



Transforming Local Systems TEC Pathfinder Programme Evaluation

Final Report
Executive Summary

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**This is an excerpt from a larger report.
The full report can be viewed [here](#).**

Executive Summary

“ I really like the approach, I think it’s brilliant ... because folk, like myself, could have preconceived ideas of what customers want, of what they need. But [with this] you work with [people] to come up with solutions and ideas of how they can be resolved. So I think it’s brilliant.”

— Pathfinder team member

Background

This report shares findings from the final evaluation of the Transforming Local Systems (TLS) Pathfinder Programme. The TLS Programme was funded by the Scottish Government’s Technology Enabled Care (TEC) Programme, Digital Health and Care Directorate between 2019 and 2023. It established four Pathfinders and their Named Partners to contribute to the transformation of local health and social care systems using digital technology, shifting local delivery upstream towards prevention and self-management. A novel model of national programme support was established to support the Pathfinders to use the Scottish Approach to Service Design (SAtdSD) to transform an aspect of the local system. This ‘managed programme of support’ for the Pathfinders was led by a multi-agency, multi-disciplinary ‘National Team’. The National Team was composed of the TEC Programme of the Scottish Government’s Digital Health and Care Directorate, Healthcare Improvement Scotland’s ihub, the Office of the Chief Designer, Scottish Government Mental Health and Social Care Directorate, and the Digital Office for Local Government.

The four Pathfinders were Aberdeen City, East Ayrshire, the Highlands, and Midlothian. The Named Partners were East Renfrewshire, Orkney, South Lanarkshire, and the Western Isles. Each Pathfinder consisted of a partnership of service users, Health and Social Care Partnerships (HSCPs), NHS and/or third and independent sector organisations.

This evaluation has been conducted by Matter of Focus and builds on the developmental evaluation support for the Pathfinders and the National Team provided by Matter of Focus using its software OutNav since early 2020.

