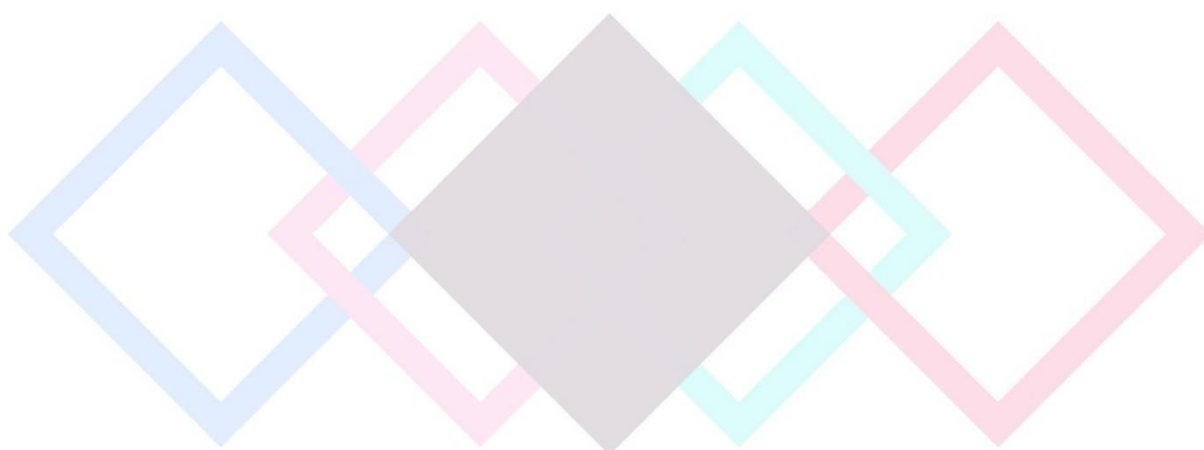


# Connected Health Cities End of Project Report:

## Workforce Development: Coaching for Spread and Adoption: Digital Health



# CONTENTS

- ABSTRACT
- INTRODUCTION
- METHOD
- RESULTS
- IMPACT
- CONCLUSION
- FUTURE PLANS
- AUTHORS
- ACKNOWLEDGEMENTS

## ABSTRACT

One of the main aims of The Connected Health City programme is to equip the healthcare workforce with the digital, analytical, contextual and management/leadership skills to improve the conversation between individual professionals and groups.

As part of its commitment to developing digital health skills in the current and future workforce in the North West Coast, the Innovation Agency's Coaching Academy ran a course entitled: Coaching for Spread and Adoption: Digital Health.

This seven month coached programme for NHS staff and community stakeholders was made possible by funding from Connected Health Cities.

Analysis of its resulting data and stakeholder narratives has:

- 1) Informed understanding of digital health transformation within the North West coast health and care system.
- 2) Provided insight into challenges and opportunities for leveraging the enabling power of workforce to implement and spread digital innovation.



# INTRODUCTION

Integral to the success of a connected health city 'learning health system' is the development of a digital ready workforce who are able to understand messages uncovered from the vast array of health and social care data.

The Connected Health Cities programme is working towards an integrated strategy to develop the digital and data skills of the current workforce whilst promoting the development of the next generation.

This activity feeds into national initiatives such as the National Information Board's work focused on developing a health informatics profession, and informatics skills for allied professionals such as clinicians.

In the North West Coast, CHC sponsored a seven-month course which was delivered by the Innovation Agency's Coaching Academy.

This programme and its curriculum were designed for health and care professionals with innovations and/or innovative approaches specifically relating to the use of data from, or implementation of, digital technologies that aim to improve health and care.

This programme was a natural fit for supporting the work of Connected Health Cities in that it afforded the opportunity to explore and assess workforce engagement and initiative for enabling adoption and spread of innovations that maximise data and digital feedback.

***"One of the primary drivers for selecting this topic was our desire to connect what we know about the power of data and analytics in connection with human initiative and curiosity."***

***"By matching learning experiences that pair storytelling and evidence-based strategy, we hoped to encourage participants to fall more deeply in love with their data, leveraging their promotional stories with science."***

Jen Kohan, Head of Coaching  
Innovation Agency

## METHOD

Professionals from health and care, third sector, academic, and public sector organisations in the North West Coast with a particular interest in the use of data from digital technologies were welcomed to apply, following an online recruitment campaign.

A limited number of places were also available for local small businesses. Cohort members were selected from applicants across the Innovation Agency Academic Health Science Network (AHSN) region and included an additional participant from the Greater Manchester AHSN region in the spirit of collaboration.

Participants submitted a basic application, and most were accepted. Upon acceptance, participants completed surveys to collect data about demographics, learning style, and self-efficacy.

Participants committed to three full-day workshops held in Haydock, Merseyside as well as virtual coaching sessions and webinars in between face-to-face meetings. The maximum number of spaces for each virtual coaching session was capped at five to ensure that innovators were able to receive individual attention.

