Health Innovation East Midlands

Measuring benefits and impacts – an introduction

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Part of the Health Innovation Network

Overview

Health Innovation East Midlands

- Introduction
- Identifying benefits
- Your challenges
- Measuring benefits & impacts
- Your challenges
- Taking this forward

Introduction

In which type of organisation do you work?
Let us know

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1. NHS Trust (acute or community)
2. Local authority
3. ICB
4. Public Health (OHID/NIHP)
5. Regional/national NHS body (including Health Innovation Network)
6. Charity / voluntary sector
7. Company / innovator
8. Other

What is your role in relation to benefits from innovation? Let us know

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1. I have a strategic responsibility for project / programme delivery
2. I’m responsible for identifying and delivering benefits
3. Innovations are given to me and I want to get more out of them
4. I want to get a better understanding of how I can identify and or measure benefits for my project or innovation
5. What are benefits? I’m here to find out more
6. This is personal development for future roles / projects

What is your experience of identifying and measuring benefits? Let us know

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1. Experienced – something I do a lot, but would like to get some new ideas and tips
2. I do it, but not sure that I'm doing it the best way
3. Not very experienced, but something I've had to do / not very confident in this area
4. Not really done much, but I know that I need to
5. This is a whole new area to me – keen to learn more!

How to identify benefits

Inspired by Innovation Collaborative benefits management support and Cranfield University approaches

Defining Benefits

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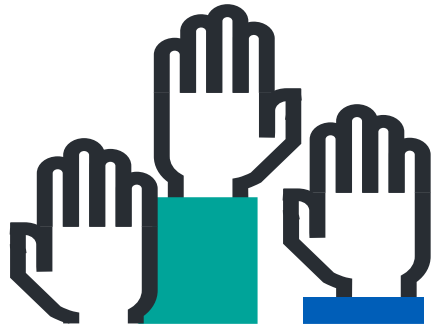
A benefit is:



- A measurable improvement
- Resulting from change
- Considered to be advantageous by at least one stakeholder
- Contributes to an organisational objective
- The value perceived or realised by those experiencing the outcomes of change

Delivered within a benefits realisation framework

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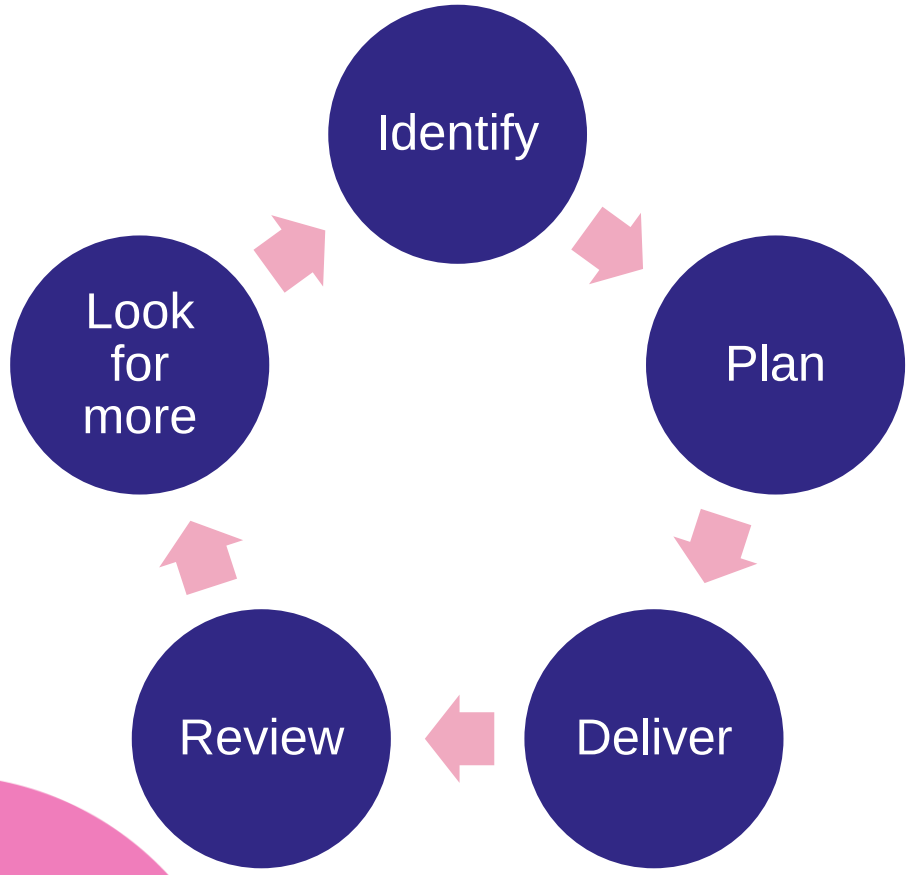