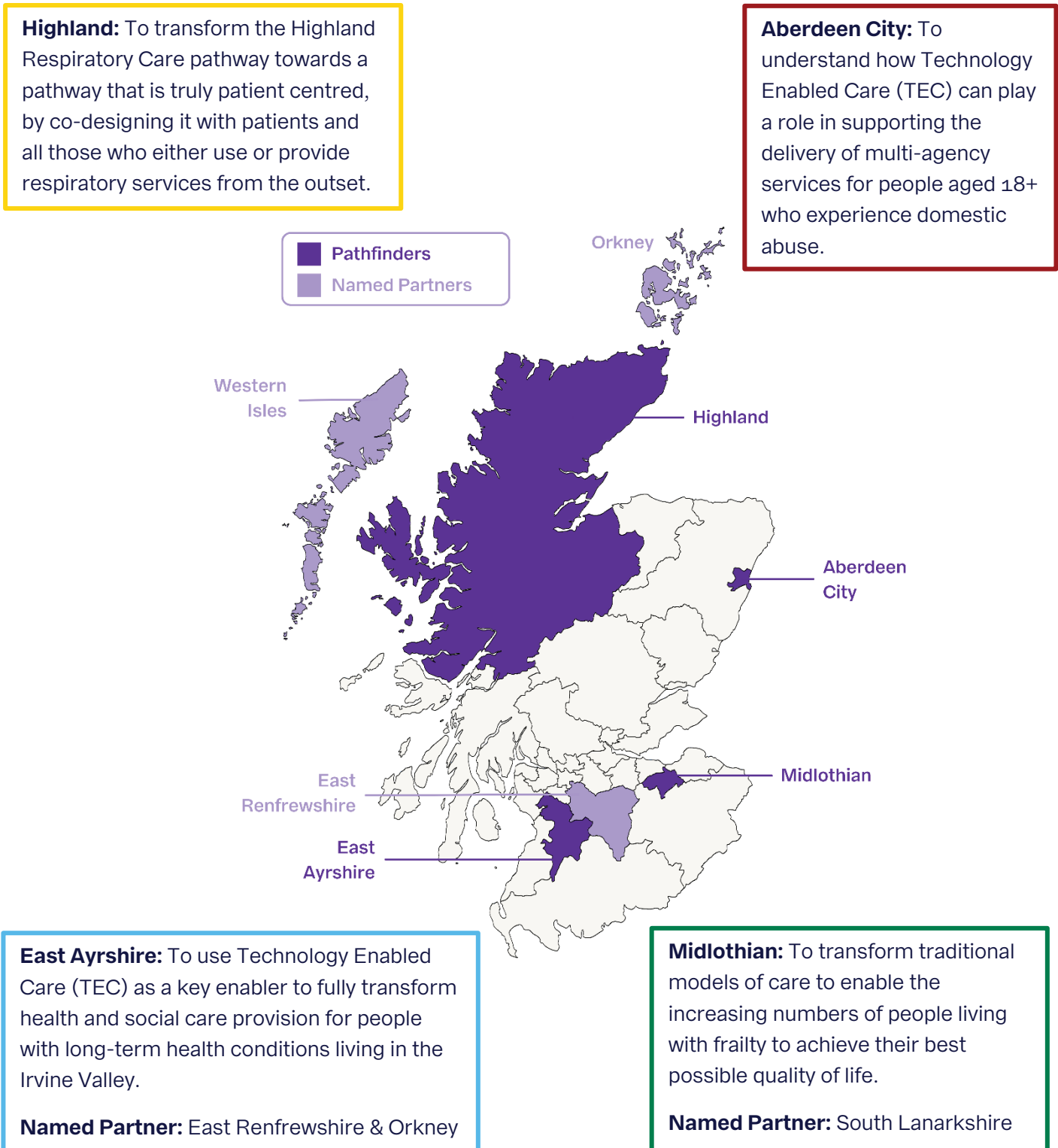
Context for delivery

The Pathfinders were established with explicit recognition that the transformation of local systems is hard to do, and it was anticipated that they would need new tools, approaches, resources, and flexible support to realise the ambitions of the Programme. The 2018 National Digital Health and Care Strategy and the subsequent refresh in 2021 highlighted the need for service redesign on both a national and local level. This was needed to make the best use of digital technologies in the design and delivery of services that support the transformation of local systems towards prevention and self-management and improve the care and wellbeing of people in Scotland.

Between 2020 and 2022, key staff were diverted from their roles into crisis management as part of the Covid-19 response, significantly impacting programme delivery. The 2021 National Strategy

refresh recognised the need to respond to the opportunities and challenges presented by the pandemic, and while digital technologies are considered central to supporting Scotland’s recovery, digital exclusion is highlighted as a key issue. Digital services need to be accessible, and people need digital options. In this context, the Pathfinders remain relevant, contributing learning on how service redesign can help people to access the data, information, and digital services they need to better manage their health and wellbeing.

Figure 1. Transforming Local Systems Pathfinders and their areas of focus



The evaluation approach

The evaluation takes a theory-based approach, using contribution analysis to test the TLS Programme's theories of change and develop contribution stories that establish how well the Programme has worked and its impact. Data collection and analysis took place between September and December 2022, involving semi-structured interviews with key stakeholders from the Pathfinders and from the National Team, a review of documentary evidence, and analysis of data captured in OutNav. OutNav is the cloud-based software developed by Matter of Focus and provides a single platform for evaluation planning, analysis, and reporting. Using OutNav, Matter of Focus supported the National Team and the Pathfinders to develop outcome maps (or theories of change) in 2020 which have been examined in this evaluation.

Findings

The following section presents high-level summary findings on the difference the Pathfinders are making, and the key enablers of impact. Individual impact reports providing detailed findings on how the Pathfinders have used the SATSD and the extent to which this has contributed to transforming an aspect of the local system can be found in Appendices 1 - 4.

What difference are the Pathfinders making?

- 1. The Pathfinders have delivered valuable solutions supporting the implementation of the 2021 Digital Health and Care Strategy.** The Pathfinders have helped people to have digital access to information, their own data, and services, which support their health and wellbeing (priority one of the strategy).

Table 1. Pathfinder solutions against the 2021 Digital Strategy priorities

Strategy Aim	Aim 1: Citizens have access to, and greater control over, their own health and care data – as well as access to the digital information tools and services they need to help maintain and improve their health and wellbeing	
Priority	Pathfinder Solution	Description
Digital Access to Information	Aberdeen City: Development of a Dynamic Database of Specialist Domestic Abuse Support Services	A one 'true source' digital database with guidance and information about support, service provision and referral pathways.

