

DEFINING THE INNOVATION WORKSHEET

PURPOSE

The Defining the Innovation Worksheet (See MEASURE Evaluation [PRH Guide for Monitoring Scale-up of Health Practices and Interventions](#)) serves to assist planners and practitioners piloting innovative products, services, or approaches articulate essential elements for expansion as *part of the initial planning for strategic scale-up*. The worksheet should be completed using a participatory process that includes multiple stakeholders, facilitates broad ownership of scale-up goals and monitoring, learning, and evaluation (MLE) of the scale-up process, which fosters the sustainability of the innovation offered at scale.

The worksheet combines understanding of implementation drivers and systems thinking (see Box) to guide practitioners through a process to define the human, financial, and time processes and resources required for scaling up an innovation. Ultimately, this exercise will help practitioners define their evidence-based innovation package and move to the next level of program scale.

HOW IT WAS DEVELOPED AND USED

As part of its mandate, the High Impact Practices (HIP) Monitoring and Evaluation of Scale-up Community of Practice (COP) was interested in documenting experiences of innovations that were successfully defined from the beginning. Working in collaboration with MEASURE Evaluation PRH, USAID, Futures Group and other M&E of Scale-Up COP members on

the [Guide for Monitoring Scale-up of Health Practices and Interventions](#), IRH developed the worksheet to capture its experiences defining SDM. The worksheet was inspired by the [ExpandNet's Nine Step Guide to Scale-Up](#), literature on critical implementation drivers of successful scale-up (Blase et al 2009), and actual IRH staff and stakeholder experiences defining the SDM innovation. The worksheet received positive reactions from the M&E of Scale-Up COP members who practiced using it with a variety of innovations during the group's 2012 meeting.

The worksheet consists of tables to guide the definition process. Topic questions reflect main issues to consider in innovation definition, while those in the tables are probing questions that help drill down the necessary level of detail in each step of the definition process. Additional, customized questions may be inserted into the worksheet. Participants should be encouraged to expand the number of rows under each step, as needed.

The worksheet should not be used by program managers in isolation, but rather within the context of a participatory process involving a set of multi-disciplinary stakeholders who are part of or will be affected by implementation of the innovation. This will ensure a well-operationalized definition of the innovation appropriate to the context and will garner stakeholder buy-in. In defining the innovation, it may be useful to assure representation from members of the resource team, user organizations, as well as 'vertical scale up' actors (e.g. central level and technical staff involved in developing norms and policies, HMIS, clinical services BCC, etc.). To maximize the process, a mix of presentations, discussions,

and group work is recommended to engage all parties. Facilitators of the definition process need to exercise flexibility and tact in knowing when to push and when to alter the approach in order to arrive at a complete definition of the innovation elements.

ATTENTION TO VALUES

Both the [Nine Step Guide](#) and the '[Defining the Innovation' Worksheet](#) pay specific attention to defining core values of the innovation that should remain when offered at scale. The worksheet captures an innovation's inherent values by having those who use it describe the underlying principles of the innovation as well as elements related to gender, equity, and human rights, and other values defined by an innovation's resource team.

LESSONS LEARNED

- Feedback from its testing by IBP M&E Working Group members indicated that the worksheet is practical and can be adapted to a variety of innovations, as it allows

flexibility to include additional questions. To make full use of the worksheet during a participatory process, facilitators should orient the group to the rationale of the questions and the format of the worksheet.

- The worksheet still needs to be tested in a real-time field setting to judge what works and does not work so well. Based on IRH's experience using ExpandNet's Nine-Step Guide process to define the innovation, it should take 3-4 hours to reach a consensus on the innovation definition.

KEY REFERENCES & RESOURCES

ExpandNet. "Nine Steps for Developing a Scaling-up Strategy", page 9

Blase, KA, Fixsen, DL et al. (2009) Implementation Drivers – Best Practices for Coaching, page 1. Retrieved June 25, 2012, from the State of Washington Office of Superintendent of Public Instruction website http://www.k12.wa.us/RTI/Implementation/pubdocs/DriversBestPracticesCoachingSept_09NIRN.pdf

ANATOMY OF AN INNOVATION: DEFINITION, INVOLVED PARTIES, AND METHODS

The implementation and scale-up of best practices requires careful documentation of the evolution of the practice as well as lessons learned along the way. Often, practitioners get so invested in piloting their ground-breaking programs, that they lose sight of the basics. Moreover, they struggle to scale up innovations because they are unable to articulate essential elements for expansion. Obtaining broad ownership of scale-up goals and embarking upon a process to monitor and evaluate progress is impossible without a clear definition of the innovation. Several organizations such as ExpandNet, the World Health Organization (WHO) and the National Implementation Research Network (NIRN) have developed resources to facilitate scale-up processes for programmers and researchers alike. Additionally, throughout the literature, there is agreement that defining the innovation is an essential component of scale-up success.

"Implementation drivers" for scaling up an innovation within a health system are the engine behind scale-up and are comprised of six processes: staff recruitment and selection, pre-service or in-service training, coaching/mentoring and supervision, internal management support, systems level partnership, and staff and program evaluation. These processes enable implementation of evidence-based practices at scale by improving the organizational and systems environment¹. Without attention to these drivers, the scale-up process breaks down.

