

Social Care Digital Innovation Programme

Discovery phase evaluation report

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Social Care Digital Innovation Programme

Delivering digital innovation in social care

This LGA and NHS Digital programme provides grant funding for 12 Local Authority projects to deliver digitally enabled innovations in social care.

Traverse and the Bayswater Institute were commissioned to provide a formative and summative evaluation of the Social Care Digital Innovation Programme (SCDIP). This report delivers insights about the SCDIP discovery phase.

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- The Social Care Digital Innovation Programme 2018/19 (SCDIP) responds to learnings from the Local Investment Programme (LIP) and the corresponding [interim report](#) delivered by Traverse and the Bayswater Institute in March 2018. This report suggested an approach where the introduction of a discovery phase could facilitate the exploration of a range of factors that contribute to more successful implementation, scalability and sustainability by identifying and responding to an evidenced need.
- The goal of the SCDIP programme, is to catalyse the adoption of digital solutions that can support independence of citizens, assist in the integration of health and social care and address rising demand.
- The programme has been split into two phases;
 - **1. Discovery phase:** Grants of £20k were awarded to 12 Local Authorities in July 2018 to undergo a discovery phase. This aimed to determine the project needs, test the research challenge, explore solutions and ensure user needs are met by project proposals.
 - **2. Implementation phase:** Following this, in October 2018, it was intended that 6 projects be selected to receive up to £80k in funding to implement project plans identified in the discovery phase, although this has been increased to 9 following discovery phase learning.
- The 12 projects that were selected to take part in SCDIP demonstrated that they responded to local challenges in one or more of the following areas:
 - **Demand Management and Efficiency** – including strength based approaches, helping people manage their own care and support.
 - **Market Shaping and Commissioning** – working closely with care providers to improve access to good quality care.
 - **Sustainable and Integrated Care** – improving cross sector working and patient flow.
- While the projects sit within these key themes, there is a range of design and delivery approaches.
- This report evaluates the SCDIP **discovery phase** (July-Oct 2018) and includes learning from the discovery phase projects, as well as for the SCDIP programme in delivering this two-step approach.

What is a discovery phase?

- A 'discovery phase' is used to understand user needs prior to designing a service.
- It ensures that the services designed are solving the right problems and that these are tested before being implemented.
- This means that project activities, need cases and new user journeys can be tested to make sure that they are addressing user and stakeholder needs and that they are plausible in terms of scope.
- A discovery phase helps to ensure the project's relevance, buy-in from service users and ultimate success when it comes to service take-up and scalability.



Nottingham City working with SPLAT (Speaking, Listening, Acting Together) to develop their solution. Find out more on page 11

Methods

While each project designed their own discovery phase, monitoring of project discovery phases was done using the following methods:

1. Discovery Stage Kick-off Event and Learning from Local Investment Programme (LIP)

- Discussed learnings from the Local Investment Programme
- Presentation from service design agency Snook

2. Discovery phase monitoring and data collection

- Two sets of semi-structured peer learning calls in July and September. These were in the form of a conference call, where project teams discussed themes emerging from the discovery phase.
- These were optimised with projects grouped as follows:
 - Group A: South Tyneside, Nottingham City and Wirral.
 - Group B: Cambridgeshire, Stockport and Sunderland.
 - Group C: Havering, Haringey and Isle of Wight.
 - Group D: Lincolnshire, Bracknell Forest and Shropshire.

3. Discovery phase reports and implementations phase bid

- Projects were assessed on their presentation of a discovery phase report to determine whether they would receive funding to move to the implementation phase.
- This report was presented to a panel including members from LGA, NHS Digital and Traverse and decisions about which 6 projects would progress to the implementation phase and how much funding projects would receive were based on a scoring system with the following weighting:
 - Discovery phase review (40%)
 - Implementation phase plan (30%)
 - Presentation (30%)

Learning adopted from the Local Investment Programme (LIP)

During the Kick Off meeting, findings from LIP were presented as recommendations for how best to approach projects. Introducing these themes and the ideas presented by Snook around the discovery process caused several of the projects to re-assess their ambition and scope for the projects. The evolving thinking for the projects became clearer during the peer learning calls and the discovery phase monitoring. The LIP findings are as follows:

