

Analytical Capability

Improving skills within the service, in
the context of rapid evaluation

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Context

Pace of change in health service delivery continually increasing

Demands for evidence based/informed policy but information about 'what works' and its generalisability often limited

- intervention evolved/adapted /applied in different setting
- types of patient treated

Various models of what is covered in evaluation – in both purpose, scope and methods

Range from independent academic multi methods long term... to immediate monitoring & feedback (BI)

Collecting bespoke information slow and costly. How we can make the most of existing data?

Reality of service innovation

Often interventions are complex – working across services and with complex care packages

Sense of urgency to deliver in hard financial times

Considerable effort to establish the new service

Varying expectations of what the service offers and what constitute success

Evaluation help not always easy to find or practicable

... "Bridging the ivory towers and the swampy lowlands"

What role do local analytical teams play?

Common problems with independent evaluations

Slow

Expensive

Answers a question you didn't ask?

Findings may be (too) ambiguous

Focuses on one tiny part of the big picture

Is overtaken by events?

Doesn't use the best data – or misinterprets local data

Findings not communicated to wider audience

Sticks to too rigid a protocol

Not used to inform change

Potential benefits of using local analysts in evaluation.

Better understanding of local data sources

Easier access to latest data

Can be more closely aligned to management and delivery systems (and quicker)

Develop a better approach to measurement and monitoring over a longer term

Support sustained change

Do we have the analytical capability we should have ?

Thought paper

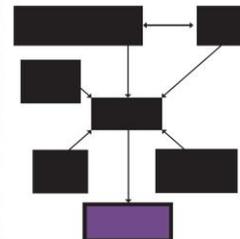
December 2016

Understanding analytical capability in health care

Do we have more data than insight?

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What about analytical capability?

