



Nursing Innovation Fund Consultation Support

Consolidated Final Report

August 2017

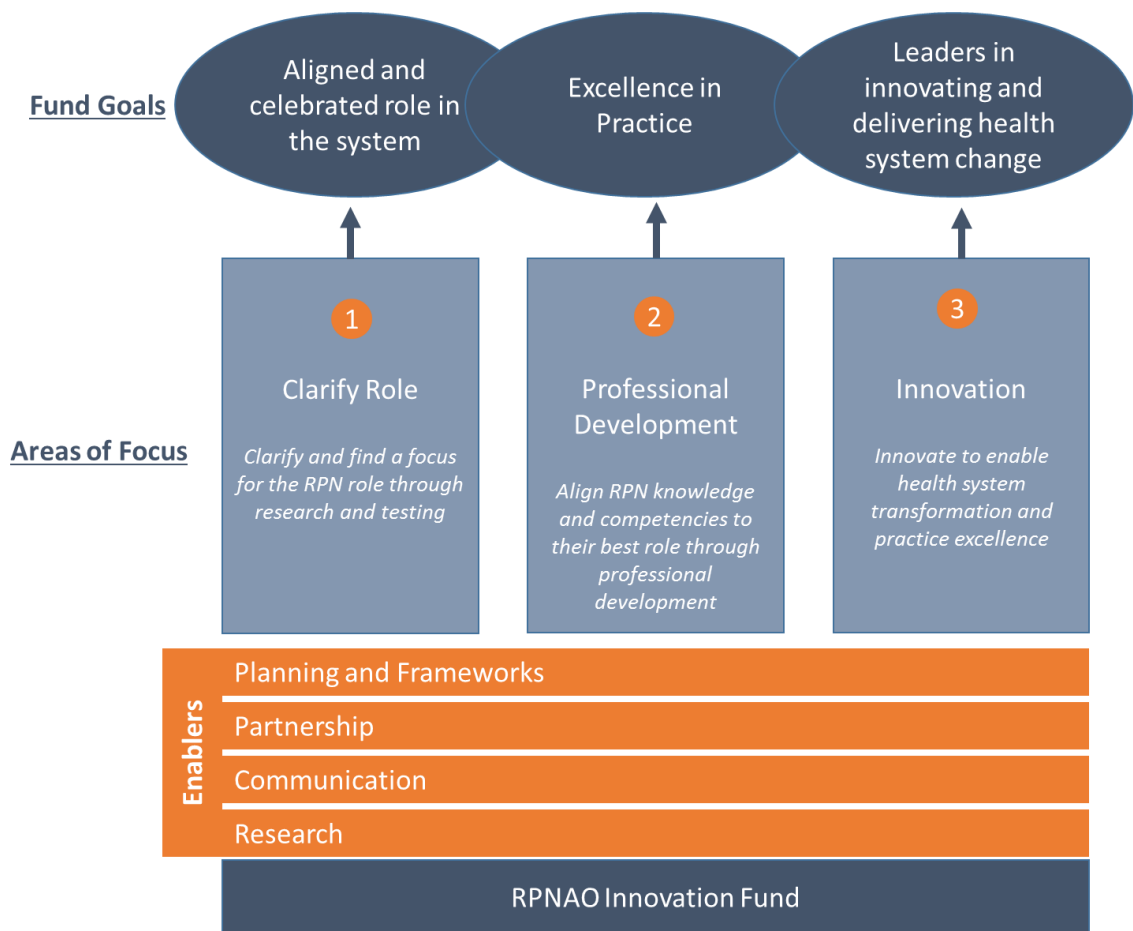
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1. Executive Summary

RPNAO recently received funds from the government that will be used to develop and support RPNs in meeting the emerging needs of patients and the health care system. In order to prudently use these funds, termed the Innovation Fund, RPNAO consulted broadly with RPNs, other health professionals, and thought leaders to understand how these funds can best be used to create real and meaningful change for RPNs and the clients they serve.

