



CITY & HACKNEY CCG
INNOVATION FUND



City and Hackney
Clinical Commissioning Group

Interesting practice: The City & Hackney CCG Innovation Fund

In November 2013, City & Hackney CCG invited local residents, service users and stakeholders to the CCG’s **Commissioning Intentions event** to discuss and influence these plans and to talk about how health services can best meet people’s needs. **The Innovation Fund was created** in response to the thought-provoking ideas and comments received at this event.

The fund was designed as an opportunity **to surface and support innovative practice**, learn from ideas that are tested in the real world, and use the lessons to shape and improve the eco-system of services available to people in City and Hackney.

In May 2014 the CCG issued **an open call for ideas** looking for innovations that had the potential to deliver significant improvements in the health and wellbeing of City and Hackney residents. The aim of the fund was to surface solutions that met the four themes of the fund (see right). In addition to the fund themes, the CCG were also looking to support projects that:



- showed a **deep understanding of the needs of communities** and could evidence demand for the interventions they propose
- articulated a **strong case for the change** they want to see in services and practices
- had **great ideas about ways to improve and radically transform existing practices**, working inside or outside of mainstream services currently provided
- were able to **strongly demonstrate how they are involving users** in shaping, delivering and reviewing the solutions they propose to implement
- are working in **partnership** to deliver integrated solutions

The Response:

The call for ideas stimulated interest from a wide pool of organisations ranging from local social enterprises to bigger and more established charities working nationally and internationally. The CCG received 65 applications in total, spanning physical and mental health conditions; acute, planned and long term care; and addressing health and wellbeing from cradle to grave. A wide variety of delivery mechanisms were proposed for new services, including peer support and mentoring, volunteering, timebanking, activity groups, digital software, and mobile applications.

The Selection Process:

In stage 1 of the process, applicants were invited to submit a short application form. Applications were reviewed and shortlisted against three core criteria:

- **Idea in a nutshell** - is the proposed solution and its aims clear, does it propose an innovative and interesting approach?
- **Case for Change** - does the applicant have a deep understanding of need based on meaningful user involvement, a compelling vision for change and evidence of demand for their solution?
- **Strategic Fit** - does the proposed solution align with Fund theme(s), does it have the potential to deliver significant impact for the people of City and Hackney, are its lessons/model likely to be transferrable/ replicable across other services?

34 applications were shortlisted and in stage 2 of the process, these applicants were invited to answer some **additional questions** that asked them to be clear about their proposed impact and to provide a project plan and outline budget. For stage 2, we added a further criterion for assessing applications:

- **Feasibility** - Does the applicant have the right experience and skill set, do they set out a convincing plan, a realistic budget and do they have good ideas about how to measure the impact of their solution?

The strongest applications demonstrated a **compelling case for change** and were able to articulate a **clear vision** of how their solution would move toward a future that ensures better outcomes for City and Hackney residents. They also had a clear understanding of the state of play in existing mainstream and commissioned services.

Applications that demonstrated a **strong understanding of City and Hackney** and drew upon **local data** to back-up their analysis of the current state of play were scored highly. We looked for applications that exemplified **user involvement, co-design, and co-production in the development of their idea** as well as in the proposed solution. Strong applications tended to show **rigorous thinking about impact** and produced targets that were significant and credible within the timescale of the project, offering value for money invested by the CCG.

Eleven projects were selected to receive investment from the Innovation Fund. Details of one of the projects is below. More information is available: <http://www.cityandhackneyccg.nhs.uk/about-us/innovation-fund.htm>

Example: Doctors of the World



Doctors of the World have been working with **vulnerable migrants** for 30 years. They have a clinic in London providing access to healthcare for these groups. There are populations in City & Hackney who do not have access to primary care by virtue of their status and because of misinterpretation of requirements for migrants. The proposal from Doctors of the World is to work with these communities in Hackney to provide a **service to advocate on behalf of vulnerable people to access timely, appropriate care working with local GPs and A&E providers.**

This will mean people are able to access preventative care for long-term conditions, vaccinations, early diagnosis for health conditions, follow-up after an emergency admission in a timely way with better outcomes for mothers and babies – this is more cost-effective than accessing care when complications arise.

Medical practices and vulnerable populations will have a stronger understanding of their entitlement to accessing healthcare and will increase access to timely, preventative care. The plan is to work closely with the A&E department at Homerton and urgent care/walk-in centres to provide advocacy for people who require GP registration following an attendance.

The people who come to the clinic are likely to be extremely vulnerable and the service may be the only trusted place they feel safe to access healthcare. People who have been turned away with no-where else to go will be welcomed and supported to access mainstream services. The aim is to enable people to access appropriate timely care and get on going access to preventative care. Without the service people won't access healthcare or other services until the situation becomes an extreme emergency, women without antenatal care may give birth at home alone or present at accident and emergency without any prior care.

Outcomes:

- 65% of the people we see will be supported successfully to access mainstream primary healthcare
- All cases which are not resolvable by our support workers will be escalated to NHS England for resolution
- 50% of people attending our clinic will have infectious disease screening
- 100% of all pregnant women accessing the service will receive mainstream antenatal care