NHS Digital 5 stage approach

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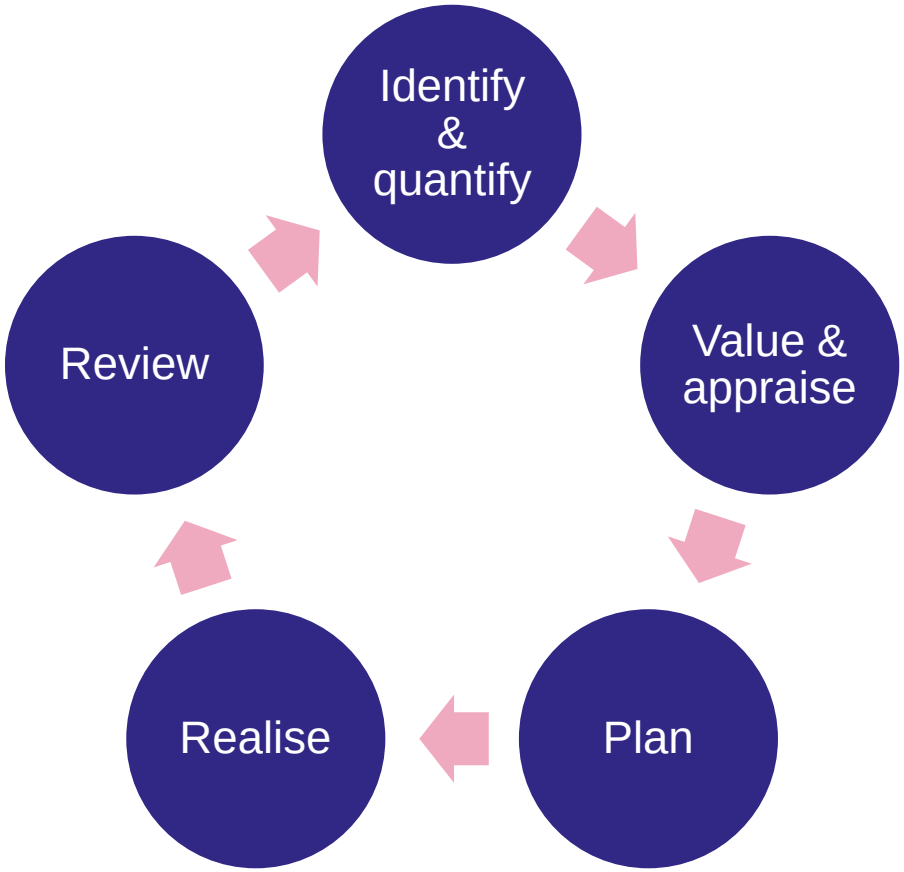

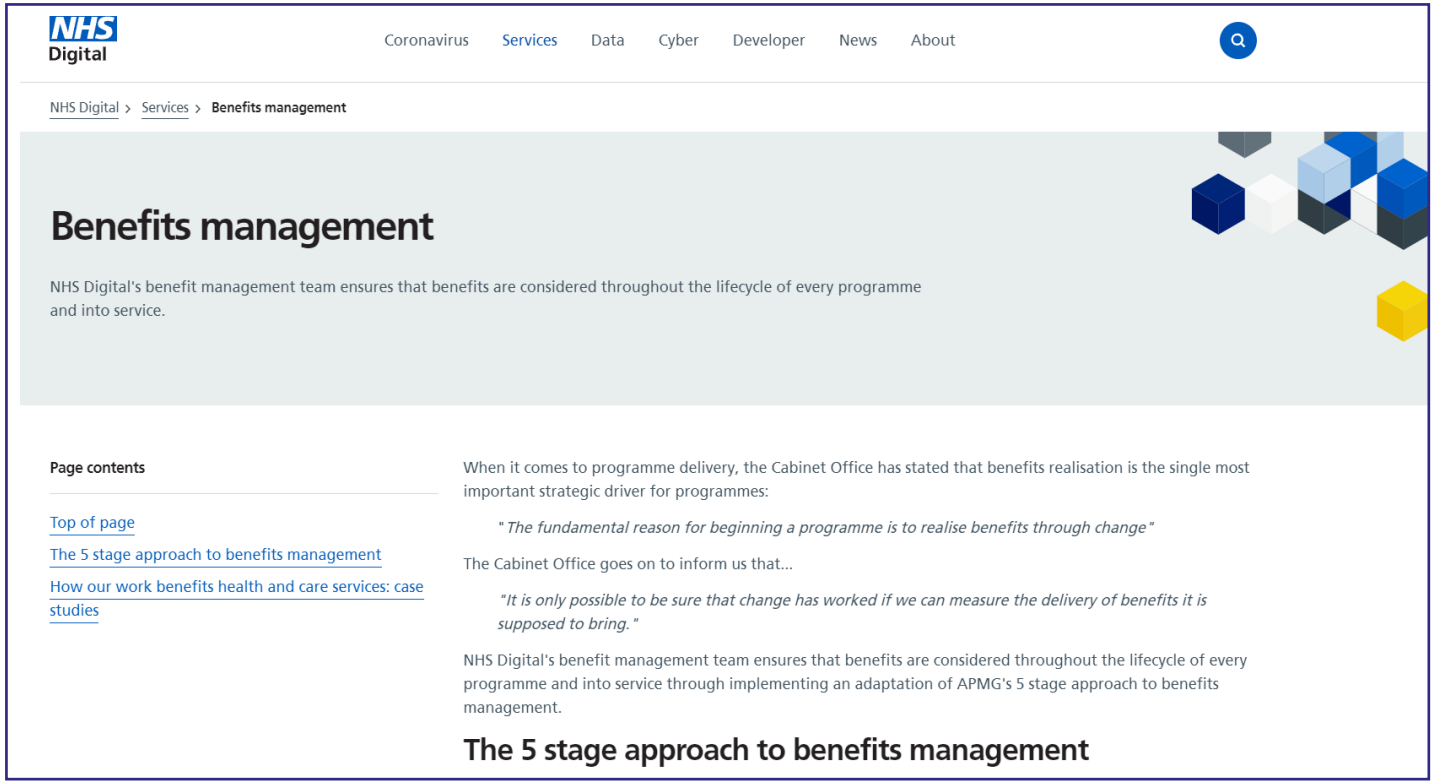
NHS Digital

Coronavirus Services Data Cyber Developer News About

NHS Digital > Services > Benefits management

Benefits management

NHS Digital's benefit management team ensures that benefits are considered throughout the lifecycle of every programme and into service.