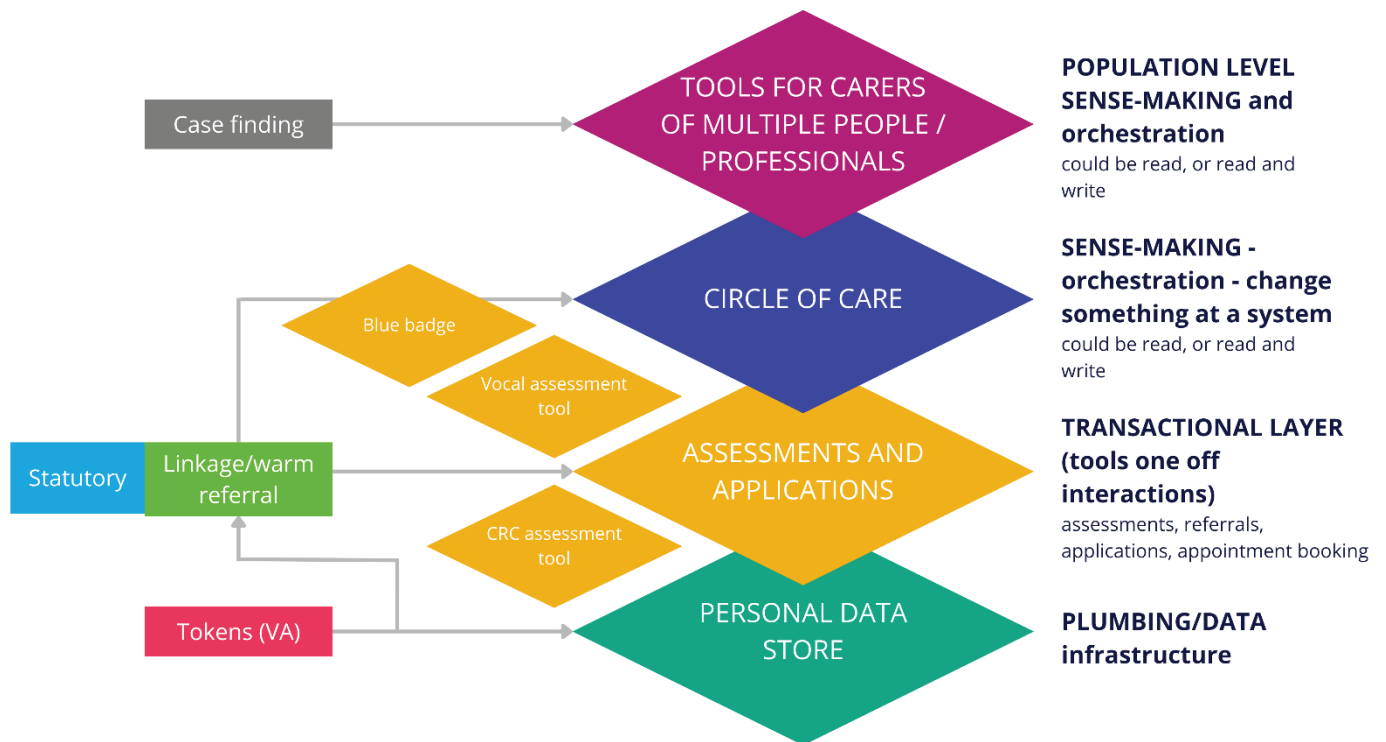
	<p>East Ayrshire: TV screens in GP surgeries</p> <p>Digital Hub in Community Centre</p>	<p>Citizens can access information about digital services from the Digital Hub. TV screens will be updated regularly with useful and relevant information to citizens.</p>
	<p>Highland: Your Breathing Matters – online open learning sessions</p> <p>The Respiratory Resource Hub</p> <p>Improved Respiratory Guidelines on NHS Highlands systems</p>	<p>Digital resources supporting both citizens and healthcare professionals to access digital information on the respiratory care pathway, with the aim of sharing information, building capacity and empowering individuals to self-manage their health and wellbeing.</p>
<p>Access to Digital Services and Tools</p>	<p>East Ayrshire: Multi-Disciplinary Team meetings</p> <p>Digital Health and Care Support Worker</p>	<p>Online MDT meetings established for patients to discuss their long-term health conditions with a multi-disciplinary team of health professionals. The Digital Health and Care Support Worker will support people to access digital services, products, and tools.</p>
	<p>Highland: Improved access to Community Respiratory Team (CRT) and Pulmonary Rehabilitation (PR) funded by the Interface Care programme</p> <p>Your Breathing Matters – online open learning sessions</p>	<p>Increased access to essential services such as the Community Respiratory Team and pulmonary rehabilitation through its digital courses and resources (taken up by the Interface Care programme).</p>
	<p>East Renfrewshire and Orkney Named Partners: Tech Peer Mentor</p>	<p>Tech Peer Mentor supporting people to access telecare options and other digital services and supports in the health and third sector.</p>
	<p>South Lanarkshire Named Partner: virtual and physical TECH Zone</p>	<p>TECH Zone to facilitate people to access digital supports and services.</p>