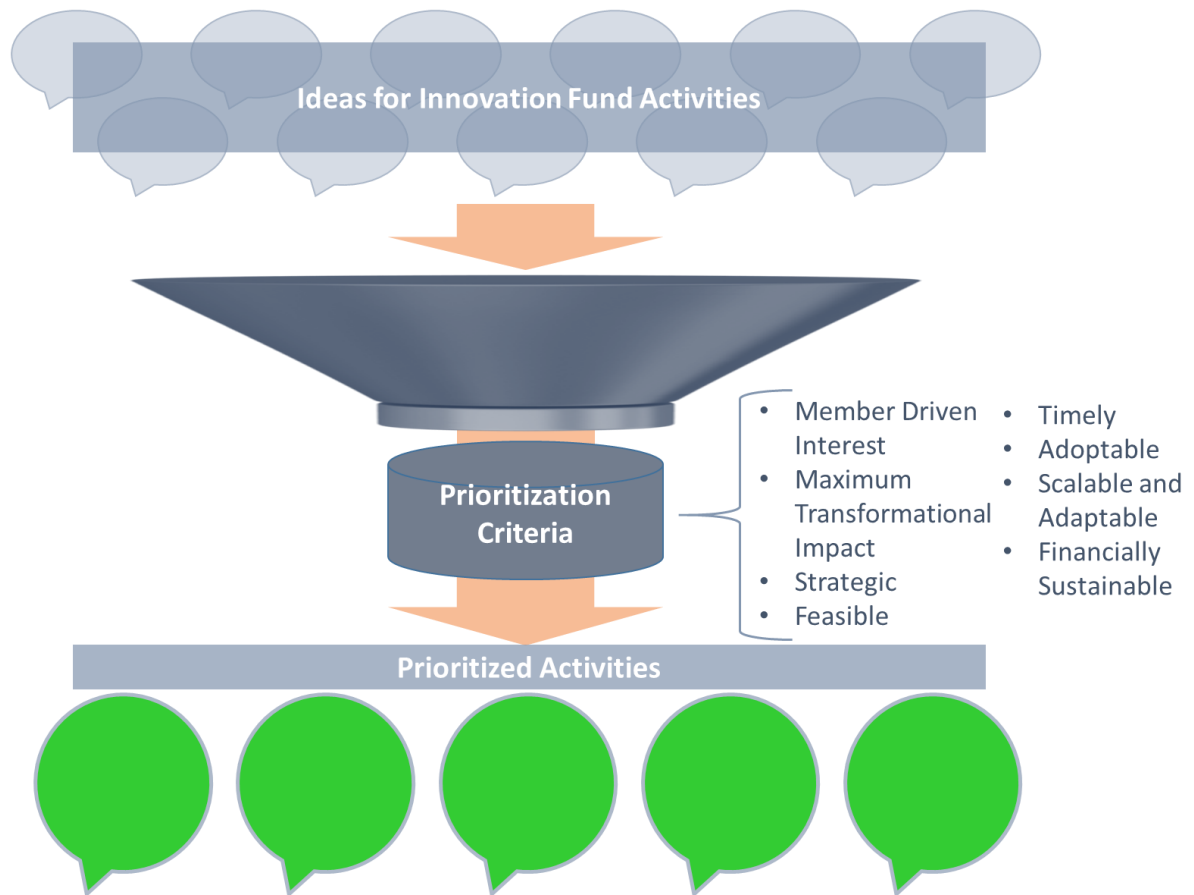
Based on the outputs from these consultations, the Innovation Fund is envisioned to have a three-part focus in order to achieve three goals for RPNs.



Through consolidating and synthesizing the consultation outputs, 5 observations were made by the OPTIMUS | SBR team in relation to how the fund should be set-up:

Observational Analysis	Implication
<p>1: Misconceptions of RPN value must be addressed to enable transformation</p>	<p>Change management will be key to shifting RPNs to a mindset of innovation. To enable RPNs to focus on innovative transformation, progress must be made on activities that help the broader community see and acknowledge the value that the RPN role brings. This means that:</p> <ul style="list-style-type: none"> • A portion of the Innovation Fund may best be used to resolve the perceived RPN role clarity issue • RPNs may need to see and feel the effects of RPNAO working to provide role clarity before they are ready to take on the challenge of being seen as innovators. RPNAO will need to communicate this progress to RPNs • Change management and a culture shift is needed to shift RPNs thinking towards innovation
<p>2: Leadership is needed to create a vision for transformative innovation and RPN role optimization</p>	<p>The Innovation Fund may need to prioritize and fund activities that RPNs do not see as high priority. To avoid disillusionment and create buy-in, the fund will need to create a vision for how different priorities are actually in RPNs interests and will achieve their goals. This vision needs to be clearly communicated, and will allow the Innovation Fund to maintain a focus on system transformation for RPN role optimization while continuing to involve RPNs.</p>
<p>3: Specialization is an opportunity to clarify, differentiate, and demonstrate value in the RPN role</p>	<p>The Innovation Fund should consider Specialty Certification as a strategic way to clarify, differentiate, and optimize the RPN role.</p>
<p>4: The time to act is now</p>	<p>The Innovation Fund will need to focus on action and trialing solutions. RPNs should be involved in this work, and the Innovation Fund has an opportunity to partner with RPNs and use their efforts to further innovation. While the value of the RPN role may need to be demonstrated through research in the long-run, training of RPNs in areas where their value is most likely to be recognized should start soon.</p>
<p>5: RPNs may have unused innovation potential</p>	<p>Spending at least some Innovation Fund monies on providing RPNs with supports for innovation (i.e. a vision to spur further ideas, an innovation process, and idea sharing) may activate the potential for RPNs to develop innovative ideas and promote the idea of RPNs as innovative thinkers and doers.</p>

Many ideas were suggested for the activities that will best support each Area of Focus. These ideas require prioritization in order to properly steward the limited funds available. The proposed prioritization criteria can be used to filter these ideas and identify priorities for the fund, as illustrated in the following diagram.



As next steps, the Innovation Fund will need to validate the proposed prioritization criteria and adjust as necessary, and then using the tools provided, prioritize the ideas for funding.

