

Embedding Digitally Enabled Support

A best practice guide
for commissioners

Introduction

“ Digital is an integral part of our service offer and needs to continue to be. ”

- Tony Bacon, Commissioning Manager for Mental Health, Kirklees Council

The world is changing, and support services need to change with it. This is unlikely to come as news to anyone working in the sector; the Local Government Association (LGA), the King's Fund, the Association of Directors of Adult Social Services (ADASS), and others have long been making the case for reform, and will doubtless continue to do so.

Recent world events have directed the spotlight towards (among many others) two subjects that, while there have always been strong cases in their favour, have never been as fully adopted in mainstream support as they perhaps ought to have been. Firstly, the use of digital technology to deliver more effective, accessible, sustainable support; secondly, the move towards enabling people to manage their own needs more independently rather than depending on services.

At Brain in Hand, we work with teams in health and social care services to deliver a digital hybrid system: a combination of simple digital tools and practical human support that builds on a person's strengths to help them self-manage. Our system is not condition-specific but works well for those who find it hard to organise or plan, make decisions (especially when stressed), remember things, or manage anxiety. As such, it is often used by autistic people, people with learning disabilities, and those with mental health challenges.

Choice and active participation in care ensures people receive the right help for them at the right time, allowing them to do more for themselves and move towards independence. This in turn reduces reliance on support, which allows the professionals involved in their support to direct the work they do so well where it's most needed.

If our experience has taught us anything, it's that implementing new solutions is not as simple as taking something out of a box and walking away.

Proper deployment involves integration with services to ensure the best results.

We've come across a range of challenges and barriers to quick, smooth, effective adoption, and we hope to share some of our knowledge to help more services fully embrace digital support.

Based on our experience across over 65 commissioned projects, we've compiled this best practice guide for implementing digital innovations and solutions.

This guide features insight and stories from these local authority leaders in digital innovation:



Tony Bacon

Mental Health Commissioning Manager, Kirklees Council

As mental health commissioning manager, Tony focuses on bringing people and services together with the right solutions to meet individual needs.



Fadzai Tande

Senior Manager, Transition, Surrey County Council

Fadzai guides Surrey's transition team to support young people as they move into adulthood, working to achieve outcomes based on their strengths and goals.



Alison Thrower

Telecare Team Manager, London Borough of Southwark

An occupational therapist by profession, Alison now works to expand Southwark's telecare services to explore the broader range of technology-enabled care.