It is important to remember that the innovation refers to service components, other practices or elements that are new or perceived as new and consists of a "set of activities" including not only a new technology, clinical practice, educational component or community initiative, but also the managerial processes necessary for successful implementation². Furthermore, this set of activities needs to be a package that is transferrable with local and contextual modification. With this foundation of what an innovation consists of, each organization or implementing entity can follow a process to define the components of a particular innovation in their specific context.

In defining the innovation, it is important to first assess the body of knowledge and evidence about successful implementation of the innovation collected during the pilot phase or other setting to tease out the various contributing components including: the practice, the evidence base, the methodology, the users, the implementers, the dissemination strategy, and the policy environment. Useful resources to review include reports from clinical trials, service delivery research, and program evaluations. It will also be useful to consult documentation and tools from previous experiences with the innovation, such as monitoring instruments, supervision check lists, training manuals, budgets and work plans. The worksheet found in this section should serve as an easy reference point in the process of defining the components of the innovation.

INTEGRATING AT SCALE A NEW FAMILY PLANNING METHOD: EXAMPLE

- Offering the method according to a tested protocol by competent and supervised providers to eligible women who are counseled on a range of options and make an informed decision to choose the method.
- The method is included in SBCC materials and strategies with well-tested messages.
- The method is incorporated into appropriate norms and guidelines.
- Finally, the supporting systems such as HMIS, finance and procurement, report appropriate information on processes and commodities.

¹ Blase, KA, Fixsen, DL et al. (2009) Implementation Drivers – Best Practices for Coaching, page 1. Retrieved June 25, 2012, from the State of Washington Office of Superintendent of Public Instruction website http://www.k12.wa.us/RTI/Implementation/pubdocs/DriversBestPracticesCoachingSept_09NIRN.pdf

² ExpandNet. "Nine Steps for Developing a Scaling-up Strategy", page 9



DEFINING THE INNOVATION WORKSHEET

1. Document the philosophy, values and principles that underlie the innovation, provide guidance for all decisions and evaluations, and promote consistency, integrity and sustainable effort across all organizational units.

What are the underlying principles of the innovation product, service, or practice?	What are the elements related to equity?	What are the elements related to gender?	What are the underlying human rights angles?	What are the elements related to [ADDITIONAL THEME]?	How does informed choice factor into this practice?

2. Determine the inclusion and exclusion criteria that define the population for which the innovation is intended and who is most likely to benefit when the program is implemented as intended.

Who does the innovation benefit?	Who is the primary audience?	What other audiences are involved?	Who is not the intended audience?



3. Enumerate the features or the essential ingredients (also known as core intervention components, active ingredients, or practice elements) that must be present to say that a program exists in a given location.

Service Delivery <i>(Effective, Efficient, and Accessible Services)</i>	Human Resources <i>(Sufficient, well-trained staff)</i>	Medical Products, Vaccines, Technologies <i>(Equitably accessible)</i>	Information Systems <i>(Providing useful data on health determinants and health system performance)</i>	Governance <i>(Leadership with effective oversight, regulation, and accountability)</i>	Finance <i>(Adequate funds for affordable services)</i>



4. Capture the implementation drivers or the components related to developing staff competency, organizational supports, and technical and adaptive leadership supports, as well as the responsible party for each implementation driver.

STAFF COMPETENCY/PEOPLE <i>(List Individual/Group Responsible for Managing Staff Competency)</i>	
Who will be involved in implementing this innovation?	
How will they be selected?	
What skills do they need?	
How will they be trained to introduce/maintain the innovation?	
Who provides the training?	
How is the training or coaching received, processed, and applied by the recipient practitioners?	
What type of ongoing coaching, monitoring and/or supervision will they require?	
Who will provide the ongoing coaching and support?	
What tools, if any, are needed?	
How will these processes and tools be integrated into systems for sustainability?	
What other resources are needed?	
Where will the resources come from?	



ORGANIZATIONAL SUPPORTS/SYSTEMS

(List Individual/Group Responsible for Managing Organizational Supports/Systems)

What are our Monitoring & Evaluation capacities?	
What level of support can our HMIS data systems provide?	
Is there administrative support for this innovation?	
What kind of administrative support do we have?	
What is the buy-in of management?	
Which organizational norms and policies facilitate this innovation?	
Which organizational norms and policies hinder/serve as obstacles to this innovation?	
What further systems support is required?	
Where will the additional support come from?	
What are our supervision and/or quality assurance capacities?	
What activities are needed to integrate this innovation into existing systems?	



ENVIRONMENTAL/OTHER ELEMENTS

(List Individual/Group Responsible for Managing Environmental/Other Elements)

What national norms and policies facilitate this innovation?	
What national norms and policies hinder/serve as obstacles to this innovation?	

5. Describe how all core elements of the innovation interact with other sub-systems.

Sub-system	Kind of interaction	What are the system-wide effects?

6. Define the adaptations needed for expansion/scale-up sites.

Adaptation	Is this adaptation practical for the field context?	If it is not practical, should we adjust or drop it? If adjust, how?	What core elements of the intervention would the field application of the adaptation compromise?	Where has this been successfully field tested before? What were the results?

