



Issue 20

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Research Theme

Innovation is Here to Stay

In this issue

1. Introduction: Innovation is Here to Stay
2. Postcard from Abroad: Dr Lynne Maher
3. New Zealand Trade and Enterprise's Focus on Health
4. INNOV'08 - Weaving Innovation into Health
5. Investment in World-class Research: The Starting Point for Commercialisation
6. SPRINT Protocol for Tight Glycaemic Control in Critically Ill Patients: An Innovation Success Story
7. Health Innovation Awards 2008 Finalists
8. Running Hot! Interconnection: New Zealand Science in the 21st Century
9. Australasian Conference on Safety and Quality in Health Care
10. New Zealand Clinical Research Conference 2008 'Research in Practice'
11. Science Media Centre
12. Cancer Services in Primary Care DHBRF Request for Proposals
13. Next DHBRF e-newsletter
14. About DHBRF e-newsletter
15. Subscribe/unsubscribe
16. Contact us

1. Introduction: Innovation is Here to Stay

It's nine months since the DHBRF Sharing Innovation Workshop. And what now? How have we fared over this time? Was it all hype? What is this 'innovation' business anyway? Based on information from several sources, the HRC developed a definition for innovation:

“Paradigm changing projects, speculative novel proposals that are unlikely to gain support in traditional peer review rounds. Projects may be high risk (and high return) and/or involve innovative partnerships (for example research and industry)”

Along these lines, the National Institutes of Health (NIH, USA) have some interesting 'innovator' and 'pioneer' grants. The term 'pioneering' is used to describe highly innovative approaches that have the potential to produce an unusually high impact on a broad area of research and an 'innovator' is a new investigator of exceptional creativity who proposes bold and highly innovative new research approaches that have the potential to produce a major impact on broad, important problems in research. These definitions can be easily adapted for application in areas such as health services, public health and clinical research.

The value placed on this theme by the NIH is one demonstration of the significance of this idea of **innovation – it isn't just a fad, and it isn't going away!** Innovation can apply at multiple levels, from simply translating research outcomes into practice, to real culture changes and new ways of viewing old challenges.

In this issue of the DHBRF enews we have a follow-up article from Dr Lynne Maher, Head of Innovation Practice at the NHS Institute for Innovation and Improvement, and a key plenary speaker at last year's conference. Lynne's '**Postcard from Abroad**' highlights the power of observation as a core tool and focuses on the development of relationships for innovation.

Also in this issue, Duncan Catanach, the Programme Manager - Healthcare at New Zealand Trade and Enterprise (NZTE) profiles his organisation's innovative '**Focus on Health**', highlighting the recent work in the domestic health sector by the government's economic development agency, with the potential to deliver both improved health and economic outcomes.

An innovative collaboration in itself is the co-hosting by the Ministry of Health and NZTE of the upcoming **INNOV'08 - Weaving Innovation into Health** conference. This will be an exciting summit in November; details of speakers and registration are included below. The 2008 Health Innovation Awards will be held in conjunction with this meeting. In this issue, the **SPRINT Protocol** is briefly profiled as a success story from the Health Innovation Awards, along with a summary of several of this year's finalists to give readers a taste for the breadth and depth of new ideas in our country.

A number of conferences are approaching this year that may be of interest to readers including themes of quality and safety, clinical research, emerging science in NZ and master classes on 'thinking differently'.



Next month's DHBRF e-news focuses on the theme of **Health Services Management**. Please email ahaggie@hrc.govt.nz if you have any contributions on this topic that may be of interest to newsletter readers.

Innovation can be hard, but we can continue to persevere, be inspired and brave these new challenges.

2. Postcard from Abroad: Dr Lynne Maher

Dr Lynne Maher was a plenary speaker at last year's DHBRF Sharing Innovation conference, who spoke passionately about emerging themes in innovation and improvement. As the head of Innovation Practice at the UK's NHS Institute for Innovation and Improvement, Dr Maher provided an international perspective on innovation in the health sector, yet she began her presentation by remarking that NZ is well advanced in its adoption of innovative practices.



Lynne enthusiastically provided an article for this month's newsletter, highlighting key factors that will enable us to face challenges differently. She focuses on the power of observation as a tool, where it is essential to consider situations with 'fresh eyes' and develop new ideas for old problems. The development of new and different relationships, which may be unconventional partnerships (for example with the Ferrari Formula One Team...), is also an important way to lead to new learning, new approaches and the development of new tools to support improvement and innovation in our health system.

A strong supporter of improvement and innovation, Dr Maher has worked with wide ranging groups within the health sector in the UK and internationally to encourage and teach creativity and innovation, develop leadership in health improvement, and help front-line service teams to be more creative in their improvement work and service delivery. Most recently this has included pioneering work on experience based design which truly involves patients in designing health care services.

