Innovation at SEHSCT

Following the Trust Board presentation in March 2026, a number of critical questions were posed to inform the Trust's direction on innovation. The Trust Board is now asked to endorse the South Eastern Health & Social Care Trust definition of innovation and to agree a shared organisational ambition for its role in delivering transformation.

Innovation in the South Eastern Health & Social Care Trust is the purposeful creation, testing, adoption, and implementation of new processes, products, or services that demonstrably enhance quality and deliver outcomes for service users, communities, and staff.

Innovation is grounded in evidence, co-design, and evaluation, and is supported by clear structures, proportionate governance, strong partnerships, and a culture that enables ideas to be tested and implemented effectively.

To support the understanding and allocation of effort there will be a decision support tool, differentiating Quality Improvement, System Transformation, Implementation, Research and Innovation, enabling teams to seek support and partnership with the right teams of experts in the Trust. The Innovation Framework will align closely to the work of the Quality and Research and Development Teams.

Three questions were posed to Trust Board.

1. What is Trust Board's Ambition for Innovation?

The Trust's ambition is to establish innovation as a core strategic driver of system transformation, not a parallel activity. The focus of innovation is to improve outcomes and experience for service users and staff, while demonstrating value through evidence, evaluation, and adoption. To enable the evolution of innovation the Trust should shift from dispersed activity to a mission-led approach, focusing on population need and service challenges. This will result in prioritising a small number of strategic programmes, integrating innovation at the core of complex transformation.

The structure and culture of organisational leadership should shift to position innovation as integral to strategic transformation, not a parallel endeavour, with formal structures that ensure innovation expertise is embedded at the decision-making table for crisis management, service redesign and transformation.

2. What Resource should be Applied to Realise Ambition?

Delivering this ambition requires dedicated, not incidental resource aligned to a structured innovation system.

1. Infrastructure and governance

Core capability investment should focus on establishing the foundational infrastructure required to enable innovation to operate at scale across the organisation, including the development of a clear innovation framework aligned to Trust priorities and supported by proportionate governance arrangements. This will ensure that innovations are consistently assessed, prioritised, and progressed

through a structured pathway, enabling safe testing, effective decision-making, and timely adoption into routine practice.

2. Workforce

Core innovation teams in healthcare are typically small, dedicated, cross-functional units built around a set of core roles that enable delivery partnering with clinical teams.

- Innovation Strategic lead
- Programme Managers
- Commercialisation Specialist
- Data Analysts
- Implementation and Evaluation Specialists
- System Designers
- Health Economists

The core innovation team is supported by agile, responsive information governance, ICT, procurement, and finance functions that understand the innovation process and enable effective partnership, testing, and implementation.

Currently the Assistant Director is supported by:

- Innovation Lead Band 8B (Part Time) – in recruitment process
- Tec Enabled Care Manager Band 8A – DHCNI post focused on TEC contract

The current team capacity constrains the ability to develop an extensive innovation programme. A dual funding model supports both the testing of innovations and the core team, combining HSC investment with external funding streams, including academic partnerships, industry collaborations, and competitive grant opportunities to enable sustainable development and implementation.

3. Funding Resource

The current innovation in the Trust operates without a dedicated budget to support the testing, evaluation, and implementation of new initiatives. This limits the ability to initiate projects that could demonstrate improvements in efficiency, outcomes, and cost savings, as robust evaluation is essential to evidence impact and inform investment decisions.

To realise the ambition for innovation and embed it within service transformation, a defined funding allocation is required. This could sit within the Innovation Team or be enabled through access to Directorate budgets, ensuring innovation activity is integrated into delivery, supported by evaluation, and aligned to organisational priorities and value.

4. The SET Operational Delivery Model

Resource is needed to develop a full innovation pipeline including:

- Project design
- Evidence and data
- Value case development
- Adoption and implementation
- Robust evaluation and health economics
- Evaluation and health economics

Resource must support a whole-system innovation capability, combining people, data, governance and funding to move from pilot activity to scaled implementation.

5. Constraints

It must be acknowledged that there are significant challenges in advancing innovation within the Trust. These include limitations in internal capacity and specialist expertise, alongside constraints within regional structures and processes. In particular, requirements relating to information governance, legal frameworks, ethics approval, and data sharing introduce necessary but often complex and time-intensive processes.

The absence of a regional health innovation network limits access to coordinated expertise, shared infrastructure, and strategic focus. This lack of system-wide support is a key barrier to scaling innovation and developing a coherent, sustainable approach across the region.