Theme	Project Impact
Ambition – the benefits of starting small	Some LIP projects demonstrated the benefits of having narrow ambitions initially but a clear route to scaling once success was demonstrated.
Information governance, data sharing and consent	The importance of this topic has seen it recur across nearly all of the LIP projects. Two projects remain blocked by Data Access Request Service applications to NHS Digital.
The impact of General Data Protection Regulation (GDPR) on projects	GDPR had a major impact on consent, data sharing, breach notification, privacy by design and the role of Data Protection Officers (DPO.)
Developing with partners and coming to agreement about intellectual property (IP)	IP caused challenges in one LIP project and had the potential to impact on a second. The choice of buy or develop with regard to solutions requires consideration of IP issues. This is particularly true when collaborating with the private or University sectors.
Ethics approval	Health has a much higher requirement for ethical approval if the intervention is identified as research. One LIP project ran into ethics difficulties. As integration of health and social care progresses it will become very important to clarify what kinds of interventions qualify as research rather than service development or audit.
Sustainability of approach	Two of the LIP projects demonstrated a ‘pump priming’ approach to modifying practice where the LGA funding has acted as an exemplar. The future costs of the intervention will be borne outside of the health and social care system but provide benefits to the payer and the system. This is a highly sustainable approach. Other interventions cause cost to be incurred in external budgets but have great improvements in efficiency and outcomes.
Implementing behaviour change	Some LIP projects showed innovative ways to incentivise behaviour change. This is often a key cultural issue and any behavioural ways to embed new practice are highly pertinent.

Selected projects for SCDIP

Theme 1: Efficiency and strength-based approaches



Exploring how to make it easier for all people, including those not readily able to navigate websites, to connect to community initiatives by building a bridge between community information available and residents.



Giving the individual control of the financial assessment process through exploring a digital self-service approach. The project will address the barriers to such an approach.



South Tyneside Council

Service users with learning disability and/or autism feel not listened to or understood so this project will explore improving communication and conversations to help co-design solutions.




Enhancing the role that information/digital technology play in helping people with autism developing their own solutions. The project will also explore the role of biometric technology to pre-empt care needs.



Wirral's partnership project with Autism Together features on ITV News.





Selected projects for SCDIP

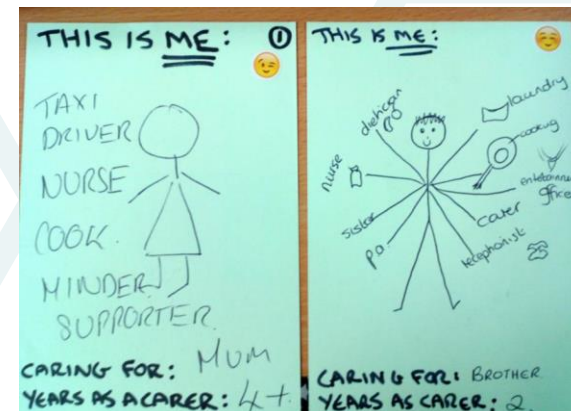
Theme 2: Managing markets and commissioning	
	<p>The project will explore different ways of meeting needs working with care providers, users and carers to increase the role digital and assistive technology with individual's care plans.</p>
	<p>Addressing the recruitment and retention problems within the health and social care market through exploring portability of employment checks and evidence of statutory and mandatory training being completed.</p>
	<p>Exploring the behaviour change required for providers and citizens to deliver a new outcome focused model for services supporting adults with learning disabilities.</p>
	<p>Combining large data sets and applying predictive analytics, machine learning and data modelling to better understand current demand, predict and prevent future demand. This will inform commissioning plans.</p>



Havering planning their solution with their social care providers.

Selected projects for SCDIP

Theme 3: Sustainable and integrated care and health systems	
 <p>Cambridgeshire County Council</p>	<p>Developing a digital offer for medicine management support by exploring integration of care delivery with health and local pharmacies and creating a tool that matches medical adherence equipment with user needs.</p>
 <p>ISLE of WIGHT COUNCIL</p>	<p>Discovering the potential role for robotics by testing public perceptions and understanding what objections people may have to robotics being deployed as part of the care and support solution.</p>
 <p>STOCKPORT METROPOLITAN BOROUGH COUNCIL</p>	<p>Supporting people to remain in their own home through exploring technology solutions and increasing the impact of assistive technology, including products linking into monitoring centres or viewed by family carers.</p>
 <p>Sunderland City Council</p>	<p>Developing a scorecard to test the effectiveness of assistive technology and designing a platform to present all the data collected by the products.</p>



Stockport creating an end-to-end journey from the user perspective

The following section thematically explores the benefits that SCDIP projects identified from participating in a discovery phase:

Adapting view of project scope based on findings

The discovery phase approach and the guidance from LIP helped several projects to reassess their aspirations. Two of the projects generated useful insights in terms of scope and depth of the projects.

