-effect was that partners in Knowsley (NHS FT, CCG, local authority, housing provider) developed closer relationships and understanding







Step 7 - Evaluation of process: participants' feedback

(Evaluation of outcome outside project scope)

1. What were the positive things about this competition was run?

- It was really refreshing that you encouraged a non formal approach to the application, I think this helped encourage creativity. I thought the communications were brilliant and this gave me encouragement to concentrate my efforts.
- Fantastic facilitators, who were professional, friendly, inspiring and gave their all. The fact it was the first of its kind was exciting. The guidance notes and background very simple
- The energy of the organisers, the guidance offered and fun had
- The fact that it was open to everyone regardless of background, and that it emphasized that ordinary people were often experts in solving these kinds of problems.
- Also, that the competition focused on the quality of the idea rather than who had the fanciest presentation. I think it really encouraged creativity in doing this.
- Well-structured, friendly, accessible and relaxed
- Relaxed atmosphere. Great support. Great networking.







(Continued)

1. What were the positive things about this competition was run)?

- Relaxed atmosphere. Great support. Great networking
- Well organised. Focused on ideas, innovation and creative thinking. Opportunity to meet and quiz the panel in advance.
- Team work. Inspirational bigger picture. Positive influences. Knowledge.
- Friendly, supportive and relaxed manner. Feeling of reassurance. Good venue and location
- Nice to have a change to speak about what I am passionate about without the restrictions of 'organisations'
- The fact that it was open to individuals and organisations with ideas, with plenty
 of information on the website
- I love the idea of getting the wisdom of people not working in the system into the open space
- The support and framework is important and I think if word of mouth takes hold more people would come forward – knowing this is for real







2. How can we improve the way we run this competition?

- Perhaps assign a mentor to help develop the idea further before the pitch stage?
- IT (avoid) and venue (1st) Speed of payment perhaps bring cheques. Doesn't bother me but some people might think 'oh now they've had the detail they are not bothered about paying' Ensure all 'leaders' sing from an inspiring and polite hymn sheet and know their audience...(as discussed Heather). And timescales for a response I feel are slow, what are the reasons for this?
- In the first session, while it was fun it would have been good to present our ideas & get immediate feedback from organisers and other bright sparks - the development of the idea would then be evident in the marketplace
- I think the overall running was excellent. One question I was asked by some
 of the panel though was whether I was all set up and ready to provide the
 service (i.e. of my idea) and I had to explain that it was just an idea. So
 maybe some further briefing materials to the panel to really explain the
 premise of the completion could help.







(Continued)

2. How can we improve the way we run this competition?

- I think the current format is fine
- Better advertising of the competition
- As a participant not based in Knowsley, access to further information about priorities and services in the area would be useful
- Market place was a bit noisy maybe room needed to be bigger
- Opportunities to spread the word about yourselves
- No thoughts I have really enjoyed it. Being short, concise and to the point with minimum invasion
- Maybe more help with the application stage. The videos on the website were clear but getting an idea down in writing can be difficult
- More face to face briefings and communications through places people chat e.g. cafes, hairdressers, post offices
- Whilst social media and networks were used they still seem formal and on this first run – may not have reached some people who need to believe the great ideas they tell their friends are worth developing and telling the world!







3. What should we do more of?

- Encourage networking between bright sparks and linkage of ideas clearly
- Thank, support, reward. And also, explore what process is beyond £1,000. If an idea saved the NHS £30 billion yet you only were rewarded £1,000 it might feel a little like you were being used...so IPR etc. and group development of ideas Action Learning etc.
- Feedback on ideas
- I think the marketplace idea was great but 10 minutes was very limited, and maybe after it had finished, we could have had another group session with the panel for them to have asked further questions after meeting together (on the same day).
- Advertising of the competition
- Competitions are an excellent way to tap new ideas, particularly those with experience, first hand, of NHS commissioned services.







(Continued)

3. What should we do more of?

- Bright Sparks listening to other ideas
- Advertising the benefits of such a competition for networking
- These competitions
- Use of radio and local papers may still have merit
- Earlier face to face between panel and bright sparks or potential sparks
- Value of bigger meetings/events to get things going at the front end open space methodologies may help here
- Q&A or info hub still some fundamental questions being asked at the meet the panel event that may have been able to answer earlier
- Encourage balance between system naiveté and system savvy thinking
- More wider system/organization briefing resources are tight and so useful for outsider/facilitator to do event in hospital for example – perhaps with governors
- Communications with members in NHS FTs or partner organisations







4. What should we do less of or stop doing?

- Cant think of anything really...
- Trying to please everyone with IT. It just gets on my nerves and is hard to facilitate. Simplify
- Nothing!
- There was nothing that could have been lessened!
- Structure of the competition right length between sessions. Range of panel members. Accessibility – opportunity to attend via Skype etc.
- The first session was a bit repetitive
- Too early to say Bright Sparks may have more insight at this stage its good to try everything!