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The 5 stage approach to benefits management

How our work benefits health and care services: case studies

When it comes to programme delivery, the Cabinet Office has stated that benefits realisation is the single most important strategic driver for programmes:

"The fundamental reason for beginning a programme is to realise benefits through change"

The Cabinet Office goes on to inform us that...

"It is only possible to be sure that change has worked if we can measure the delivery of benefits it is supposed to bring."

NHS Digital's benefit management team ensures that benefits are considered throughout the lifecycle of every programme and into service through implementing an adaptation of APMG's 5 stage approach to benefits management.

The 5 stage approach to benefits management

https://digital.nhs.uk/services/benefits-management

Terminology

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Outputs – Outcomes - Benefits

NHS

"Outputs" are the products or deliverables created by a project. Examples include a new system going live, a building being constructed, or an innovation successfully adopted.

Delivery of outputs is the responsibility of the individual project manager.

"Outcomes" are the result of, or the difference made by, the use of an output. Examples include fewer errors in workflow management, quicker access to records or an increase in the number of patients assessed.

Responsibility for this typically sits with overall programme management.

"Benefits" are the measurable improvement resulting from an outcome that is seen as advantageous by stakeholders where system or business value is created.

Examples include shorter length of stay, improved quality of life, staff experience or a reduction in operating costs. Benefits management often occurs at portfolio level.

Number of tools to help identify & understand benefits e.g.

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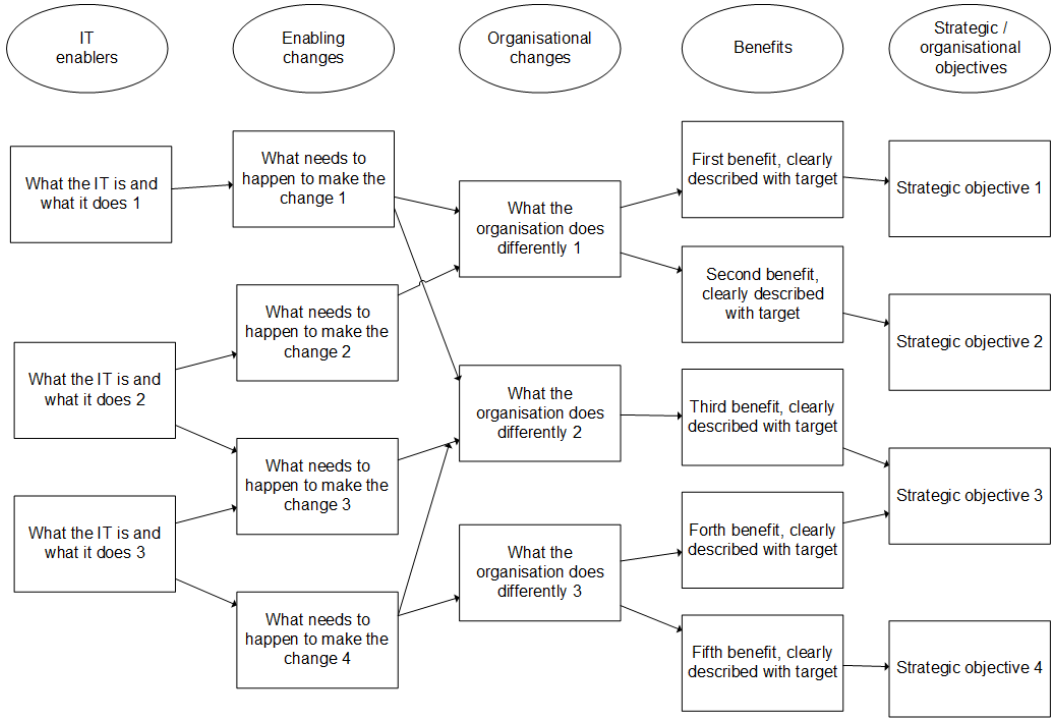
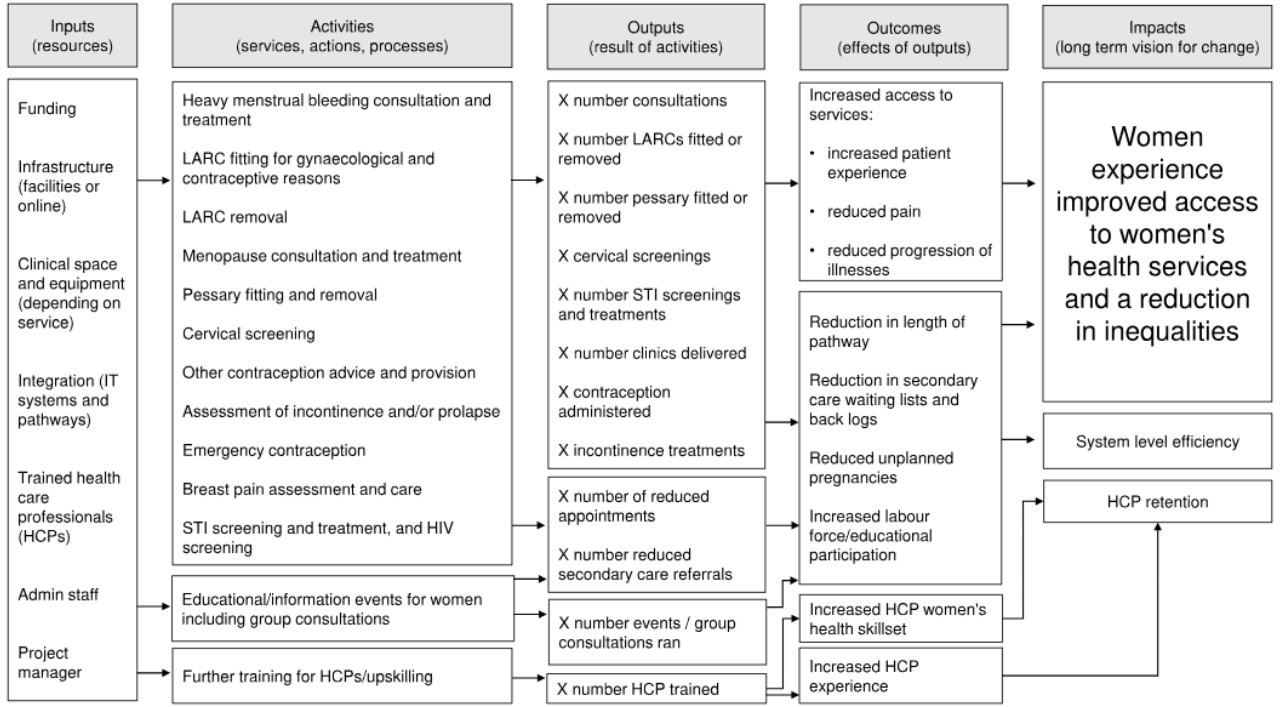


