

Dorset Innovation Hub - Defining Innovation and wider contexts

1. Background

Innovation nationally and within Dorset is described in many ways which leads to varied interpretations and creates a lack of clarity.



The DIH utilise the principles of the “Enabling innovation and adoption in health and social care - Developing a shared view” report (Feb 2021) by the Accelerated Access Collaborative NHSE, Care Quality Commission (CQC), National Institute for Health and Care Excellence (NICE) and partners which outlines:

- “Over the longer term, health and care services will face continuing pressures as populations age and our health and social care needs become more complex.
- But at the same time there are opportunities to use new ideas and technologies to improve the way we deliver care, improve outcomes for people who use services and become more efficient.
- Innovation is often talked about as the way in which we can meet these challenges and take these opportunities,
- but there has sometimes been a lack of clarity around what innovation means and how to do it well”.

While there is widespread recognition of the importance of innovation in health and social care, the term can mean different things to different people and the DIH use the AAC definition: “the term innovation to cover both invention (creating new ideas, products, services or models of care) and adoption (implementing what has worked elsewhere)”.

2. Definition of innovation

The Dorset Innovation Hub focus is on adoption of evidence-based innovation and recognising this we use the following definition of innovation:

“Innovation is the intentional introduction of new approaches, practices, treatments, technologies and services within a health and care role, team, organisation, or system, which are designed to improve and support communities to live their best lives”.

3. What are you trying to do?

Recognising innovation as one of the available evidence-based improvement methodologies, you need to consider what type of project you are doing to ensure you get the most effective outcome. To assess the type of project you are doing we recommend you use:

- [Defining Research Table](#) (2022) - Research, Service evaluation / Improvement / development, clinical audit, usual practice
- [Is my study research? \(hra-decisiontools.org.uk\)](https://hra-decisiontools.org.uk)
- Defining your project [FAQs – Innovation \(ourdorset.org.uk\)](https://ourdorset.org.uk)

4. Examples of innovation

Local (Dorset) case study examples of innovation adoption are available on our website at: [Our projects – Innovation \(ourdorset.org.uk\)](https://ourdorset.org.uk), and include; Placental Growth Factor-based testing, Heartflow, Badgernet, Together we can, CO@H – Covid oximetry at home, and Delivery of TEC in adult social care.

Badgernet: Maternity services

At University Hospitals Dorset (UHD), problems were identified with the existing digital records system as records were not easily accessible by staff and parents. Working in collaboration, the Maternity team and IT team at UHD identified and introduced a new electronic maternity healthcare record system (Badgernet), which allows real-time recording of all events wherever they occur: in the hospital, the community, or at home.

This new system has associated benefits including safety assurance as pregnancy record is readily available, all information / documents relating to a pregnancy being in a single location, and better access for community midwives and parents. Badgernet was implemented in UHD in February 2022.

Social Care Digital Innovation Programme: Local authority

The [Social Care Digital Innovation Programme](#) provided over £1m funding for local authorities to respond to adult social care challenges in their area. Digital services are developed and implemented in collaboration with service users, health care professionals, and local councils. Digital services can support people's care needs from initial assessment and care planning, to ongoing support.

These digital tools can give people more independence, make tasks for care professionals easier, and deliver long-term value for councils through cash savings and indirect non-cash benefits.

Case studies under this programme can be accessed via the [Local Government Association](#) website and include:

- [Improving assessment for home adaptations using smartphones](#)
- [Preventing falls in the community with safe steps mobile app](#)
- [Using data mapping to inform health care decisions](#)
- [Improving hydration for care home residents](#)

Bournemouth, Christchurch and Poole Council: 'Together we can'

Together We Can (TWC) was an innovation pathway led by BCP Council during the COVID pandemic. Working in close partnership with public, private and voluntary sector organisations as well as community groups and residents who offered to help and support to the vulnerable people in the conurbation during the pandemic. Outputs included:

- Protecting the area's most vulnerable residents
- Supporting those who have identified themselves as being in food crisis during the pandemic
- Helping vulnerable people (individuals or households) who are isolating and who are without family or friends nearby
- Providing advice for those who are self-isolating but who have support networks or who are well but worried

To manage the volumes of calls to a newly established TWC helpline a software-based solution was quickly put in place, adapting a Microsoft Dynamics package already used within the Council and generating a triage system. A standard set of questions were asked to shielding residents contacted by the team, in addition to the standard Government survey questions.

For further details go to: <https://ourdorset.org.uk/innovation/project/implementing-front-line-response-to-covid-19-a-local-authority-view/>

5. Difference between innovation adoption and quality improvement and transformation

Quality Improvement

“Improvement, including formal quality improvement (QI) using a structured method, is often used to describe incremental change within an existing service model, whereas innovation can be used to mean disruptive change that creates a new service model.

Furthermore, innovation is often viewed as a discrete, one-off change, whereas improvement is often viewed as iterative and ongoing. Nevertheless, both innovation and improvement tend to involve one or more interventions.....”

[Taken from the Health Foundation – The spread challenge report](#)

Transformation

“Transformation is a deliberate, planned process that sets out a high aspiration to make dramatic and irreversible changes to how care is delivered, what staff do (and how they behave) and the role of patients, that results in substantial, measurable improvement in outcomes, patient and staff satisfaction and financial sustainability.”

[Taken from the Health Foundation – Transformational change in NHS providers](#)

6. Key principles to increase likelihood of innovation adoption success

Utilising the following principles will increase your likelihood of innovation success.

Care Quality Commission. It is crucial that the health and social care system are good at inventive and adoptive innovation, so that new ideas are developed to solve problems and the best ones spread quickly. The report identifies the following six principles that are crucial for providers to be more effective at innovating:

- Develop and deploy innovations with the people that will use them
- Develop a culture where innovation can happen
- Support your people
- Adopt the best ideas and share your learning
- Focus on outcomes and impact
- Be flexible when managing change

Full report: https://www.cqc.org.uk/sites/default/files/20210208_InnovationPrinciples_report.pdf

NHS Impact. Recognising innovation as an evidence-based improvement methodology, we advocate the principles as outlined by NHS Impact:

NHS Impact ‘improving patient care together’ is the term used for the new single, shared NHS improvement approach. This includes the five components which form the ‘DNA’ of all evidence-based improvement methods, which underpin a systematic approach to continuous improvement:

- Building a shared purpose and vision
- Investing in people and culture
- Developing leadership behaviours
- Building improvement capability and capacity
- Embedding improvement into management systems and processes

When these 5 components are consistently used, systems and organisations create the right conditions for continuous improvement and high performance, responding to today’s challenges, and delivering better care for patients and better outcomes for communities.

For further information go to: [NHS England » NHS IMPACT](#)