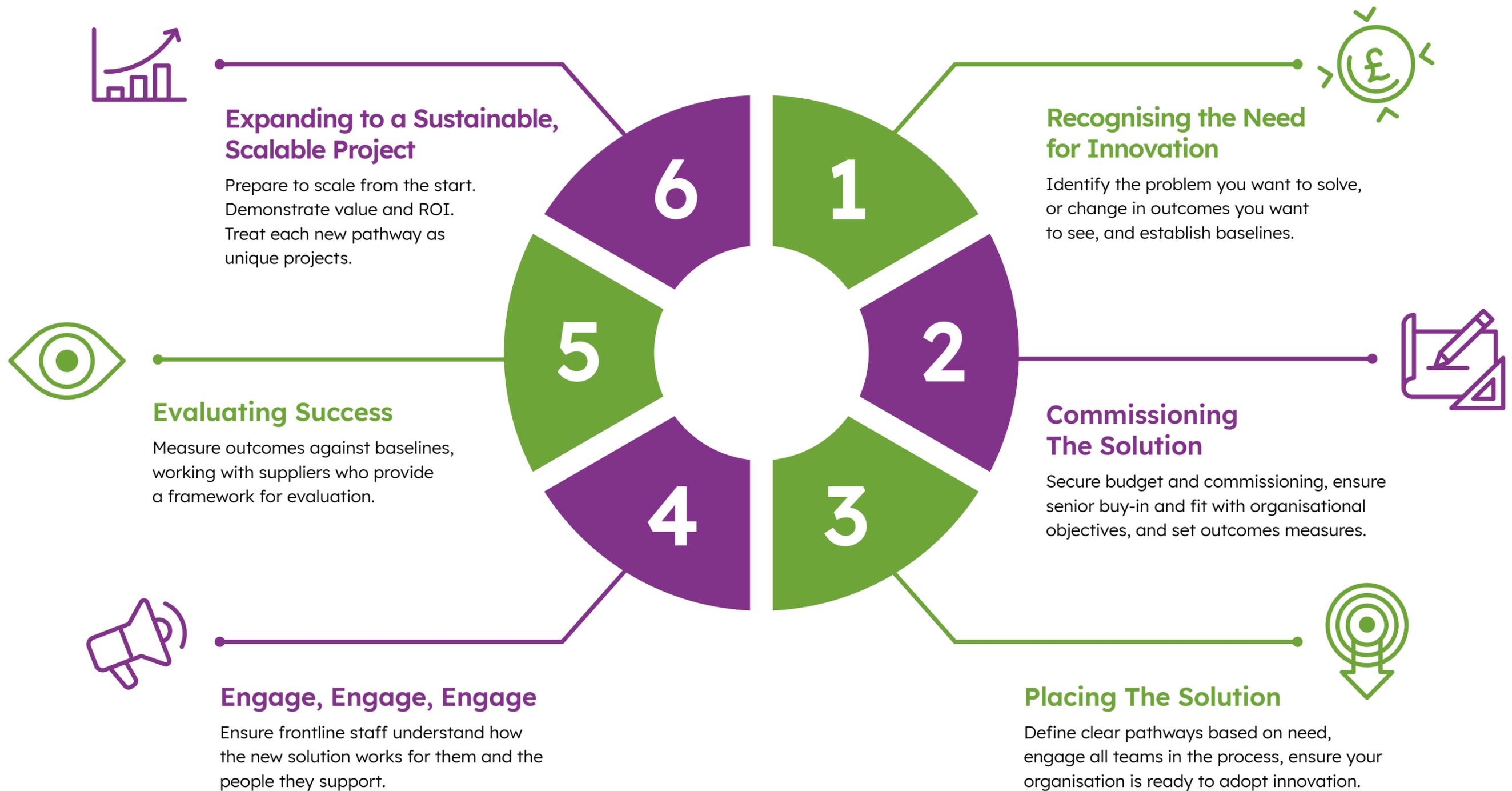
Hannalease Newton

Brain in Hand Coordinator, Community Links

Hannalease works closely with local services in Kirklees to identify, refer, and support people who would benefit from using Brain in Hand digital support.

Six steps to successful implementation

Click a section title to navigate the guide.



Recognising the Need for Innovation

“Locally integrated care, built around the individual, should be the norm... We must prioritise access to technological and digital solutions.”

- ADASS, *Nine Statements to Help Shape Adult Social Care Reform*¹

Innovation is no longer a nice-to-have. It's a can't-do-without.

Much of what the world has taken for granted has been transformed in the wake of the COVID-19 pandemic. It has necessitated that people and organisations find new ways of doing things. Despite major challenges, the fact that services have continued to run – the speed with which teams responded, and the ingenuity in finding solutions to maintain something as close as possible to normal functioning – has shown that health and social care systems can adapt to change.

But innovation cannot only come as a result of reacting to global crisis.

A new model for the 21st century

The NHS Long Term Plan speaks to the need for ‘a new service model for the 21st century’, focusing on being increasingly:

- **joined-up and coordinated**
- **proactive**
- **differentiated in what it offers to each individual.²**

The Long Term Plan was a pre-COVID policy; details are very likely to change in the aftermath of the pandemic. That said, however, these themes seem unlikely to change. If anything, it might be expected that they be given even greater prominence.



In order to create health and social care services that are sustainable, that focus on prevention rather than cure, that reduce inequalities, and that respond to each individual's needs, organisations must continue to develop ongoing programmes of proactive innovation. The benefits of prevention – delivering early intervention to a service user, rather than wait until they fall into crisis – are huge; so too could be the benefits of creating a service that solves its own problems before they arise.

1. <https://www.adass.org.uk/media/8036/adult-social-care-shaping-a-better-future-nine-statements-220720.pdf>
2. <https://www.longtermplan.nhs.uk/online-version/chapter-1-a-new-service-model-for-the-21st-century>

Innovate to solve problems before they happen

Kirklees Council’s commissioning team noticed that there was a lack of initiatives around using technology. Although their services often provided physical adaptations (alterations to properties, mobility aids, and so on), the potential to use technology for other kinds of support was unexplored. The Council needed to

introduce solutions that could provide earlier interventions, reaching people sooner and preventing them escalating to a higher level of need that would require admission to more expensive services and cause much more difficulty and distress for all involved.

Ten fundamental questions to ask

One of the first challenges for any service looking to innovate is simply understanding what questions need to be answered: what case needs to be built.

Building a business case for a digital solution will always include consideration of required outcomes, cost-effectiveness, impact on staff and existing resources, and timescales.

- 1 Why are you innovating? Outcomes, savings, or both
- 2 Where is the unmet need – where can you make a difference?
- 3 Which teams and staff will need to be involved?
- 4 What are the most pressing challenges your staff currently face?
- 5 How well resourced are the teams that will be involved?
- 6 What are your requirements on timescales for implementing?
- 7 What budget is available, and from which sources will it come?
- 8 What will success look like for your users, staff, and services?
- 9 How will you measure, control, and evaluate project success?
- 10 What is the long-term plan for scaling to a sustainable project?

Identifying the right solution

Answering the most critical questions, and developing clarity about the required outcomes, informs the search for the right solution. This needs to be achieved across all relevant teams and stakeholders; involving those who will be part of the project early is a predictor of later success and allows effective consultation with potential providers.

When considering providers, it should be borne in mind that more goes into making an innovation work than just the product. It can be all too easy to choose a solution that seems to address surface-level needs, that promises quick and simple improvements, but that is not equipped to build a sustainable improvement or address long-term needs.

Good suppliers don’t assume they know what’s best for your needs

A good supplier should take the time to listen and understand what’s important to their clients for one simple reason: an organisation’s staff are the experts on their own service. Managers and frontline staff know best how their service works and what it needs, so a

provider should never presume to know better. However, the supplier should also be able to give a clear roadmap and practical advice on how their solution can be implemented to deliver high-quality outcomes in the long term.

“We used the experience from Brain in Hand’s team because they’d supported other local authorities and really knew how this was all going to work.”

- Fadzai Tande

“Everyone needs to be clear on outcomes. Don’t implement until you’re ready and can commit to it.”