2. Introduction

RPNAO recently received funds from the government that will be used to develop and support RPNs in meeting the emerging needs of patients and the health care system. In order to prudently use these funds, termed the Innovation Fund, RPNAO consulted broadly with RPNs, other health professionals, and thought leaders to understand how these funds can best be used to create real and meaningful change for RPNs and the clients they serve.

OPTIMUS | SBR was asked to assist this effort by:

- summarizing themes identified in Mind Maps and interviews;
- designing, administering, and analyzing a survey related to use of the Innovation Fund;
- performing research on ways to support continuous innovation; and
- develop a presentation to communicate the findings of the stakeholder consultations

This document is a consolidated report of the findings from Mind Maps, interviews, and a survey, as well as research performed on supporting continuous innovation. A presentation communicating the findings and key messages will be developed at a later date. This document provides a proposed direction for the Innovation Fund based on the findings and analysis. The full survey analysis, Mind Map themes, and innovation research report can be found in the appendix.

3. Methodology

Consultations were held across Ontario to gather ideas from RPNs and other stakeholders through the development of Mind Maps and a survey on what the Innovation Fund can best be directed towards. Significant effort was expended to be present and hear the voices of RPNs from across the province. Between January 11, 2017 and May 31, 2017, the Tour made 24 stops across Ontario engaging a total of 188 RPNs and 125 other stakeholders from Dryden, to Windsor, to Ottawa, to Toronto, and in between. Seventeen (17) interviews were also held with thought leaders from across the province to hear their advice on developing the Innovation Fund.

To deepen and validate an understanding of the perspectives that RPNs and other stakeholders shared, a survey was developed, administered, and analyzed. Over 300 people responded to the survey, which was open during the weeks of April 17th, 2017 to May 29th, 2017.

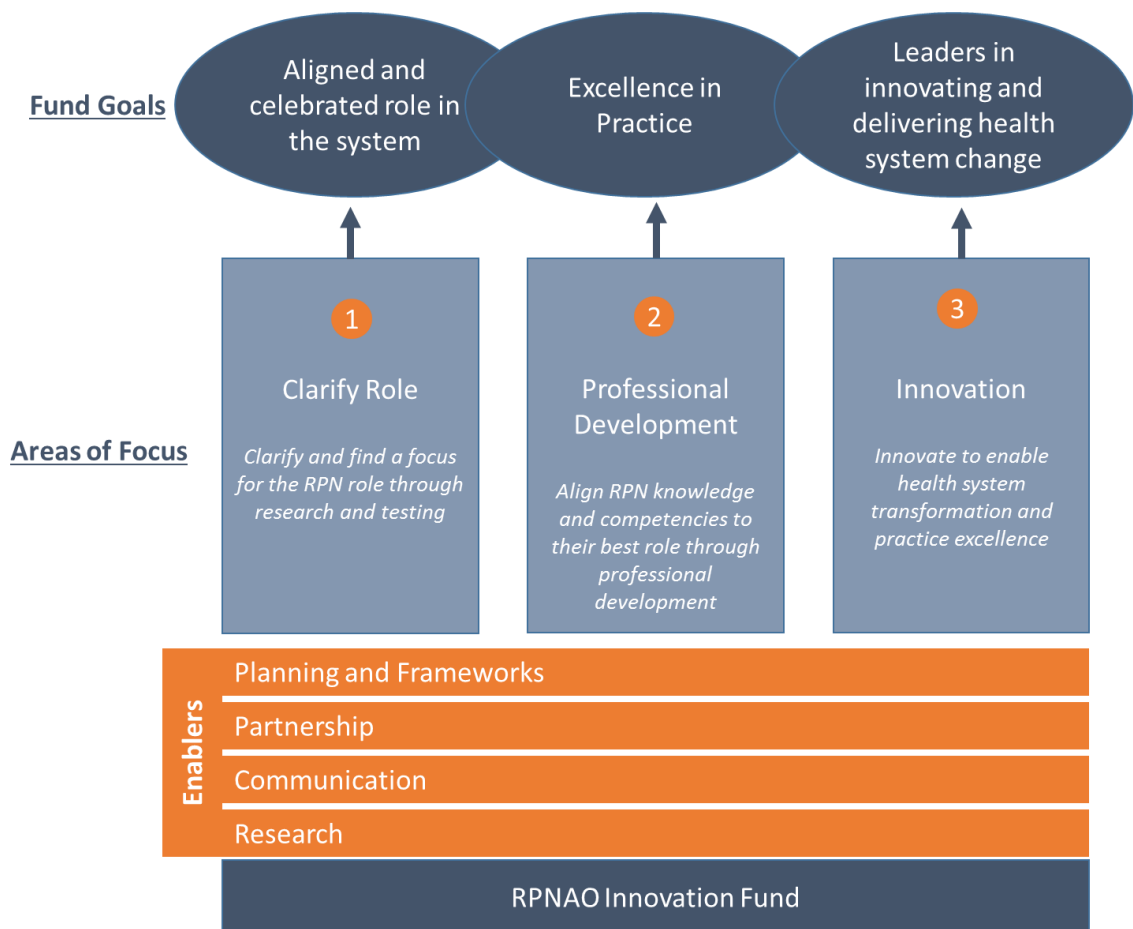
Research was also performed through a scan of publically-available electronic information to identify ways the Innovation Fund can support continuous innovation.