Download Lynne Maher's full article [here](#).

Lynne Maher is going to be in New Zealand for several events this year, including the 6th Australasian Conference on Safety and Quality and INNOV'08, which are both featured in this newsletter. Lynne is also hosting several master classes on Thinking Differently and Patient Experience in September. More information is available [here](#).



3. New Zealand Trade and Enterprise's Focus on Health

New Zealand Trade and Enterprise (NZTE) is the New Zealand government's economic development agency. One of the areas that NZTE has selected to focus on is healthcare including health IT, medical technologies, bioactives (e.g. functional ingredients) and services (e.g. health consulting). As part of its work in healthcare, NZTE partners with companies, individuals and organisations to accelerate the development, implementation and commercialisation of New Zealand healthcare innovation.

As an economic development agency, NZTE's strongest connections are with the commercial sector – our core business is to support NZ

companies to be more successful, particularly in international markets. For instance, during 2008 NZTE is supporting companies attend major international tradeshows such as Medica (medical technologies), HIMSS (health IT) and Health Ingredients (bioactives), in addition to facilitating targeted missions to Japan and Canada. We also work with industry organisations such as the New Zealand Health IT Cluster and the Medical Technologies Special Interest Group to build capability and connections domestically.

More recently NZTE has been working closely with the domestic health sector as well as our healthcare companies. Underpinning this strategy is the “healthy, wealthy, wise” hypothesis. This hypothesis suggests a strong and aligned focus on health innovation encompassing policy, provider, research and commercial organisations, and has the potential to deliver both improved health and economic outcomes. For example, late last year, NZTE and the Ministry co-hosted the British Columbia Minister of Health’s visit to New Zealand and subsequently worked together to showcase New Zealand providers and vendors in an Indigenous Health Forum in British Columbia in May. NZTE and the Ministry of Health are also partnering to present INNOV’08 – Weaving Innovation in Health – more on that later in this newsletter. **These are exciting times with rich opportunities for collaboration for the benefit of New Zealand.**



For further information on NZTE’s work in healthcare, please contact Duncan Catanach, Programme Manager – Healthcare on (04) 816 8236. For information on [NZTE visit the website](#).

4. INNOV’08 -Weaving Innovation into Health

During 3 - 5 November this year, Wellington is the place to be if you have any interest in health innovation!



Who should attend INNOV’08?
Health, disability and rehabilitation innovators:
<ul style="list-style-type: none"> ○ CEOs, leaders and clinicians from DHBs, PHOs and NGOs ○ Commercial innovators in health IT, medical technologies, bioactives ○ Policy makers, project managers, service improvement practitioners ○ Researchers and academics from universities, medical schools and research institutes

NZTE and the Ministry of Health are partnering to present INNOV’08 – Weaving Innovation into Health. INNOV’08 features leading health, disability and rehabilitation and technology innovators and leaders from service providers, research organisations and industry as they share their journeys. The summit will provide a platform for establishing leadership and promoting the development, adoption and commercialisation of innovative healthcare solutions.

INNOV'08 also offers the opportunity to learn in person from international experts such as	
David Chilvers	(CEO, NHS Innovations, UK)
Carol Haraden	(VP, Institute of Health Improvement, US)
Scott Young & Carolyn Mustille	(Co-executive Directors, Kaiser Permanente's Care Management Institute, US)
Steve Ailder	(Clinical Director of Neuroscience and Ophthalmology, UK)
Jan Davies	(Executive Director and CEO of the National Institute of Clinical Studies, Australia)
Roger Killen	(Managing Director, The Learning Clinic, UK)
And return visits to New Zealand from:	
Lynne Maher	(Head of Innovation Practice, NHS Institute for Innovation and Improvement, UK)
Jonathon Lomas	(Inaugural CEO, Canadian Health Services Research Foundation, Canada)
Richard Bohmer	(Senior Lecturer of Business Administration, Harvard Business School, US)

Delegates will have the opportunity to participate in learning labs, plenary sessions and workshops. INNOV'08 will also feature the Health Innovation Awards Expo and Gala Dinner.

To register your interest and for the latest speaker and programme details visit [the INNOV'08 website](#).

5. Investment in World-class Research: The Starting Point for Commercialisation

The HRC funds a large amount of innovative health research at a fundamental level, recognising the importance of supporting basic research, which may lead to not only new knowledge but real benefits for New Zealand.

Download here the [Investment in world-class research: the starting point for commercialisation](#) document, prepared for the Ministry of Research, Science and Technology (MORST) Capitalising on Research Summit in Auckland, November 2006. This contains case studies demonstrating the exciting journey of specific research studies heading into commercialisation.