- Fadzai Tande

Finally, before seeking suppliers, a critical step that can make an enormous difference to the project as it comes to the evaluation stages is establishing baselines. Identifying the metrics that will help to show the success of the innovation is key; measuring them before anything is implemented provides a ‘control’ data point for comparison, allowing for much more meaningful reflection later.

The baselines captured by a service provider will be dependent on the objectives set, or the problem to be solved, and the success criteria against which the intervention will be measured.

For Brain in Hand, where user outcomes revolve around self-management and independence, baselines often include metrics

such as the number of support hours delivered to users (in other words, how much time staff are spending with each user), redirected support hours, how often emergency services are accessed, and how successful carer relationships are (as avoiding carer breakdown can be enormously valuable).

Whether a new solution seeks to reduce or prevent spend (through enabling people to step down from care or helping them to avoid crisis services) or to improve user outcomes, having these baselines in place will enable the service to demonstrate a meaningful return on the initial investment. Once baselines have been established, it should become much easier to conceive of innovating within care as an investment, not as a cost.³

Capture meaningful measures based on your objectives

The table below provides some examples of measures derived from organisational objectives. The key takeaway, again, is that each service’s chosen measures should be relevant to the goals and outcomes it needs to achieve. By linking baselines and key results to objectives, it becomes much easier to demonstrate meaningful value, which can help with creating a scalable, sustainable project in the long term.

Objective	Measure
Increase service users’ confidence, independence, or wellbeing	<ul style="list-style-type: none"> Qualitative feedback from users or support workers Change in formal support delivered: <ul style="list-style-type: none"> Number of support hours Frequency of support Duration of support Number of unplanned reviews Type of support delivered
Redirect support hours	Change in type of support delivered: <ul style="list-style-type: none"> Progress from basic self-care to travel or employment support Out of hours support to planned support
Ensure more joined-up support	<ul style="list-style-type: none"> Reduction in no. of user engagements with different professionals Reduced time between user requesting and receiving intervention
Reduce reliance on services by encouraging self-management	<ul style="list-style-type: none"> Level and quantity of formal services accessed Transition from residential provision to local supported living Reduced average length of stay for enablement placements
Develop a cost-effective service	Changes in costs post intervention: <ul style="list-style-type: none"> Cost of support per user (hours supported or type of support) Cost of travel per user Cost of residential support or supported living Cost of enablement placements Cost of crisis or emergency service involvement
Promote the use of assistive technology solutions	<ul style="list-style-type: none"> Quantitative system data Qualitative user satisfaction

It is important that a service sets its own objectives and collects its own baseline data, but involving the supplier at this stage allows for clarity and a realistic approach: the supplier needs the opportunity to be clear on whether it is in fact able to deliver those outcomes.

3. See the Health Foundation’s excellent article arguing for the need to invest in social care, and the feasibility of doing so. ‘Reforming social care is not unaffordable’, it concludes. <https://www.health.org.uk/news-and-comment/blogs/if-not-now-when-the-long-overdue-promise-of-social-care-reform>

Commissioning The Solution

“Digital innovation is still new, but the last year has pushed people to think in that direction.”

- Tony Bacon

Where the money comes from is important. Where it goes is fundamental.

Any new digital support solution is going to cost money, and where that money comes from is likely to vary from service to service. An organisation that takes a funding-first approach – where a budget is identified before the solution is selected – is sometimes a sign of organisational readiness to adopt new solutions, but the journey will not always be so smooth.

The first step should always be identifying the problem to solve. Having a budget and the task of working out how to spend it sounds like a positive situation, but if the service does not properly understand the unmet need, it may be likely to inadvertently spend its money on something that is not relevant to its real requirements.

The best-case scenario: championing innovation from the top

For Kirklees, the push to adopt new digital solutions came from a high-level director keen to introduce new and innovative technological forms of support. Having senior buy-in at the earliest stages made it much easier to drive the commissioning process to fruition, with budget readily earmarked.

Meanwhile, based on their ‘Fit for the Future’ principles, London Borough of Southwark introduced a specific digital innovation board made up of managers from all departments across the council to consider ideas from key workers about new technology that could be trialled.

At the same time, they employed an external funding officer to support

the technical aspect of writing applications. The telecare team was able to secure the board’s backing for a Brain in Hand project, while also receiving support to consider wider possibilities around using a range of solutions for different client groups.

In both cases, senior leaders within the council encouraged a culture of technological innovation, leading and championing digital support.

In Southwark’s case, the council even went so far as to change its internal structure with the introduction of the new board, encouraging all teams to consider innovating and making the process of doing so more accessible.



“We’d used up all the money allocated for traditional telecare, so we had to look at other options.”

- Alison Thrower

If digital innovation isn’t yet business as usual, there are still plenty of options

A common prompt for innovative projects is simply the end of the financial year; where unspent funds become available, a service may find it easier to direct these otherwise unallocated budgets to piloting new solutions.

intervention, delivered by social care services, could prevent people from needing to be admitted to more expensive, more distressing, more invasive, or more resource-intensive emergency care.

A team looking to innovate may find that embracing joined-up commissioning by working together with a local Clinical Commissioning Group (CCG) can bring some success. There is now significant crossover in funding health and social care projects, particularly in areas such as Transforming Care: the drive to keep people out of hospital or other residential care and as independent as possible in their own homes.