3. How can we Partner to Increase Expertise and Capacity?

To maximise impact, partnerships should adopt best practice models that accelerate adoption and connect innovation to delivery, drawing on approaches such as innovation accelerator programmes, structured adoption pathways, and mission-led collaborations. These are coordinated approaches that rapidly translate innovation into scaled, real-world impact.

The focus should move beyond collaboration alone towards shared delivery, including co-development of joint roles and capabilities, such as implementation science, to ensure innovation is effectively translated into practice at scale.

Development of innovation in the organisation must enable co-production and user-led innovation by embedding participatory design approaches and strong collaboration with service users and staff.

Partnerships should shift from transactional to strategic, building a collaborative innovation infrastructure that brings expertise, capacity and routes to scale.

Examples of Leading Innovation Team Models in Healthcare

- Imperial College Innovation Team

Imperial College London's innovation teams operate within the Institute of Global Health Innovation and related centres. Their structure typically comprises multidisciplinary professionals, including clinicians, engineers, project managers, and researchers. Key roles involve leadership (Director or Chair), innovation managers (overseeing project pipelines), research fellows, and engagement specialists. The team leverages cross-departmental collaboration, drawing expertise from public health, medicine, engineering, and business.

Funding is primarily sourced from competitive grants (such as NIHR and Wellcome Trust), philanthropic donations, and strategic partnerships with industry and government bodies. Imperial emphasises sustainable funding through diversified streams and ongoing grant applications.

Organisational capacity building is supported by regular training, mentorship programmes, and integration with academic curricula. The team fosters a culture of innovation by encouraging cross-disciplinary learning and maintaining strong links with external innovators and policy-makers.

- Children's Hospital Innovation Team Dublin

The Innovation Team at Children's Hospital Dublin is designed to catalyse novel solutions for paediatric care. The team consists of implementation leads, clinicians, clinical engineers, digital health specialists, system designers and project leads. Roles include innovation leadership (Head of Innovation), clinical champions (driving adoption), project managers, and patient engagement coordinators.

Funding is obtained through a mixture of hospital foundation support, government innovation grants, and collaborations with local universities and technology firms. The team actively pursues external funding opportunities, including EU innovation schemes and private sector sponsorship.

Capacity building efforts focus on staff development, workshops on creative problem-solving, and the establishment of innovation fellowships. The team also promotes a 'sandbox' environment, enabling rapid prototyping and pilot testing within the hospital setting.

- Guy's and St Thomas' NHS Foundation Trust – Innovation and Implementation Team

Guy's and St Thomas' NHS Foundation Trust is recognised as a leading UK provider organisation with a dedicated innovation and implementation team. The Trust's Centre for Innovation, Transformation and Improvement brings together clinicians, improvement specialists, researchers, and project managers to drive change across the hospital and community services.

Team roles span innovation leadership (Director of Innovation), improvement advisors, digital health leads, and operational implementation specialists. The team

operates closely with clinical departments, embedding innovation activities within frontline services and supporting rapid adoption and scale-up of new solutions.

Funding is sourced from NHS improvement programmes, NIHR grants, and partnerships with technology companies, academic institutions, and charitable organisations. The team maintains ongoing funding streams through successful grant applications and collaborative projects.

Capacity building is achieved through structured training on improvement methodologies, workshops, and mentorship programmes. Staff across the Trust are actively encouraged to participate in innovation and improvement initiatives, with support for professional development and leadership in transformation work.

Summary Overview

Effective innovation teams in healthcare are marked by diverse expertise, robust leadership, and sustainable funding models. Best practices include fostering multidisciplinary collaboration, securing diversified funding, and prioritising capacity building through ongoing training and engagement.

All three innovation teams share common features: multidisciplinary composition, strong leadership, and a commitment to capacity building. Imperial College and Guy's and St Thomas' NHS Foundation Trust particularly emphasise cross-disciplinary collaboration and integration of innovation with frontline implementation, while Children's Hospital Dublin focuses on clinical integration and patient-centred innovation.

Funding strategies vary, with Imperial and Guy's and St Thomas' relying on a blend of grants, NHS support, and partnerships, whereas Children's Hospital Dublin benefits from foundation and public-private collaborations. In terms of capacity building, all teams offer structured training, with Guy's and St Thomas' demonstrating a strong focus on embedded improvement and transformation practices.