Findings were analyzed and synthesized to support development of the Innovation Fund. For the full methodology, see the Appendix.

4. What We Heard

Through inputs of the Mind Maps, interviews, and the survey, a picture emerged of what goals RPNs want the Innovation Fund to accomplish. This provides the Innovation Fund with **clarity of purpose** by **creating three goals for the fund**. These goals correspond with three **Areas of Focus** that the Innovation Fund should concentrate on.

The following diagram illustrates this triple focus in relation to the fund’s goals, as well as enablers for their achievement.



The enablers will support all three areas of focus:

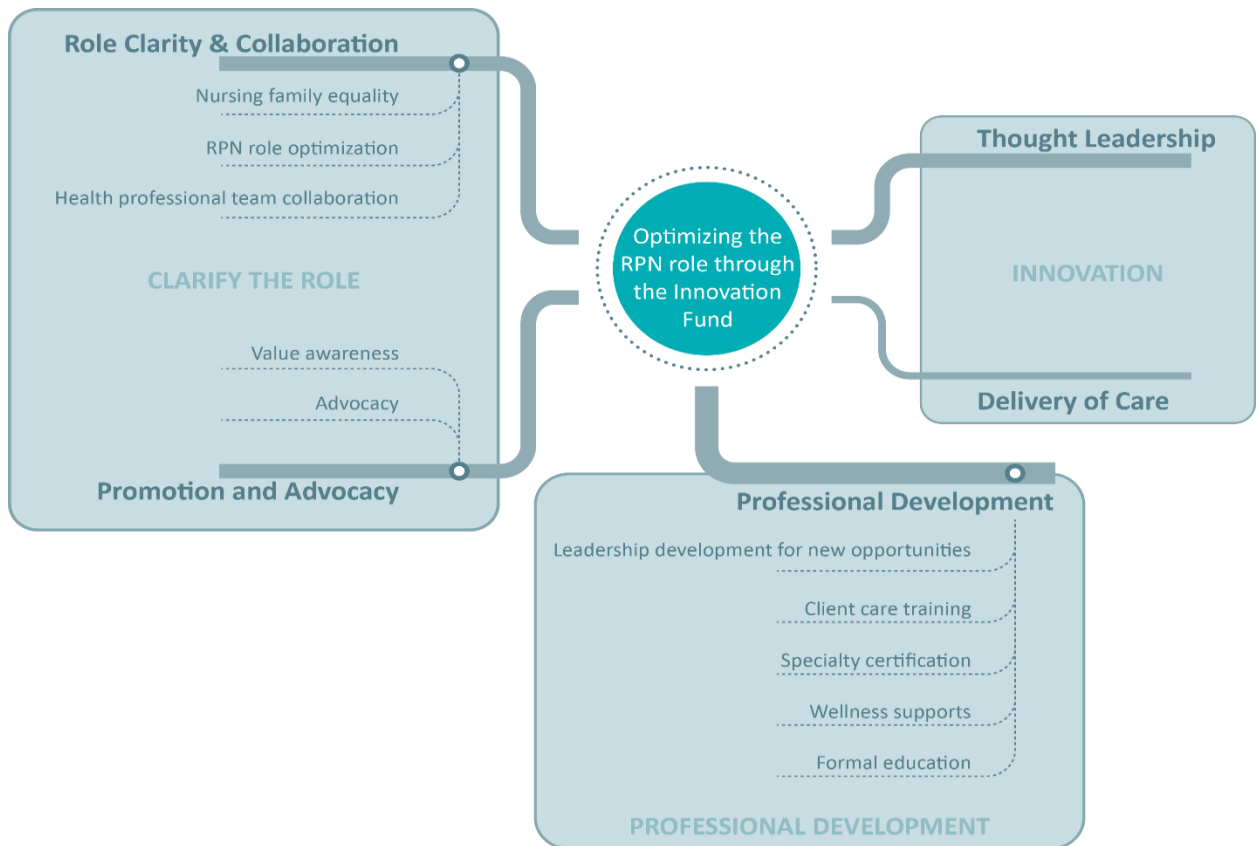
- **Planning and Frameworks:** Activities will need to be properly planned with corresponding frameworks to provide guidance as necessary. Potential investments will

need to be selected to ensure funds are put to good use and maintained or depleted appropriately. Evaluation of the activities will demonstrate impact.

