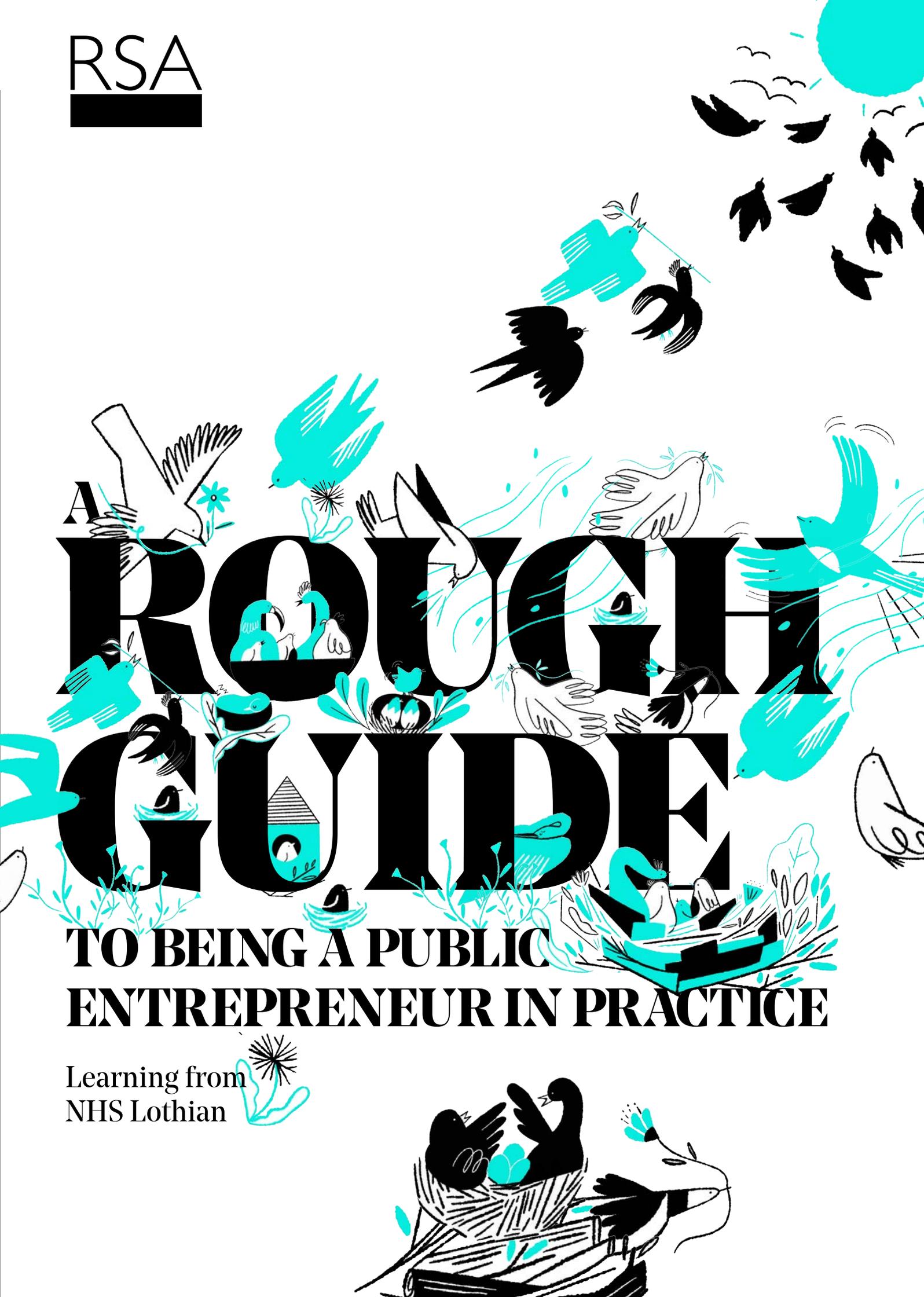


RSA



ROUGH GUIDE

TO BEING A PUBLIC
ENTREPRENEUR IN PRACTICE

Learning from
NHS Lothian



Acknowledgments

This document presents a summary of the insights gained by 12 members of NHS Lothian's staff who came together to explore how they can support each other to challenge the status quo and find new ways of addressing challenges they face in their work. They did this over the course of a six month programme between October 2021 and May 2022. You can find details about the NHS Lothian cohort and the issues they were addressing on pages 8–13.

We would like to acknowledge the group's commitment and energy – to their work, to each other, to their teams, to NHS Lothian and to the people they serve.

The programme was designed and delivered by the RSA (The royal society for arts, manufactures and commerce) team below, drawing on our collective experience and the RSA's work on public service reform and innovation over the last decade. Foundational RSA reports and other key texts are summarised at the end of this document.

The RSA team comprised of:

Ian Burbidge, head of innovation and change
Jamie Cooke, head of RSA Scotland
Ella Firebrace, innovation and change manager
Benny Souto, collaboration and change designer
Beatrice Bekar, delivery coordinator
Adanna Shallowe, senior global manager

Four RSA Fellows generously agreed to donate their time to host a masterclass on their area of expertise; our sincere thanks to **Rowan Conway**, **Billie Carn**, **Steve Martin** and **Nikolas Badminton**. You can find more about them on pages 46–47.

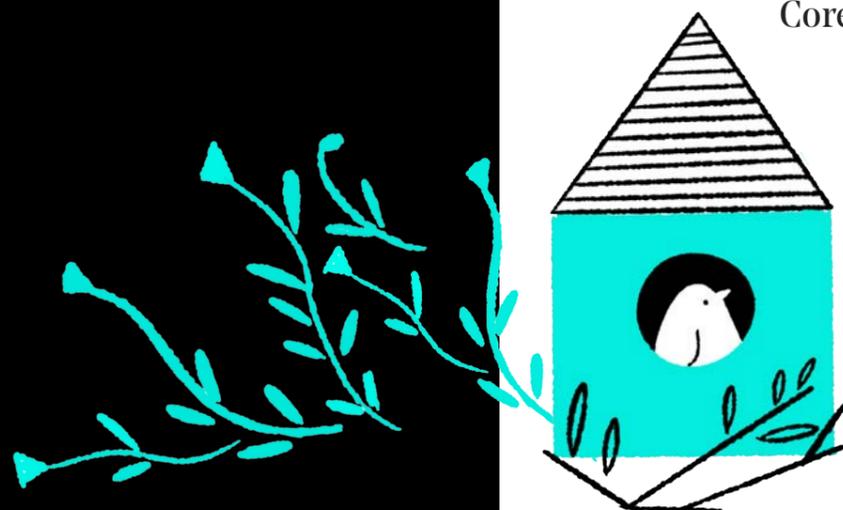
This rough guide has been prepared by the RSA based on the cohort's insights and with their sign-off.

Thanks to colleagues across the RSA who contributed at various stages to this work; Amanda Ibbett, Amy McNulty, Dean Samways, Deborah Ajia, Joanna Choukeir, Muirir Keating, and Steven George

Any errors of fact or omission remain the RSAs.

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REALISING

CHANGE

About the RSA

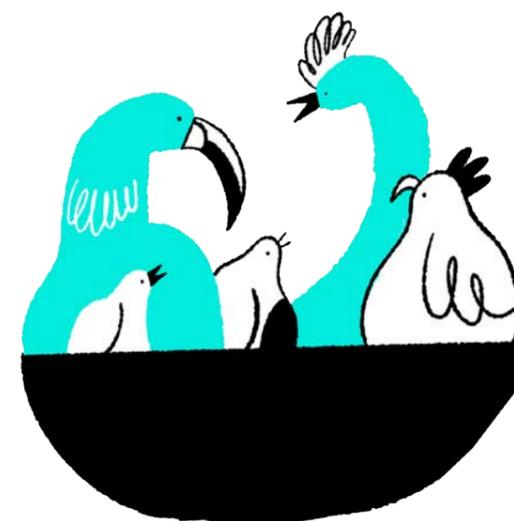
We are the RSA. We're committed to a future that works for everyone. A future where we can all participate in its creation. The RSA has been at the forefront of significant social impact for over 260 years. Our rigorous research, innovative ideas platforms and diverse global community of over 30,000 problem solvers, deliver solutions for lasting change..

Find out more at thersa.org



About NHS Lothian

NHs Lothian provides a comprehensive range of primary, community-based and acute hospital services for the populations of Edinburgh, Midlothian, East Lothian and West Lothian, as well as some services for patients in the Borders and in Fife. The UK's second largest health authority, NHS Lothian has four acute hospital campuses, 126 GP practices, 180 community pharmacies, 173 dental practices and 112 ophthalmic practices and is a national centre of expertise for some specialties provided to people across Scotland. NHS Lothian has an annual budget of £1.6bn and employs approximately 26,000 staff.



WELCOME, CURIOUS EXPLORER.

You are not alone.

Twelve NHS Lothian staff have already stepped this way.

They've left you the learning and insights they generated as they took this road less travelled.

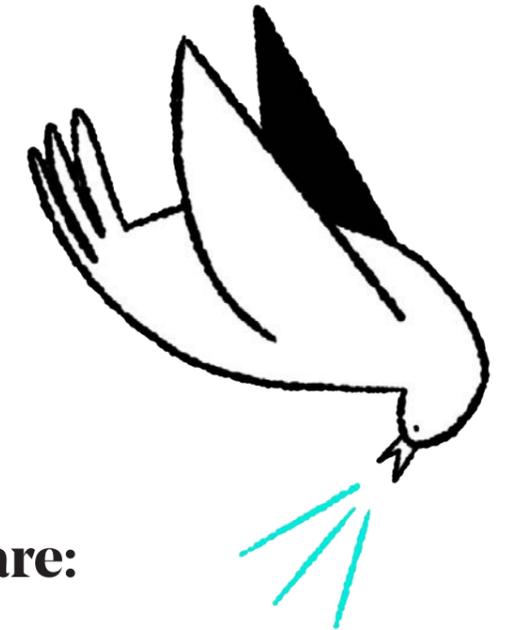
A road through the territory of change, of being entrepreneurial in your work and your attempts at creativity and innovation.

Your route will inevitably be different.

But hopefully their insights will be of interest and help.

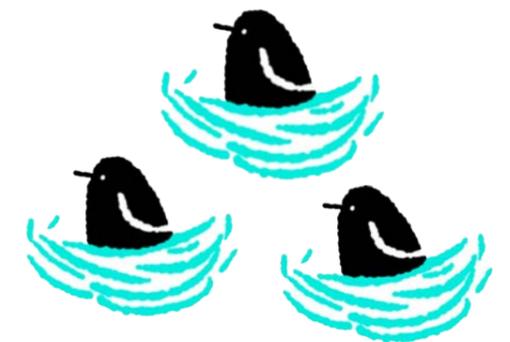
They've called it a **rough guide** – to help you navigate this landscape.

A guide for public entrepreneurs.



This guide is for you if you are:

- 1. NHS Lothian staff:** the insights here are surfaced by your colleagues. We hope they might inspire and empower you to seed new ways of doing things in your own teams and to join a growing movement for public entrepreneurship across the organisation.
- 2. NHS staff and public service staff:** whilst every context is unique, NHS Lothian like other NHS and public service bodies in the UK will be facing some similar challenges and, with that, some potential opportunities that might spark ideas for doing things differently.
- 3. Curious about innovation and systems change:** some of these approaches can be, and have been, translated across different fields and sectors. We believe that you can borrow ideas and inspiration wherever you can find them and hope this guide sparks something for you.



How to use this guide

Draw on those insights and ideas that are useful for you at any particular time.

Reach out to those in your teams as well as those across different departments.

Spark conversations around the insights.

Try things and see what you learn – and share with others.

As you read this guide, use these few prompts to reflect on how these insights might apply in your own context:

- What's piqued your interest, resonates, or feels relevant to you?
- What are the issues you'd like to address in your context and who do they impact?
- Where might you see possibility or energy for change?
- What are the barriers and opportunities?
- What is your role and the role of others?
- What could you test out in your own context?



Introduction

Our health and social care systems have been working to meet people's needs for over 70 years. Yet the approach to change is often incremental rather than radical or transformational. This means we sometimes 'muddle through' with the resources we have. Given the pace of change and long-term trends and challenges on the horizon this approach is no longer sufficient.