For those services that lack their own digital transformation budget, identifying common pain points and overlapping needs between the service and larger organisations with more access to funding, like CCGs, may be a promising route to securing funds while achieving a joined-up, integrated model of care delivery.

In cases like this, by taking a preventative approach to care, the CCG stands to achieve a significant return on investment. Earlier

If a team’s locality has a board for innovation, assistive technology, digital systems, or any other relevant topic, approaching this board is often a good first step towards securing links with the CCG.

It is also worth considering whether specific funding streams such as grants might be leveraged for digital innovation.

If all else should fail, some teams see success in providing digital solutions on an individual basis.

The Disabled Facilities Grant, for example, is most often used to fund physical adaptations (such as ramps and other modifications to properties), but nothing about the grant itself prohibits it from being used to fund mental health support, where doing so might aid in facilitating independence. However, a service’s scope to use specific grants is often dependent on local policies, so funding that can be accessed in one locality may not be appropriate for another.

Personal budgets, for example, can be used to access support systems, as can Personal Independence Payments (PIP). Allocating an individual service user’s personal funding to technological support can be an effective way to achieve improved outcomes for that person, and may also be cost-effective if doing so means that less of their budget needs to be spent on other kinds of support.

Explore the options:

- End of a financial year
- Work with CCGs
- Approach local boards
- Access specific grants
- Leverage individual funding



Always think long-term

Sources such as specific grants or end users' individual funding are often an accessible and viable route to innovating; however, a service should consider whether introducing a new solution in this way will deliver the outcomes they require.

Innovating at an end user level, rather than an organisational level, may not address service-wide needs such as making better use of resources or achieving a better understanding of groups of service users.

However, services that have already commissioned a digital innovation and worked to integrate it within their teams can often find success in using personal budgets to add

more service users to their existing project, bringing more people into a solution that has already been properly embedded.

Small pilot projects can be useful to demonstrate viability, but consideration should always be given to how the solution can continue to be funded and deployed following a successful pilot. Otherwise, there could be a risk of being unable to continue a valuable service.

A pilot should both be extremely clear on what success will look like in terms of outcomes and ensure that a plan is in place for securing longer-term funding if viability has been demonstrated.

Make your business case specific

Once a funding route has been identified, there is likely to be an application process to get the project approved. Working with the innovation provider on this can strengthen the business case to be presented, as well as providing opportunities to set the project up for long-term success down the line.

As always, services and suppliers should be clear on the outcomes the project needs to deliver. Demonstrating specificity – showing that the innovation will meet the individual requirements of the setting, its staff, and its end users – makes for a much stronger business case.

Understand your challenges, target your solution

When Southwark's telecare team were seeing lower numbers of referrals, they surveyed the teams with the lowest numbers to understand the challenges they were experiencing and the outcomes they required. Common themes emerged about the service's needs, and their users' needs; many users experienced difficulties that could prevent them from being fully independent and that could lead to relapses, but traditional telecare was unable to adequately support them.

This helped them to consider what kind of innovation would bring the most benefit to their services, targeting their solution where it was most needed and understanding what it would need to deliver. Ultimately, the council came to a needs-led conclusion, supported by their 'Fit for the Future' principles, that innovation needed to target support to those teams who were finding that they

could not use existing telecare delivery to meet their service users' requirements.

This targeted approach helped everyone involved to be confident that Brain in Hand would deliver the right outcomes for them, strengthening their business case and setting them up for success all through the delivery of the project.

“ We came to Brain in Hand through a needs-led conclusion that it would support teams who were not using existing telecare for those specific reasons. ”

- Alison Thrower



Placing The Solution

“We couldn't use it with all our teams, so we needed to look at which teams would work best.”

- Alison Thrower

Innovation identified – now how can you maximise its potential?

Once an innovation has been identified and budget secured, the first crucial step of implementation is identifying the right pathway in which to deploy the new solution. In some cases, the choice to seek a solution at all will have been informed by awareness of

an unmet need in a specific setting, but this should not be the only consideration: services need to consider whether the new technology complements the setting, reducing burden rather than adding to it.

Five fundamental questions when placing a solution:

- 1 Are the frontline staff receptive to potentially adapting their way of working to see the most benefit?
- 2 Is the user demographic a good fit for the innovation: does it address their needs and help them to the outcomes they want?
- 3 Do the service users have access to, and confidence with, the technology, required to use the innovation?
- 4 Are the project goals appropriate for the setting's structure and staff, and for users' level or complexity of need?
- 5 Is the service supported by a visible, high-level manager or director who can act as a champion to make sure there is awareness and adoption?

Asking overarching questions like these can help to establish whether solution and setting will be a good match, but it's also important to engage personally with all the relevant team members so they have a chance to give feedback on plans. This gives the best chance of spotting potential challenges and developing an engaged team invested in making the project work.

Regularly review your situation

These questions should be answered upfront, but also regularly revisited. Services must focus not only on the immediate actions of implementing and evaluating, but pace

themselves by consistently checking all aspects of the project's delivery to remain fully in control.

Ensure new solutions complement what you do best

The point of innovating should not be to replace existing services, but to make it easier for them to do their best work. Wherever placed, a new solution should help to improve outcomes by allowing incredibly valuable human support to go further, whether by delivering it more effectively – perhaps helping staff to communicate more easily or ensure that information will be better retained – or by targeting it where it’s most needed at the right time, reaching more people without increasing caseloads.

