

**Innovation Health & Wealth: Accelerating Adoption and Diffusion in the NHS**

The Department of Health published this document on 5 December 2011 which outlined the approach to accelerating the adoption and diffusion of innovative ideas across the NHS. The purpose of this is to improve the quality of care being delivered, and improve productivity to meet the growing demand for services. In turn the improvements in NHS provision are expected to improve the overall health of the nation and support wealth creation through contributing to the UK economy.

The document defines innovation as:

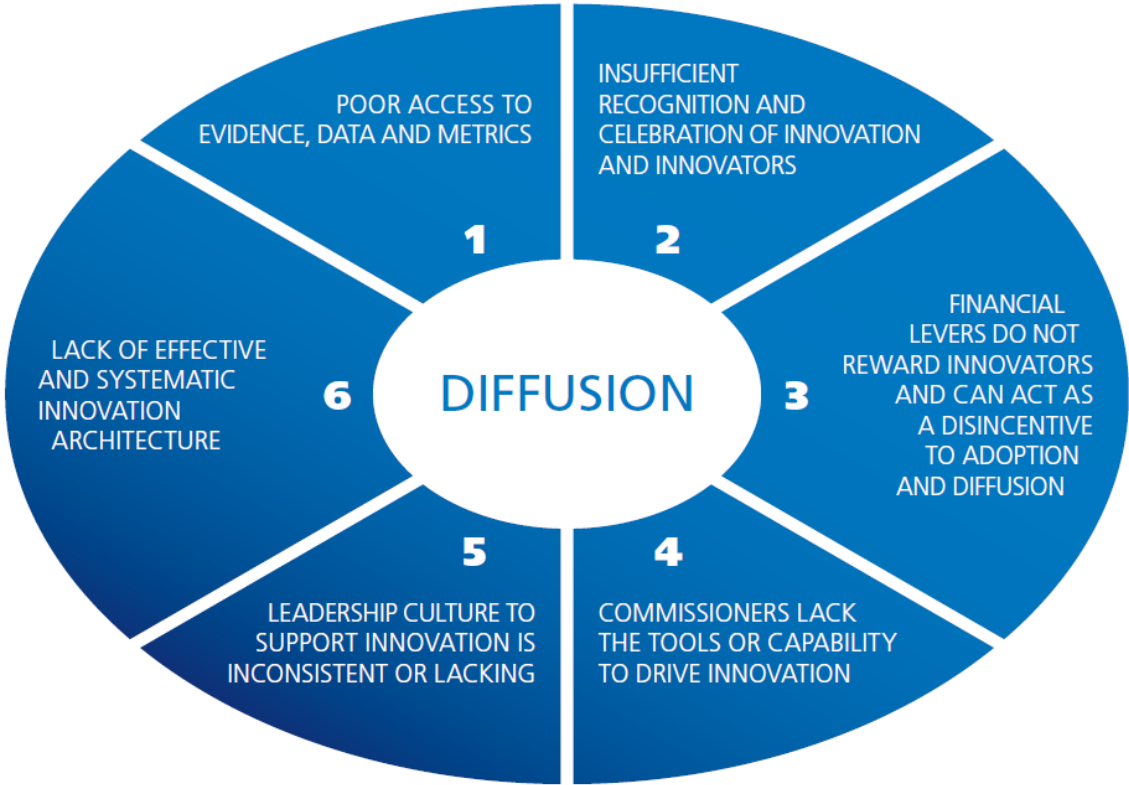
*An idea, service or product, new to the NHS or applied in a way that is new to the NHS, which significantly improves the quality of health and care wherever it is applied.*

The three stages to innovation are defined as:



The report also recognised that the UK is slow, relative to other developed economies, in adopting innovative medical techniques. The barriers to this have been identified as:

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The prerequisites for successful inclusion are identified as first, a *supply* of ideas, services or products that demonstrably add value in terms of quality and productivity to pre-existing arrangements; and second, a *demand* for those ideas, services or products from organisations and individuals throughout the NHS.

On the supply side, ideas must demonstrate that they add value, which may be related to clinical or other outcomes. On the demand side, potential adopters of an innovation need to be aware of its advantage.

The effective diffusion of innovation, especially in a large and complex system such as the NHS, will only happen if the following three approaches are mobilised together.