There are, however, people, processes and practices that are demonstrating a new kind of public entrepreneurship - responding fast, taking risks and experimenting to meet challenges head on. We've seen incredible responses to the pandemic and whilst it's hit society hard, it's also accelerated changes that might have otherwise taken decades to implement.

We need to harness the collective potential of creative people more systematically, working across the system to build resilience and support transformational change efforts. Staff commitment and energy is fundamental to spotting the challenges and the opportunities for change, taking action to not only meet the needs of today, but those of tomorrow.

Together NHS Lothian and the RSA designed and ran a programme in an attempt to do just that.

The Covid-19 pandemic has acted as an accelerant for the Lothian health and care system. Changes in how society operates that previously may have taken years have happened in days and weeks, and we have delivered services in very different ways. We have also seen performance in some elements of care deteriorate, and a widening of inequalities across the population we serve. It is clear that no change is not an option.

By exploring the ideas for change of a number of our staff, supported through the RSA's public entrepreneur programme, we hope to build our capacity to creatively resolve the problems that we face, and to understand more about how we might work in future. This is a critical step on our journey towards a future that remains uncertain and ambiguous".

Colin Briggs, director of strategic planning
Rebecca Miller, head of strategy development

"Public services generally, and the health sector in particular, are facing some deep challenges. Staff are exhausted and burnt out from the intensity of dealing with the impact of Covid-19. The external pressures for change are intensifying and at the same time demands rise and budgets fall. And yet the status quo still holds an equal and opposite counterforce to these pressures. Siloed working, entrenched practices and risk aversion all prevail. How to forge a way through?"

We can be guided by glimpses of hope. Pockets of innovation have emerged during Covid-19, whether out of necessity or opportunity. Some staff have grasped these emerging opportunities; indeed, there is a latent demand among many staff to do things differently, a collective energy for change. It was this energy that we wanted to nurture and support, exploring innovations that might just offer others a glimpse of a future in which appropriate, yet dynamic change is the cultural norm.

To do this, we recruited 12 changemakers to our inaugural cohort. You'll meet them in this guide. What follows is a synopsis of their insights".

The RSA team

The cohort

Twelve members of staff were selected through an application process

Alexandros Pagonidis



Alex is a senior clinical engineer at the electronics department of Edinburgh Cancer Centre. He started his career in healthcare as a product specialist of cardiological implants and ultrasonic devices. Since then, Alex has worked across a variety of roles ranging from sales

management, electronics and telecommunications technologist and service engineer for a number of leading medical companies. Alex came enthusiastically along with more than one idea.

Idea/problem statement I. A culture that promotes an understanding of different minds (aka neurodiversity) and can tackle misconceptions and miscommunications in the workplace which currently causes

Alison McLuckie



Alison is a consultant paediatrician at the Royal Hospital for Children and Young People in Edinburgh, working across community and acute paediatrics and child protection. She is the Edinburgh city lead for care experienced children and young people and the lead clinician in NHS Lothian for

the Youth Navigator programme. Alison also sits on the Royal College of Paediatrics and Child Health (RCPCH) health improvement committee representing Scotland.

Idea/problem statement. In recent years children and young people in Scotland have self-reported a down turn in their mental health and wellbeing. This is possibly in part due to changes in the sociodemographic environment including rises rates of child poverty and effect of the



daily stress for neurodivergent colleagues. A situation which could otherwise drive them from the NHS can be turned around by playing to the strengths and traits of neurodiversity to the benefit of teams.

Idea/problem statement II. Imagine another NHS, an equally shared participatory NHS governed by all staff. A participatory NHS would promote decision-making that would benefit our patients and our staff more, something that would also have a positive impact on their teams and families.

Superpower(s). Problem solving and a firm believer of the human spirit and the power that comes with the realisation of our limitations.

Eureka moment. I am not alone; I am among people that think alike. It's a feeling that re-energises me, makes me believe that changes can actually happen and makes me persist and overcome all challenges.

Covid-19 pandemic. Pressure on CAMHS services is significant and many children and young people are helped considerably by community based third sector services. Could a dynamic database of available services which allow primary care and community healthcare professionals to refer to third sector partners at the 'reachable' moment help improve outcomes for families?

Superpower(s). Multi-tasking and being the 'competent boundary spanner'.

Eureka moment. Despite significant pressure on services, there are individuals within NHS Lothian who are committed and willing to think outside the box and take (mitigated) risk to work to improve outcomes for their patients. There is no picture which is too big and no ambition which is too great and the pairing of a public health approach and clinical experience has potential to do great things.

Jeremy Chowings



Jeremy is an experienced general practitioner having been a partner in two practices in different parts of the UK. He has been involved in education and research throughout his career and is passionate about the public sector and improving the service offered to patients as well as the working environment of the teams he works with.

Idea/problem statement. Can a change to the traditional structure of the general practice working day help improve the

ability of practices to provide high quality care? Would this change allow better access to a wider range of health and social care professionals as well as providing flexibility for patients and staff?

Superpower(s). Problem solving and negotiation.

Eureka moment. The group helped me to stop focusing on getting the right or 'expected' answer and just work through the idea of changing the working day. It was initially a very uncomfortable feeling but allowed the idea to grow and develop in ways I had not expected.

Mahua Chakrabarti



Mahua is a colorectal/general surgeon who has recently completed training in the west of Scotland. She is in her second year as a Fellow at the Western General Hospital in Edinburgh. She has worked in the NHS for 19 years, during which she has completed two years in the Scottish NHS graduate

management scheme collaborating with non-clinical graduates, has been the chair of the trainees committee for the Royal College of Physicians and Surgeons of Glasgow, and was part of the team which organised the amalgamation of four hospitals into the Queen Elizabeth University Hospital in Glasgow.

Idea/problem statement. Staff in theatre are leaving or resigning due to burn out and a lack of enjoyment at work, which then means theatres cannot run efficiently at full capacity.

Superpower(s). Communication and championing people that don't have a voice

Eureka moment. You don't necessarily need to have a fully formed idea when approaching or trying to persuade people that things need to change but it does require more courage.



Mark Strachan



Mark is a consultant in diabetes, endocrinology and acute medicine at the Western General Hospital, Edinburgh and honorary professor of the University of Edinburgh. He runs a genetic diabetes service in Lothian. Throughout his career, Mark has also published widely on the effects of type 2 diabetes and was awarded the RD Lawrence Lectureship by Diabetes UK. Mark leads the south east Scotland thyroid cancer and neuroendocrine cancer services. He is also a treasurer of the British Thyroid Foundation, a trustee and founder of the Ann Edgar Charitable Trust for patients with neuroendocrine cancers and the former Secretary of the Royal College of Physicians of Edinburgh.

Idea/problem statement. Technology is available that has the potential to transform the lives of many people with type 1 diabetes. The technology could also realise substantial cost savings for the NHS in the future by abolishing complications of type 1 diabetes, such as kidney failure and diabetic eye disease. However, the technology is expensive and is staff resource intensive to initiate.

Superpower(s). Speed of working.

Eureka moment. It's not just about getting money to make this happen but also about how we can transform the process of care – that will ultimately create more funding streams for ideas of change.

Meghan Perry



Meghan is an infectious diseases consultant with a background in research. She is passionate about the slow burning pandemic and global health crisis that is antimicrobial resistance (AMR) and antimicrobial stewardship as a key tool to fight this. She has set up a novel multidisciplinary recurrent urinary tract infection clinic with the aim to improve management and decrease unnecessary antibiotic use. She has developed a primary schools musical about antibiotics and the rise of bacterial resistance to increase public understanding of AMR, a project which has yielded exciting results and is now going to the US.

Idea/problem statement. Doctors and the general population are not valuing antibiotics as the precious finite resource that they are. They are using more than necessary and this promotes resistance and perpetuates problematic behaviour patterns. What if we can promote attitudinal change in all doctors to halt the rise of antimicrobial resistance?

Superpower(s). Seeing the potential in everyone/ring insights from different perspectives.

Eureka moment. We need to recreate the energy generated in this cohort in our clinical work and teams to allow change and potential to be realised.

Rob Waller



Rob is a consultant psychiatrist in adult mental health in Edinburgh for psychosis, mania and high-risk patients. He leads the digital transformation programme within mental health services in NHS Lothian. This covers major recent hardware bids, new systems to improve patient flow and the development of a clinician-facing and patient-facing software. Rob is also associate director of medical education for the Royal Edinburgh Hospital and Associated Services (REAS), looking after medical students and doctors-in-training.

Idea/problem statement. What if mental health services in Lothian were digitally transformed, supported by an electronic record that helps us do our jobs better and empowers service users?

Superpower(s). Networking.

Eureka moment. I benefited from being in a group, bouncing ideas, being in a space to complain about the current system but also find solutions together.

Sarah Crymble

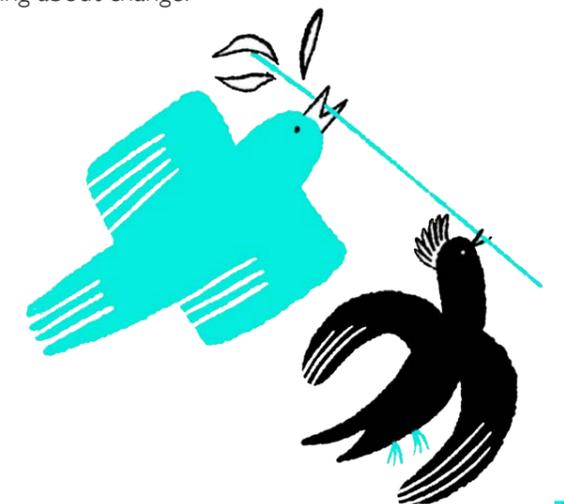


Sarah is a physiotherapy team lead in one of the Edinburgh health and social care partnership locality hubs, and a community falls coordinator within the Edinburgh long term conditions team. As a team lead, she supports her staff to shape the service built on the 'home first' ethos to prevent unnecessary hospital admission and facilitate earlier discharge. As a falls coordinator, she interprets and translates strategies, clinical guidelines and evidence into practice; improving pathways and resources; delivering training; and supporting frontline practitioners to best support people at risk of falls.

Idea/problem statement. Community therapy services are disconnected and uncoordinated and are using suboptimal and outdated methods of information sharing, which is resulting in inefficiencies and confusion for referring clinicians.

Superpower(s). Positivity and enthusiasm

Eureka moment. Having that group ethos, motivation and reflection help you move forward and help you feel like you can bring about change.



Stuart Gillon



Stuart is a consultant in intensive care at the Royal Infirmary of Edinburgh and the clinical professional lead for the department. He graduated from the University of Glasgow in 2005 and pursued his postgraduate training across Glasgow, Melbourne, Perth and London. He has worked as a consultant in the Queen Elizabeth University Hospital, Glasgow for two years and has been in post at the Royal Infirmary since November 2018.

Idea/problem statement. Clinicians are trying to deliver complex, 21st century healthcare using archaic means of communication and coordination. This is frustrating for clinicians and impedes the delivery of timely, high quality care.

Superpower(s). Synthetising different views into a unified vision.

Eureka moment. The recognition that everyone in the organisation wants to make things better; we just need a mechanism to share, develop and synthesise our ideas.

Waheed Mahmood



Waheed is a newly qualified GP. He has taken a convoluted route to get there, spending some time in research along the way. He is a creative individual who is always looking to explore new ideas and think outside the box.

Idea/problem statement. Men's mental health is not being properly addressed leading to underdiagnosis and increased morbidity and suicide risk.

Superpower(s). Being a sounding board and supportive.

Eureka moment. It felt daunting to promote change from the bottom up but it is possible.



Zena Trendell



Zena is a programme manager and has held various roles within multiple health boards in NHS Scotland. Thanks to her operational management experience, she understands the passion that drives some of the decision-making within the NHS. Moreover, as a former analyst within the finance department (prescribing), she is able to critically appraise situations based on facts. One of her key skills is identifying issues, applying practical solutions and integrating these into service strategic direction.

Idea/problem statement. Can we begin to break down the clinical/non-clinical divide to work more cohesively as a team? Most individuals join the NHS to help people, so let's progress that journey by incorporating basic diagnostic tasks into reception staff roles (including phlebotomy).

