Network posts:

Hello

I have a drive to promote a system to identify/ recognise/ support and scale grass-roots innovation in primary care. Having been a GP partner for 19 years (& NHS doctor for 30 years) I know from personal experience that primary care innovates constantly to keep up with multiple pressures (workload/ political/ financial/ CQC etc) but usually these innovations stay within the practice (or even within the GPs room), with no time or capacity to scale and benefit the wider NHS.

There seems to be a disparity between what is needed for a struggling frontline primary care workforce and some of the NHS organisations e.g. research funding rather than innovation support, and some of the AHSNs - which have a focus on top down and very focussed innovation without great impact, or concentrating on commercially viable innovations, rather than supporting NHS improvements.

What do you feel is the best way to spread innovation?

Reply

I absolutely agree that we need innovation advocates who can work at grass roots level in practices - and that these should be part of PCN working on an everyday basis. It's too easy for practices to get bogged down in day to day tasks and not be able to look ahead and focus on new ways of working, strategies and innovations which could make a huge difference to their workload and patients' health and satisfaction. Working at PCN or similar level would help to "localise" solutions in order to make them more workable and acceptable to practice teams.

 Reply

What an interesting question! My sense is that loads of great stuff happens out in primary care that doesn't even get recognised as great because it's simply what needs to be done to make things work for us. We have a tendency to be pragmatic do-ers and historically aren't great sharers, even if we think we're on to a winner. As such, I think that innovation in primary care needs to be actively sought, practice by practice, PCN by PCN.

However, even when we identify great stuff, we often hear the comment 'yes, it's a great idea but it wouldn't work here'. Well, why not? Whilst I like the idea of innovation managers I would also advocate coupling this with QI expertise to build trust and confidence in the idea that innovating doesn't have to be scary and taking on an innovation doesn't have to be laborious. If we could not only identify the great stuff but make it easy to do, to amplify at scale or to adjust for any particular context then we might find it easier to encourage more of our hard-pressed primary care workforce that they don't need to reinvent every wheel out there.

Marketing Department, Design Department, Engineering Department, Quality Department, Design Engineers, Quality Engineers, Process Engineers, Production Engineers,