Services and suppliers should work together to target the impact of the solution where it’s most required and most suitable rather than

delivering a generic, less relevant service. All parties being clear on the goals of the project helps with this, as does having clearly established baselines for the metrics to be used. Any new supplier will need to work closely with the service to understand their priorities and unmet needs and then map the solution to best address these.

In short, it’s much harder to achieve goals if those goals aren’t specifically being identified and targeted. This requires input from the supplier, but also depends on a strong, engaged project manager within the commissioning organisation who can set clear expectations.

“It’s saving time for staff as we aim to shorten the period that each individual needs support. Using Brain in Hand helps staff work with the person on new strategies, reinforcing therapy techniques, and working on goals. This could contribute to an increase in independence and confidence, and a decrease to the level of support needed.”

- Hannalease Newton

Make the most of local partnerships

In Kirklees, a group of commissioning managers met with BiH and decided that it fit best with the direction their mental health provision was headed. The majority of community commissioned provision is delivered by voluntary sector organisations, so Kirklees took the opportunity to work with a VSO to pilot the system and reach vulnerable members of

the community. Leveraging the strengths of different organisations is a key part of Kirklees’ approach, as the Council’s mental health service works closely with those community and voluntary organisations as well as with the local CCG. The Council says it’s fortunate to work well in partnership with the CCG, as many commissioned services are jointly funded.

Set realistic expectations

Staff in the identified pathway must be engaged early and given realistic expectations about what implementing the new solution will involve. There will always be an initial period of adjustment while an innovation is embedded, and the teams who will be delivering it need to be prepared to undertake this work. Teams who have a clear awareness of the benefits they can expect to see once the solution is up and running are often more willing to invest time and effort in this.

Be wary of any innovation that claims not to require any time to adjust while services get used to it, as this likely means it is not in fact being properly embedded at all.

Once in place, the solution should be another tool in the team’s kit, helping them do what they do best.

Take advantage of suppliers’ experience and expertise

When lockdown began, Surrey needed to change their plans for delivering Brain in Hand. The Brain in Hand team were able to suggest ways to adapt the system and delivery route to help Surrey’s teams reach more service users; support was delivered more remotely than anticipated and users were aided to develop new coping strategies as their previous routines and activities were disrupted.

As a result of the pandemic, Brain in Hand pivoted to delivering every element of the solution (including personal onboarding and an on-demand response service for every user) online and direct to end users, taking as much of the strain as possible off Surrey’s staff.

Once the system was smoothly in place following this new delivery model, the Council’s teams could more effectively use it to support their work with users

by monitoring wellbeing, reinforcing strategies, and targeting help where it was most needed.

“We used experience from the Brain in Hand team, who’ve supported other local authorities and knew how it would all work. Lockdown complicated things, but it was helped by the team’s ability to suggest different approaches.”

- Fadzai Tande

As the pandemic forced plans to change, Surrey used Brain in Hand’s experience of working in a range of settings to make informed decisions about the right approach to deliver the maximum benefit.

Engage, Engage, Engage

“The main challenge was convincing frontline workers that tech could work for their client group, so we involved them early on in groups to get their input and buy-in from their senior managers.”

- Alison Thrower



The frontline can make or break a project

If the project has been managed correctly from the start – if the questions identified earlier were answered thoroughly and each step of the process has been aligned with the service’s specific needs and goals – there should be fewer issues to solve as implementation unfolds. However, there will of course always be some challenges to overcome.

One of the biggest challenges is often simply getting those members of staff who will be using the solution in their day-to-day roles to buy in to its adoption; these are the individuals who need to understand what it does and how it works, and to want to use it.

If everything from the business case to securing funding to identifying the pathway has been managed well at a commissioning or directorship level, the success of the project still rests on how well it is delivered at an operational level.

In many cases, the biggest predictor of success is simply ensuring that frontline staff understand why the new solution can work for them and the people they support. The Brain in Hand team run workshops and awareness sessions to help with this. Once people have the chance to put real-life examples to the test and see that it can work – and has worked – in those cases, it becomes much easier for them to want to use it.

“Having that partnership with someone who knew the system and had used it many times really helped; everyone saw how it could work for them.”

- Alison Thrower

A shift in mindset for Southwark

Sometimes a more philosophical shift in attitude is required. In Southwark, for instance, social workers were in the practice of building a package in response to immediate needs rather than long term ambitions for independence.

Being able to demonstrate that Brain in Hand could help their clients move safely towards greater independence – with multiple case stories of other people with similar needs who had achieved this outcome – helped to

secure their investment in the project. Alison notes that the adjustment was easier in the teams led by occupational therapists because their inclination and practice was more often to help their clients towards independence.

Considering the mindset that teams are likely to have before implementation can help to address their concerns, meet their needs, and make the process smoother.

Involving as many key workers as possible at the earliest stages of the project is essential. Ensuring operational teams feel involved and invested, that they understand the solution and the project, and that they have some sense of ownership has two significant benefits.

Firstly, buy-in from these members of staff means a more committed team behind the everyday use of the new solution.

Secondly, these individuals will often be perfectly placed to identify both potential issues in delivery and potential solutions to those issues.

The goal should be to make the new solution part of every key staff member’s everyday toolkit, rather than something above and beyond the work they already do. Making use of the solution part of an individual’s objectives turns it into part of their normal work, not an optional extra.