Superpower(s). Asking probing questions.

Eureka moment. The power of coming together to disrupt in a constructive way.

Zoe Harvey



Zoe is a programme support manager for the abdominal aortic aneurysm (AAA) screening programme for the Lothian and Borders collaborative. The programme aims to reduce the number of deaths associated with AAA rupture through early detection, appropriate monitoring and treatment. Zoe has been at NHS Lothian since 2017, working closely with colleagues to ensure the delivery of a high quality service both locally and nationally. Prior to this role, she worked with the screening services team in NHS Dumfries & Galloway for six years covering a number of different screening programmes.

Idea/problem statement. Key performance indicators for the programme identify inequalities in screening uptake. For the year ending March 2020 there was a

10.9 percentage point difference in uptake between SIMD 1 (most deprived) and SIMD 5 (least deprived) in NHS Lothian (with SIMD referring to the Scottish Index of Multiple Deprivation). Participants living in SIMD 1 areas are less likely to engage with the screening programme increasing the risk of unidentified/unmonitored AAA's. This means we need new ways to reach participants and raise awareness of the programme.

Superpower(s). Assessing and viewing the whole system

Eureka moment. That my ideas are important, and I can make a difference by bring my ideas to life. Having the support of the cohort has helped me to build my ideas and the confidence to deliver them. Since taking part in the public entrepreneur programme I have been able to design and implement a participant engagement project, aimed at improving uptake.

THE NHS LoTHIAN ENTREPRENEUR'S MANIFESTO

The group distilled **15 core lessons** from their work together. These are presented in the form of a public entrepreneur's manifesto for NHS Lothian. Collectively they support the widening and deepening of innovative practice within NHS Lothian. They support fresh thinking that challenges the status quo where necessary and helps staff to develop compelling changes across the organisation.

All of this work remains in service to **improving health outcomes for citizens across the Lothians.**



Develop trust and support

Build your team and develop your support network. Changing systems is demanding work - any collective effort needs to be founded on a sense of shared purpose and trust to enable everyone to show up authentically and contribute effectively to the team.

Hold a safe space to think

Time is a precious commodity and devoting some of it to uninterrupted thinking is critical. Think things through with others who bring different views, an atmosphere of listening, trust and support.

Have a maverick mindset

Mavericks are always seeking a better way to do things. They have a 'can do' mindset and question the way things are done - especially rules and practices. In doing so they can be perceived as being difficult, but they love challenges and find solutions, being driven by intrinsic and social goals.

Be adaptable and flexible

Rigid pursuit of a goal can lead to a lack of adaptation to changing circumstances. Over-constraining approaches to change can lead to chaos - focus instead on issues and outcomes not fixed milestones and targets. Being willing to abandon a prior course or set of ideas is crucial.

See different perspectives

It's important to dig more deeply into how different challenges show up. We must guard against seeing these challenges from our own perspective and instead make efforts to see how the issues show up for those that it most impacts.

See the system

Too often we focus narrowly on the challenge; a systems view encourages us to zoom out and see the wider context. The web of connections - within NHS Lothian, to other organisations, partnerships and people - helps us spot new ways we might approach the challenge.

Find the energy for change

There will be others who support your work - within NHS Lothian, other organisations and the community. Engaging with them will help you build some momentum for your work and spot opportunities to push your work forward.

Disrupt the status quo

The way we do things has evolved for a reason. Problems arise when our services, methods and processes no longer fit the changing context - perhaps social or technological. We must always be prepared to challenge the status quo and find better ways of doing things for the benefit of local people.

Learn from the journey

When we are addressing complex challenges, we can't predict what will happen when we take action, so it's important that we focus on the learning about the system that arises. Many of the issues we address may never be fully resolved (for example, think fitness), so a journey mindset helps: each step on the way teaches us something about the work and informs the next step.

Small changes into something bigger

We are implored to be productive and do more, faster, and with less; society tends to want instant results. Yet we know that sometimes big changes occur from small interventions; seeding new ways of working and nurturing thinking and ideas can lead to change that, in the long run, has more impact than immediate actions.

Don't fixate on the answer

In complex situations a traditional linear planning approach that pursues a fixed goal can be unhelpful. Thinking like an explorer is preferable to being blinkered in pursuit of a fixed destination. A critical part of this is having a clear sense of mission without holding the destination too tightly.

Identify new forms of value

We are used to making a financial business case for change, but many of the benefits that may accrue from our work are less obviously quantifiable. By engaging with the people our work is intended to benefit we can see the impact through their eyes and tell their stories. It's important to find ways of measuring this wider social value and doing so over the long-term.

Balance short-term pressure with long-term challenges

Perhaps the most critical challenge of leadership is how to meet rising demand and expectations with reducing budgets, whilst taking a long-term view of the challenges ahead. These range from meeting net zero targets and long-term workforce planning to identifying future opportunities for change. It is usually the immediate and most pressing that absorbs our attention.

Tell stories

We are used to using data to prove an argument, but narratives can be just as important as numbers. It can be easy to forget the people behind the data. Stories attract others to our work and help us start to build a movement. History teaches us that new stories can change people's perspectives and can lead to widespread change.

Harness the power of the collective

Innovation and change is a team sport and not a solo endeavor; everyone brings their particular knowledge and skills to the work. In this way collaboration can achieve more than the sum of its parts. This includes the wider network of influence that extends beyond the team actually doing the work.



STAFF BURNOUT

POWER OF STATUS QUO

DISRUPT THE STATUS QUO

DON'T FIXATE ON THE ANSWER

BETTER HEALTH OUTCOMES FOR LOTHIAN CITIZENS

STAFF WANTING TO CREATE CHANGE

LIMITED RESOURCES

ENERGY FOR CHANGE

SEEDS OF CHANGE

SMALL CHANGES INTO SOMETHING BIGGER

HAVE A MAVERICK MINDSET!

LOOK BACK AND FORWARD

HARNESS THE POWER OF COLLECTIVE

SHORT TERM PRESSURE WITH LONG TERM CHALLENGES

LEARN FROM THE JOURNEY

STORYTELLING

NEW FORMS OF VALUE

DEVELOP TRUST AND SUPPORT

SEE DIFFERENT PERSPECTIVES

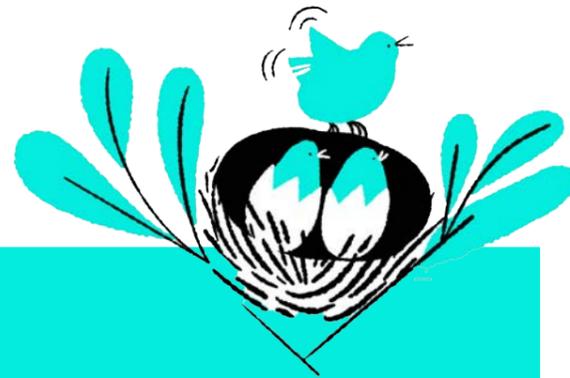
SEE THE SYSTEM

HOLD SAFE SPACE TO THINK

Figure 1: The NHS Lothian entrepreneur's manifesto¹

1. Illustration by Izzy Bunnell (2022).

The journey of change



“Imagine if...”

As a cohort of change-makers we create positive change within the Health and Social Care system, bringing our collective energy, ideas, and experience to harness opportunities making Lothian a renowned hotbed of innovation and radically disruptive public sector practice improving population health outcomes...

The programme was designed to:

- Support each member of the cohort to develop insights and take forward actions that help them bring their ideas for change to life.
- Support the cohort to forge links and relationships that can start to create momentum behind this work.

The work was framed around a journey - an action-led inquiry as opposed to simply designing a solution.

It is structured around three different activity formats:

Inquiry days

Six collaborative days of workshops and practical activities spread over six months. This is the spine of our work, to help explore the value of public entrepreneurship, go deep into our individual and collective ambitions for change and learn from each other. See pages 20–43.

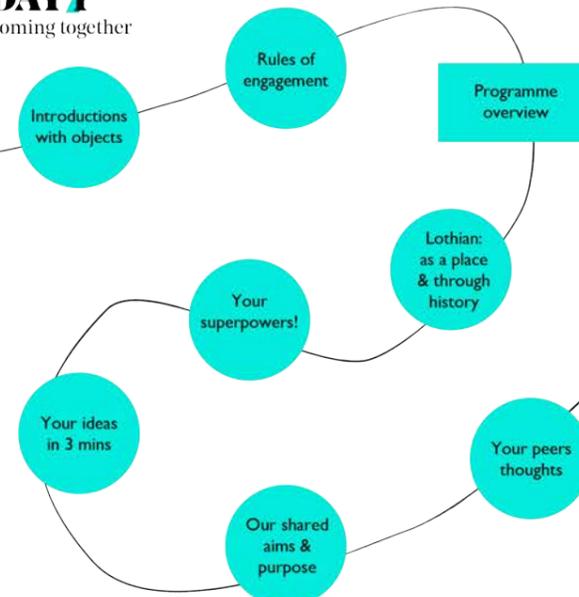
Fireside chats

A chance to listen to some inspiring guest speakers from across the RSA Fellowship, covering influence, future trends, social value and maverick mindsets. See pages 46–47.

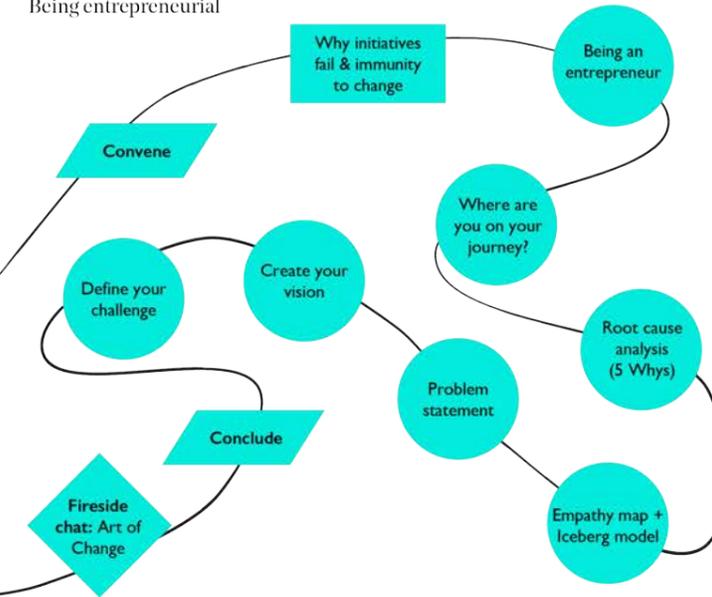
Open spaces

Virtual sessions in between each of the inquiry days to check back in with each other, seek peer support and challenge, and continue to work with the support of the group.