Benefits dependency network



Logic model

Example from: https://www.gov.uk/government/publications/womens-health-hubs-information-and-guidance/womens-health-hubs-core-specification

Understand what changes in the patient pathway will deliver the benefits

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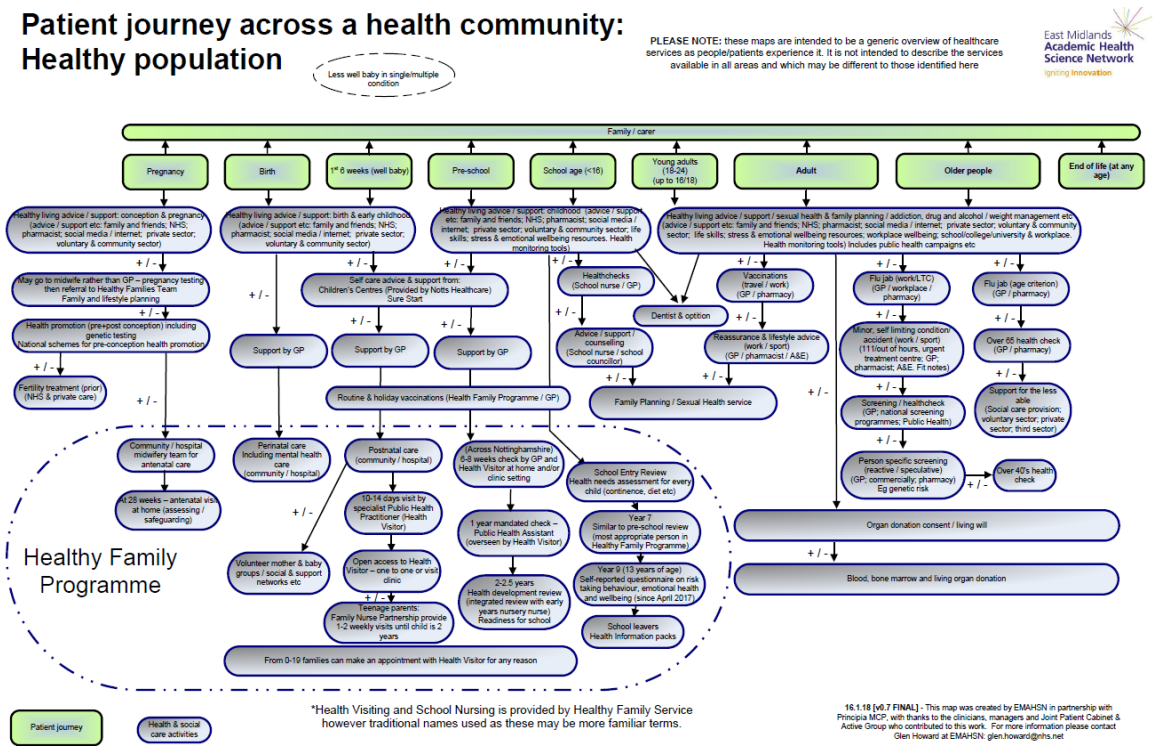
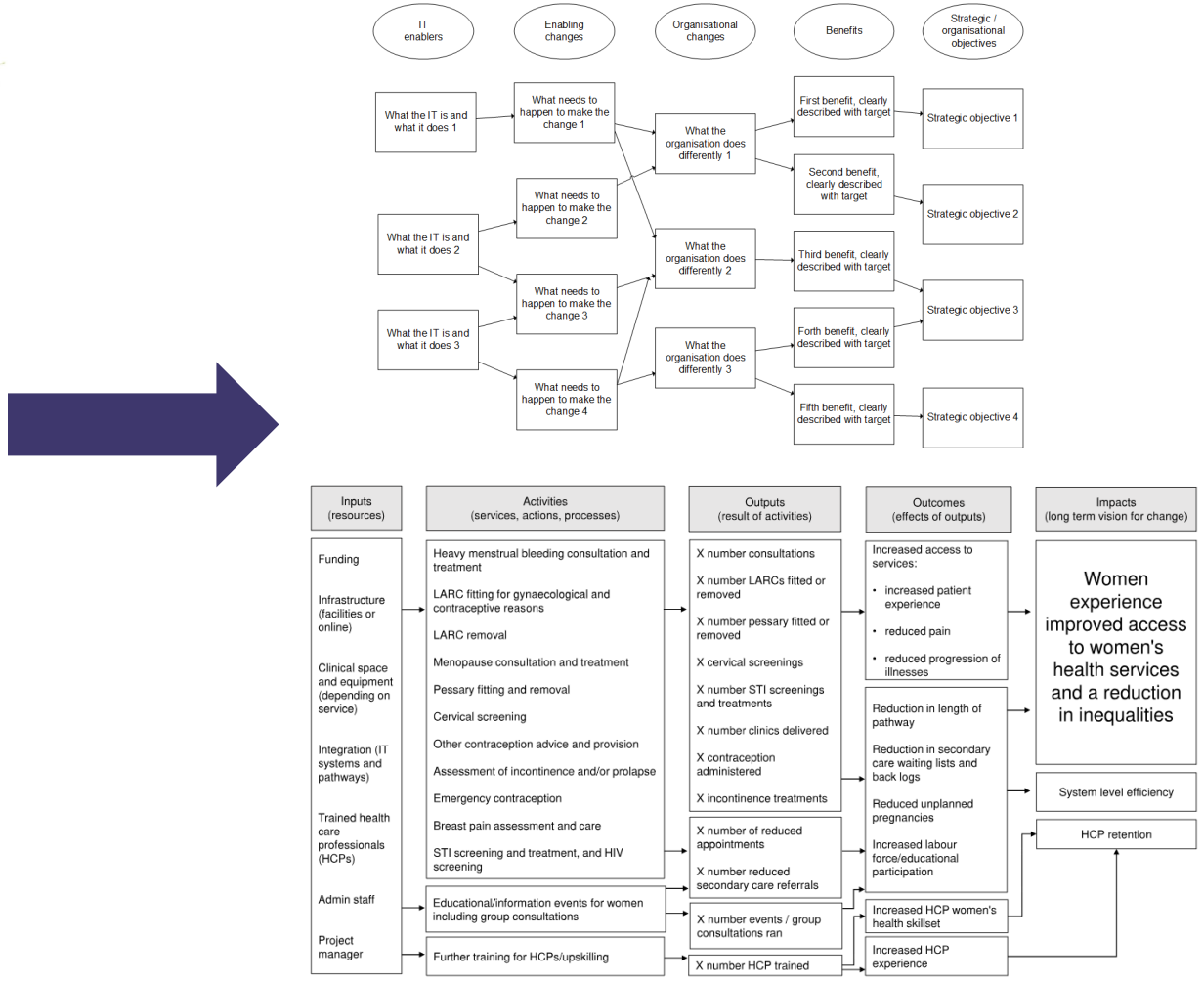
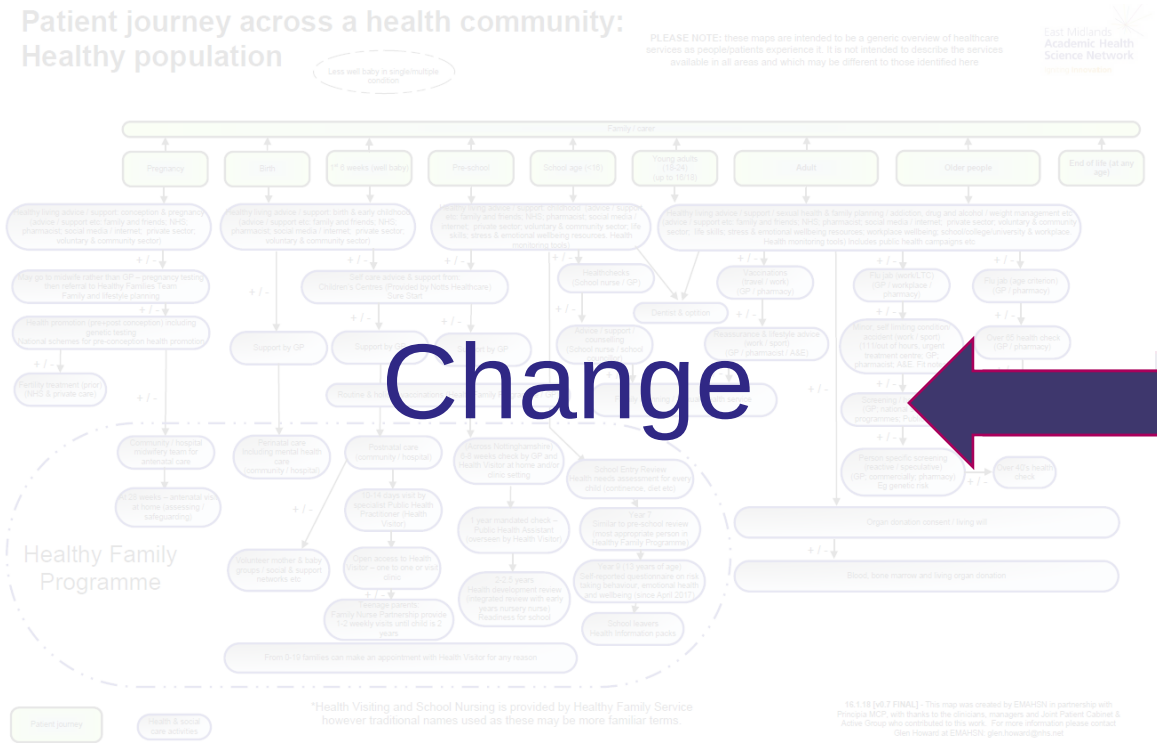