Data Driven Services and Insights	Midlothian: Collaborative Care Architecture and Circle of Care Concept	User research and data insights are supporting DHI's 'Collaborative Care Architecture' – a tiered architecture underpinning the Circle of Care concept connecting carers, professionals and people, enabling people to gain access to integrated services, maintain and control their data efficiently and effectively.
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2. Evidence of the desirability of citizen-owned data has emerged across the Pathfinders, as a whole. Through challenges around siloed data, governance constraints limiting systems integration, and the need for aligned infrastructure, systems and governance have been common themes. These issues fundamentally determine the extent to which HSCPs can extensively transform services. The Pathfinders have highlighted the need for national support and direction to overcome these challenges.

3. The Pathfinders have been able to contribute evidence on the challenge of establishing digital foundations, and on what a 'future state system' might look like. The Midlothian Pathfinder has contributed very significantly to supporting greater understanding of the challenges and digital components underpinning the ambition for citizens to manage, access and own their own data. The Pathfinder's user research has supported the Digital Health and Innovation Centre (DHI) in their development of a blueprint for the 'Collaborative Care Architecture' – a tiered architecture underpinning the Circle of Care concept connecting carers, professionals and people enabling them to gain access to integrated services and data efficiently and effectively (see Figure 2). The Pathfinder is continuing to support DHI to develop a functional clickable prototype for the Circle of Care concept. The Highland Pathfinder has also supplied evidence and raised awareness of the importance and desirability of citizen-owned data (see Figure 3).

Figure 2. Collaborative Care Architecture



4. **Evidence from the Pathfinders hints at the fact that though many digital technologies may exist, there is still a need for a transitional process of raising awareness, empowering, changing attitudes and behaviour, supporting and upskilling people in the use of digital.** Through their work they have promoted digital inclusion and highlighted that beyond the need for digital choice, there is a need for digital transition. Most of the Pathfinders have developed discrete solutions that can be implemented in the short to medium term (see Table 1). Many of these solutions are relatively simple to deliver and relational. Many solutions highlight the need for digital ‘go-betweens’: tools, approaches and *people* who can support citizens to make an informed choice on how they wish to access services and empower citizens to effectively use digital technologies to proactively manage their health and wellbeing. These solutions – critically – directly respond to needs and priorities expressed by local people and how people wish to use digital technologies to engage with services.
5. **The Pathfinders using the SATSD have all developed solutions that have the potential to transform local systems towards prevention and self-management in the long term.** The Pathfinders have built networks across the system improving how service providers, users, carers, citizens, and people interact with each other, changing how parts of the local systems function. They have identified ‘hubs’ or ‘navigators’ that can empower people and facilitate their understanding and engagement of digital solutions and services, to improve lives and wellbeing.
6. **Evidence from the Pathfinders shows that to achieve a large shift in the system, there is a dual need for support at the national level, empowering the citizen by establishing the fundamental digital foundations underpinning how people and organisations can interact digitally in the system, and support at the local level, empowering the citizen by**