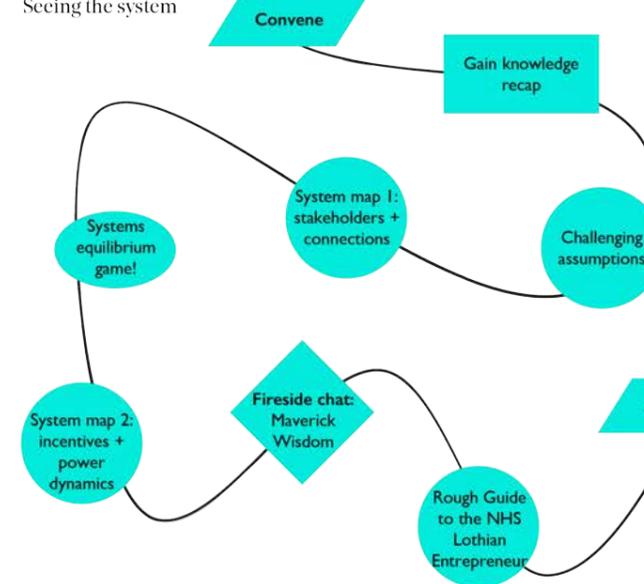
DAY 1 Coming together



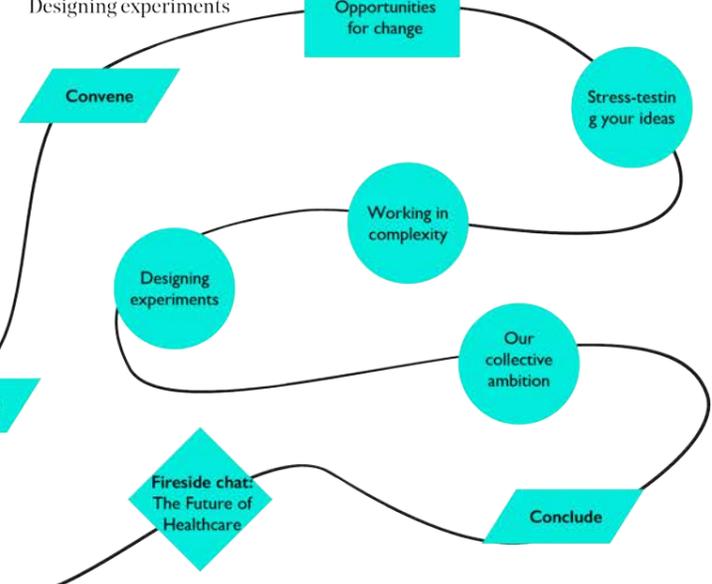
DAY 2 Being entrepreneurial



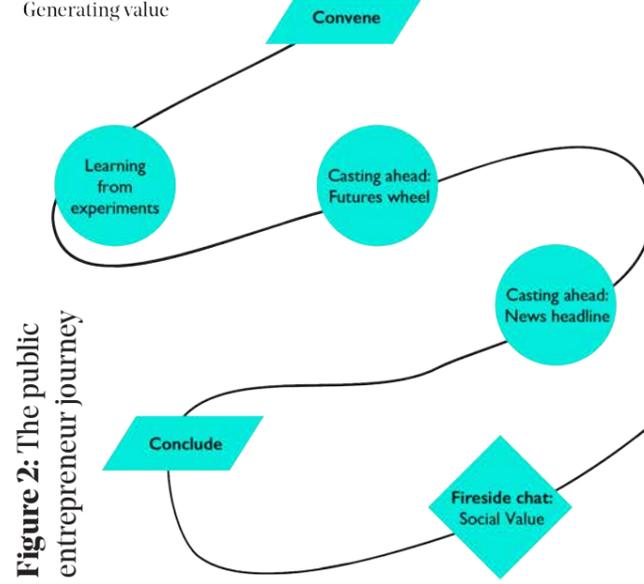
DAY 3 Seeing the system



DAY 4 Designing experiments



DAY 5 Generating value



DAY 6 Inspiring a movement

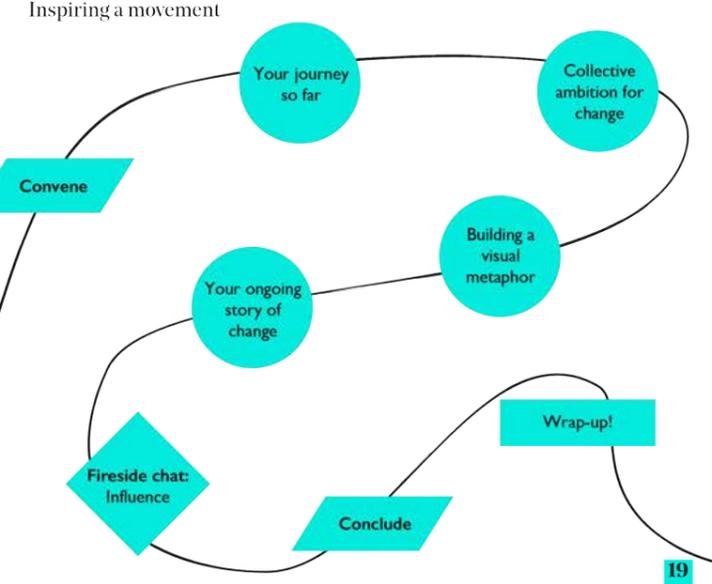


Figure 2: The public entrepreneur journey

Day 1: Coming together

Manifesto

Develop trust and support.
Hold a safe space to think.

We must not, in trying to think about how we can make a big difference, ignore the small daily differences we can make, which, over time, add up to big differences that we often cannot foresee.²

Day 1 was all about grounding our work in the context of Lothian past and present and developing a supportive team ethos. We explore what good could look like through our individual ideas for change and establish a shared sense of ambition for collective impact.



Module: Lothian context

Mapping key events and moments along a timeline showing the history of Lothian offered perspective on the extent and potential of change across time. This also helped us spot patterns of events and underlying value and belief structures that not only impact who we are today, but also how we imagine the future. It's vital to recognise we are at a point in time.

We went back as far as the Scottish Enlightenment, the Highland Clearances and the Industrial Revolution in the 18th and 19th centuries, to the closing of coal mines and devolution in Scotland in the 20th century and more recently, Brexit and Covid-19.

Three insights:

- All of these events in some way help shape culture, myth, social norms.
- Pivotal discoveries that revolutionised healthcare provision (eg the first vaccinations, discovery of anaesthetics and antibiotics) sit alongside social interventions such as the introduction of the welfare state and founding of the NHS.
- Change occurs at different speeds and scales and the impacts are often unpredictable.

Reflections from the cohort...

- “There’s a lot of appetite for change – Covid-19 offered an opportunity for reflection and an organisational desire to move things forward”.
- “Coming from a task agnostic and end-goal-focused work setting, it was refreshing to find ourselves entering a journey where destination and outcomes aren’t predefined”.

“Because you can’t see the end result, yet you feel like an impostor, you ask yourself if you deserve to be up there; the cohort helped with this by creating a feeling of solidarity”.



Module: Individual ideas for change

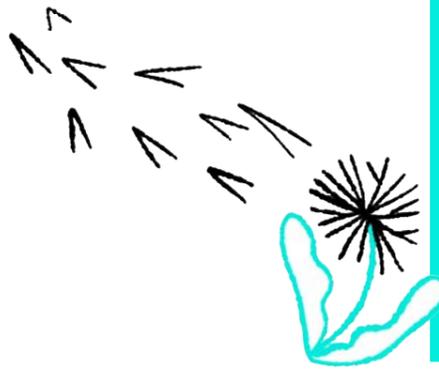
In this module we developed the idea that the whole group was a supportive consultancy for each individual idea. Participants shared their ideas for change in a space of friendly challenge and open feedback. Each idea highlighted systemic challenges and opportunities; practices that needed to be stopped as well as new ones that could be started.

Three insights:

- Feedback from colleagues who may not be aware of your work or ideas can offer great perspectives on your thinking and can highlight potential blind spots.
- People know people you may not know and can help make connections around your work that are valuable as you start to take your ideas forward.
- In a safe environment, you can gain a sense of how those unfamiliar with your ideas for change may respond to them.



Figure 3: Cohort’s feedback on individual ideas



Discussion: What are Elinor Ostrom's core design principles?

Elinor Ostrom was the first female Nobel Prize winner in Economic Sciences and the first person to use the term 'public entrepreneur' in her work in 1969.³ Her Nobel Prize was for work on the 'commons' – resources shared across society, such as air, water and a habitable earth. She identified a number of core design principles by which these resources can be sustainably managed.^{4,5} In her work with evolutionary biologist David Sloan Wilson and others, these principles were adapted and expanded to support the successful governance of self-organised systems and groups that are productive, equitable and collaborative.⁶ Known as Prosocial, this is about finding ways to balance and integrate multiple interests at multiple levels to create trust and collaboration at scale.

Module: Developing a shared purpose

People tend to struggle to identify with a group when they don't feel aligned with the overarching purpose.

Within organisations, this is exacerbated as staff are often dealing with:

- **Wicked problems** with multiple causes interacting in unpredictable ways and which therefore require the alignment of a broad set of actors. This might include challenges such as obesity or educational attainment.
- Highly **individual problems**, including those that are related to life and living circumstances that may require relational support, such as frailty and loneliness, unemployment, mental health or imprisonment.
- Highly **political problems** that require important ethical or material trade-offs, and therefore require deliberation and the mobilisation of consent, such as the location of new houses / roads or licensing regulations.

We asked the question 'what matters most to us as a collective?' to begin to create space for this group to shape their own identity, helping to generate the momentum for coordinated group action.

Three insights:

- The value of the group is being there to offer support and confidence to prompt change within the organisation, in the knowledge that they were not acting alone.
- Twelve different ideas for change but one common purpose – to make things better for people living in the Lothians.
- Coming together with others as humans (as opposed to job titles), who bring their own personalities and superpowers, helps move beyond traditional service siloes and enables working with people with different perspectives and experiences

The public entrepreneur creates outcomes that citizens value. They know how to develop a rich understanding of the issue in all its complexity and bring the entrepreneurial mindset to tackle it. In doing so, they act as a broker, collaborator, re-framer of problems, surfacer of ideas, champion of what works, challenger of the status quo, navigator of barriers to change... They are aware of the inherent tensions between making a case for, and facilitating, change whilst simultaneously making a case for, and delivering, stability.⁷



Figure 4: Cohort celebrating end of Day 1 with objects that represent our superpower!

2. Wright Edelman, M (1987) Families in Peril: An Agenda for Social Change, Harvard University Press. p107
3. Ostrom, E (1965) Public Entrepreneurship: A Case Study in Ground Water Basin Management. Los Angeles: University of California.
4. Ostrom, E (1990) Governing the Commons: The Evolution of Institutions for Collective Action. Cambridge: Cambridge University Press. pp 90, 91–102.
5. Ending The Tragedy of The Commons (2012) [video] Big Think. Available at: bigthink.com/videos/ending-the-tragedy-of-the-commons/
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7. Beresford, T, Hallgarten, J and Hannon, V (2016) Creative Public Leadership - how school system leaders can create the conditions for system-wide innovation [PDF] London: RSA. Available at: www.thersa.org/globalassets/pdfs/reports/creative-public-leadership.pdf

Day 2: Being entrepreneurial

Manifesto

Have a Maverick mindset.
Be adaptable and flexible.

For every complex **problem** there is an answer
that is clear, simple and wrong⁸



Day 2 was all about getting stuck in, exploring how change happens in complex settings and applying this learning to help unpack the group's various challenges. We spent some time exploring what it means to be an entrepreneur in the public sector and the specific challenges that we face.

Write out your challenge statement in simple terms.

Here is a suggested format:

[who is affected] + [what's happening to them] + [why is this an issue]

eg. *Young people in Lothian affected by violence suffer reduced life changes*

Figure 5: Develop a problem statement

Module: Develop problem statements

We spent some time unpacking the individual ideas, drafting them into a challenge statement and then looking at it through a root cause analysis exercise, which starts to unpack the underlying conditions that are causing the challenge to manifest and preventing it from being addressed.

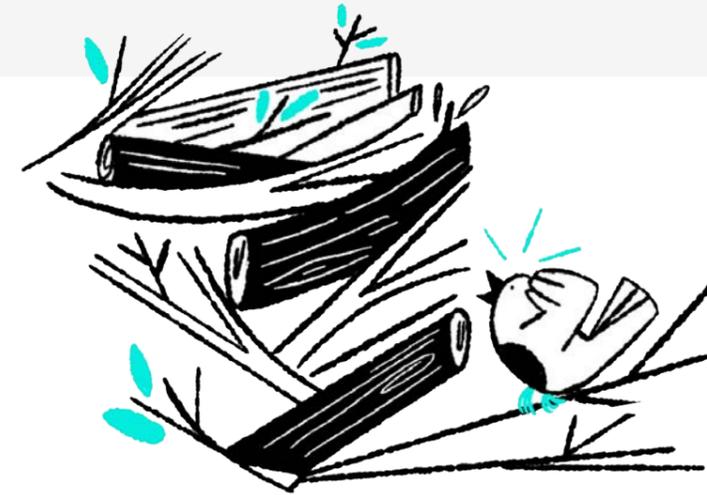
Three insights:

- We often jump to the first explanation of why a problem or challenge shows up, when the reality is that there are deeper issues at play.
- If we only address the presenting issue and not the underlying causes, we are unlikely to create change that lasts.
- It's vital to understand the problem or issue we are dealing with before we develop interventions and take actions.

Reflections from the cohort...