Kirklees assigns a dedicated coordinator

The team in Kirklees recognised early, thanks in part to extensive consultation with delivery staff, that there would be a need for a dedicated post responsible for coordinating all the work (especially given the nature of

the project spanning CCG and social care commissioning and voluntary sector delivery partners). Kirklees is the first local authority to introduce a dedicated Brain in Hand Coordinator role, funded by the CCG.

“The day-to-day coordination is really critical, so having Hannalease in a specific post to keep that going has been a real boon.”

- Tony Bacon

Hannalease is Kirklees’ Brain in Hand Coordinator; her duties include overseeing referrals, ensuring a high quality of user onboarding, engaging with providers, monitoring and reporting on all licence activity, and generally taking care of all users and engaged staff.

The benefits of having her in this role have been enormous: service users and their supporters get a well-managed service with an accountable individual who understands all elements of the project well, while the Council has a dedicated resource to manage every aspect of delivery and reporting. A single point of contact between the service and the Brain in Hand team has also helped to maintain consistent quality, resolve any problems quicker and more effectively, and prevent confusion or things getting missed.

Having a single person accountable for coordination is the most effective way to ensure that all needs are met with a comprehensive, holistic approach.

This may not always be viable, however, depending on the structure of the setting in which the project is to be implemented.

Ensure the project has all the resource it needs

Whether a service has the scope to create a dedicated post or not, there are vital roles that must be fulfilled when implementing a new solution. A single person may serve more than one of the following functions. The ‘champion’

role is perhaps the most frequently neglected, but visibility is a major component: promoting the innovation to keep it in the minds of all involved staff at all times is key.

Recommended project roles:



Project Sponsor

A strategic lead who can oversee, unlock resources, and to whom benefits and outcomes are reportable (they will not manage day-to-day operations but are nevertheless key to project success).



Operational Manager/Coordinator

Provides the overall direction and management of the project, making sure all elements are delivered, milestones are achieved, and logistical issues can be resolved.



Innovation Champions

Visible members of staff who advocate for the use of the innovation to encourage buy-in, and who can provide the first level of support to the operational staff. Often team managers or senior delivery staff.



Referrers

Practitioners able to identify service users who would benefit and refer those people to use the service. Referrers will need support to understand what the solution does, who is eligible, and how to refer.



Supporters

Those who already work regularly with the users and can help them to make the most of the solution. Personal supporters, like family members, can be as invaluable as professional team members.

Promote, promote, promote.

To help visibility, services should consider hosting regular webinars, creating emails or physical flyers notifying teams of any changes to the solution or project, ensuring all managers are engaged and can push information out to delivery staff, and running drop-in sessions to provide the most up-to-date information and give an opportunity for any issues to be raised.

It should also be remembered that the service’s staff are not the only individuals to whom the solution needs to remain visible.

Innovation that affects end users must be a partnership between the solution provider, the end users, their families and supporters, and the professional teams supporting them, so keeping every involved party engaged will greatly improve the chances of success. This is especially important when it comes to generating referrals for service users to use the solution: suppliers and services need to work together to make sure that there is a clear plan for identifying suitable users quickly so the project can be up and running as soon as possible.

Without referrals, there can be no successful project – and the referred people need to be right for the solution, too, so having clear suitability criteria is key.

Find suppliers who can support engagement

A good supplier will be able to offer and launch a programme of support to help facilitate this communication. At Brain in Hand, we have a structured engagement programme including awareness sessions (delivered by our team and in partnership with each service) for senior teams, operational teams, practitioners,

referring organisations, and any other relevant stakeholders.

We also provide referral guides, guides for end users, newsletter information and images, and support with social media campaigns to raise awareness, increase referrals, or generate PR interest.

Whatever challenges a team faces, it should seek to take full advantage of any existing initiatives within the organisation. Tech programmes, pushes to innovate, senior or visible staff who seek to drive positive change; all of these can help a service to jump up the first few rungs of the ladder towards implementing a new project.

Overall, one of the most key points is to always think long-term. A solution’s chances of making a real difference will be significantly worse if it is treated as a short-term distraction rather than a sustainable way of making ‘business as usual’ better.

Evaluating Success

“Evaluating from an individual user perspective is the way to do it.”

- Tony Bacon

Work with providers to demonstrate success

A good provider will work with the service to help generate the data and evidence required to demonstrate success, tailoring evaluations to each service's agreed outcomes and objectives (having worked in collaboration to co-create them). It should be clear whether those are being met, what exactly it is about the solution that's driving the impact and in which areas, and, just as importantly, what

can be done to improve the situation where any objective is not being met.

Both parties – supplier and service – are responsible for working in partnership to ensure that evaluation targets the most meaningful metrics and can be conducted easily and accurately.

Build baselines early – it pays off later

The early work on establishing required outcomes, and especially on defining and measuring baseline metrics, pays off at this stage in making it much easier to see the difference the solution has made. It also

ensures that not only can an impact be seen, but that a service can be certain that it is the right, most meaningful impact for the needs of the organisation, staff, and service users.



Demonstrating savings

Brain in Hand builds evaluation into every project. In Kirklees, a case study approach was adopted to demonstrate the benefits to end users.

This allowed the commissioning team to run a social value exercise to determine cost savings that were both direct (where a user had been stepped down from a service) and potential or avoided (where a user might otherwise have required a more expensive intervention) using current unit costs of health and social care.