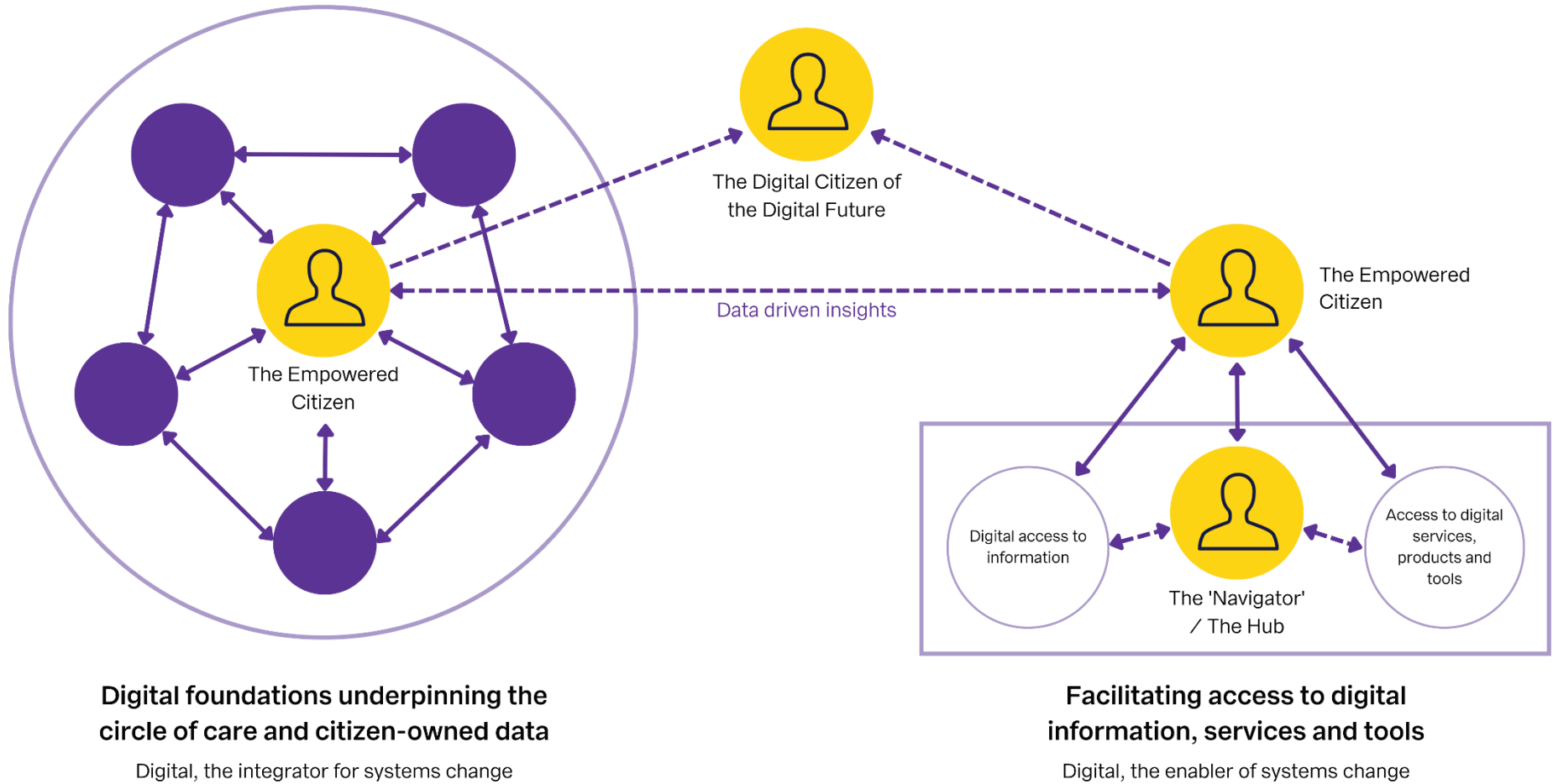
using ‘facilitators’, ‘navigators’ or ‘hubs’ to mediate between the digital offering and the person (see Figure 4). The Pathfinders have demonstrated, using the SATSD, that much can be done at the local level to create the conditions for success, at the national level, by pinpointing key leverage points within the system that can shift and transform the system towards prevention and self-management. These leverage points centre on empowering the citizen.

7. **Overall, the Pathfinders are all generally well positioned for impact and the implementation of the SATSD to achieve outcomes for people can be said to be effective.** While the direct impacts of most of the solutions themselves is not yet known, due to the early stage of implementation, the evaluation finds that as a result of the strong user, stakeholder, and community engagement the solutions designed were relevant and addressed the issues that mattered to people.