As part of their discovery phase, **South Tyneside Council** engaged people with learning disabilities and/or autism to discuss how technology could better support them. This has opened up a much wider discussion that has surpassed the 3-month time constraints of the SCDIP discovery phase, which has meant that they have continued their discovery phase, allowing them to explore issues in much more depth than was originally proposed.

The discovery phase for **London Borough of Havering** facilitated broad stakeholder engagement and demonstrated that there was a real need for their project approach, although they also learnt that the scope of the project goes beyond social care into other care sectors including health. NHS Digital recognised the value of this project and its potential for linking into existing projects and have agreed funding for Havering to continue to develop their project for social care providers at a regional level.

In both cases very valuable learning has been developed that the LGA and NHS Digital wish to retain. They will continue to support these projects to evolve into achievable models of delivery even though discovery phases identified that they were out of scope for the SCDIP implementation phase.

Starting with user needs

The discovery phase invited projects to start by identifying **user needs rather than current service capabilities**. This meant that projects were required to be flexible and adapt their projects according to emerging findings from user engagement. Benefits of the user-led approach included:

- **Identifying the need case and synergising views of end-users and stakeholders:** This has meant that projects can be steered towards focusing on technology and services that can have the greatest impact. For example in **Stockport**, both service and staff needs were considered to help understand and synthesise their priorities. In **Shropshire**, engaging with both service providers and other local authorities as well as the Association of Directors of Adult Social Care helped them to better understand the need their approach could address. In **Havering** research has been conducted to understand the value of their product from the perspectives of individuals (working in care providers, the council and the industry as a whole). In **Haringey** the discovery phase allowed them to engage with a wide range of partners and gain a common and increased understanding.
- **Ensuring user buy-in:** User engagement has also ensured user buy-in to the projects, as user research participants have been consulted when developing need cases and testing early prototypes. For example in **Havering** prototyping has meant that workers, providers and senior leaders have been enthusiastic about the project and its potential. In **Bracknell Forest** they plan to engage user research participants during the project roll-out to help evaluate the initiative.
- **Testing adoptability:** In **Wirral**, staff were engaged to understand how workable any project outputs would be in a residential setting. Ideas were tested in specific settings, for example at home, to see if they were acceptable in these environments.
- **Iterating service designs based on findings:** One authority identified that monitoring of service acceptance, even using established evaluation tools, is often perceived as an administration task. This disconnect between data acquisition and service delivery caused the project to rethink the goals of the service.
- **Usability testing:** **Nottingham City Council** engaged with their SPLAT (Speaking, Listening, Acting Together) user-led group who also form the learning disability and autism partnership board. This has led to the development of an app which has progressed through close collaboration and balancing user needs with usability.
- **Developing a new user-centred approach:** Through SCDIP, some local authorities have delivered a discovery phase for the first time ensuring success by partnering with an external organisation. They have learnt skills to adopt this type of user research for future projects.

Understanding the market

Several projects have used the discovery phase to **explore existing technologies** prior to developing something new, to help understand where there are gaps and determine “what good looks like”.

For example, through partnering with Digital Catapult, **Sunderland City Council** refined their service focus and this enabled them to define which existing technologies could help deliver their project. This was then used for a clear procurement process based on headings including: openness, security, scalability, reliance, usability and economic viability. These would be used to test technologies on an ongoing basis throughout implementation.

Understanding need for future data collection

As a result of engaging in the discovery phase, **Stockport** identified that they were not collecting enough data in all instances to measure outcomes, they have since refined their approach as a priority for future projects.

Reducing risk and understanding benefits

Some projects identified that taking part in a discovery phase mitigates against full implementation risks, thus ensuring that there is user buy in and that the project is scalable prior to investing more resources. It also provides an opportunity to understand the cost savings that can be expected from a project more accurately, as well as understanding demand drivers.