5. What should we keep the same?

- The background and statistics used to back up the local issues were very useful
- Energy, fun, enthusiasm
- I liked the creativity exercises in the first session, and the opportunity to meet the panel and ask questions. Also, I liked the competition's ethos in promoting the quality of the idea and allowing you to present in any format you thought best.
- Marketplace idea
- Market Stall
- Marketplace idea excellent
- Easy application, no pressure for first session. Freedom for artistic interpretation
- The structure from applying to the Bright Spark event to the final event. Wellorganised and spread out to give individuals a chance to develop ideas
- Support and keeping people informed has been excellent
- Buy in from Board to bedside personnel important if change is to be championed and supported







6. Was there anything you think you learned through being involved in the competition?

- It gave me a great deal of confidence in my own ideas. It will give me encouragement to develop ideas further in future
- Lots the two things that instantly spring to mind are the loneliness and 15 cigarette a day fact and the process of thinking how to make a problem worse in order to come up with creative ideas to make it better
- To apply my creativity and constrain ideas
- Yes, I learned and enjoyed the creativity exercises and how you could apply them to other kinds of problem-solving. Also, meeting a range of people but with a common interest was very satisfying, and it was good to develop my idea further after the first session. I enjoyed the back-to-basics creative approach that the competition fostered. And that ideas can just be ideas!
- It was interesting to see the overlap of ideas and the common ground
- How many great ideas are out there and the need for more support for them
- I found some of the techniques used at the afternoon workshop with Chris and Heather useful
- We all have similar positive aims







(Continued)

6. Was there anything you think you learned through being involved in the competition?

- Reinforces my notion of more joined up thinking and holistic in approach
- That my ideas are still relevant. I have felt oppressed and suppressed in my job and doing this has taken me back to when I worked in the community with a bottom up approach to health which WORKED!
- The Bright Spark event was useful, meeting the leaders and bright sparks gave me an insight into the problem as a whole
- Need to reflect post market place today
- From meet the panel event
 - Its great to have ideas from people who don't know what they don't know fresh eyes
 - However I would love the power of people to be leveraged to influence the system – most people don't recognize the impact of making the NHS more of a market place
- We need to develop a useful language to help patients and staff work together to get the health outcomes we all want – building trust and solutions together and learning from experimentation and when things don't go to plan







7. Any other comments

- Thanks this competition gave me faith in my own ideas and a platform to develop the seed of an idea into something meaningful
- I don't feel able to comment as I wasn't directly involved.
- Well done Heather Thank you Chris. Good luck everybody I hope we can smash this to make a difference. I have another idea!
- The marketplace idea was a good decision
- I thought the competition was truly innovative in its brief and approach, and really enjoyed being a part of it. I hope it is repeated in other areas of health and wellbeing.
- Thank you for the opportunity and for the handling of the process and event
- Really enjoyed the experience. Was empowering, challenging and rewarding and therapeutic. Thank you.
- Very, very enjoyable
- I have enjoyed the process and support from everyone, it has been a good learning experience about how I present my work.
- Thank you for just letting me participate. I just wish I could give up my job and run with developing this idea ☺
- Good initiative
- We need to keep it simple and accessible
- It needs resource at organization and individual level to make it happen
- Developing entrepreneurial and innovation mindsets/capability in NHS staff is critical









Step 8 - Mainstreaming

Summary

- Process was generally considered successful in generating potentially innovative solutions, with some tweaks suggested
- Good range of ideas emerged many at early stage needing support to test
- People with a direct and personal connection to the problems tended to apply – this could be local, national or worldwide
- NHS FTs, their partners and Bright Sparks are on a parallel journey of learning: how to take an idea, prototype, demonstrate proof of concept and mainstream it
- We are still at an early stage of understanding whether NHS FTs and their partners can deliver this
- They are literally 'acting themselves into a new way of thinking' rather than 'thinking themselves into a new way of acting' the evidence from other asset based approaches such as Positive Deviance tells us that this is the most effective way to deliver social change







Recommendation

- To support Unlimited Potential to turn the process into a marketable offering
- Process could work right across social determinants of health (housing, fire, police, education, etc.), not just NHS
- The level of support could vary:
 - offer support for steps 1-5 for those capable of taking ideas produced, testing and mainstreaming
 - offer support for steps 1-8 for those needing help with management of change

Next step:

Drawing on unspent monies, SVF commissions Unlimited Potential to develop and commercialise a product based on the pilot programme.