6. SPRINT Protocol for Tight Glycaemic Control in Critically Ill Patients: An Innovation Success Story

Medics and engineers in Christchurch developed a world-leading system to tightly control blood-sugar levels in Christchurch Hospital's sickest patients. The SPRINT system, Specialised Relative Insulin Nutrition Tables, helps to safely and predictably regulate glucose levels. In 2006 this team won the Health Innovation Awards Small Innovation Award and the Supreme Award. At the time of the awards announcement, the SPRINT system had already been shown to dramatically reduce the risk of low blood sugar and reduced deaths by 30% in patients who spent less than three days in intensive care.



In April this year the research team presented a publication in *Critical Care* (*Critical Care* 2008, 12:R49) with a comprehensive description of the implementation and evaluation of the SPRINT protocol. The full article can be downloaded [here](#).

One of the main investigators, University of Canterbury researcher Dr Chris Hann was named an HRC Sir Charles Hercus Health Research Fellow in 2007, for research creating patient-specific heart modelling methodologies to improve diagnosis and treatment of cardiac patients in critical care. Read the case study [here](#).

Portions of the SPRINT protocol are now patent-pending in the US. With the assistance of the Canterbury Development Corporation, Intersection LifeSciences Ltd was formed in 2006 to commercialise model-based therapeutics for optimised patient monitoring, diagnosis and therapy, such as this system. A brief description of the formation of this company can be found on page 48 of the [CDC 2007 Annual Report](#).

This is a great example of a successful innovative approach that has progressed and continues to show positive outcomes for our communities.

7. Health Innovation Awards 2008 Finalists

Nearly 130 entries were received this year for the NZ Health Innovation Awards, which have been narrowed down to twenty finalists competing in eight categories. This year's HIA winners will be announced at the HIA expo and gala dinner held in November in Wellington. Summaries of three of these initiatives are below. More information on all finalists including contact details can be found at the [HIA website](#) along with event registration.

New Ventilation Service at Christchurch Hospital Offers Life-saving Treatment

People with emphysema and other respiratory diseases in Canterbury can now be treated more quickly and safely thanks to the Acute Non-Invasive Ventilation (NIV) service.

Unlike invasive ventilation where a tube is inserted into the patient's throat, NIV uses a mask over the mouth, eliminating the risk of infection and injury. The new service means patients at Christchurch Hospital can be treated in a ward by nurses instead of waiting for a bed in intensive care, as was previously the case. In the three years since the service has been running, almost 200 people have benefited. In 2007, the use of NIV contributed to the reduction in mortality for those admitted with severe respiratory failure from 55

percent to 29 percent.

Respiratory disease is the third leading cause of death in New Zealand and the new service introduced by Canterbury District Health Board has improved patient care, and reduced mortality rates.

Kaiawhina Helps Improve the Health of Maori on the South Island's West Coast

A kaiawhina or helper/navigator has succeeded in boosting the number of M•ori from the Buller region who are enrolled at the West Coast Primary Health Organisation (PHO) by 32 percent. Layperson Rehia MacDonald spent months approaching those she already knew and getting to know other wh•nau in the area before encouraging them to join the PHO.

The West Coast PHO employed Rehia because they wanted to address inequalities in the numbers of M•ori registered with them. Health indicators showed that M•ori were not doing as well as non-M•ori and were missing out on vaccinations and screening.

Rehia, who is herself M•ori, started in February 2007, and has seen the number of M•ori and Pacific peoples enrolled in the PHO in her district rise by 165. She has made over 180 home visits, assisted more than 150 people to attend doctors' appointments, and enabled 49 children to be immunised.

Patients with Spinal Cord Injuries Get Help with Sexual Intimacy

A person's sexual ability may be affected after suffering a spinal cord injury and many wonder whether they will ever be able to have sex again. But help with expressing sexual intimacy is now available thanks to a new programme run by the Auckland Spinal Rehabilitation Unit and TASC (The Association for Spinal Concerns). Patients may need to learn to express sexual intimacy in a different way than before their injury, but are often relieved at the opportunity to discuss and explore the practical and emotional aspects of their sexuality.

Regular education workshops and one-on-one counselling are organised for patients, and training sessions run for staff to ensure the culture of the unit makes patients feel comfortable to talk openly about their sexuality. The team will be assisting Burwood Hospital to set up a similar programme in Christchurch so that the programme can be available to all New Zealanders.

8. Running Hot! Interconnection: New Zealand Science in the 21st Century

Following on from the successful inaugural conference in 2006, a new Running Hot conference has been announced on the theme 'Interconnection: NZ Science in the 21st Century'. The conference is to be held 29-31 October 2008 at Te Papa, Wellington.