Understanding the relationship



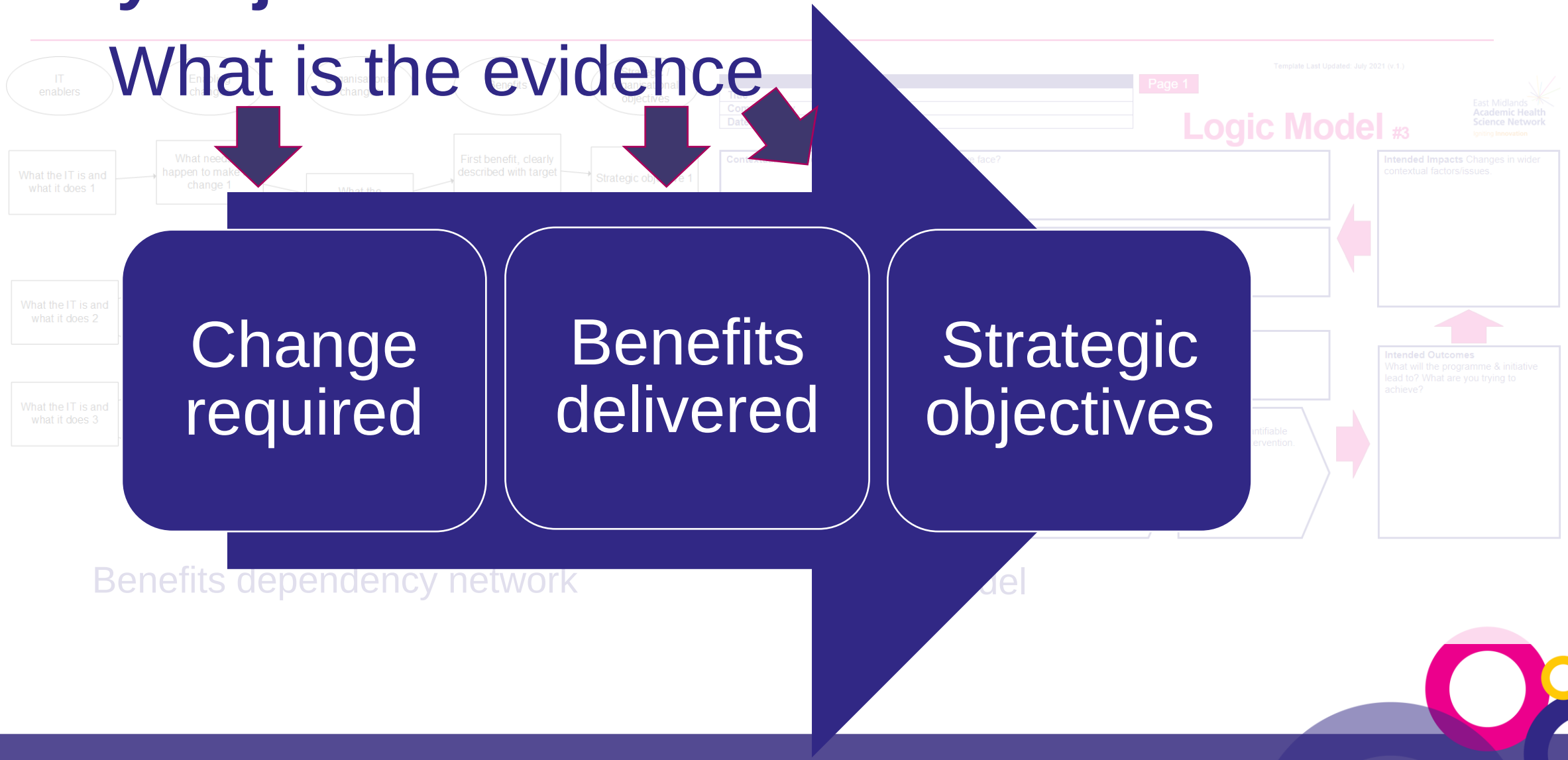
Change

Benefit

Key objective is to understand:

Key objective is to understand:

What is the evidence



Key types of benefits

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Cash releasing

Non-cash releasing

Quality benefit

Societal benefit / Public benefit

Disbenefits

Benefits can be ‘monetised’

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Cash releasing

Non-cash releasing

Quality benefit

Societal benefit / Public benefit

Expressed as a calculated value in £

Only cash releasing benefits release in a way that resources can be completely re-allocated elsewhere, or the benefit can be completely claimed from a budget.

Difficult to sensibly monetise

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Quality benefit

- Quantified and measured
- Essential to capture, measure and track – much of the value
- Key for stakeholders & engagement

Benefits usually come from

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Doing something new

Doing something different

Stopping doing something

Who benefits?

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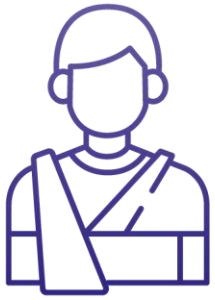
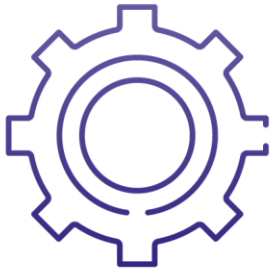
May be useful to consider benefits from the perspective of:





Your challenges and questions?