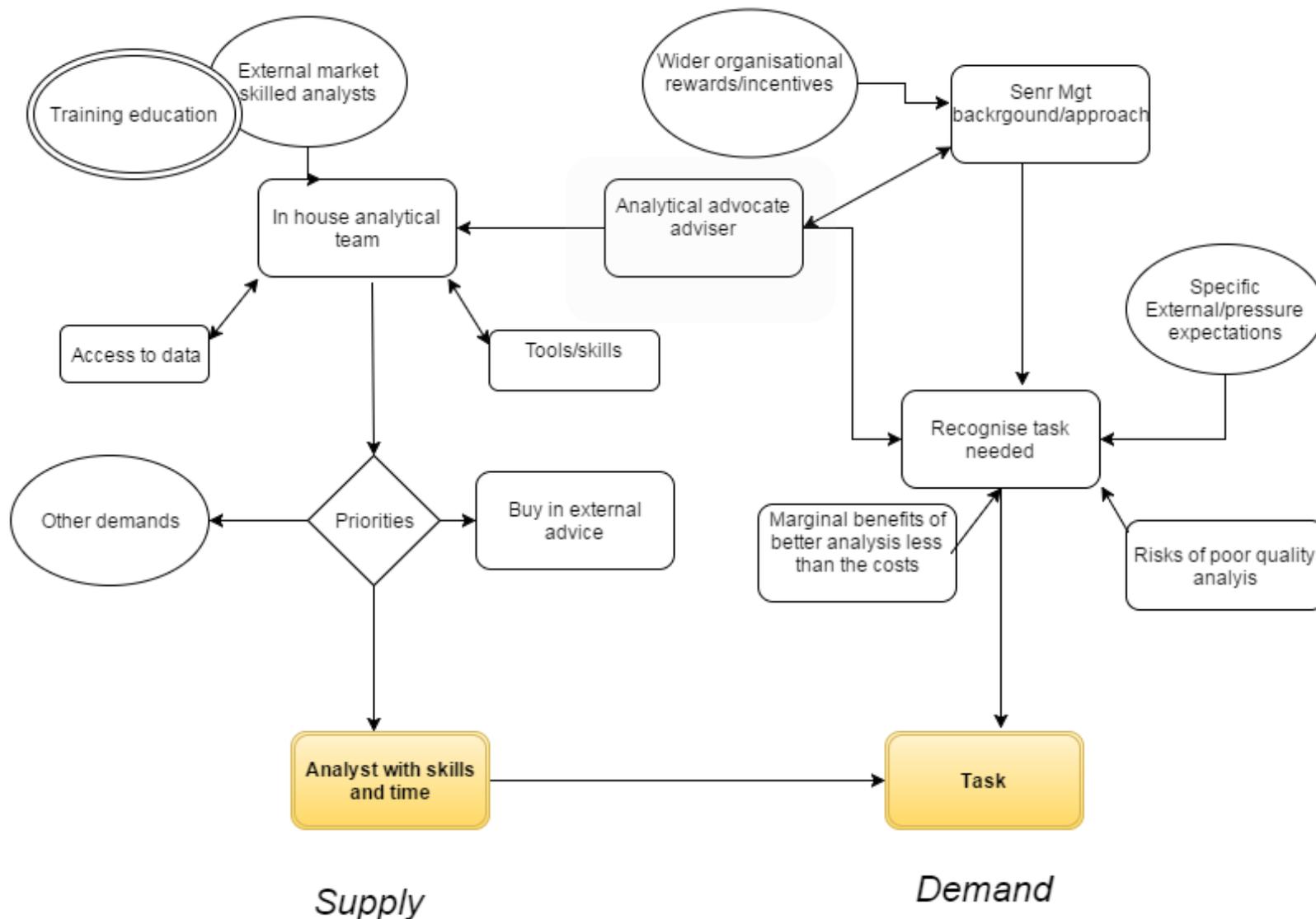
“Don’t make the best use of our data

“We base decisions on instincts and gut feelings rather than evidence”

“Cultural issues about evidence based decision making- need to make it more impactful in all organisations”

“No entry criteria. No career path – may have to leave organisation to move up the ladder”

“Lots of data and not enough insight”



Is it a problem of supply?

Number of analysts

Priorities of what people work on

Range of skills within the team

- Shortage of particular skills

- No career structure or professional identity

- Training opportunities

Access to data

Tools to make the most of data/resources and the
“analytical efficiency dividend”

Strategies to help supply

Supporting professional development and training

Promoting ways that analyst can use networks to share and learn.

Supporting tools for analysis including access to data and more coherent approaches to IG

Developing collaborative (cross organisational) approaches to accessing methodological expertise

Is it a problem of demand?

“Senior managers data naive “I don’t do numbers”.

“Data not valued”

“Lots of analysts sucked into contract monitoring”

“Lots of demand for low value dashboards and metrics...the crap dashboard industry proliferates”

“Analysts need to be proactive with analysis – but need to understand key issues of the day and where customers are coming from”

Stimulating the demand for good quality analysis among NHS leaders.

Build into general management and training

Recognise the value of 'good' analysis establish higher expectations

Using central requirements to raise the bar

Reinforce the benefits from adding right level of analysis and risks associated with poor quality analysis

Role of the advocate/advisor

Creating different ways of working

Working at scale -helping analysts work in larger teams that span across organisations

Providing room for innovation, development and testing of new analytical applications

Creating new relationships with the experts to improve the quality of support and evidence

eg Joint projects with academic teams; working across organisations using shared specialists concentrating analytical resources

THF programme of work...

Support national thinking supply through engagement and bringing together leading analytical groups

Helping to support analytical networks that can improve learning and cooperation in relation to vital analytical skills. Eg APHA ,R Community

Development of an awards programme specifically aimed at improving analytical capability for providers and commissioners of health and care services

Exploring scope for fellowship programmes and models of analytical collaboration

Partnership working to help spread the implementation of innovative analytical methods most notably with NHS England through the Improvement Analytics Unit

- Advancing Applied Analytics is a new programme aimed at improving analytical capability in support of health and care services. At present we support 23 projects from around the UK. We have £750,000 of funding to support round 3 this year.
- We expect to support 10-12 project teams. Max £75k per project and duration up to 15 months.
- We want to support local projects that can demonstrate how they will improve analytical capability and provide lessons for the wider care system.
- Applications invited from local/regional NHS or social care providers or commissioning organisations including local authorities. Partnerships with other groups and sectors are also welcome.

Applications open now till Feb 26th.

To find out more visit THF website <https://www.health.org.uk/funding-and-partnerships/programmes/advancing-applied-analytics>

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Summary

Evaluation is important in an NHS which is constantly changing and seeking improvement

A solely independent evaluation model not enough to support sustained change

There are challenges in developing skills in house to undertake the right types of evaluative work.

Need to invest in local analytical capability and establish better relationships with experts

Thank you