Addressing the challenges of the 21st century requires new ways of thinking and new ways of connecting with knowledge and information. Focusing on relationships across disciplines and intellectual paradigms, Running Hot 2008 will investigate approaches for an engaged, connected and multi-disciplinary science for the future.

The programme includes prominent international and New Zealand presenters across a broad spectrum of research fields. Registrations

are currently open. Visit the [Running Hot! website](#) for more information.

9. Australasian Conference on Safety and Quality in Health Care

The Australasian Association for Quality in Health Care (AAQHC) is holding its annual conference in Christchurch from 1-3 September 2008. This conference, which continues to be the premier event for those interested in quality and safety, has grown to be amongst the largest international events of its kind. The 6th Australasian Conference on Safety and Quality in Health Care has the theme of “Bold Aims – Bold Outcomes”.



Those attending will have the opportunity to meet, network and form partnerships with key health care safety and quality leaders to include CEO's, clinicians, managers and consumers. In addition delegates are able to share in the most up-to-date strategies, innovative approaches, theories and tools that seek to enhance the safety and quality of our health care services.

For more information visit the [Safety and Quality in Health Care conference website](#).

10. New Zealand Clinical Research Conference 2008 'Research in Practice'

The 5th Clinical Research Conference 'Research in Practice' is to be held at the Langham Hotel in Auckland 28-29 August 2008. The conference is hosted by the NZ Association of Clinical Research (NZACRes). The aim of NZACRes is to provide a forum for clinical researchers in science, healthcare and industry in NZ – for exchanging experience, sharing expertise and networking.



This year's conference will be exciting and again different from earlier ones, incorporating interactive workshops on a variety of topics, exhibition and poster displays and networking opportunities. Key speakers will address topics including top-notch NZ research success stories, an update on the Trans Tasman Regulations, electronic data, drug safety, and how to deal with suspicious data.

For more details visit the [Research in Practice website](#).

11. Science Media Centre



The New Zealand Science Media Centre (SMC) was launched at the beginning of July 2008 to act as an independent source of expert comment and information for journalists covering science and technology in New Zealand. The opinions of leading scientists on breaking

news stories are featured as well as background reports and tools for both journalists and scientists. The aim is to promote accurate, bias-free reporting on science and technology by helping the media work closely with the scientific community. This is therefore an innovative tool to promote engagement and enable better understanding and communication of science.

Science and technology are fundamental to transforming our economy and improving our wellbeing. As part of the strategy to engage New Zealanders with science and technology, in its 2007-2010 Statement of Intent, the Ministry of Research, Science and Technology (MORST) announced a three year pilot for a Science and Technology Media Centre for NZ.



The SMC is operated by the Royal Society of NZ. Based on similar Centre's in the UK and Australia it is anticipated that the NZ SMC will also be able to successfully promote the voices, stories and views of the scientific community to the national news media.

This DHBRF e-newsletter is an example of the promotion of research outcomes to the community, aiming to engage and facilitate the translation of research. Visit the [SMC website](#) to find out more about this new resource.

12. Cancer Services in Primary Care DHBRF Request for Proposals

A new DHBRF Request for Proposals (RFP) has recently been released focusing on '**Improving Detection and Management of Services in Primary Care for People with Cancer**'. The aim of the project is to identify and describe 'best practice' solutions which can inform future development of service delivery models in primary care for those with cancer.

A two-stage application process will be utilised. Applicants are asked to complete the Expression of Interest (EOI-DHBRF0006) and return it to the HRC by **5 September 2008**. An investigator briefing meeting will be held on 15 August 2008 and interested parties are asked to register to attend the meeting by **8 August**. Full proposals are due on 31 October 2008.

[Application forms](#) are available on the HRC website. To register for the meeting or for more information please contact Katie Hart by email khart@hrc.govt.nz or phone (09) 303 5081.

13 . Next DHBRF e-newsletter:

The next issue of the DHBRF e-newsletter will focus on **Health Services Management**. Please contact us if you have a proposed newsletter item relevant to this theme by emailing Aroha Haggie at ahaggie@hrc.govt.nz .

14 . About the purpose of the DHBRF e-newsletter:

- Provide DHBs with information relevant to DHB core business i.e. funding and planning activities

- Identify research that could inform planning for public health services
- Identify less relevant research which may have more of a biomedical focus
- Monthly communications focus on one of the priority population health goals as outlined in the New Zealand Health Strategy
- Information is taken from an annual HRC report identifying publications produced by New Zealand research teams or funded by the HRC between May 2005 – June 2006

Information included represents highlights of findings of high-quality research, readily available at the time of writing

15 . [Subscribe/unsubscribe](#)

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16. [Contact Us:](#)

To contact us telephone Aroha Haggie at the HRC on (09) 303 5207
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Check out the HRC's website on www.hrc.govt.nz