- **Partnership:** The impact of the Innovation Fund will be greater if activities are done in partnership. Partners can break down barriers to change, communicate key messages, and provide valuable ideas. Partners can also support initiative funding, and scale up and augment the system impact of funded initiatives.
- **Communication:** Communication will be needed across activities to ensure stakeholders, RPNs, and the public are engaged and informed. The Innovation Fund can be branded and seen as a distinct offering of RPNAO
- **Research:** Primary and jurisdictional research on the outcomes of RPN care, models of care, best practices, and how to spur innovation

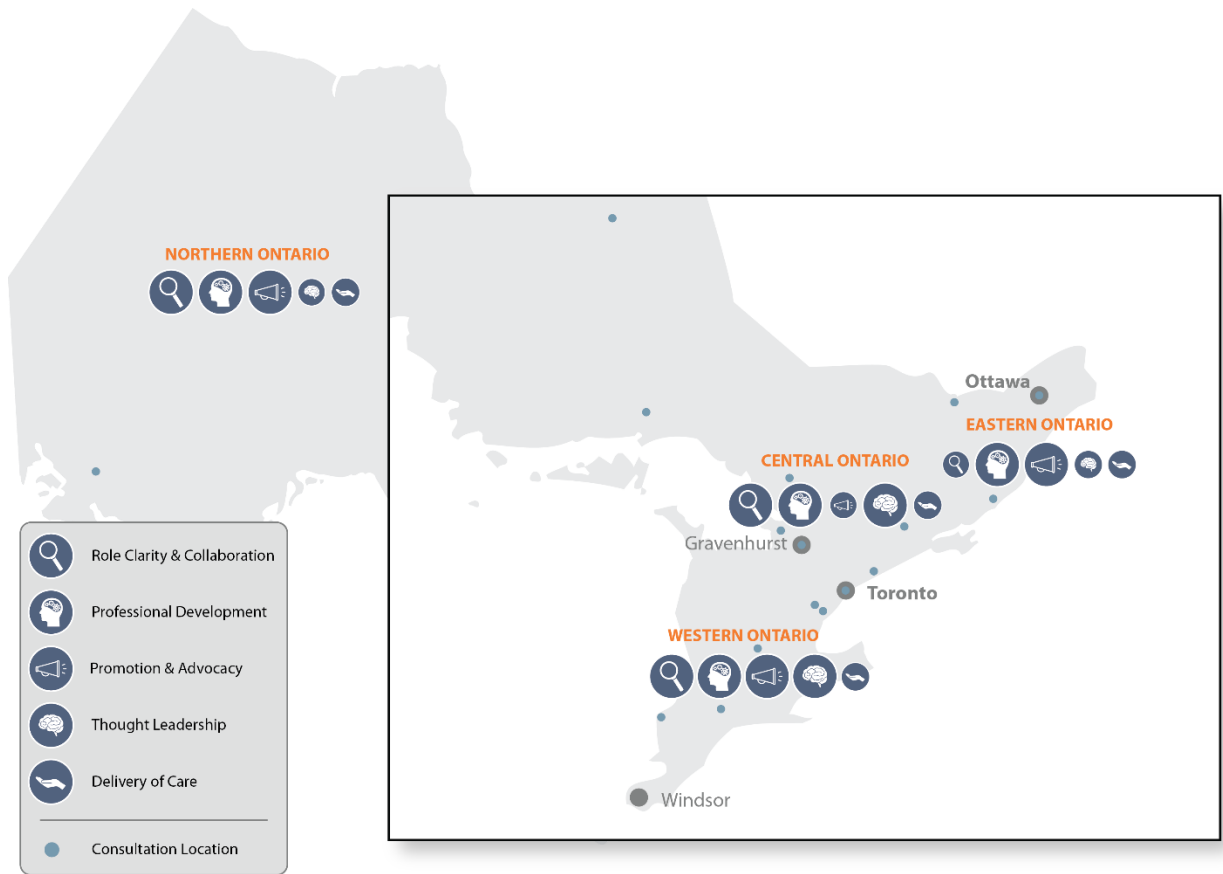
4.1 Mind Map Consultations Summary

Extensive effort was made to engage RPNs and other stakeholders in creating the Mind Maps, which provided a significant amount of data with a wide range of ideas. Between January 11 and May 31, the Tour made 24 stops across Ontario engaging a total of 188 RPNs and 125 other stakeholders. The following diagram is a summary Mind Map of the themes seen. The 5 themes were then grouped into the 3 Areas of Focus (Clarify the Role; Professional Development; Innovation - listed above) for the Innovation Fund and which are described later in this report section.



While many ideas were written on the Mind Maps, some were seen with more frequency than others. While the above diagram is a summary Mind Map of the themed ideas, it also illustrates the frequency with which these ideas were seen. The line thickness from the center of the diagram indicates the relative frequency with which ideas were seen, with thicker lines representing greater frequency.

Mind Map responses were also analyzed for geographical differences. The following diagram of Ontario represents how strongly the 5 themes were represented in different geographical regions. The larger icon represents stronger representation while the smaller icon represents less strong representation.



4.2 Areas of Focus

The following descriptions more fully describe what was heard in relation to each of the 3 Areas of Focus from the Mind Mapping sessions, and provides snapshots of Mind Map components as exemplars of what was communicated by RPNs. The Mind Map, survey and thought leader interview findings have been incorporated into the Observational Analysis section of this report, and detailed summaries can be found in the appendix.