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**TOP DOWN PRESSURES**

Central requirements, regulation and incentives; and support, such as guidance and skills development

**HORIZONTAL PRESSURES**

Peer influence, transparent reporting, collaboration, competition and effective marketing from external suppliers

**BOTTOM UP PRESSURES**

Patient and public demand for best practice, professional and managerial enthusiasm, entrepreneurialism and choice

The review, led by Sir Ian Carruthers, Chief Executive, NHS South of England, identified eight themes:

1. Reduce variation in the NHS, and drive greater compliance with NICE guidance;
2. Working with industry, develop and publish better innovation uptake metrics, and more accessible evidence and information about new ideas;
3. Establish a more systematic delivery mechanism for diffusion and collaboration within the NHS by building strong cross-boundary networks;
4. Align organisational, financial and personal incentives and investment to reward and encourage innovation;
5. Improve arrangements for procurement in the NHS to drive up quality and value, and to make the NHS a better place to do business;

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6. Bring about a major shift in culture within the NHS, and develop our people by 'hard wiring' innovation into training and education for managers and clinicians;
7. Strengthen leadership in innovation at all levels of the NHS, set clearer priorities for innovation, and sharpen local accountability;
8. Identify and mandate the adoption of high impact innovations in the NHS.

### Identified Actions

The actions to address the identified gaps are summarised in Appendix 1.

### Implementation

An Implementation Board to oversee delivery will be established. The Board will be chaired by Sir Ian Carruthers, reporting to the NHS Chief Executive. In addition a series of cross-sectoral "Task and Finish" groups to lead the delivery of individual actions will be formed. Each group will be led by a Board level sponsor with leading practitioners and experts drawn from the public, private, academic, scientific and NHS communities.

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## Appendix 1 - Actions to address the identified gaps

### REDUCING VARIATION AND STRENGTHENING COMPLIANCE

We will introduce a NICE Compliance Regime to reduce variation and drive up compliance with NICE Technology Appraisals

We will require that all NICE Technology Appraisal recommendations are incorporated automatically into relevant local NHS formularies in a planned way that supports safe and clinically appropriate practice

We will establish a NICE Implementation Collaborative to support prompt implementation of NICE guidance

### METRICS AND INFORMATION

We will develop and publish an innovation scorecard to track compliance with NICE Technology Appraisals

We will procure a single comprehensive and publicly available web portal for innovation in the NHS

We will work with Which? to raise awareness among the public and patients of innovations in healthcare

We will establish the Clinical Practice Research Datalink (CPRD), a new secure data service within the Medicines and Health Care Products Regulatory Agency (MHRA)

### CREATING A SYSTEM FOR DELIVERY OF INNOVATION

We will establish a number of Academic Health Science Networks (AHSNs) across the country.

We will publish details of the AHSN designation process in March 2012

We will undertake a sunset review of all NHS/DH funded or sponsored innovation bodies.

With immediate effect, NICE will take responsibility for the iTAPP programme

### INCENTIVES AND INVESTMENT

We will align financial, operational and performance incentives to support the adoption and diffusion of innovation

We will increase the profile of, and maintain investment in, the NHS Innovation Challenge Prizes

We will extend the 'never events' regime and encourage disinvestment in activities that no longer add value

We will establish a Specialised Services Commissioning Innovation Fund

### PROCUREMENT

We will publish a procurement strategy in March 2012

We will double our investment in the Small Business Research Initiative

We will review the existing NHS intellectual property strategy and develop a model for contracts that is fit for purpose

### DEVELOPING OUR PEOPLE

We will ensure that innovation is 'hard-wired' into educational curricula, training programmes and competency frameworks at every level

We will establish joint industry and NHS training and education programmes for senior managers

We will establish an NHS Innovation Fellowship Scheme

### LEADERSHIP FOR INNOVATION

The NHS operating framework asks the NHS to prioritise the adoption and spread of effective innovation and good practice

Clinical Commissioning Groups will be under a duty to seek out and adopt best practice, and promote innovation

We will strengthen leadership and accountability for innovation at Board level throughout the NHS

### HIGH IMPACT INNOVATIONS

We will rapidly accelerate the use of assistive technologies in the NHS, aiming to improve at least 3 million lives over the next five years.

We will launch a national drive to get full implementation of ODM, or similar fluid management monitoring technology, into practice across the NHS.

We will launch a 'child in a chair in a day' programme to transform the delivery of wheelchair services throughout the NHS

We will require NHS organisations to explore opportunities to increase national and international healthcare activity and will host a summit with UK trade and investment in the new year

We will require the NHS to work towards reducing inappropriate face-to-face contacts and to switch to higher quality, more convenient, lower cost alternatives

We will require the NHS to commission services in line with NICE-SCIE guidance on supporting people with dementia

From April 2013, compliance with the high impact innovations will become a pre-qualification requirement for CQUIN