Additionally, participants chose webinar topics and speakers but provided feedback in coaching sessions.

The content was also delivered in an online learning system, Moodle, to build engagement and technological facility. Participants engaged in online discussions, accessed webinars and virtual coaching sessions, and interacted with programme materials and feedback tools.

This seven-month coached programme provided:

- Practical skills and tools for the adoption and spread of innovative approaches; skills development; and action learning workshops.
- Regular group coaching to support learning and reflection on how to spread innovations.
- Personal development and growth as participants learned how to overcome barriers and challenge beliefs that hold them back.
- Group support to build resilience while working with others facing similar challenges.

The coaching team monitored progress for programme effectiveness through the lens of participant surveys and self-assessment against the Coaching Academy's Spread and Adoption Competencies (see below).

## RESULTS

A total of 34 participants from 17 organisations were enrolled in the cohort and trained coaches supported their journeys to spread:

- Digital health support to teachers and parents in rural education settings
- An interactive sexual health website
- Understanding of usage of apps in the community
- Creative opportunities for older people to use digital health tools
- Nationally funded population health project implementation
- Building a digitally ready health and social care workforce in Greater Manchester
- Introducing digital tech to help staff and GPs
- Training for the third sector - NHS and Local Authority - to work on digital platforms
- Digital physio-based programmes
- NHS England products onto the front line
- Digital technology to manage long term conditions to help people stay at home
- Supporting individuals with a digital toolkit
- Empowering people – population health sharing data
- Management systems to create more joined-up systems
- A&E physical wellbeing data analysis
- Self-assessment questionnaire – social care to share and have input
- Access information about diabetes
- App – professionals and people – daily living skills relating to confidence score
- Digital study days for paediatric oncology – nurse education, nursing competencies
- Encouraging exercise compliance/physio – better surgical outcomes
- Local authority app to inform public of winter/weather preparedness

More than half of the participants were concurrently networked in a Digital Pioneers programme offered by Healthier Lancashire and South Cumbria, whereby they were provided one day per week to work on their projects.



# IMPACT

Both the programme and participant outcomes for this course were evaluated in a variety of categories, organised within the Coaching Academy's unique Spread and Adoption Competency Framework.

More than 80% of participants reported growth of one or more standard deviations in all categories over the course of the programme, assessed at each face-to-face session.

A photo of this framework follows, and the framework can be downloaded from our website, [here](#).

	Emerging	Developing	Performing	Transforming
Innovation Mindset	Open to new ways of thinking about spread and adoption of innovative products and practices. Eager to grow and curious about understanding needs within system/organisation and how innovation can meet challenges. Is interested in exploring innovation pathways through the organisational and system landscape.	Understands that innovation spread and adoption sits within the context of wider system/organisation needs. Acknowledges risk and failure as inherent in spread and adoption. Asks questions to drive innovative practice, considers proportionate risk, and takes steps to optimise conditions for spread and adoption activity within own field.	Feedback from experimenting and learning from failure inform new thinking about spread and adoption of innovation. Demonstrates courageous and collaborative action that is driven by a clear need. Displays system thinking, and understands drivers and constraints for implementing innovation at pace and scale.	Leads a community at scale to develop individual and systemic capacity for transformative change through understanding challenges and identifying evidence based innovation for spread and adoption. Confidently models and champions divergent thinking, dynamic strategy, and moving to action.
Goal Setting, Monitoring, and Evaluation	Defines a spread and adoption goal for innovation/innovative practice that connects to health outcomes, and identifies potential impact on individuals and system.	Articulates explicit, time bound, and achievable spread and adoption goals with nominator/denominator for scale. Establishes evidence base to measure value, citing external sources and research where appropriate.	Monitors and adjusts innovation efforts via reflective practice, collecting and responding to data with exploratory assessment insights and questions.	Articulates spread and adoption journey, goals, and assessment so that others can apply learnings to new models, and applies evaluation for system transformation.
Systems Thinking and Agility	Understands interdependency of wider systems for spread and adoption. Communicates priorities and engages with interrelated systems to plan for successful spread and adoption.	Understands the need to engage and empower wider system stakeholders. Identifies critical friends and system levers to support and inform innovation efforts.	Engages key influencers across system to align innovation with local priorities for spread and adoption. Navigates innovation pathways with flexibility and responsiveness.	Maps innovation journey through relational connections and evidenced impact, articulating and leading system transformation via digital tools and collaborative relationships
Evidence-based Strategy and Practice	Familiar with skills needed to support innovation spread and adoption. Understands need to promote value with evidence, and asks questions about what evidence best demonstrates viability of innovation.	Seeks opportunities to uncover and establish research and evidence base to define value, identify stakeholder and system needs, and strategize for spread and adoption	Determines innovation value and viability using evidence to develop and articulate strategy. Explores creative methods for evaluating outcomes and analysing data. Curates innovation relative to organisation/system need.	Fosters others' development in understanding and applying research and evidence based practices to drive innovation spread and adoption, and identifies gaps in existing research to inform future strategy.
Communication and Relationship Management	Understands need for innovation, and feels ready to communicate thoughtfully and develop collaborative relationships for successful spread and adoption	Articulates evidence-based needs and value for innovation in messages that spark interest and build critical relationships intended to promote decisive action.	Differentiates and effectively delivers focused messaging to engender adoption, advance systemic change, and spread innovation at pace and scale, to drive transformation.	Influences other innovative leaders and builds their capacity to communicate and advocate effectively with stakeholders, navigating communication within diverse power structures.
Technological Facility	Utilises technology to manage professional responsibilities, expand capacity, and engage in synchronous and asynchronous collaboration to transfer knowledge.	Applies appropriate technology tools to communicate and build learning networks with stakeholders to improve. Engages in synchronous and asynchronous collaboration to build and apply knowledge.	Optimises technology to collect data for continuous improvement. Facilitates synchronous and asynchronous collaborative data to evaluate spread and adoption activities and alignment with system priorities.	Leads innovation and transformation to create new forms of, and uses for, technology as a tool for communication and change. Inventively connects technology in order to improve outcomes.

