



HSRAANZ Webinar Series

Why do so many technology projects in healthcare fail? A new framework for studying the non-adoption, abandonment and failure of scale-up, spread and sustainability (NASSS) of health and care technologies.

Wednesday, 28 March at 11am AEST, 1pm NZST

There is no cost to attend the Webinar but registration is essential. Please register at: https://zoom.us/webinar/register/WN_vO8mCzYrSe6wnV4eXQuBNw

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PRESENTER

Trish Greenhalgh Professor of Primary Care Health Sciences and Fellow of Green Templeton College at the University of Oxford.

ABSTRACT

An apocryphal (but probably not wildly out) statistic suggests that 80% of technology-supported change projects in health and social care fail. We all know that's because they're complex. It's time to unpack what that complexity is all about – because failed technology projects are costly, wasteful and potentially harmful at both a human and a system level.

Many promising technologies are not adopted at all (for example, because of clinician "resistance") – or they are adopted but quickly abandoned (for example, when it becomes clear that using them creates problems somewhere else in the system). Technologies that are successfully adopted on a small scale (for example, in proof-of-concept demonstration projects – perhaps as part of a randomised controlled trial) may prove difficult or impossible to scale up locally beyond the initial team of enthusiasts, and/or impossible to spread elsewhere (even when the settings appear comparable). Finally, few technology projects are sustained over time in a way that adapts and evolves with a changing context. These five challenges (Non-adoption, Abandonment, and failure of Scale-up, Spread and Sustainability) inspired the development and testing of a framework (NASSS) to explain such phenomena. NASSS is based on the most extensive systematic review ever published on technology adoption in healthcare, plus a large and diverse sample of organisational case studies followed for up to three years. It considers seven domains – the illness or

condition, the technology, the value proposition, individual adopters (patients, staff), the adopting organisation(s), the wider system and time. Each domain may be simply (that is, few components, clear categories and predictable), complicated (multiple components and issues), or complex (dynamic, ambiguous, unpredictable).

Complexity in multiple NASSS domains appears strongly predictive of programme failure. Proactive attention to reducing complexity in the different NASSS domains early in the planning stages may reduce the risk of failure (though that hypothesis remains to be tested empirically). The NASSS framework was published in November 2017 and quickly became one of the most downloaded papers ever published in the Journal of Medical Internet Research. Various researchers, design companies, consultancies and policymakers have begun to use it to guide, support and/or evaluate the development, adoption, implementation and scale-up of technology-supported programmes.

This lecture will introduce the NASSS framework, give examples of its application and invite discussion on how it might be used and refined in the future.

BIOGRAPHY



Trish Greenhalgh is Professor of Primary Care Health Sciences and Fellow of Green Templeton College at the University of Oxford. She studied Medical, Social and Political Sciences at Cambridge and Clinical Medicine at Oxford before training first as a diabetologist and later as an academic general practitioner. She has a doctorate in diabetes care and an MBA in Higher Education Management. She now leads a programme of research at the interface between the social sciences and medicine, working across primary and secondary care.

Her work seeks to celebrate and retain the traditional and the humanistic aspects of medicine and healthcare while also embracing the unparalleled opportunities of contemporary science and technology to improve health outcomes and relieve suffering. Three particular interests are the health needs and illness narratives of minority and disadvantaged groups; the introduction of technology-based innovations in healthcare; and the complex links (philosophical and empirical) between research, policy and practice.

Trish is the author of over 300 peer-reviewed publications and 16 textbooks. She was awarded the OBE for Services to Medicine by Her Majesty the Queen in 2001 and made a Fellow of the UK Academy of Medical Sciences in 2014. She is also a Fellow of the UK Royal College of Physicians, Royal College of General Practitioners and Faculty of Public Health.