“It almost felt like working backwards: starting with an idea and taking a step back to look behind the problem and decipher the wider context”.

“It's always helpful when people are well outside your normal area of work. And they say, 'well, why?' And you suddenly realise that you always do that, because you always do it. And everybody who you work with always does it. And so no one ever asks the why question”.



Module: Being a public entrepreneur

We know that change doesn't happen in isolation and that having a network of peers to support you on your journey is critical to whether ideas are successful or not. We explored the notion of entrepreneurship, what it means in a public sector context, and, specifically, what it means within NHS Lothian, as well as what are some of the characteristics that differentiate a public entrepreneur.

Three insights:

- The term public entrepreneur is something new and different, that could create excitement and positivity. Participants agreed it can seem vague and maybe needs some defining and communicating of this definition so as not to be exclusionary.
- The key skills of a public entrepreneur range from creativity, curiosity and vision to less obvious ones like storytelling, humility, resilience, comfort with uncertainty and an ability to navigate complexity.
- An entrepreneur in the public sector is different in their focus on societal needs and public demands, on improving services rather than creating profit, on systems-change not just process improvement. They blend the need for stability and bureaucracy with the need for experimentation and risk tolerance.

Discussion: Why can change be so hard?

All too often we pursue change in our organisations as if it is a process to be managed. Despite this, we know from practical experience that change can sometimes be unexpected, sometimes serendipitous, often unplanned. How can we more consciously seek to land new ideas and seize emerging opportunities? Part of this comes down to identifying the characteristics within the status quo that hold it in place. The group drew on their wide range of experiences across their careers to identify a number of these, including the following 'top ten':

- A lack of pressure to change.
- The inertia of 'things have always been done like this'.
- Incentives that are in conflict and/or reinforce service silos.

- The budget allocation and spending process.
- General risk aversion.
- Not enough capacity for an individual or team.
- Not falling into anyone's area of responsibility.
- Innovations that work well in silos but fail to scale to the rest of the organisation.
- The need for advocates and supporters.
- Slow decision-making and resource allocation processes.

The entrepreneurial challenge is to seek ways of navigating a way around these challenges.

Module: Beneficiaries

To continue to deepen our understanding of our challenges, we focused on the people who are affected by them using an empathy mapping tool.⁹ This helped to unpack what different perspectives might be on the problem, but also on how our ideas and potential solutions might affect them. We then built on this using a second framework, adapted from the iceberg model,¹⁰ which helped us to look beneath the surface of what is happening to unpack the patterns, structures and beliefs that underpin the current status.

Three insights:

- It's easy to make limited assumptions about who benefits from the work. Interventions will have impacts for people who are not directly affected by the problem.
- Unexpected impacts can accrue in unexpected places across the system and affect multiple people/groups in different ways – positively or negatively.
- It's important to see the challenges from the perspective of the different beneficiaries – how do they experience the issue(s)?



Fireside chat: Maverick wisdom, with Billie Carn

Billie's presentation explored the values and characteristics of mavericks¹¹ and how they achieved impact in their work. She challenged the group to explore how these behaviours could be applied to a public sector context such as a big organisation within the NHS.

If I had only one hour to save the world, I would spend 55 minutes defining the problem, and only five minutes finding the solution¹²



Figure 6: Cohort working together on the different modules

8. Mencken, HL (1917) The Divine Afflatus, New York: Evening Mail (16 Nov 1917)

9. Empathy Map Canvas (2017) [image] Gamestorming.com. See: gamestorming.com/empathy-map/

10. Hall, ET (1976) Beyond culture. New York: Anchor Press.

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Day 3: Seeing the system

//
We make the assumption that everyone sees life the way we do¹³

Day 3 was about challenging our underlying assumptions and positioning our ideas for change within a broader system of values, beliefs, key players and power dynamics. We explored how our ideas about the future guide our thoughts and actions in the present, and used these insights to start to surface the energy for change.

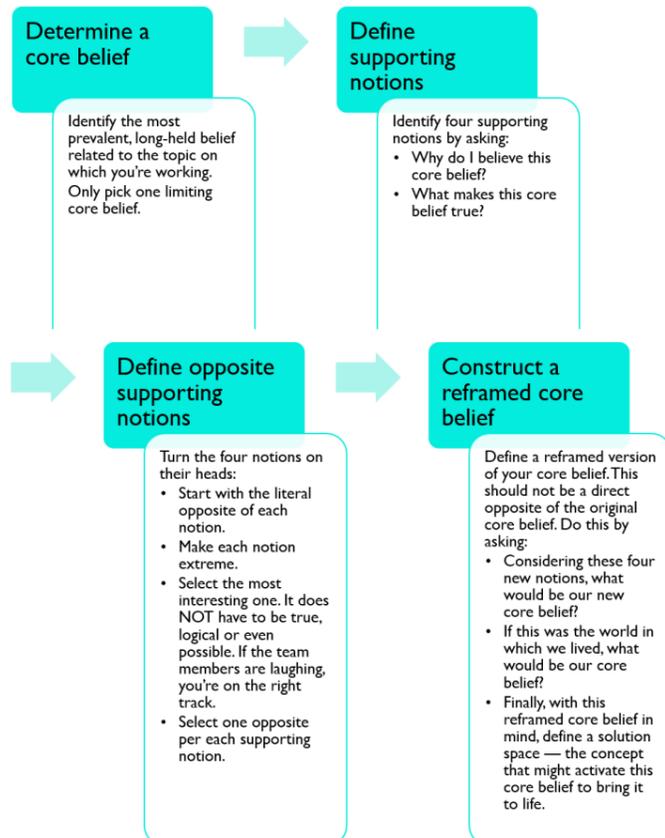


Figure 7: Reframing the challenge

Manifesto

See different perspectives.
See the system.
Find the energy for change.

Module: Challenging assumptions

Whether we are aware of it or not, we are constantly operating within deeply rooted sets of values, beliefs, and norms. These core beliefs underpin our ideas for change and are often not visible to us or to others: it's easy to assume everyone sees the world as we do.

To help surface some assumptions we may be making we listened to a series of short audio sketches created by SITRA¹⁴ about different future scenarios to stretch our thinking into different spaces. It was then important to identify and reframe some of the core beliefs that may underpin our work: those held by us as individuals as well as across the organisation, the NHS and society as a whole.

We used Karim Benammar's four-step reframing process¹⁵

Three insights:

- By questioning the assumptions we hold we gain new information about the challenge, which sheds light on alternative solutions we might have not considered before.
- Many of the supporting notions that sustain the current beliefs gave us a sense of reassurance – without changing these, change is hard.
- As soon as you start thinking that a different perspective might hold a grain of truth, your ideas start to grow and evolve.

Reflections from the cohort...

“I wonder whether the cohort's ideas are going to balance or destabilise the system”.

“We are always surprised when solutions don't work even though they were bound to break from the start because of the way they were designed - we try to fix complex challenges with more constraints and control”.



Module: Mapping the system

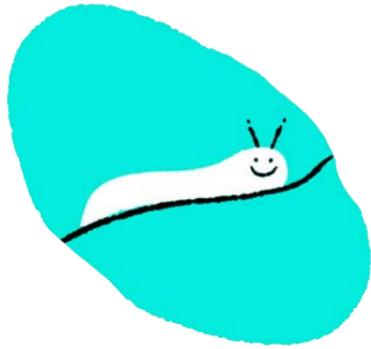
All challenges are nested within a wider set of patterns and relationships between people, organisations, partnerships and groups. System mapping is designed to help reveal these connections: their strengths, any gaps, where power and resources exist, where policy is formulated and decisions are made. We centred the system maps around the core beneficiary.

Three insights

- Understanding a system is the first step to better understand the wider context for the issue and start to build a compelling story of change.
- System mapping shows how the systems don't align with the institutions within which we work and offer insights into who else we need to collaborate with to create change.
- It's important to develop enough influence to engage those who have access to power and resources yet perhaps have no institutional incentive to work with you.



Figure 8: Cohort mapping their system



Discussion: Why can change be so hard?

A system is “an interconnected set of elements that is coherently organised in a way that achieves something”.¹⁶

Systems thinking is “the ability to understand these inter-connections in such a way as to achieve a desired purpose”.¹⁷

“As the 21st century unfolds, it is becoming more and more evident that the major problems of our time cannot be understood in isolation. They are systemic problems, which means that they are all interconnected and interdependent. And with the new emphasis on complexity, networks, and patterns of organisation, a new science of qualities is slowly emerging. This new conception of life involves a new kind of thinking – thinking in terms of relationships, patterns and contexts. In science, this way of thinking is known as systems thinking”.¹⁸

Module: Spotting opportunities for change

It’s critical to explore where and when there might be energy or possibility for change. Events and actions can release it, and if we can harness it, we can accelerate towards our ambitions, like a surfer catching a wave. There are push and pull factors driving change, from responding to a pressure or problem, working with a compelling vision or idea, or seizing an emerging opportunity. Wherever our starting point, we need to be sure and think about all three.

Three insights

- The NHS responds well to a ‘burning platform’ – a crisis or a critical failure when things just have to change (eg the pandemic) – yet it’s not sustainable to operate in crisis mode.
- It requires a degree of preparation and situational, system-wide awareness to respond quickly to emerging opportunities.
- It can be tricky to try and establish a vision in respect of a complex challenge, where so many issues interact dynamically. It can be equally hard to establish a compelling vision that is embraced by front line and ‘back office’ staff, partner organisations and citizens.

Fireside chat: Art of change, with Ian Burbidge

Ian’s presentation explored the art of change and some of the challenges arising when we approach change as an initiative to be managed. He challenged the group to see the change from a variety of perspectives and anticipate the different motivations arising.

“The times are urgent; let us slow down”.¹⁹



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14. Poussa, L, Ylikoski, T, Dufva, M, Wartiovaara, A (2021) *Futures Frequency*. Helsinki: Sitra. For more information see: www.sitra.fi/en/projects/futures-frequency/#
15. Benammar, K (2012) *Reframing: The art of thinking differently*. Amsterdam. Available at: www.karimbenammar.com/en/books/66-reframing-the-art-of-thinking-differently
16. Meadows, D (2015) *Thinking in Systems: A Primer*. London; Sterling.
17. Stroh, DP (2015) *Systems Thinking for Social Change: A Practical Guide to Solving Complex Problems, Avoiding Unintended Consequences, and Achieving Lasting Results*. US. Chelsea Green Publishing.
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19. Akomolafe, B (nd) *The Times are Urgent: Let’s Slow Down*. [online] Bayoakomolafe.net. Available at: www.bayoakomolafe.net/post/the-times-are-urgent-lets-slow-down.

Day 4: Designing experiments

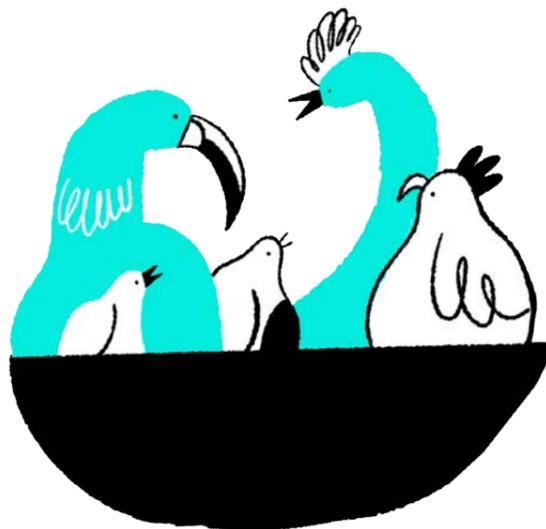
Manifesto

Disrupt the status quo.
Learn from the journey.
Small changes into something bigger.

Instead of working back from a goal, work forward from promising situations. This is what most successful people actually do anyway”²⁰



In Day 4 we continued to develop our understanding of the complex systems within which our ideas for change are nested. We explored the differences between systems and identified a range of actions and micro experiments to generate learning and insights about the contexts we're operating in.



Module: Developing ideas

It's vital to broaden the range of options and ideas available. This session uses quick fire prompts to generate imaginative (and sometimes outlandish) ideas that added new insights and brought to life different scenarios.