Areas of direct savings included reduced hours spent in day care services or with professionals such as CPNs, psychologists, and social workers, reduced travel support, and reduced reliance on community mental health teams.

Potential avoided costs included outpatient or A&E visits, unemployment benefits, and crisis resolution teams. (Kirklees has a consistent method of attributing potential avoided costs to its providers; see the full co-produced report for more information.)⁴

“If you can see the value on a case study basis of what people achieve and how they’re able to move on – supporting themselves, getting back into work, getting into a normal lifestyle – then that’s where the real value is.”

- Tony Bacon

The team also conducted a report on the benefits to social care practitioners and found that 12% of service users had decreased the amount of support time they needed, which allowed practitioners to focus their energy where it was most needed.

Using Brain in Hand in one-to-one work with the individual also helped to reinforce therapy techniques and work on goals, which could then lead to further reductions in the level of support a person might need.

Effectiveness, experience, economy

Services should look to establish whether the innovation has met their unmet need and delivered outcomes in three key areas: effectiveness, experience, and economy.⁵

An effective solution will have improved the targeted outcomes for service users and staff; users who report a qualitatively positive experience using the solution are more likely to be engaged and thus continue to use it; an economical project is one that can be sustained financially and deliver return on investment.

It’s important to note that there are challenges demonstrating return on investment across

health and social care. Current approaches to economic evaluation are substantially less well developed than those in traditional clinical pathways.

There is considerable uncertainty and disagreement about which methods to apply and diversity in methodological practices, all of which make it challenging for service providers to demonstrate the ROI of innovation. Methodologies need to reflect what is feasible given the available evidence and what is appropriate for health and social care.⁶

Developing new ways to prove return on investment

It is exactly because ROI outcomes are so difficult to measure across Health and Social Care that Brain in Hand works very closely with service providers to define and measure the outcomes that deliver ROI.

We are also pioneering a framework for health economic evaluation across

the ecosystem, working with YHEC and ORCHA and utilising findings from our phase 2 SBRI grant award.

This is an important piece of work for both Brain in Hand and the industry as a whole: to better utilise available resources and make more informed decisions about long-term sustainable solutions.

5. See <https://www.orchhealth.com/how-do-digital-health-standards-assess-evidence> for more in-depth discussion of the elements of a good evaluation – ORCHA has spent a lot of time and effort establishing how best to measure the success of digital innovation.

6. David Buck makes this point excellently in his piece for the King’s Fund. <https://www.kingsfund.org.uk/blog/2018/04/return-investment-public-health>

End user benefits drive overall success

A consistent message from projects with Brain in Hand is that benefits for service users must come first. If the solution brings value to its users, financial benefits should follow, and the user outcomes should remain the driving force behind evaluations.

Investing upfront in establishing baselines – and ensuring that all spends and savings are regularly evaluated and reviewed throughout the duration of the project – will ensure that strong outcomes can be demonstrated.

Ultimately, good innovation is an investment that will pay off through improving people’s quality of life and enabling them to become

less dependent on other services. In some cases, support may be reduced, creating direct savings; in others, prevention of crises may avoid significant potential spends.

There are benefits, too, to redirecting support hours without necessarily reducing them: for example, an individual whose daily living needs are now met by an innovative solution can use their support time to work on travel or accessing the community.

Direct savings, cost avoidance, and redirection of costs can all be valuable outcomes, allowing the money to be used where it can make the most difference.



Make the most of powerful user stories

Southwark decided early on that prevention and wellbeing was the right approach for their telecare service: keep people as independent as possible in their own home, using tech to support them so that they would not need to go into care as early or at all.

“ I showed the innovation board this anecdotal evidence and they were amazed to hear that something so simple had made such a difference, so we approached evaluation in terms of the impact for each person. ”

- Alison Thrower

Like in Kirklees, their evaluation approach focused on gathering anecdotal evidence to show how much of a difference the solution had made to everyday lives; these real stories about

end user experiences proved immensely valuable when demonstrating to the innovation board that Brain in Hand had been a success.

Demonstrating value can be challenging, but will get easier

Of course, this kind of evidence is powerful and often necessary, but rarely sufficient when looking to make the case for large-scale investment in new, innovative technologies. Good suppliers should be committed to working with clients to generate robust evidence of financial and economic benefits; this will have to become a much better understood practice if digital support is to become truly business as usual. The near future will doubtless provide exciting opportunities for forward-thinking support services to work with suppliers to develop strong,

more standardised approaches to measuring value in terms of user impact, benefits to the service and its staff, and return on investment. These developments will be critical in establishing digital innovation as a key, mainstream part of 21st century support delivery.

In the meantime, commissioning services should continue to work closely with suppliers to create evaluations that show the innovation’s performance against the most meaningful measures for their individual objectives.

Expanding to a sustainable, scalable project

“Demonstrate the need and the demand, the value and benefits to people accessing the system and how that supports them to manage their lives with less support – or, in some cases, without support.”

- Tony Bacon

Know what value looks like and how to show it

Demonstrating value is the key element to building a scalable project. Because the approach of routinely embedding digital innovation in services is still relatively new, understanding from the very start what value will look like is key: it must be clear in advance how to tell when a solution has delivered the required outcomes. Showing this and that the project is sustainable both in terms of

financial cost and other resources required (staff time and investment, for example) prove viability.