4.2.1 Area of Focus: Clarify the Role

- **Nursing Family Equality:** RPNs want to be treated equally and respected within the family of nursing.
- **Value Awareness:** The public, government, and more importantly health professionals need to be aware of the value RPNs bring to their clients. Health leaders

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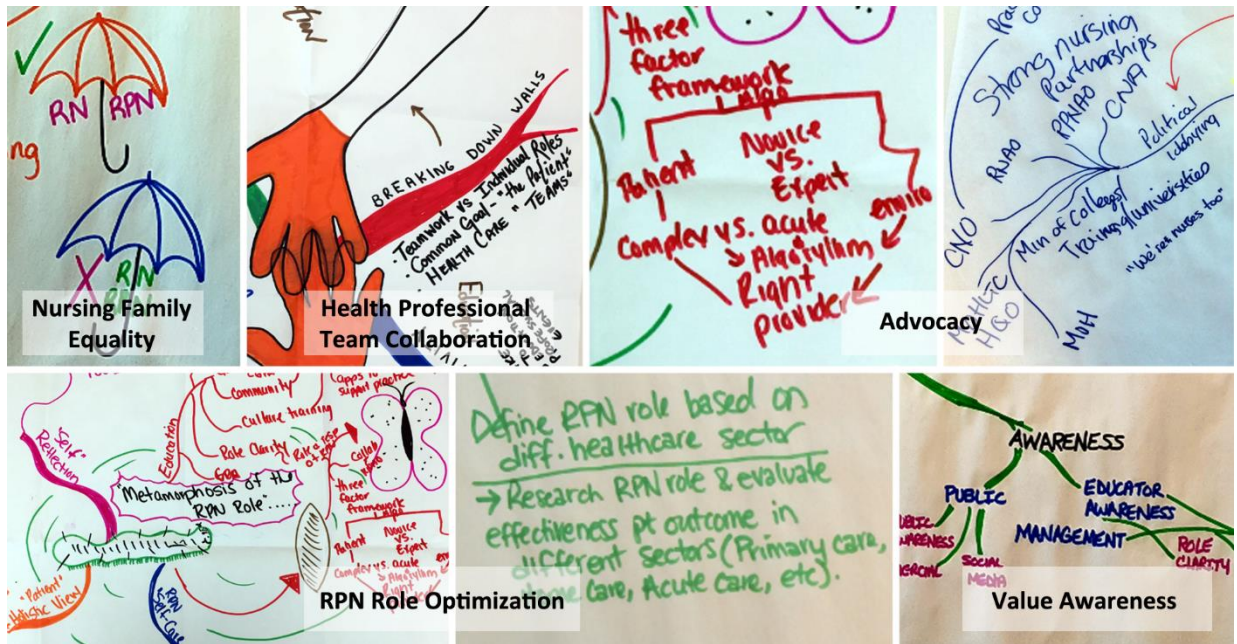
Clarify Role

Clarify and find a focus for the RPN role through research and testing

need to be aware of the value that RPNs provide. RPNs and clients see this value, which needs to be communicated more broadly. The role of what RPNs do within the health professional team needs to be communicated.

- **Advocacy:** While communication about RPN value is needed, RPNs want stronger action to advocate for their value and an increasing scope of practice within a divisive environment. Political advocacy, media campaigns, and a strong voice can support this through collaboration with other associations, unions, and different political groups. Their value needs to be actively celebrated, externally to the public and other health professionals, but also to RPNs themselves in order to increase confidence, encouragement, and empowerment. The conversation needs to be changed on what categorizations of clients RPNs should be caring for, as RPNs already effectively manage complexity within the healthcare team.
- **RPN Role Optimization:** While RPNs and clients see the value of the RPN role, it has the opportunity go through a period of metamorphosis, optimizing it to where RPNs can have the greatest impact on client care. This can be enabled by research that shows the impact of RPN care on client outcomes. RPNs see their role as having high potential for optimization across different sectors, areas of practice, and roles (e.g. health coaching, navigation).
- **Health Professional Team Collaboration:** While RPNs do not feel fairly respected in the nursing family, they are extending a hand to collaborate. They want to play their optimal role within the health professional team, working together for the benefit of clients. They also want to collaborate more with each other to network and share information.

The following pictures present examples of the ideas commonly illustrated on the Mind Maps.



4.2.2 Area of Focus: Professional Development

There is a strong desire for additional professional development in a number of areas.