Working with academics and industry experts

Projects worked with technology specialists and academics collaboratively to find the right solutions to tackle their identified issues. This has helped to fully determine the problem that the projects should address. For example in **Cambridgeshire** the discovery phase enabled the project to engage stakeholders within the medicine management sector and related experts, as well as service users and stakeholders. **Haringey** council engaged in a widescale review of assistive technology supported by the industry association Technology Enabled Care Association (TSA).

Recognising the Interplay of Practice, Culture and Technology

The recognition that the technology did not exist in isolation but required new ways of working and engagement with a range of stakeholders was well represented across the projects.

Stockport engaged with their telecare provider CareCall to consider how a stratified approach to telecare could include more rapid assessments and fast-tracked installs. This involves a newly formed team called the STAT (Stockport Triage and Referral Assessment Team.) This has the potential to increase acceptance of the use of technology by making its introduction more immediate and responsive to people's needs. It was also recognised that getting the technology in quickly and where need was greatest could have a beneficial impact for health services which has led to discussions and improved collaboration with them

Personalisation

The discovery phase allowed several projects to explore a service-led view needs-based approach which did not start with the technology and was not one-size-fits-all.

In the case of **Sunderland** this caused a shift in the view of how each of four technologies could support people with specific corresponding needs to how combinations of the technologies were appropriate. This move from looking for single pieces of technology to personalising the mix of technologies is potentially very powerful but has an impact on the 'core' platform proposed. This evolution in thinking is in line with personalisation and the idea of combinatorial approaches in the 'Five Year Forward View.'

Stakeholder engagement

The implementation of a discovery phase resulted in much greater levels of stakeholder engagement in development of the approach to an implementation phase. This was evident in the breadth and depth of engagement that the discovery phase enabled. Please see the following slides for the types of stakeholder engagement across projects.

Local Authority	Engagement methods
Cambridgeshire	User needs research was carried out through a survey with the Older People’s Partnership Board members, contextual interviews in Older People’s Day Centres and prototyping with local residents, engagement with representatives from other Local Authorities, Technology Providers, local pharmacies, the Local Pharmacy Committee, Technology Enabled care board.
Stockport	End user and carer observations, focus group meetings with carers, shadowing staff and clients, interviews with staff and high level process mapping. A steering group was also established comprising of senior representation from telecare commissioning, telecare provider services, Acute Foundation Trust, Adult Social Care Early Intervention Team and the Council’s Digital by Design team, who lead the user engagement work. A solutions workshop was held with key stakeholders to share the user engagement and other findings, and to help generate Stockport’s solution
Sunderland	The local digital catapult has been engaged to provide support around technology; Urban Foresight provided support for workshops with residents; Software City in Sunderland provide engagement events networking interested parties with local technologists; Age UK
Lincolnshire	Voicability engaged to provide user feedback; Looking Local provided experience of workflow and use of technology; Engagement around a digital roadmap for citizens, workforce and community
Bracknell Forest	Produced an online community map of 400 groups; QA Research engaged with people with learning disabilities and older adults to generate feedback requirements; Hackathon to co-design solutions with users.
Shropshire	Multi-agency team assembled including: ADASS representative, an economist, data analyst and CCG involvement; Tech 7 event held to demonstrate approach and generate feedback.
Havering	Collaboration with commissioners; Domiciliary care providers approached; Engaged with head of NHS workforce, CQC over safer recruitment, Skills for Care, DVLA; Discussions with Home Office.

Benefits

Local Authority	Stakeholder Engagement
Haringey	Engaged with the Technology Enabled Care Services Association (TSA) to support understanding of available technology; Engaged with care providers – community, voluntary, Learning Disabilities and mental health, complex needs; Leveraged end-user engagement already undertaken.
Isle of Wight	Engaged with Carers UK; Workshop to frame the language and approach to discussing outcomes; Engagement workshops and focus groups undertaken; Engagement with young carers group to compare age related points of view; Engaged with Carers Isle of Wight.
South Tyneside	Engaged with the local digital catapult to understand available technology; Through partners engaged with end-users; Engaged social work team managers; Engaged with the transitions team; Project team supported by Your Voice Counts; Focus groups with people with Learning Disabilities and Autism; Project linked to regional informatics board and digital board.
Nottingham City	Arranged a provider forum to address tech being considered/developed; Engaged with IT team in council; SPLATS user groups engaged to discuss what outcomes/benefits are wanted; Engaged with East Midlands Academic and Health Science Network to arrange a forum of suppliers and return intelligence on what is out there and what is already happening; Engaged with University; Engaged with Connected Nottinghamshire who are the lead on the digital roadmap for the STP.
Wirral	Working with Autism Together to lead technology development and integration; Engaged with project partners in three areas: hardware, software and analytics; Engaged an academic lead; UK Barrister engaged to help with international data sharing and agreements with the academic lead and software developers; Architect engaged to offer guidance on sensor placement; Engagement with in-house communication teams and families of autistic people; Seven families identified that are interested in participation.