To expand the use of the solution, however, a service also needs to show that the need and the demand for it still exist. As when the solution was first commissioned, it must still be demonstrated that there is a problem for it to solve.

Wide or deep?

Depending on the setting, scaling could be a matter of either breadth or depth, or both. Expansion could first involve increasing the number of users in the same pathway (going from thirty users in a mental health setting to three hundred, for example) or it might be that use is spread to new settings and teams (perhaps expanding from the supported living team into workplace support, for example).

When deploying an innovation that's worked in one pathway to another, it should not be assumed that the new setting will be able to

adopt it immediately just because it's already embedded elsewhere. The preparatory work will need to be done again to make sure the new pathway is ready to adopt the solution.

Setting expectations and building confidence with all the teams who'll be using it is key. Identifying early how referrals will be generated, so that the innovation can be rapidly deployed as widely as possible, will result in a confident team and an engaged user base ready to begin adopting and using the new solution.





Pick the right model for scaling in your services

Any supplier should understand how to help a service scale their innovation. The delivery model Brain in Hand adopted in Surrey, where we provide all the elements of the system direct to end users, is one we are confident in scaling because it takes all the strain off the service. It allows us to deliver a high-quality solution that improves outcomes and helps teams to feel confident in supporting users towards independence.

When the time comes for Surrey to expand their use of Brain in Hand, we will easily be able to work together to transpose that simple model to more users or more services, taking the strain off the staff and delivering the solution directly to those who use it.

In Kirklees, however, the model is more integrated. Council and VCO staff members, in close partnership with their Brain in Hand project team, deliver much of the work themselves; there, the dedicated Brain in Hand Coordinator role ensures that every element of the system is still delivered to a high standard.

For Kirklees to expand therefore requires the Council to ensure that each setting has sufficient staff resources and training to deliver Brain in Hand. The benefit of this, however, is that the Council can be more in control of where and how they deploy and use the system, creating a self-sufficient programme.

Make evaluation a continual process

It's important to review successes and learnings from the project as it progresses, not just as a one-off activity. By continually looking at what's working well and what needs refining, a service can adjust its delivery model to ensure the best outcomes as early as possible.

These lessons can also help to inform developing projects in new pathways and settings. While each will be different (in its service model, staff members, structure, and so on), understanding the general principles that can lead to successes or challenges can help new implementations to get up and running as quickly and smoothly as possible.



Getting it right is worth the effort

Technology may not be able to solve all of health and social care's problems on its own, but it has the potential to help address real needs with targeted, effective, sustainable interventions. The solution itself isn't enough, though: it takes willingness to embrace change, it takes time and effort to understand how best to implement and scale a solution, and it takes a lot of collaboration.

Ultimately, the aim should be to integrate solutions (that have been shown to work) into as wide a range of settings as possible across the organisation so the benefits can reach as many teams and service users as possible. To truly embrace digital support is to make it business as usual; the goal should be to reach a point where innovative solutions become trusted, everyday tools in the service's kit.



The future for Kirklees, Southwark, and Surrey

Kirklees now consider digital support an integral part of their offer and intend to keep it that way. Before the pandemic, they were working towards digital integration, but lockdown accelerated the process of digital becoming an expected component of support.

Hannalease credits Brain in Hand with helping services that were stretched beyond maximum capacity and unable to bring in new users. Some users were able to step down and transition into greater independence, which freed up resources to deliver more accessible and effective support for more people.

In Southwark, analogue traditional phones will be switched off by 2025; the telecare team will be fully digital. Access to a range of tools is opening up for them; they expect that soon they will no longer be reacting to someone having a fall but preventing the fall through predictive analysis and proactive monitoring.

And in Surrey, senior manager Fadzai says that the pandemic, while it's been difficult for everyone, has proved that people and services can quickly adapt to using technology to keep delivering services at the same high quality.

“I think the beauty of technology nowadays is that it connects different people from all different walks of life; it gets rid of separatism, and I think this is what our society needs at the moment.”

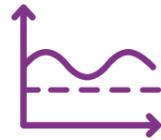
- Fadzai Tande

Summary



1). Identify your unmet need:

Determine the problem that needs to be solved. Work closely with staff to understand their needs and their service users' needs.



2). Establish baselines early:

Outline and measure the most relevant metrics that will tell you whether your desired outcomes have been achieved.



3). Involve all relevant stakeholders:

Get people involved as early as possible to secure their buy-in and promote collaborative working.



4). Find a collaborative provider:

Work with a supplier who will target the solution to your specific needs and the idiosyncrasies of your service.



5). Consider local partnerships:

If you share pain points with other organisations such as your local CCG, there may be opportunities to work together.



6). Ensure your service is ready:

You will need a project sponsor, operational manager, innovation champions, and delivery staff.



7). Prepare each individual site:

Ensure all staff are ready to adopt the innovation and willing to adapt their way of working to make the most of it.



8). Promote the solution to your teams:

It's key to keep the solution front of mind for frontline staff who will be using it and referring service users.



9). Focus on early referrals:

There can be no chance of building a successful project if people aren't using the solution.



10). Take all the help you can get:

Leverage any existing initiatives within your organisation that might help you progress your project.



11). Celebrate qualitative successes:

Stories of the real difference that has been made to people's lives are extremely powerful.



12). Evaluate based on your specific objectives:

This will enable you to demonstrate that meaningful value has been delivered.

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