

# Service Innovation in Health and Social Care Essay (Critical Writing)

This paper is dedicated to the learning journey of CareCom and mid-county adult social care in their implementation of innovation to improve the delivery of health and social services.

The case of CareCom and mid-county adult social care demonstrates the complexity of the innovation process. Even if its necessity is obvious and it may be initiated and guided through several stages, there may be barriers that will hinder its further development (*Implementation barriers*, 2014; Goffin and Mitchell, 2017). In the case of CareCom and its partners, the Frailty Project was initiated by NHS England based on the necessity of service optimization and changes were successfully elaborated through the cooperation of leading specialists through knowledge distribution (Harris and Tucker, no date). However, subsequently, the project was decelerated by the NHS commissioners' shifted focus. Nevertheless, CareCom and mid-county adult social care undertook all efforts and created a new joint venture according to previously shared knowledge, facilities' experience, and patients' vulnerability to health complications that may be caused by uncoordinated health and social care delivery. In addition, the facilities' learning journey indicates that for a successful innovation process, it is essential to analyze all available variants to combine and implement the best practices for appropriate results.

A common thread that runs through each of the four phases of CareCom's change process is cooperation based on knowledge sharing which may be regarded as an intrinsic element of any successful innovation. The first stage established the necessity for change that could be implemented through facilities' interaction. The second phase established front-line teams for the development of the project through learning and knowledge sharing. The third stage emphasized the necessity of further collaboration, and the fourth stage was characterized by the union of facilities for the coordination of health and social services through organizational learning and combined knowledge sharing.

In the first phase, the necessity of knowledge sharing by front-line staff was defined by commissioners. The second phase was characterized by the formation of knowledge communities and knowledge-sharing events for collaborative exploration (Harris and Tucker, no date). The third phase demonstrated the significance of the collaboration and knowledge sharing between previously non-connected healthcare providers. Finally, the fourth stage may be regarded as the project's freedom of knowledge sharing when facilities communicate with each other and share formalized knowledge for the improvement of existing practices. First of all, knowledge sharing allows one to assess the strengths, weaknesses, and barriers of a project (Hayes, 2018; Clegg, Harris, and Hopfl, 2011). Moreover, knowledge sharing is important for the development of the best strategies for the achievement of corporate goals (Cooke *et al.*, 2016). In addition, knowledge sharing is essential for the creation of the structure and the optimization of working processes (Cudney *et al.*, 2015; Dodgson, Gann, and Satter, 2008; Gregor *et al.*, 2016). In the present day, the majority of companies perceive the necessity of knowledge management, and one of them is Xerox (Heath, 2020; DNA Web Team, 2018; Doyle, 2016). It had poor

knowledge management, and none of the employees' ideas were considered. After losing its talented engineers, the company integrated a platform for knowledge sharing for its workers.

### **Reference List**

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