Three insights:

- Change doesn't have to be rigid and can incorporate elements of fun, using different parts of our brains and personalities.
- It's important we don't run with the first thing that comes to mind – or with a pre-conceived solution.
- The assumption is that time spent away from patients/work isn't time well spent, but actually building in time during clinic hours could create plenty of opportunity for creativity and innovation.

Reflections from the cohort...

“We tend to think of the NHS as this very serious place, that is against tech development and innovation even though society adapts and changes constantly. By being part of the cohort, we were able to find that space and energy to be fun, creative, innovative, entrepreneurial, embracing of change”.

“A lot of the time it's about taking leaps of faith, trusting staff and the process”.



Figure 9: Idea generation prompts

Prompt 1

What if you had cutting edge technology?

Prompt 2

What if the idea had to be fit for the next generation?

Prompt 3

What if you incorporated a disruptive element?

Prompt 4

What if you couldn't use any digital tools, the internet etc.?

Prompt 5

What if it had to work tomorrow?

Prompt 6

What if budget wasn't a constraint?

Prompt 7

What if you were the prime minister?

Prompt 8

What if you had unlimited access to world class experts?

Prompt 9

What would a 7 year old do to solve your challenge?

Prompt 10

What if you had no money/budget available?

Prompt 11

What if you reversed the most obvious idea?

Examples

- What if you incorporated a disruptive element?
“I'd ban the use of mobile phones and pagers in the hospital and leave people with no choice but to use alternative forms of communication”.
- What if you were the Prime Minister?
“I'd launch national screening programmes to test for antibodies for type 1 diabetes and prevent it completely”.
- What would a seven-year-old do to solve your challenge?
“I'd gamify digital health records and make it fun and incentive driven. For example, a game with avatars that met patients at the hospital doors to take them to their appointments”.
- What if you had cutting edge technology?
“I'd use an AI antimicrobial pharmacist to decide if patients need antibiotics and compare the AI's decisions to the decisions of doctors”.
“I'd use a non-invasive scanner that provides basic clinical output, this includes your height, weight, x-ray and bloods (without the need for blood extraction). These can be placed in multiple locations reducing the need to travel”.



Discussion: A stitch in time?

One of the primary reasons we need to think about futures and foresight is to help us change course toward different outcomes. We need to consider possible futures so we – and our descendants - are not captured by them. On the one hand, such approaches can help us understand what the future might look like so that we might better organise ourselves for that speculative future. On the other hand, it can help us to disrupt and change future scenarios because we believe in better. It is critical that through futures and foresight we can imagine this better future and take tentative steps forward in the present. Such a level of flexibility is a necessary response to the complexity of the world and its challenges. We can't assume to stay on a fixed course or we will find ourselves lost and obsolete. What actions could organisations, policymakers and society take to avoid this? A foresight approach can offer a way forward in facilitating and supporting the kind of multidisciplinary working, critical thinking and radical action that are necessary to effect change.²¹

In complexity you describe the present and see what you can change. You define a direction of travel, not a goal, because if you start on a journey, you will discover things you didn't know you would discover which have high utility. If you have an explicit goal you may miss the very thing you sought to discover.²⁴

Module: Working in complexity

How can we make sense of the world so that we can act in it accordingly? Using the Cynefin Framework,²² we determined whether the issues we faced, and our ideas, fell within complex, complicated or clear domains. This is an important step in understanding what appropriate decisions and actions to take.

The fold between the clear and chaotic domains, in the framework denotes a cliff edge and suggests that it's easy to fall into a state of disorder if you become too complaisant.

Three insights

- We don't like to acknowledge that there is often no single, definable solution to the problem we face.
- Focus shouldn't be on fixing problems but making things better incrementally.
- We are not taught to manage in extreme uncertainty... what if we recruited differently, for project managers with complexity degrees?



Figure 10:
The Cynefin framework²³

Module: Designing experiments

When working in complexity, there is never a best course of actions and we won't know whether a decision we make will result in a desired outcome. A good way to approach this is then to design safe-to-fail probes or experiments that could generate learning and help direct further action.

Examples include a conversation, a new ritual, stopping something, trying a new process, adding/removing constraints, engaging with beneficiaries.

Three insights

- During what feels like periods of endless change and crisis we prioritise the response when we should give equal priority to learning from that response.
- In complex areas it's important to set guidelines and not rules; a target-driven environment can lead to incentives that don't favour the patient or citizen.
- Trust, transparency and autonomy are important, as they can help counter possible blame culture when things 'fail'. Instead, see the learning opportunities in every situation, whether things are going great, or not so well.

Fireside chat: A futurist's view of healthcare, with Nik Badminton

Nik offered provocations and insights about many of the trends playing out, or likely to play out, in tech and health. He challenged the group to explore potential disruptive implications for 'business-as-usual' and how they might think differently about the present.

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 23. Ibid.
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Day 5: Generating value

Social value is the quantification of the relative importance that people place on the changes they experience in their lives.²⁵

In Day 5 we reflected on what we've learned from our micro experiments and identified where our work could generate wider value for society and the planet. We cast years ahead into the future on the wild card possibilities that might play out to stretch our thinking into new realms.

Manifesto

Don't fixate on the answer.
Identify new forms of value.
Balance short-term pressure with long-term challenges.

Module: Learning from experiments

The whole point of safe-to-fail probes or experiments is to generate feedback and learning from the system. We reviewed the experiments and actions that people took and what happened as a result. The group explored questions such as, 'what are we learning about innovation and change in NHS Lothian?', 'what patterns are we seeing?', 'what is disrupting these patterns?'

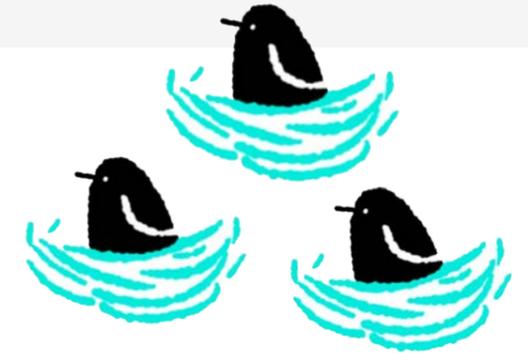
Three insights

- The idea of safe-to-fail is that the experiments and actions are sufficient to generate learning without a disproportionately high level of risk to the organisation and those it serves.
- The importance of reframing our understanding of failure from things that didn't go as planned to learning that can inform future actions.
- Learning about the capacity of the organisation and wider system to change is just as important as generating insights around the specific idea for change.

Reflections from the cohort...

“Being reminded of important goals and/or missions (ie helping people) gets us beyond a simple focus on hitting targets. When you remember why you work for the NHS you realise how important the need to change is”.

“I really like the idea of futures thinking and having that long-term perspective before you get started. [...] It's not just about seeing blockers to progress but seeing the absolute long-term goal”.



Module: Creating social value

We are used to making a case for change based on clear performance metrics demonstrating need, and financial metrics demonstrating economy. Getting beyond these traditional cost-benefit analyses as the primary means of making the case for change is vital. Not only that, but it's also central to a systems' view. We know that being in work or living with clean air are positive for people's health, but these are parts of the system outside the direct control of health services. We know that volunteering or looking after elderly relatives is not valued in economic terms, yet the bottom line is that it adds value to our communities and saves the state money.

Three insights

- Cost-benefit analysis is not sufficient to evaluate wider social impact; we need to consider additional aspects such as accessibility, social cohesion, local employment and skills, value to the beneficiaries and so on.
- Health issues are systemic, involve the relationships between citizens and their community and environment, the interactions with a range of other service providers, and often result in someone exhibiting multiple conditions. The value from an intervention may accrue across this system so the mapping exercise is helpful here.
- It is important to build these measures into our more traditional approaches to programme evaluation.



Discussion: What do we mean by social value?

The Public Services (Social Value) Act 2012 requires those who commission public services to think about how they can also secure wider social, economic and environmental benefits from their spend. Social Value UK define social value as, "the quantification of the relative importance that people place on the changes they experience in their lives. Some, but not all, of this value is captured in market prices. It is important to consider and measure this social value from the perspective of those affected by an organisation's work. Examples of social value might be the value we experience from increasing our confidence, or from living next to a community park. These things are important to us but are not commonly expressed or measured in the same way that financial value is".²⁶ Social value is also often expressed in terms of 'social return on investment' (SROI) as a means of quantifying this broader impact.

Module: Casting ahead

The 12 ideas for change being pursued by the cohort are all in service to a longer-term ambition – for Lothian's citizens, for our health systems, for NHS Lothian and its staff.

To stretch our thinking and open up new possibilities, we took a 30-year journey to 2052 and explored utopian and dystopian futures. Such contexts are of course unlikely to occur. The point, though, is that the future is unlikely to simply be a continuation of the present, and this exercise helps disrupt this path-dependent thinking.

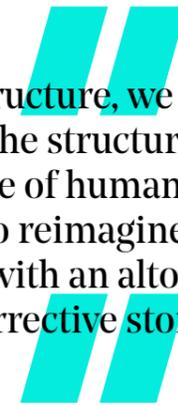
Three insights

- There is a clear role for innovation and entrepreneurialism over the next 30 years to address the big challenges we face.
- It's important to have forums to talk about the future and to allow for free flowing ideas – which will also help restore a balance between the long and the short-term pressures we face.
- Allocating time to think is a must - not very often that you sit with colleagues and talk about things you'd like to change, especially with a diverse group of people, coming from different professional backgrounds and therefore with different points of view.



Figure 11: 2030 future vision for Lothian

... to change the structure, we first need to change the story about the structure...The only way to change the course of humanity is to change the input [story] – to reimagine the way we think of knowledge with an altogether different, corrective story...²⁷



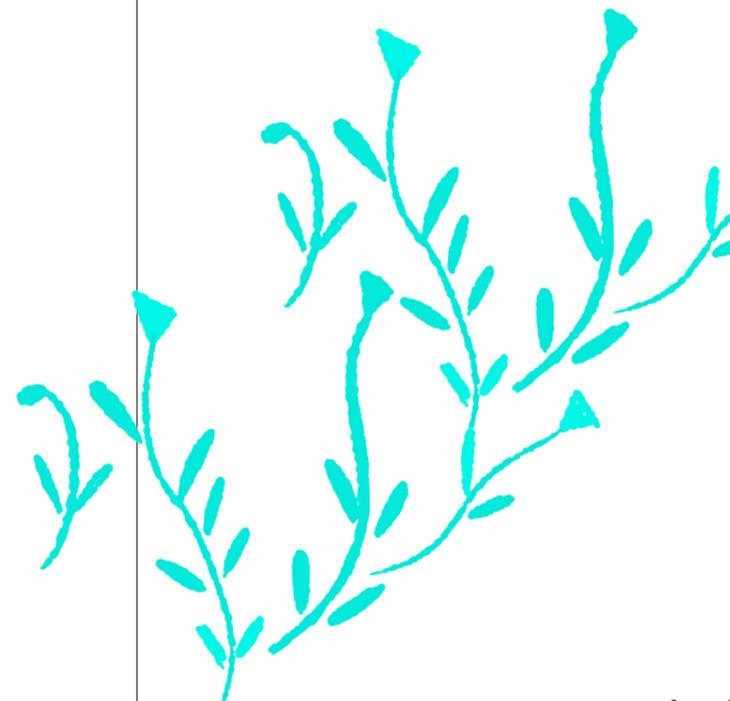
Fireside chat: Social value, with Rowan Conway

Rowan's presentation shared insights around social value and how we might think differently about cost-benefit analysis and evaluation. She challenged the group to think differently and more broadly about the impact of their work.



Figure 12: Cohort building their visions of the future

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Day 6: Inspiring a movement

Manifesto

Tell stories.
Harness the power of the collective.

Effective leaders must be truth-seekers, and that requires a willingness to understand truths other than our own.²⁸

In Day 6, we identified and drew together some of the key threads of this work, to reflect on the ground covered so far and the journey still to come. We focused on both the individual projects and the collective impact of the group. A crucial part of this is the use of stories alongside data to influence others and build momentum for change. Doing so enables us to continue to situate this work within the wider ambitions of NHS Lothian.

