Response to NHS Chief Executive’s Open Call for Evidence and Ideas

Respondent ID: 258

Organisation name: SFA Ltd

Type of response: Online
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Please choose the description below that best fits your organisation’s main role:

Other

What can the NHS and NHS Commissioning Board learn from national and international best practice to accelerate the pace and scale of adoption of innovations throughout the NHS?

I've written a book on how good practice doesn't spread - translated into 4 languages. This came as a result of 15 years supporting large scale spread programmes in a number of countries. Happy to provide you with a copy (Jim Easton has one - Undressing the Elephant is it's name).

Bottom line - spread happens through targetted mgt top down effort. The touchy feeling Rogers Diffusion of Innovations odes work to scale on a targetted basis.

To consider : why is it healthcare that uses the term spread etc when other industries call it project management? I worked for Exxon for 10 years and we produced enormous scaling up programs across different countries in very short timescales - it was about focus and attention, and outstanding project mgt.

Happy to help review anything as I have the bragging rights for many countries on how to and how not to spread. (Happy to help for free - am not touting for business)

What specific actions do you think national NHS bodies, such as the NHS National Commissioning Board, need to take to encourage and stimulate the successful and rapid adoption and spread of innovations throughout the NHS?

Stop the bad practice before insisting on hew practices

stop researching spread etc. Put the money and effort into making adoption happen.

Do you have any further comments about accelerating the adoption and
spread of innovation in healthcare?

Lost the mental model of spread and adoption and replace it with "implementation" and large scale project mgmt.
After 15 years almost solely dedicated to "spread" in healthcare and 10 yrs prior in the oil industry I have come to the conclusion that creating more models and theories is of no use. Change happens because of action. PLEASE no more research and theories.

We would like to be able to follow up interesting comments and case studies. Can we contact you for this purpose?

Yes

Do you want to be kept in touch with the next steps in this process?

Yes

Do you want to be included in a wider community of interest?

Yes

What specific actions do you think local NHS bodies, such as providers and Clinical Commissioning Groups, need to take to encourage and stimulate the successful and rapid adoption and spread of innovations throughout the NHS?

as above