Figure 3. Highland Pathfinder ‘Test’ interface prototype of a patient digital record



Figure 4. Transforming Local Systems using Digital Technology



What have been the key enablers of impact?

The following factors have been identified as key enablers of impact:

- **The National Team's support to the capacity of the Pathfinders in the implementation of the SAAtSD.** The National Team have played a critical role in building the capacity of the Pathfinders in the implementation of the SAAtSD and in new tools, methods and approaches for user engagement.
- **The focus on establishing equal and broad partnerships across the HSCP, NHS, third sector, and local community in the early set-up phase of the programme.** These partnerships have been critical to successful project delivery. They have also been important in strengthening relationships and connections between key actors in the local system. This has been identified as a key pathway towards achieving the broader systems changes needed across health and social care that contribute to better outcomes for people.
- **The third sector have played an important role in the Pathfinder.** They have contributed important insights, new connections and partnerships, and importantly, facilitated engagement with people with lived experience, especially during the pandemic.
- **Expertise in service design.** The Pathfinders that benefited from service design or research expertise within their teams were more ambitious in their project's objectives and outputs.
- **Citizen and user participation.** The Pathfinders have made strong efforts to engage citizens, people with lived experience, staff, healthcare professionals and other stakeholders. As such, the solutions are highly relevant to the local contexts, and there are early indications that that the solutions will or are being taken up.
- **The individuals involved in the Pathfinder have been critical to achieving the wider changes in behaviour and culture needed in health and care organisations.** They have been important in ensuring digital technologies, new ways of working with partners, and user participation are at the heart of how health and social care systems are transformed in ways that improve outcomes for people. Many are acting as change agents within their own teams, departments and organisations, championing both the SAAtSD, new ways of working with partners, and the role played by digital technologies to transform health and social care.
- **Senior leadership buy-in.** Where there has been buy-in from senior leadership there has been evidence of changes in practice and strategy at the organisational level. There has been emphasis on the SAAtSD and digital technology in transforming services to be more person-centred.
- **Flexibility of the national support.** The National Team have provided tailored support to each of the Pathfinders to accommodate the differing paces at which they were moving through the SAAtSD. They have also responded flexibly in response to Covid-19. This flexibility has been critical in ensuring the Pathfinders were well supported throughout the implementation of project activities, particularly, as due to their intrinsic nature as Pathfinders, they were navigating and seeking to effect change in complex settings. This required a learning and adaptive approach.
- **Embedded evaluation.** Embedding evaluation in delivery was recognised by the National Team as critical to ensuring a sustained focus on realising the desired outcomes for people.

The Pathfinders have been working in complex and constantly changing environments. They have needed to adopt an adaptive, reflective, and learning approach to meet their objectives.

Conclusion

The Pathfinders have achieved good progress in implementing a variety of solutions that have the potential to transform local systems towards prevention and self-management in the long term. There is evidence that there are changes occurring within the Pathfinder organisations themselves as well as in the wider health and social care systems of the localities and that this is due to the way the Programme was implemented through the National Team's managed programme of support and the use of the SAtSD.

The Pathfinders have shown that it is not simply a matter of 'digital choice' or of providing digital options. People need to be *able* to access digital technology. They need to be *aware* of digital options. They need to know *how* to use them in ways that best meet their needs. Finally, they need to be able to make *informed* decisions over their own health and social care. This is critical to ensuring people do not fall through the cracks, and are not digitally excluded and unable to access information and services that can enable them to make preventative and proactive choices that improve their health and wellbeing. This is where the use of the SAtSD has been valuable. It has enabled the Pathfinders to understand how services can be delivered such that they are truly person-centred.

The TLS Programme has shown that HSCPs can play a very important role and be at the vanguard of local systems transformation using digital technology. However, staff need to be equipped with the digital and service design skills to deliver services that can serve the needs of people.

Lessons

1. Lessons for the scale up and spread of the Pathfinder solutions in the Transforming Local Systems Programme

1.1 It is important that the Pathfinders maintain monitoring and evaluation processes to ensure they continue to capture data that will support future impact assessment to enable policymakers to understand not only what has worked, but how, and in what context, and to enable better understanding of how solutions may be scaled up or spread to other localities. This is particularly important as the Pathfinders are at an early stage of delivering their solutions.