Module: Reflective learning

We walked around Calton Hill, Edinburgh, using visual clues in the landscape to retrace our journey to date, and gain new perspectives on our work. It takes time and attention to reflect personally on the changes we're seeing – in ourselves, in the group, in our work. We used a learning canvas to capture these insights after each session, asking how this learning changes our understanding of the issues we are addressing.

Three insights

- It's important to create a supportive and non-judgmental atmosphere to capture and share the learning.
- Some ideas were initially very narrow and taking part of the programme helped some to expand them, taking into account different viewpoints. Others felt the opposite – being part of the programme helped them narrow down their ideas for change.
- Identifying a leverage point in the system can create a wider ripple effect. Sometimes just taking a single, small action is enough to catalyse change.

Reflections from the cohort...

“Looking at the view from Calton Hill we realised that there is a complex system out there – somebody can and will come into it to build something new or break something old. It's a painful process but it happens all the time! The old and new are constantly coming together”.

“[...] strategic work often gets pushed aside (in favour of patient time), and when you [...] cobble everything together that is when you come up with a quick fix”.

“Being at different heights also impacts the way you see things – like the birds you can oversee everything (just like senior management does), people walk through the system (like members of staff), patients see things in a whole other different way too! How can you bridge their different viewpoints?”

Module: Ambitions for change

Having a direction of travel or mission is important to offer purpose to the work and clarify the ambition for the work. It can give shape to narratives and help you connect with others who align with your ambitions. We worked with the Three Horizons Framework (3H) to bring all the work to date together.²⁹

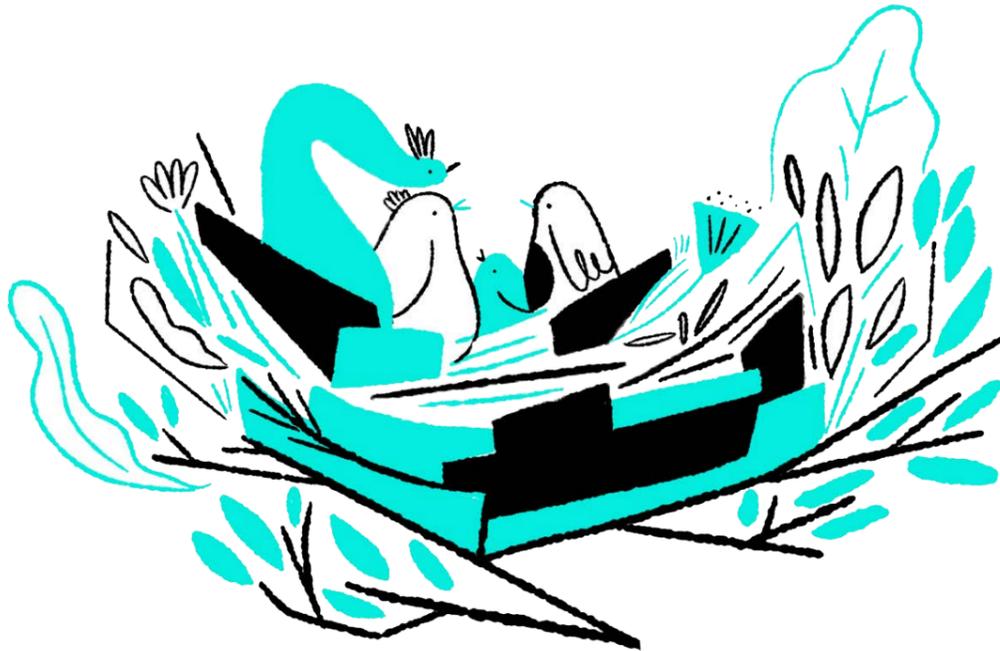
Three insights

- There are seeds of the future already in the present – if we slow down and broaden our perspectives enough to see these emerging innovations.
- Our ambitions for change represent a challenge to the status quo. But the way things are currently organised has inertia on its side – an inherent 'immunity to change' that needs to be overcome.
- The role of the entrepreneur is to bridge the gap between the norms of the present and the possibilities for the future. This is where experimentation and innovation can help offer a glimpse of the future.



Figure 13: Cohort in Carlton Hill reflecting on their journey to date





Module: Seeding culture change

A core purpose of this work was to start to seed a collective ambition for change in NHS Lothian. How might we, as a group, help NHS Lothian to embed more entrepreneurial mindsets and innovative practice? Can we create a ‘buzz’ around this work and develop a wider innovation network for NHS Lothian?

Three insights:

- It’s critical to create time and space to talk about change, start conversations, explore and unpack challenges, develop ideas and proposals. Enabling staff to legitimately engage with this work is vital.
- There may be a role for this group in hosting such conversations, sharing their learning and supporting new inquiries, because we’ll need a radically different approach to address the challenges of the future; no change is not an option.
- There are so many untapped pockets within NHS Lothian. Some staff might not have the confidence to join such a programme, they might not see themselves as entrepreneurs, or might not have the right manager to enable them and/or their ideas.

The group identified a few actions that could support this work:

For individuals	For teams + departments	For NHS Lothian
<ol style="list-style-type: none"> 1 Recognise the time needed to develop innovative practices. 2 Fund sessions in each department to dedicate to this work – allow staff capacity beyond clinical time. 3 Set a balance in all roles between the operational, strategic and innovative. 4 Offer more education opportunities for staff – different training modules and activities. 5 Seek diversity of perspective, background and experience. 	<ol style="list-style-type: none"> 1 Create spaces for asking and inquiring into important questions. 2 Build awareness of power and hierarchy. 3 Create engaging communications with the rest of the organisation and other teams. 4 Create room for innovation beyond core roles. 5 Develop more participatory processes. 	<ol style="list-style-type: none"> 1 Transparency – move beyond hierarchy. 2 Recognise talent and nurture it, supporting individuals to be entrepreneurial and innovative. 3 Recognise how essential it is to have this space to develop ideas. 4 Value incubation time – encourage and protect time to think. 5 Celebrate the small wins to help spread the culture/ awareness that if you have any ideas, they will be taken on.

We’ve forgotten how to use our most critical tool – the human imagination. Once we can reactivate our collective imagination there is no end to what we might accomplish.³⁰

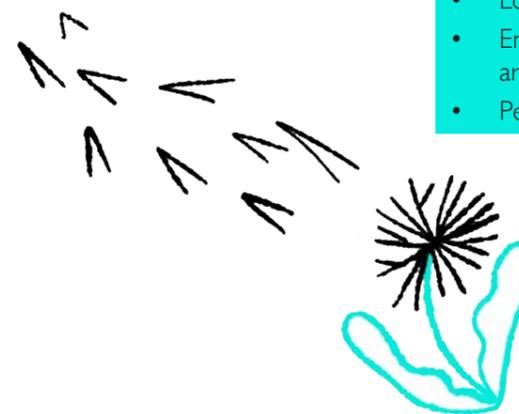
Fireside chat: Influence, with Steve Martin

Steve’s presentation explored the art of influence and learning from behavioural insights and psychology. He challenged the group to think differently about how to gain buy-in and support for their ideas.

Discussion: What are some of the tensions that public entrepreneurs navigate?

There are some inherent tensions that naturally exist when we try to create change in a complex environment. Here, in no particular order, are 12 the cohort have identified:

- The heroic individual and/or the power of the group.
- Innovation and/or bureaucratic processes.
- Immediate needs and/or long-term aspirations.
- The organisation’s needs and/or those of the wider health systems.
- Historical context and/or future scenarios.
- Pressure for change and/or new ideas.
- Solving a problem and/or exploring opportunities to change.
- Innovators moving fast and/or the mainstream moving slow.
- Challenging assumptions and/or reinforcing the status quo.
- Low appetite for failure and/or high desire for learning.
- Environments for entrepreneurs to flourish and/or where risks are mitigated.
- People wanting certainty and/or recognising ambiguity.



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WELL

DONE

TEAM!

The RSA team



Ian Burbidge, former head of innovation and change, has a background in local public service and behavioural science. He led the design, development, and application of the RSA's approach to change, blending theory and practice from a range of disciplines to offer ways to address the challenges of our time.



Jamie Cooke, head of RSA Scotland, leads on the development of the RSA's activity in Scotland, through innovative partnerships, projects and programmes of activity. He works with Fellows to strengthen RSA Scotland's impact, and to open up new ways to develop opportunities in Scotland which contribute to the RSA's strategic objectives.



Ella Firebrace, innovation and change manager, explores how new theories and practices can help us navigate complexity and how people can participate in shaping different futures. She has a background in psychology and global migration.



Benny Souto, collaboration and change designer, is a multidisciplinary designer, working across a range of RSA programmes to support more collaborative and creative ways to address complex problems.



Beatrice Bekar, delivery manager, supports the design and delivery of a number of RSA, projects exploring innovative ways to equip individuals with the skills, mindsets and tools they need to thrive in their community.



Adanna Shallowe, senior global manager, is an international affairs analyst and foresight practitioner. She is responsible for harnessing global insights in the RSA's research and for the implementation of its global strategy.

Special thanks to our fireside chat speakers

Among the RSA's Fellowship of over 30,000 changemakers, industry leaders, academics and grass roots innovators are some of the world's brightest minds and cutting edge thinkers. We were lucky enough to have four of them volunteer their time to run a bespoke session with the cohort, adding value to the core curriculum. We heard from four RSA Fellows and the RSA's own head of innovation and change:

Billie Carn, Maverick Wisdom



Billie Carn is the founder and chief maverick at Maverick Wisdom. She is the author and illustrator of *Maverick Wisdom*, which shares insights and stories from her research on disruptive enterprising maverick innovators who challenge the status quo in their industries. Billie is a former children's nurse/lecturer who went from caring for sick children to taking care of business. She believes care is the essence that enables humans to live, love, and build organisations that push humanity

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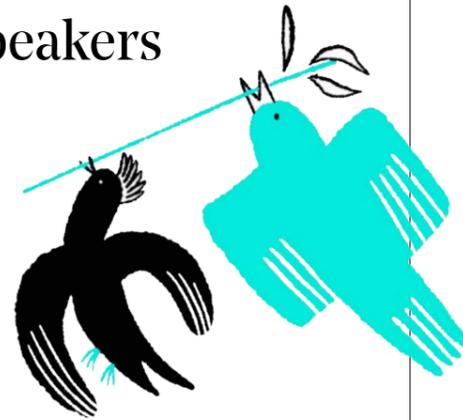
Nik Badminton, Futurist



Nikolas is the chief futurist at futurist.com and author. Exploring futures with world leaders for water-energy-food-waste nexus, the circular economy and climate resiliency. He has advised the world's most impactful companies, including NASA, Google, Microsoft, United Nations, United Way, Bank of Canada, Government of Canada, UK Home Office, Government of Cayman Islands, American Express, AT&T, Thales, Rolls Royce, Heineken, Procter & Gamble, IDEO, and many more.

Contact Nik at:

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www.futurist.com



forward, and impact multiple bottom lines. Billie's evolution from children's nurse to explorer of different thinkers to entrepreneur has given her a unique perspective. She combines curiosity, play, data, and novel different thinking to strategise the most innovative ways to challenge convention. Along the way, she reinvents how work is done to bring creative problem solving to life, because innovation without execution is just an idea.

His research and thinking have been featured by CTV, Global News, BBC, VICE, The Atlantic, Fast Company, TechCrunch, Business Insider, Huffington Post, Forbes, Sputnik and VentureBeat. Nikolas' thinking can be seen in the opening chapter for the new book, *The Future Starts Now*. He's also writing a new book that equips world leaders and executives with the tools to imagine new futures, see unforeseen risks and strengthen strategic planning.

Rowan Conway, Social Value and Innovation



Contact Rowan at:

www.linkedin.com/in/rowan-conway-09bab58

Rowan leads the Mission-Oriented Innovation Network (MOIN) at UCL IIPP. MOIN brings together leading global policymaking institutions – including state investment banks, innovation agencies and government departments, to share the challenges and opportunities they face when trying to create and nurture public value. MOIN provides an organisational dimension to IIPP's work, and members of MOIN are all agencies who have responsibility for research and innovation budgets. Formerly the director of innovation and development at the RSA, Rowan led the RSA's development of new strategies, partnerships

and innovation programmes. Passionate about design and innovation, Rowan was responsible for leading and developing the RSA's association of design, Student Design Awards and Royal Designers for Industry, as well as driving the ongoing development and implementation of design thinking methods and innovation challenges across the RSA. Rowan has over 20 years' experience in innovation, research, communications, engagement and strategy. As a consultant, Rowan has advised public and private sector organisations on communication, sustainability and strategy, most notably working for four years with London 2012.