Participants were asked to report specific examples of why they assessed themselves where they did within the competency framework, and these were some of their responses:

### **Goal setting, monitoring, and evaluation**

- Use tools to monitor alignment to value proposition
- Reviewing project development for necessary adjustments
- Defining time specific goals
- Setting goals but learning to adjust along the way
- Create systems to support goal monitoring

### **Systems thinking and agility**

- Finding stakeholders in the system to effectively aid and support the project
- Connecting with digital colleagues and inviting them to contribute
- Greater understanding of organisational boundaries and obstacles
- Greater understanding of commissioning
- “Aiming high” in the system for connections
- Better able to gather evidence of impact to inform strategy and rationale

### **Evidence-based strategy and practice**

- Project alignment with NHS research and priorities
- Measuring progress with surveys and data analytics
- Building case studies
- Using test groups and peer support
- Greater understanding of the importance of evidence to making the case for adoption of innovation
- Building on existing evidence and using evidence to drive new lines of questioning

### **Communications and relationship management**

- Understanding staff training needs
- Developing new networks with like-minded people
- Increased confidence in expressing goals and adoption strategy to others
- Using communication effectively to understand the innovation landscape
- Using new tools to shape messaging for specific audiences
- Expanded collaboration outside of traditional circles

### **Technological facility:**

- Maximise existing technology
- Engage expert support
- Use technology to respond rather than react with the right idea, at the right time, with the right people
- Utilise video conferencing
- Using media to tell the story of innovation projects



## CONCLUSION

Reflection and analysis of programme outcomes and participant experiences has greatly informed understanding of how learners within the workforce manage spread and adoption of digital innovations within the health and care system in the North West.

While data and participant narratives from the programme are still being analysed, primary takeaways at present are:

- Staff with natural connections to each other within organisational structures are more likely to seek support and feedback from one another. Our Digital Pioneers participants were absolutely more highly engaged with this programme than other participants who had no additional network connections.
- An early focus on value proposition and business model tools enabled participants to see the need for their innovations in a more clear and impact-focussed manner. If that need was less clear, they were encouraged to engage in further investigation before they could work to secure adoption.
- Implementation of digital innovation and increased use of data from digital innovations required a greater understanding of enablers in the system than most participants were originally aware. These enablers included workforce, IT, and estates considerations.
- Finally, coaching proved to be the most effective way of helping participants reflect on their own learning and experiences. Instead of pointing cohort members towards what was believed to be their best options, coaching questions were used to help participants discover for themselves:
  - How their data might be best used to tell the story of their innovation journey
  - Where to look in the system for support
  - Who to contact, especially through new network channels available within in this cohort
  - How to monitor and evaluate their goals using research-based strategies and tactics.

## **FUTURE PLANS/SUSTAINABILITY**

Because of this support from Connected Health Cities, the Innovation Agency was able to host this cohort and evaluate programme outcomes, which benefits all of our academy stakeholders.

The Innovation Agency has now committed to running similar Coaching for Spread and Adoption cohorts twice yearly, with themes aligned to priorities in the system.

The focus on data from digital tools has strengthened its curriculum and support methodology, in that, no matter what theme each course may adopt, all future programmes will have a strong foundation in learning from analytical data.

## **AUTHOR/MAIN CONTACT**

Jen Kohan, Head of Coaching Academy  
Innovation Agency

## **ACKNOWLEDGMENTS**

Connected Health Cities is a Northern Health Science Alliance led programme funded by the Department of Health and delivered by a consortium of academic and NHS organisations across the North of England. The views expressed in this document are those of the author(s).

