

INNOVATION HEALTH AND WEALTH

Dear Colleague,

I am pleased to enclose a copy of *Innovation Health and Wealth, Accelerating Adoption and Diffusion in the NHS* which sets out a delivery agenda for spreading innovation at pace and scale throughout the NHS.

Why innovation matters

Now more than ever before, innovation has a vital role to play if we are to continue to improve outcomes for patients and deliver value for money. The scale and nature of the QIPP challenge, requiring us to make up to £20 billion of efficiency savings by 2014/15 to invest in meeting demand and improving quality, means that all parts of the NHS will need to take bold, long term measures in 2012/13 to secure sustainable change. The 2012/13 NHS Operating Framework makes it clear that the role of innovation will be critical to this. Rapidly spreading changes that improve quality and productivity to all parts of the NHS, in addition to creating the right conditions for rapid diffusion of good practice, is an urgent priority for us all.

This requires a fundamental change to the way in which people currently work. At the heart of this is strong leadership – both clinical and managerial - at all levels in the system. It will require all leaders to identify and tackle the behaviours and cultures that can stand in the way of innovation. We will need to align system incentives to support and encourage innovation. We will need to create ‘pull’ for new ideas from patients and the NHS, rather than relying on the traditional top down ‘push’. We should reward those individuals and organisations that adopt best practice and new ideas, and we should ask those organisations that don’t to explain why. We need to have the courage to make changes and be less risk averse, we need to take a longer term view on investments, and we need to ensure staff are supported to introduce new ideas and technologies.

What we heard

I know that many of you have contributed directly to the review and I want to thank you for that. What we heard was very consistent:

- We should reduce variation in the NHS, and drive greater compliance with NICE guidance;
- Working with industry we should develop and publish better innovation uptake metrics, and more accessible evidence and information about new ideas;
- We should establish a more systematic delivery mechanism for diffusion and collaboration within the NHS by building strong cross boundary networks;
- We should align organisational, financial and personal incentives and investment to reward and encourage innovation;
- We should improve arrangements for procurement in the NHS to drive up quality and value, and to make the NHS a better place to do business;
- We should bring about a major shift in culture within the NHS, and develop our people by hardwiring innovation into training and education for managers and clinicians;
- We should strengthen leadership in innovation at all levels of the NHS, set clearer priorities for innovation, and sharpen local accountability; and
- We should identify and mandate the adoption of high impact innovations in the NHS.

Making it happen

We now need to turn our attention towards implementation. This will need all parts of the health and social care system to plan and improve together. If the NHS is to achieve results which are amongst the best in the world we will need a system that can significantly ramp up the pace and scale of change.

We need to make innovation everybody's job, from the top to the bottom of the NHS. We need to bring about a lasting change in culture amongst our current and future leaders. We need to build an understanding, awareness and advocacy. Put simply, we must make innovation a priority. We know that the NHS can spread new ideas at pace and scale when it puts its mind to it, and we need to do more of this.

The report sets out a number of High Impact Changes that we can make an immediate start on. The rapid spread of telehealth technology, improving the quality of children's wheelchair services, the routine use of fluid monitoring technologies, and provision of carer breaks for those looking after people with dementia will make a real difference to the quality and experience of people's lives, as well as delivering productivity improvements. This is why, from April 2013, compliance with these high impact innovations will become a pre-qualification requirement for CQUIN payments.

I want you to lead this change, and to make an immediate start by:

- building the actions set out in this report into your planning processes for 2012/13;
- planning in your local areas to deliver the High Impact Innovations set out in my report;
- developing a clear plan to improve the uptake of NICE technology appraisals; and
- Working together to develop local plans for the formation of Academic Health Science Networks.

I want you to be ambitious in your plans for delivery, and inject a real sense of urgency, and determination. That will require strong and visible leadership. In 2012, I will have a clear focus on delivery of the recommendations in this report, as should you and all those in your organisation.

Yours sincerely

Sir David Nicholson
Chief Executive of the NHS in England