



## Case study; Developing the NHS National Technology Adoption Hub

### The Challenge

The NHS has long been criticised for its slow uptake of new devices and other technologies even when there is compelling evidence of their efficacy. In response to this, the Health Industries Task Force (HITF) identified the need for a coherent approach within the NHS to the adoption of new health technologies. The NHS Institute for Innovation and Improvement's National Innovation Centre has a lead role in developing and coordinating NHS action to address this agenda.

Currently several NHS organisations as well as healthcare technologies companies have major roles at different stages in the complex system, described as the “innovations landscape,” for the development, evaluation, marketing and adoption of innovative technologies. In general the landscape currently relies on “pushing” innovative technologies into the NHS rather than responding to a “pull” from clinical need and a drive to improve productivity. However, the current NHS reform programme should create a new drive for adopting innovative technologies with the combination of Foundation Trusts operating under Payment-by Results within an increasingly competitive environment, with an increased independent sector, more patient choice and strengthened commissioning. This should facilitate improvements in NHS productivity and clinical service quality.



To address this issue of a lack of NHS “pull,” HITF requested that the National Innovation Centre pilot the concept of an Adoption Hub [AH]. Tricordant were asked to develop the business plan for the AH (quickly!) and have subsequently also supported its set up.

### Tricordant approach

The “innovations landscape” is clearly a very complex context for any new NHS organisation. We began by reviewing the appropriate reports and literature, and identifying and interviewing around 30 key stakeholders from a range of governmental, industry, clinical, NHS management and academic perspectives. From this work, we developed an understanding of the complex interactions at a whole systems level around the adoption of innovative technologies. This enabled us to begin to identify what the AH would need to do, in terms of whole work units delivering key transformations, to make a meaningful contribution to deliver given its constrained resources.

*“The Tricordant team was able to work with a wide and disparate range of stakeholders to develop a powerful understanding of the adoption of innovative technologies in the NHS. They developed practical insights into how to effectively influence this very complex system. These were captured and developed in a robust, practical and well supported business plan, delivered in a timely and professional manner.”*

***Dr Maire Smith, Director of Technology and Product Innovation, NHS Institute for Innovation and Improvement.***



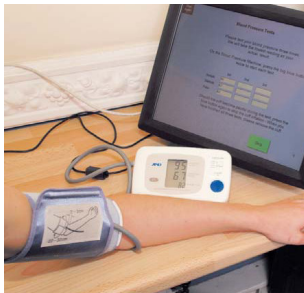
## Outcomes

The project outputs were captured in a business plan which described how the purpose, role and function of the Adoption Hub will start to tackle the complex set of cultural, organisational and financial blocks to adoption within the NHS. These blocks operate within individual NHS Trusts and at the overall system level to slow mass-adoption, even when innovative technologies are shown to deliver clinical and financial benefits within early adopting Trusts.



Three key primary level functions were identified:

- Running a small number of pilot projects to explore and address the clinical, workforce, financial, cultural and organisational issues around the accelerated adoption of prioritised products in a number of pilot Trusts to produce “adoption cases” with a “how to” focus. These products will already have proven prima facie clinical and financial cases.
- Pilot projects to explore the most effective strategies for supporting the mass accelerated adoption of products where adoption cases have already been developed. Critical to addressing this latter issue will be finding effective ways of working with clinical and organisational networks across the NHS.
- In addition the Hub will seek to collaborate with and learn from research and experience in other areas and from alternative approaches.



The Hub, with the wider NHS Institute, will then draw from these outputs to develop learning and knowledge which it will then share with the rest of the Innovations landscape and NHS. If this learning can help create a more innovation friendly and productive NHS, the financial benefits will be very large. The Plan demonstrated that the direct cost benefits of the pilot projects alone are likely to be several million p.a. across the NHS and would more than pay for the small initial budget provided by the NHS Institute, NW RDA and other funders for the AH’s initial “proof of concept” phase.

During this phase, it is anticipated that the AH will be able to demonstrate the potential to make a significant contribution to changing processes and the underlying culture within the ‘Innovations Landscape’ to enable the NHS to realise the considerable financial and patient care rewards of adopting beneficial new technologies. This in turn should also support the further development of the UK health technologies industry which is a major generator of high skill innovation-based economic growth and employment in line with the DTI’s strategy.

## Ongoing development

Following the initial business plan which was agreed by the HITF Strategic Implementation group, Tricordant have assisted the NIC in the further development and establishment of the Hub. This has included involvement in the interview panel for the Chief Executive and the Hub Steering Group.



**National Innovation Centre**  
*Technology Adoption Hub*

The National Technology Adoption Hub was formally launched in September 2007, with significant national media publicity. The Hub is now established under the strong leadership of Margaret Parton, and as part of the innovations landscape, is beginning its first projects – see [www.technologyadoptionhub.nhs.uk](http://www.technologyadoptionhub.nhs.uk).