The following section thematically explores the challenges that SCDIP faced throughout the discovery phase and how these were overcome:

Procurement challenges

Gaps in the market: Adopting a user-led as opposed to technology-led approach to service provision, meant that throughout the discovery phase several projects identified that the specific technology for their proposed approach did not exist. For example **Cambridgeshire** were looking for a specific medication management technology that would provide feedback on use and was simple to load and use. **Wirral** had identified several technologies that could be combined to provide the monitoring they were seeking, yet integrating data from across these platforms to create the output they desired required further work. **Sunderland** worked with their local Digital Catapult on specifying interoperable technologies that would meet their needs.

This need to combine or stimulate the development of the technology led to challenges in the procurement process. For example, **Cambridgeshire** arranged an exemption for the pilot to allow technologies to be trialled.

A key aspect demonstrated by the discovery phase is that a service led approach often requires flexibility and collaboration in the procurement and development of technology as the “perfect” system is rarely available.

Procurement delays: Procurement delays when mobilising a technology project is often a challenge, especially when working within a very short timeline. To overcome this **Sunderland** ensured buy-in from the procurement team early on in the project by including them within the project steering group, working together to develop clear procurement specifications early on.

Ethical considerations

As with the LIP projects, taking ethical considerations into account was a challenge, especially when working with more vulnerable groups. Apart from being aware of these challenges in advance, in order to ensure there is enough time for ethical clearance if needed, projects displayed alternative ways to overcome this challenge. For example, in **Wirral** local charity Autism Together undertook several of the key discovery phase activities including helping to ensure that research participants’ needs were considered through Mental Capacity Best Interest meetings which included colleagues from social work community health as well as participant family members.

Consent and Information Governance

Addressing consent and governance issues is often a hidden overhead in changing the way services are developed. This is particularly the case when dealing with multiple organisations. The **Stockport** project team completed a lengthy Privacy Impact Assessment to ensure the user engagement elements of the project were GDPR compliant. The **Havering** project also had cross-organisational implications. This is also potentially an issue that will be faced in Shropshire: as their approach scales it will require accessing data from multiple sources.

Collation of findings from the discovery phase: extracting the right insights

How projects approached the discovery phase research and the collation of findings varied. This could be as a result of knowledge and in-house expertise of service design. Two of the most robust, user-led discovery phases were from Stockport who has a strong in-house service design team which includes user researchers and Havering who commissioned an external service design agency to support their project.

Some projects found it a challenge to extract the right workable insights from the data, for example in **Shropshire** the project team identified that raw data 'in the form of complex graphs does not effectively convey insight'. In some cases assumptions were made which formed a big jump between the discovery phase and the posed solution, which highlights the challenge of extracting the right insights from discovery.

Willingness of clients to engage

Lincolnshire recognised that a digital self-service approach to financial assessment would not work for everyone. The perception that older people were less likely to engage with a digital solution was challenge and instead differentiating between capability to engage and the desire for human contact was identified as a key factor. Understanding issues of loneliness and its ability to impact on any reduction in human contact are real concerns. The discovery phase allowed this to be explored. This theme recurred in the work of **Bracknell Forest** who looked at introducing a technological approach to guiding people to community services, potentially reducing loneliness but by means of a technological intervention.

Cultural considerations

The projects also raised the importance of what is often referred to as culture. Against a backdrop of challenging economic circumstances any change to care provision is often perceived by key stakeholders to be motivated as a way to reduce costs. This increases the need to engage key stakeholders in developing new approaches so that factors like increased independence, better communication between family carers and new technologies are introduced with a focus on outcomes and benefits. The discovery stage has facilitated engagement with these cultural considerations in ways that are often not addressed, leading to a sensitivity around language used to describe technology, and an understanding that people's willingness and ability to engage with some technical solutions is not equal.