Steve Martin, Influence at Work



Contact Steve at:

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www.influenceatwork.co.uk

Steve is co-author of the New York Times, Wall Street Journal and Business Week International bestselling book, *Yes! 50 secrets from the science of persuasion*, which has sold over 1,000,000 copies and been translated into 27 languages. His latest book *Messengers: Who We Listen To, Who We Don't and Why*, was published in autumn of 2019. Steve's work applying behavioural science to business and public policy has been featured in the national and international press including BBC TV and Radio, The Times, Wall Street Journal, New York Times, Harvard

Business Review and Time magazine. He speaks at conferences all over the world and regularly presents on the subject of influence and persuasion. He is faculty director of Columbia University Graduate School of Business Behavioural Science Exec Ed Program and guest lecturer on MBA and Executive Programmes at Harvard Business School and the London School of Economics. He consults for a wide variety of commercial and government organisations in Europe, Asia and the US, and is chair of the Global Association of Applied Behavioural Scientists (GAABS).

Ian Burbidge, formerly with the RSA



Contact Ian at:

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Ian is an experienced strategy and systems change practitioner with over 20 years' experience supporting organisations, communities and individuals to effectively respond to the challenges they face. Most recently head of innovation and change at the RSA, Ian led the design and application of the RSA's approach to social change and the development of an institutional knowledge commons. His research has

been published in reports and journals and shared via workshops and masterclasses. Ian's previous work in local government was at the intersection of policy, partnership and participation. He ran the council's innovation lab, leading multi-agency work across health, education, housing, criminal justice and social services. Ian writes on the challenges of change at www.ianburbidge.com.

Our key lines of enquiry

The work was designed to test the hypotheses that:

With support and legitimacy, a cohort of changemakers can create positive change within the health and social care system, bringing their energy, ideas and experience to harness opportunities.

NHS Lothian, as an organisation:

- We need to experiment with new models of ill-health prevention and treatment as well as new models of good health promotion.
- Collectively we can start to shift some of the health systems in Lothian to improve the health of our citizens.



Us, as a collective

- We can define what it means to be innovative and entrepreneurial for NHS Lothian - 'our way'.
- By supporting each other we are more likely to make a difference in our work and create an entrepreneurial movement within the organisation.

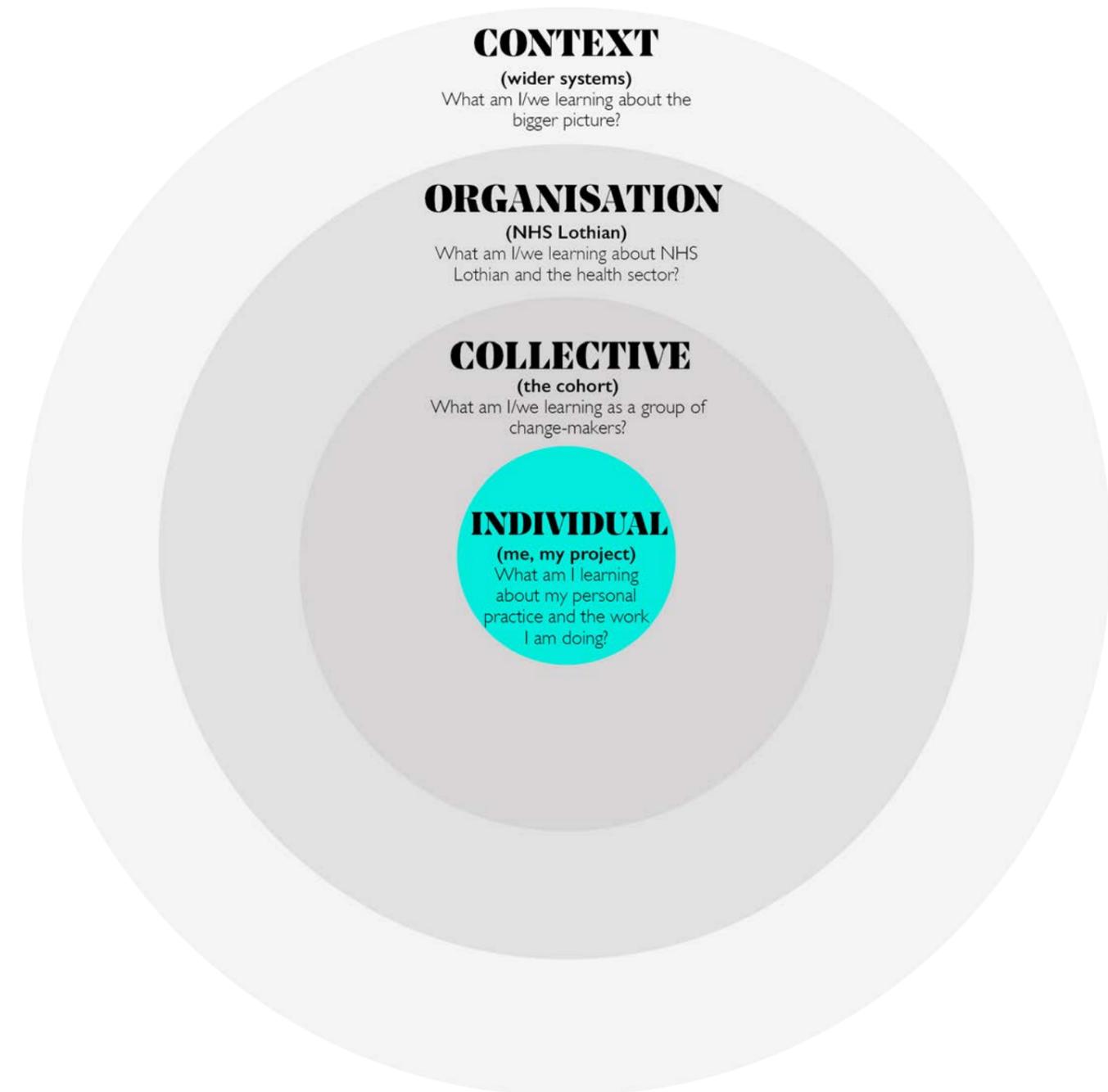
Me, as an individual

- With dedicated time and support I can accelerate work on my idea.
- I can develop my practice and grow as an entrepreneurial spirit, visibly modelling what good looks like in this space.



To do this, we explored

- Our individual and group purpose, our strengths and ideas for change, and the context in Lothian in which we are working.
- What it means to be entrepreneurial in a public sector context, and how we can bring more innovation to our work.
- The wider systems within which we all work and which influence our ability to get things done, seeking opportunities to act within them.
- How we can experiment and learn about these systems and our ideas by taking actions.
- What we mean by public value and how we can get beyond traditional cost-benefit analyses of ideas or proposals for change.
- How to take people with you in respect of the change you want to see and build a movement of allies.





Core readings

RSA articles and reports

[Outdated public services must empower people to achieve change](#)³¹

Explores why we need new forms of public service.

[From design thinking to system change](#)³²

Explores the need for innovation in public services.

[Are you a public entrepreneur?](#)³³

Explores how to bring that innovation to life in practice.

[What we see when we see transparency](#)³⁴

A brief summary of a core framing we use in these sessions.

[A stitch in time](#)³⁵

Realising the value of futures and foresight.

Other

The prosocial approach

[Prosocial: Using Evolutionary Science to Build Productive, Equitable, and Collaborative Groups](#)³⁶

How you can design, build, and sustain effective groups.

[Polycentric systems as one approach for solving collective action problems](#)³⁷

Outlines Elinor Ostrom's '8 core design principles' for effective group working.

[The individual and collective ACT Matrixes](#)³⁸

Paul Atkins offers a good overview via his blog.

[How do you form a common agenda?](#)³⁹

Podcast from the Collective Impact Forum with tips on finding a shared purpose in systems.

[The practice of adaptive leadership](#)⁴⁰

An approach to leadership that is highly consistent with Prosocial (above).

Leadership and power

[Old and new power](#)⁴¹

Heimans and Timm's HBR article is a good overview of the wider changes we face.

Narratives and community

[Find your why](#)⁴²

A book based on Simon Sinek's work with useful tools such as narrative approaches.

[The stories that bind us](#)⁴³

Examines the relationships between story and identity in the context of a family.

[The art of community: seven principles for belonging](#)⁴⁴

A book exploring principles and practical tools for growing and sustaining connected communities.

[Belong: find your people, create community and live a more connected life](#)⁴⁵

An illustrated guide which helps us understand our sense of belonging in the digital age.

Complex systems

[Dave Snowden's talk on Cynefin](#)⁴⁶

The Cynefin Framework offers an approach to addressing complex problems and opportunities.

[Uncertain times](#)⁴⁷

Jessica Flack and Melanie Mitchell of the Santa Fe Institute discuss the unprecedented opportunities Covid-19 has offered us to seeing human society as a complex system and build better futures.

[Complex systems thinking and NCD prevention](#)⁴⁸

A talk hosted by the London School of Hygiene & Tropical Medicine featuring a short introduction on complex systems theory.

[Here's why your organisation can't handle complexity](#)⁴⁹

This article shares insights on how organisations might implement networked and non-hierarchical approaches to better manage complex challenges.

[Team of teams](#)⁵⁰

A great read on leading in a time of complexity exploring new ways of combining the agility and adaptability of small teams to large organisational environments.

[The environment as a complex system: how wolves shape rivers](#)⁵¹

An interesting example of complex system theory, drawing from the interaction wolves have with their surrounding environment.

[Why incremental innovation isn't enough](#)⁵²

A great read to understand the limits of innovation as we know it.

[Yes! Our World Is Complex, But What Does That Mean?](#)⁵³

A Psychology Today article relating complexity to family systems.

[Tools for Systems Thinkers: The 6 Fundamental Concepts of Systems Thinking](#)⁵⁴

Some practical tools for understanding complex systems.

[The Systems View of Life: A Unifying Vision](#)⁵⁵

Ideas, models, and theories underlying the systems view of life into a single coherent framework.

Futures and foresight

[Transformative scenario planning: Working together to change the future](#)⁵⁶

A brief excerpt from chapter two of the book introducing the approach.

[SITRA Futures Frequency](#)⁵⁷

A workshop method for building alternative futures. Includes the 'audio dramas' mentioned p28.

Social value

[Social Value UK](#)⁵⁸

An introduction to the social value movement and a framework for accounting for social value.

[Public Services \(Social Value\) Act 2012](#)⁵⁹

Procurement policy note giving supporting guidance.

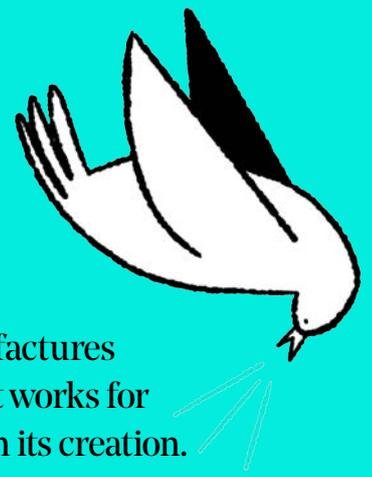
[Creating and measuring dynamic public value at the BBC](#)⁶⁰

An early-stage prototype of an evaluation framework that can measure dynamic public value.



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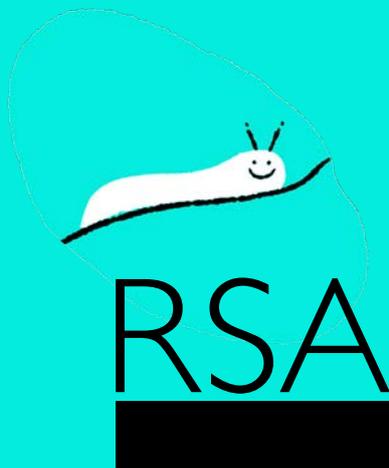


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