What challenges do you have in identifying benefits? Let us know

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1. Mapping current / new patient pathways or processes
2. Understanding the impact of the change
3. Benefits identification tools (e.g. benefits network / logic models)
4. Differentiating the benefit from the change
5. Using benefits realisation framework (e.g. recording and managing benefits)
6. Identifying the different types of benefit or who benefits
7. Anything else? Let us know in the chat

Do you have any questions on identifying benefits?

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- Please feel free to raise hands or use the chat

Measuring the benefits of innovation

An overview

Quality improvement approach

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Outcome

Process

Balancing

Not an exact match, but useful comparison

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Outcome	Process	Balancing
Lead to	~	~
Benefits	Change	Disbenefits

Trying to understand:

- How much change happened
- How much benefit
- Extent of any disbenefits encountered
- Was this due to the new intervention (‘attribution’)

Deriving attribution

- Estimate the counterfactual
- Consistent with the theory of change?
- Rule out alternative explanations
- Each have strengths & weaknesses

Difference in difference

Combination of other techniques investigating change across multiple cohorts / areas

Before & after

Take a suitable baseline and compare the measure before and after the intervention has been introduced

Trend analysis

Using historic data and, based on the trend, extrapolate where the would be compared to where it actually is

Control vs intervention

Comparing outcomes in an area implementing the change with a (suitable) area operating as usual

Considerations

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- Be clear the questions that you are asking
- Without context, data is limited value
- Can you make a sensible comparison to gain confidence in the effect you have caused
- Avoid 2 point comparison
- Consider measuring over time e.g. Statistical Process Control
- Be proud of your benefits and share with others

Potential sources of data

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- Data collected as part of usual care (IG considerations)
- Patient & user experience
- Exploit an existing dataset (e.g. quality or performance metrics)
- Whole pathway - joining data across departments or organisations
- New data collection - kept to a minimum (consider benefits & costs of collecting must be understood; timing)
- Ensure that you understand data quality
- May need expertise to understand the data: clinical & analytical

Considerations

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- How do you include patient/user experience
- How do you include staff experience
- Do you understand
  - Data quality issues related to the data
  - What the data means – definitions and how collected
- Limitations in what can be interpreted from the data

Examples of potentially useful public data

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- NHS England (extensive, including):
  - Quality and outcomes framework (QoF) & prescribing data
  - Ambulance data
  - A&E, Urgent & Emergency care metrics, Hospital Episode Statistics
  - Etc.
- National clinical audit data (HQIP)
- Public health data – e.g. OHID Fingertips
- Quality indicators (internal and external)
- Model Health System, GIRFT, SHAPE tool etc.

Your challenges

Your challenges and questions

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- What challenges do you have in measuring benefits?
- Do you have any questions on identifying benefits - please feel free to raise your hand or use the chat

What challenges do you face in measuring benefits? Let us know

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1. Knowing what to measure
2. Knowing what data is available or suitable
3. Accessing the right data
4. Understanding / interpreting the data
5. Getting the data in a useful format to understand
6. Having access to the right skills / capacity to undertake such work
7. Not many, we often do this fairly well
8. Anything else? Let us know in the chat

Do you have any questions on measuring benefits?

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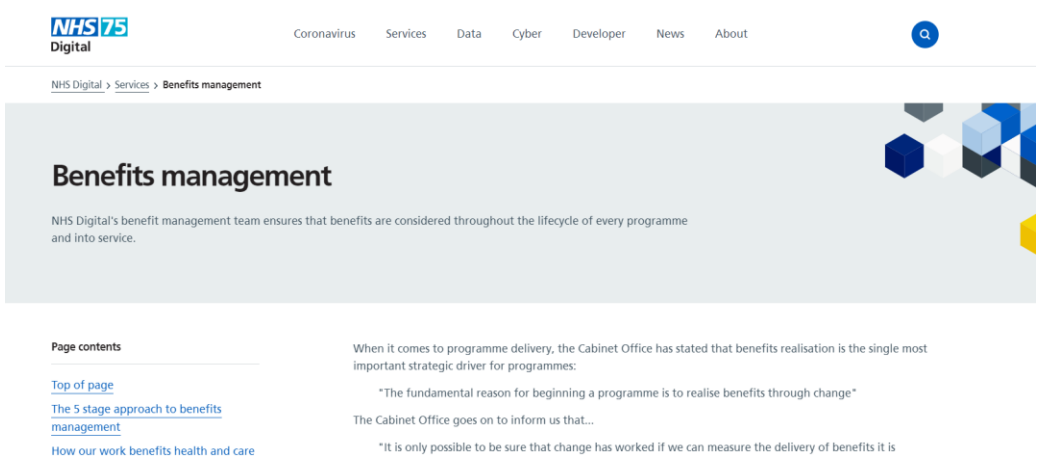
- Discussion

Taking this forward

Very brief introduction to:

- Identifying benefits
- Measuring benefits
- Understanding some of your challenges in undertaking this work