User perceptions of new service models

Nottingham and **Wirral** looked at services for people with learning disabilities and autism. Both projects would potentially offer new ways of developing services for clients. In the case of **Nottingham**, engagement with care providers was sought as any introduction of technology would impact on their services. In **Wirral**, the opportunity offered by the physiological monitoring has the potential to change the offer of services to people with profound autism through better understanding of their needs and triggers. Early in the engagement however, even the mention of technology caused questions around "electronic tagging." Having the time and resources to engage with care providers, families and the clients allowed exploration of these knee-jerk reactions.

For example, in the **Isle of Wight** the discovery stage was used to discuss the technology which could help with movement, lifting or protecting ageing joints. The use of terminology such as exoskeletons or robotics conjured thoughts of machines and robots mostly shaped by Hollywood films. Through workshops in Hampshire and in the Isle of Wight different types of technologies were discussed along with their abilities to change the way care is delivered. In this way the "cobot" technology was not introduced in isolation but in the context of enabling technologies.

The SCDIP programme approach, which included a discovery phase prior to implementation ensured that the projects responded to a user need prior to implementation. Traverse used discovery phase reports and interviews with project leads to determine the benefits and challenges of this approach. Findings are discussed in the following pages.

Benefits of the programme approach

High quality projects: Although the original plan was to provide further funding for implementation to 6 of the 12 projects that participated in the discovery phase, the discovery work produced viable projects that could have all been funded. Due to resource availability, it was decided that 9 projects would receive funding for implementation.

Taking on learnings from LIP: At the SCDIP project launch events, key learnings from LIP were shared which enabled project leads to rethink their project scope to be more restrained and achievable.

Support from evaluators and programme leads: Participants felt that the ability to contact programme leads or evaluators with any questions and the advice given by evaluators was helpful throughout the discovery phase and helped them to consider ways to monitor success of their approach.

Introducing a research-led approach: Several projects reported that the work undertaken in the discovery phase would not have happened if it had not been prompted by this programme approach. The discovery phase offered a unique opportunity to explore innovations before committing to an untested project. The majority of projects needed to introduce a different way of thinking, which they felt would make a lasting cultural impact. Several projects commented that without this grant they would not have been able to do a discovery phase.

Raising profile of interventions: Winning discovery phase funding and reporting on progress raised the profile of interventions within the councils and helped to gain internal support.

Benefits of early stakeholder engagement: By engaging with organisational stakeholders (e.g. IT) information governance and operations were brought into discussion early and this facilitated shared learning early on and avoiding delays later.

Connecting with other authorities: Some projects reported that they benefitted from connecting with other authorities, such as at the kick off meeting and through the peer learning calls.

Benefits of the kick-off meeting: This was valued for overviewing the programme, exploring evaluation, receiving advice on their discoveries and clarifying expectations/roles. It was also useful to discuss learning from LIP, which was acted upon by several projects.

The use of NHS Digital's 'benefits realisation framework' provided a useful framework for projects to measure and consider, along with extensive discussion on the use of cost avoidance models.

Challenges of the programme approach

Short time line for a true discovery phase: Many felt that the discovery phase was too short to mobilise any findings. Several also found that the discovery phase being over the summer period made scheduling meetings with stakeholders challenging. Additionally, undertaking a two-phase approach with the hiatus for the selection process of one month has left a short period of five months to deliver the implementation phase

Challenges accommodating a discovery phase: Several councils reported that the concept of a discovery phase was difficult for their management and financial structures to accommodate. Reference was made to a process driven environment which found learning and emergence difficult to accommodate.

Cost of discovery phase: The budget of £20,000 presented a challenge as quite a lot of up-front work was identified as necessary.

Challenges with evaluation: All projects found evaluation challenging. More support would have been beneficial in measuring the financial benefits. Guidance from NHS Digital framework was beneficial. A central contact at NHS Digital to discuss benefits realisation as well as data governance issues was raised by several councils.

SCDIP meetings: Travelling to London was a challenge for several projects as it is expensive and takes time. Live streaming the event was suggested for those who could not attend in person.