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Professional Development

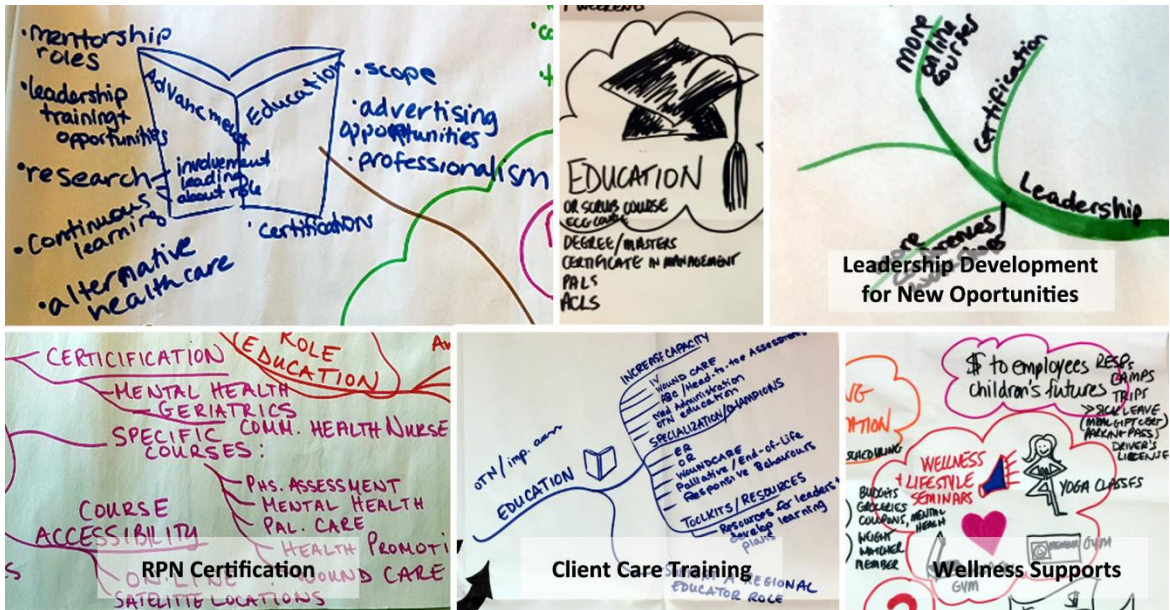
Align RPN knowledge and competencies to their best role through professional development

- Leadership development for new opportunities:** RPNs see their leadership potential and want to develop the related skills. They want opportunity to demonstrate leadership, either informally within their workplaces and/or formally in leadership roles (e.g. manager, teacher) in the healthcare system. Leadership training is seen to enable this, and examples of suggested training topics include: conflict management, critical thinking, change management, professional courage, data and statistics, staff coaching, and horizontal violence prevention. Mentorship may also support leadership development and leadership certification was also mentioned several times.
- Client Care Training:** RPNs want to provide the best care to their clients. To build on their required education, they want additional professional development related to their point-of-care duties. RPNs want to better understand

clinical leading practices and how to use technology effectively. Channels for professional development could include job shadowing, fellowships, simulation labs, networking, and online modules. Examples of training topics include: wound care, medication management, aging population, chronic disease, palliative care, oncology, and family counselling. Some of these areas of training, may also be areas where RPNs see opportunity to specialize and gain certification.

- **Specialty Certification:** Specialty certification is strongly desired for advanced practice and the range of suggested topics is broad. These topics include, but are not limited to, mental health, addiction, gerontology, and leadership. There was desire to link the specialty certification topic(s) to the areas where the RPN role is seen to be best optimized.
- **Wellness Supports:** Supports to promote RPN wellness and self-care was also identified, but to a lesser extent. This includes wellness seminars, stress management classes, vacation giveaways, and discounts on gym memberships.
- **Formal Education:** Changes to improve formal foundational RPN education was also mentioned to a lesser extent. This included redesigning curriculum to better describe scope of practice and integrate RPN/RN training, as well as funding more grants and bursaries.

The following pictures present examples of the ideas commonly illustrated on the Mind Maps.



4.2.3 Area of Focus: Innovation

While putting effort into expanding the contribution of RPNs may in some senses be seen as innovation (i.e. role clarity and professional development), ideas for transformative innovation to support client care was seen to a lesser extent and related to service delivery and thought leadership.

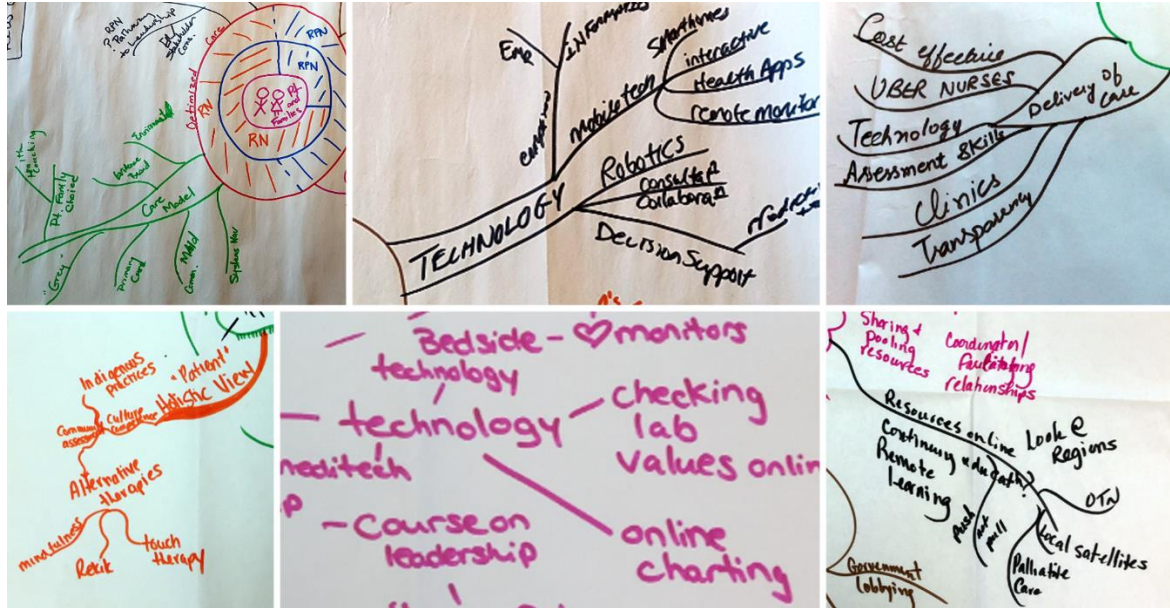
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Innovation