1.2 The research and data sets produced by the Pathfinders can be shared with other HSCPs to enable them to implement a quicker service design process. The Pathfinders have all supported research on the key health and social care themes, that has much value in itself and can be reused.

1.3 Due to nature of the solutions, low-cost feasibility studies may be undertaken to pilot the solutions in other localities to assess their scalability and spread. The Pathfinders that have invested in developing small-scale and low-tech solutions alongside prototyping more ambitious digital solutions have been best placed to realise impacts on people within the time frame of the Programme. These solutions may be adapted in other contexts.

2. Lessons for transforming local systems through Pathfinder programmes

- 2.1 Including time to establish the Programme at the start and to support impact activities at the end is important.** This is an area that could be strengthened in future Programmes.
- 2.2 Engaging people at every stage of the Pathfinder process has been key to success.** The process has generated valuable and well-structured insights that continue to guide the implementation process and that can be used in other work. In this respect the SAtSD holds considerable value.
- 2.3 The SAtSD is an effective approach to support the transformation of local systems.** The approach allowed stakeholders and citizens across the service journey to come together and develop a shared understanding of the challenge and system, and a shared vision for change.
- 2.4 Investment in partnership working, and engaging the third sector as equal partners, is invaluable.** The broad partnerships formed have ensured that the findings from the process are robust and that the system is ready for the solution.
- 2.5 Investing in the capability and skills of the Pathfinder teams, including ensuring they have the right tools and resources, has been key to realising success.** This was a new way of working for many people, and the investment was vital to enable team members to apply the SAtSD effectively to transform their local system.
- 2.6 Protected time and resource to do this work is essential.** Funder support and flexibility, embedded evaluation, and opportunities to reflect on progress, adapt and respond in an agile and thoughtful way to challenges were critical to managing change in a complex system.
- 2.7 Achieving complex whole systems change to improve the lives, health and wellbeing of people has required HSCPs to think and work differently. It has meant managing uncertainty and a commitment to a person-centred approach.** It requires capacity and capability in applying whole systems friendly approaches such as the SAtSD, integrated services, multi-disciplinary teams, and perhaps mostly importantly senior leadership buy-in.
- 2.8 The investment in a national model of support has been effective in supporting Pathfinders to implement local systems transformation and was highly valued by Pathfinders.** An adapted approach may be useful for future programmes building on learning from this evaluation. Such as for example, ensuring tenders include a focus on some degree of SAtSD capacity and capability, evaluation and impact, multidisciplinary teams, and partnerships, as well as senior leadership buy-in up-front before Pathfinders are commissioned. Sharing lessons from the TLS Pathfinders, and widely disseminating SAtSD resources and guidance may ensure that future Pathfinders are positioned to implement local transformation systems with a reduced need for significant national support.

3. Lessons for transforming local systems towards prevention and self-management using digital technology

- 3.1 Digital exclusion hinders progress towards a cultural shift in the use of digital technology. Digital exclusion is not only due to a lack of access to devices and technology but also due to lack of awareness and understanding of the supports and services available.** There is a need to drive awareness, support understanding, and create opportunities for digital use to build the capacity and capability of people to ensure they are empowered to navigate their own health and social care needs.
- 3.2 The transition to digital is transforming health and social care. However, a person-centred approach which empowers the citizen is needed to ensure that people are not left behind.** The SAAtSD has been a useful mechanism to apply a whole systems lens to understanding the problem from the perspective of people (citizens, healthcare professionals and carers). It has allowed the identification of key leverage points to influence the system: identifying and establishing navigators and facilitators in the system to mediate the space between citizens and digital technology.
- 3.3 For the empowered citizen to transition to become the ‘digital citizen’ of our digital future, strong foundations are needed.** National direction and support are needed to ensure people can access integrated services and have control over their data so they can take preventative and proactive action that supports their health and wellbeing.
- 3.4 HSCPs can play a role in local systems transformation by supporting ‘digital translation’ for local people and using person-centred and whole systems approaches, such as the SAAtSD, to design services that meet the needs of people.** But there remains a significant skills gap in the health and care sector workforce. Staff need to be equipped with the digital and service design skills to deliver services that can serve the needs of people.