Peer learning calls: Whilst projects benefitted from connecting with other authorities, they found the peer support calls challenging. It was said by one project that follow-up emails post-call were more valuable. This was because:

- Projects were at different stages and faced different challenges
- Some participants did not know each other which served as barrier and some were more dominant in the conversations
- Others who were last to share their projects felt that they should have been able to dial in later
- Some technical difficulties and some calls being taken in noisy office environments.

A suggestion for mitigation and general preference for the implementation phase is to have more one-to-one phone-calls focused on specific issues related to the projects.

Rapid Changes: Due to the time constraints of the discovery phase and the transition to the implementation phase changes to meetings and alterations to the programme were often undertaken quickly and with short notice.

Types of Projects

In the nine projects moving into implementation there are a range of goals and outcomes being sought and a range of timescales over which the projects will impact on service provision. There are many ways to categorise the projects, but the projects tend to be a balance of three aspects:

1. Projects that will have an impact on service delivery by **improving aspects of service efficiency**;
2. Projects that are about service redesign and **engaging with end-users differently**;
3. Projects that are researching new ways to deliver services that are **more fit for purpose**.

All projects contain elements of all three aspects but those focused on aspect 1 are the closest to generating measurable impact.

Those focused on aspect 3 are further from front line impact.

As the projects progress to implementation, their progress in these three aspects will be monitored and evaluated.

Stockport, Bracknell Forest, Lincolnshire: 1 → 2 → 3

Sunderland, Havering, Nottingham: 2 → 1 → 3

Wirral, Shropshire, Isle of Wight: 3 → 2 → 1

Conclusions

The introduction of the discovery phase is consistent with the developing understanding that innovative projects rarely conform to a linear progression of tasks. They more often exhibit complexity, the need to iterate and adapt to emergent learning. This has been seen across the projects in the SCDIP discovery phase.

- The discovery phase has resulted in much greater engagement with stakeholders and end users. This has had an impact on the outcomes sought and a shift to user-led service design rather than a focus on technology-led service delivery.
- The discovery phase has had a beneficial effect on exploration of projects in terms of breadth and depth of scope. Developing the maturity of the approach through the discovery phase led to the high quality of applications for the implementation phase. This not only resulted in changes to projects but also identified where projects had value but fell outside of the SCDIP programme scope.
- The discovery phase has facilitated the identification of projects that are likely to have more immediate impacts on service delivery (within the implementation phase) as well as projects that are likely to provide learning about interventions that could have a great impact but require more development. For all projects the theory of action is essential in considering how the projects will contribute to better outcomes. Developing this thinking during the discovery phase is essential to ensuring that ideas can result in change.
- The introduction of a break-point between the discovery and the implementation phase allowed the digital maturity of each project to be explored and focused the individual projects on factors that would be key in the implementation phase. It also allowed the benefits realisation approach to be aligned with other projects being funded by NHS Digital, this will ensure that appropriate evaluation data will be obtained during implementation.
- The discovery and implementation phases are delivering a clearer understanding of what the innovation projects are aiming to do and how they are proposing to achieve outcomes. However, the timescales are challenging as the project teams have to transition from developmental to implementation approaches within one year.

Considerations for future programmes

The conclusions from the analysis of the discovery phase lead to the following recommendations for future programmes:

- The introduction of the discovery phase has significantly improved the quality and robustness of projects and should form part of future programmes.
- Some projects will have demonstrated great potential by the end of the discovery phase, but the implementation phase will effectively be an extension of the discovery phase to further develop the approach for some projects. Articulating the theory of action for the final service change becomes essential to ensure that the research being undertaken can be converted into real benefits.
- A consistent framework for benefits realisation across NHS Digital projects is beneficial for projects and helps clarify the requirements for data collection.
- More time may be required for a 'true' discovery phase to iterate findings and mobilise research.
- Ongoing project support from NHS Digital, LGA and Traverse and Bayswater Institute was seen by projects as a very helpful resource, but these should be used in structured 1-1 calls and emails as opposed to semi-structured peer learning calls.

Bracknell Forest, Havering, Isle of Wight, Lincolnshire, Nottingham, Shropshire, Stockport, Sunderland and Wirral all have received funding from NHS Digital for the implementation phase of their projects.

Visit www.local.gov.uk/scdip to read the latest updates from the projects.



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