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

Respondent ID: 281

Organisation name: Derbyshire Community Health Services NHS Trust

Type of response: Online
Respondent ID: 281

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Organisation name: Derbyshire Community Health Services NHS Trust

Please choose the description below that best fits your organisation’s main role:

Community provider

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?

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?

Accessing proven Innovation - Central directory of evidenced best practice
A well signposted up to date centralised directory of best practice case studies and initiatives as per the QIPP Evidence collection. These could be categorised into various subgroups for the benefit of varying trust types i.e. where there is evidence of initiatives that relate to particular groups such as community providers, acute providers etc.

Encouraging and nurturing innovation – Investment opportunities assisting with developing and supporting innovation within the NHS
The Regional Innovation fund has proved that investment into frontline services to enable them to develop and pilot innovative and different ways of working.

At a national level work could be done to ensure that all commissioning levels are aware of this work and encourage partnership working to establish commissioning priorities that can be jointly approached to deliver solutions and clarity for both commissioners and provider services.

Promoting and showcasing - Consistent approach to showcasing and promoting innovative solutions
Over recent months there has been a continuous call (all originating from different sources) for examples of innovation and best practice. Often asking for examples on templates that all vary in content. This makes it particularly time consuming for the designated officers to keep completing the same variations on a theme in the hope that they will get noticed or contribute to the wider gain. This also happens in relation to funding and development opportunities.

If there was one central office that systematically gathered all of this information and all funding opportunities were channelled – this would save a lot of continued effort in re-working
submissions and applications for financial support or recognition for adoption and spread by other trusts that would benefit from the best practice of others.

Guiding commissioning priorities - Definitive commissioning strategies based on best practice innovation. Often the best place to be in order to understand the opportunities for improvement at the front line of service delivery. A national incentive drive for commissioners and providers to work together on common priority areas needs to be present. This will ensure that Commissioners are fully aware of the innovative solutions being developed and are better placed to build funding into spending plans. Currently innovative new approaches may not be recognised for what they are and are simply allowed to die due to lack of continued funding to sustain these often higher quality and more cost effective ways of working.

Positive national media campaigns and marketing strategies “highlighting the successes Support the continuation of regional and local hubs with an innovation role to ensure successful routing of local /regional best practice examples to the national directory. Why don’t we see more national and media coverage of the successes of the NHS?

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

In Derbyshire we have invested in an Improvement Leaders Capability Building Programme (ILP) which equips self-volunteering staff of all roles and grades within the organisation with skillsets and tools for service improvement projects. Over the last 2.5 years many of our innovative successes have been the direct result of staff having attended this programme. For example our last celebrating success event showcased a significant number of initiatives of innovation and excellence with 7 of the 12 winning/highly commended projects/initiatives having originated from our ILP graduates.

This proves that local investment of time and resources at Trust level can produce a culture that has innovative benefits and outcomes across all aspects of a trust’s portfolio from service delivery to back, middle and front office support functions.

Derbyshire Community Health Services’ Improvement Leaders Programme was awarded the ‘highly commended’ accolade in the ‘Lean Efficiency’ specialist category at the Midlands Excellence awards in February 2011 and also features on the NHS QIPP Evidence Collection.

More recently a Care Homes Support project (a resultant project from the programme) and the Improvement Leaders Capability Programme itself are finalists in the 2011 HSJ Awards.

In Derbyshire we believe we have a product which can fundamentally develop trusts similar to ours and yet we have not been encouraged to deliver this proven approach to other NHS organisations that could benefit, supporting the adoption and spread of best practice. If there are similar examples at national level with other proven solutions and innovation, then we are all missing out on some very positive and proven innovations.

I would be more than happy to discuss further the wide range of innovation happening daily within Derbyshire Community Health Services – one of the largest and geographically diverse community NHS trusts.
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?** |
| Most of the above points at national level would also need to be translated through to a local level |
| Encouraging and nurturing innovation “Investment opportunities assisting with developing and supporting innovation within the NHS |
| The Regional Innovation fund has proved that investment into frontline services to enable them to develop and pilot innovative and different ways of working. |
| In order to improve on this “a closer co-working relationship between commissioners and frontline services who may be working on innovative solutions and different ways of working would be known to local commissioners. |
| Commissioner understanding of local best practice evidence “often the providers of health care are better placed to develop innovative ventures that would benefit the broader commissioning agenda and future contracting arrangements for services. |
| Investment to promote continuous improvement “with tighter financial envelopes how can health providers generate the capacity/resource to improve and think differently about innovation opportunities or adoption and spread, when there is even more pressure from commissioners to deliver more for less. |
| Upstream saving initiatives agenda should be identified since innovative ways of delivering service in one area will probably challenge the activity and funding distribution to others. For example investment in promoting community based initiatives will help reduce certain acute admissions that have traditionally been a more expensive way of delivering care. This will require a mature and transparent approach to the best practice pathways for patient care, without a preciousness of historical funding streams/amounts. |