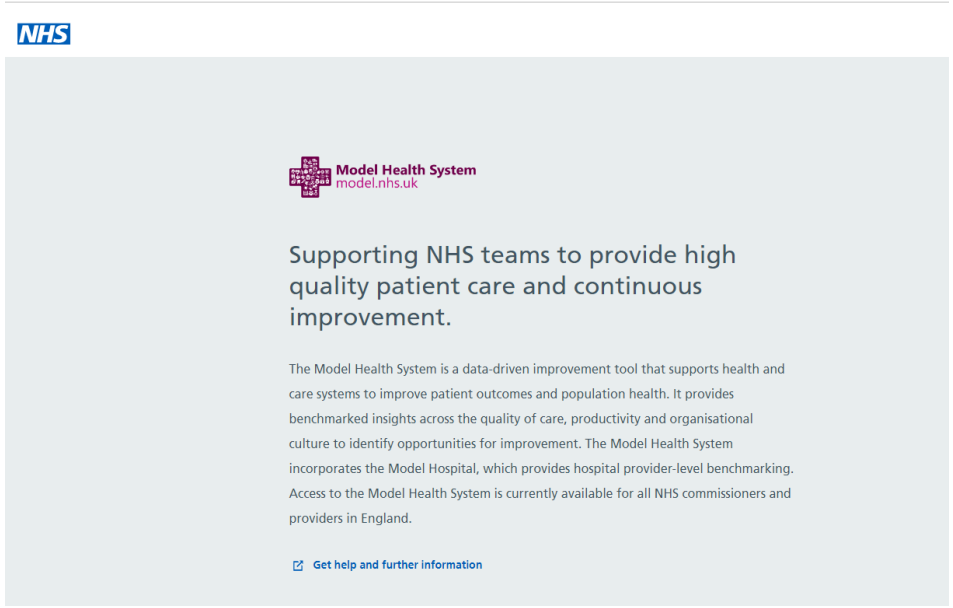
Additional resources



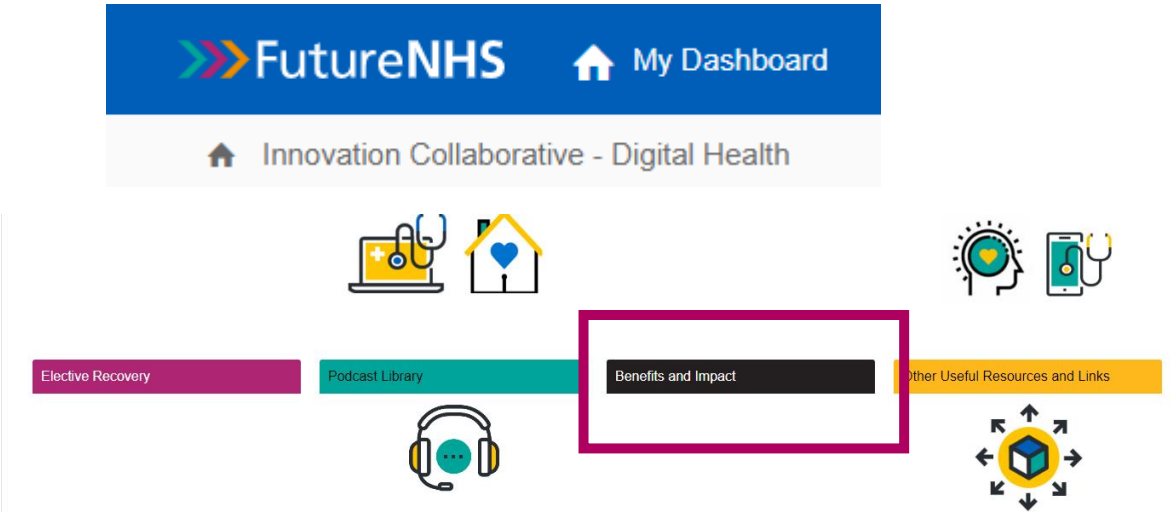
https://digital.nhs.uk/services/benefits-management

https://www.england.nhs.uk/nhsimpact/

Health & care system colleagues only



https://model.nhs.uk/



https://future.nhs.uk/connect.ti/InnovationCollaborative/grouphome

Useful resources

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Making data count: https://www.england.nhs.uk/publication/making-data-count// & Making Data Count on FutureNHS

The Health Foundation e.g. https://www.health.org.uk/publications/evaluation-what-to-consider

Health Innovation network guide to real world evaluation: https://thehealthinnovationnetwork.co.uk/national-publications/real-world-evaluation/

DH&SC SHAPE tool https://shapeatlas.net/

You can help us understand one of our changes!

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- Delivering sessions virtually may save time and travelling
- If you could answer a couple of questions we can better understand the impact

If this had been an in-person session, would you have been able/willing to travel to Nottingham?

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- Yes
- No
- Would depend where in Nottingham

If you answered yes, you would have travelled:

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- Would be really helpful to find out more details if you would be willing to help
- Please use chat, MS Forms or email glen.howard@nhs.net:
  - How far would you have travelled to the Jubilee Campus (NG7 2TU)?
  - What method would you have used?
    - Petrol car/motorbike
    - Diesel car
    - Electric car
    - Public transport
    - Cycle or walk
  - Could you estimate long would it have taken out of your day for travel – rough estimate

HIEM support

- Future events & topics – let us know what would be useful
- HIEM resources include:
  - Innovation Academy – https://healthinnovation-em.org.uk/our-work/innovation-academy
- HIEM support – https://healthinnovation-em.org.uk/images/HIEM_Analytics_and_Evaluation_Service_for_health_and_care_systems_v_2_June_2024.pdf

Thank you

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The HIEM are a fantastic team, and events like this are very much a team effort. While any errors and inaccuracies are mine, the following have provided invaluable input into this presentation:

- **Gemma Housley**, Advanced Analyst
- **Phil Miller**, Evaluation Lead
- **Chris Eagling**, Senior Information Analyst
- **Jenny Bunn**, Communications Specialist

Further information

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