Innovate to enable health system transformation and practice excellence

- **Innovation in Service Delivery:** RPNs suggested several ways in which innovation can support better client care. This could include changing models of care, using new caring techniques (e.g. Reiki), or better implementing the use of technology in care (e.g. virtual care, mobile nursing). While not necessarily innovative, RPNs also suggested the Innovation Fund be used for process improvement (i.e. shift scheduling, discharge process, charting) and for purchasing additional equipment (i.e. blood pressure cuffs, new diagnostic testing equipment, wound care supplies).
- **Thought Leadership:** There was some desire for the Innovation Fund to support thought leadership. This could include writing white papers or sharing other leading ideas, and/or it could include bringing RPNs together to share their ideas.

The following pictures present examples of the ideas illustrated on the Mind Maps in relation to service delivery.



5. Observational Analysis

Following the theming and summary of the Mind Map, interview, and survey data, the overall data set was reviewed and observations made by the OPTIMUS | SBR team that may assist in providing direction for the Innovation Fund. The following are the result of this observational analysis, and include the observations that:

- Misconceptions of RPN value must be addressed to enable transformation
- Leadership is needed to create a vision for transformative innovation and RPN role optimization
- Specialization is an opportunity to clarify, differentiate, and demonstrate value in the RPN role
- The time to act is now
- RPNs may have unused innovation potential

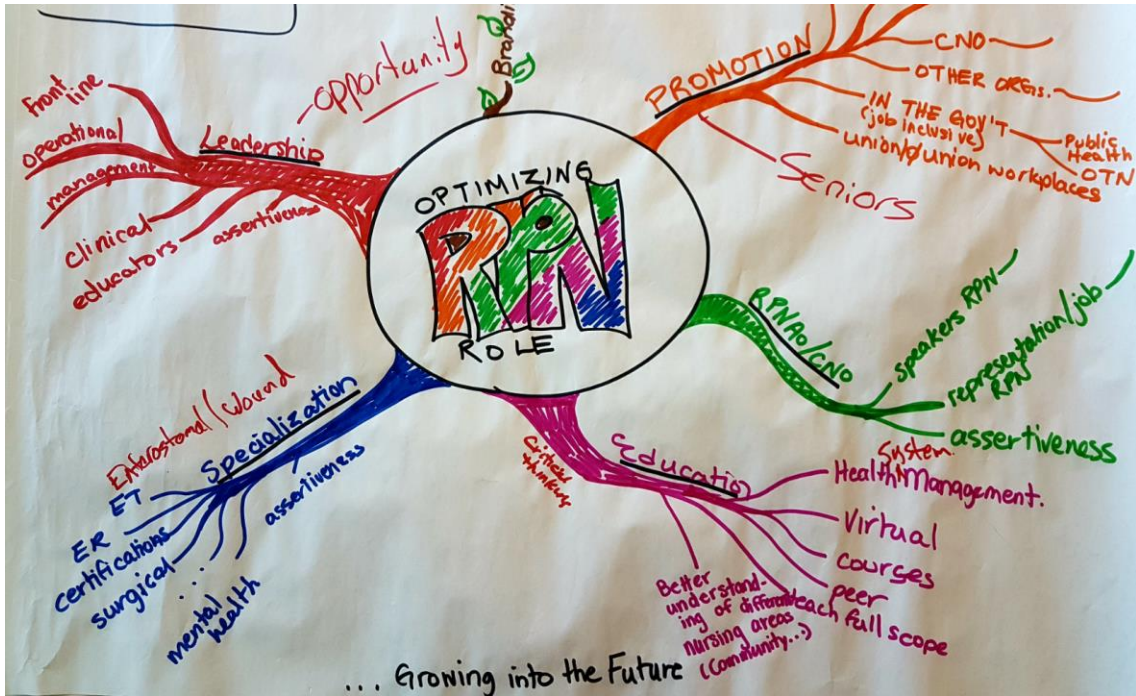
5.1 Misconceptions of RPN value must be addressed to enable transformation

We heard that RPNs want to be acknowledged for the value that they bring to clients, and state they do not fully receive this acknowledgement from their healthcare colleagues or the public. This may be the underlying motivator behind why survey respondents think the Innovation Fund should prioritize role clarity and professional development work. Clarifying the RPN role may be seen as a way help others understand the role’s value, while professional development may be seen as a way to increase the value that RPNs already bring their clients. In either case, RPNs are focused more on these ideas than transformative health system innovation.

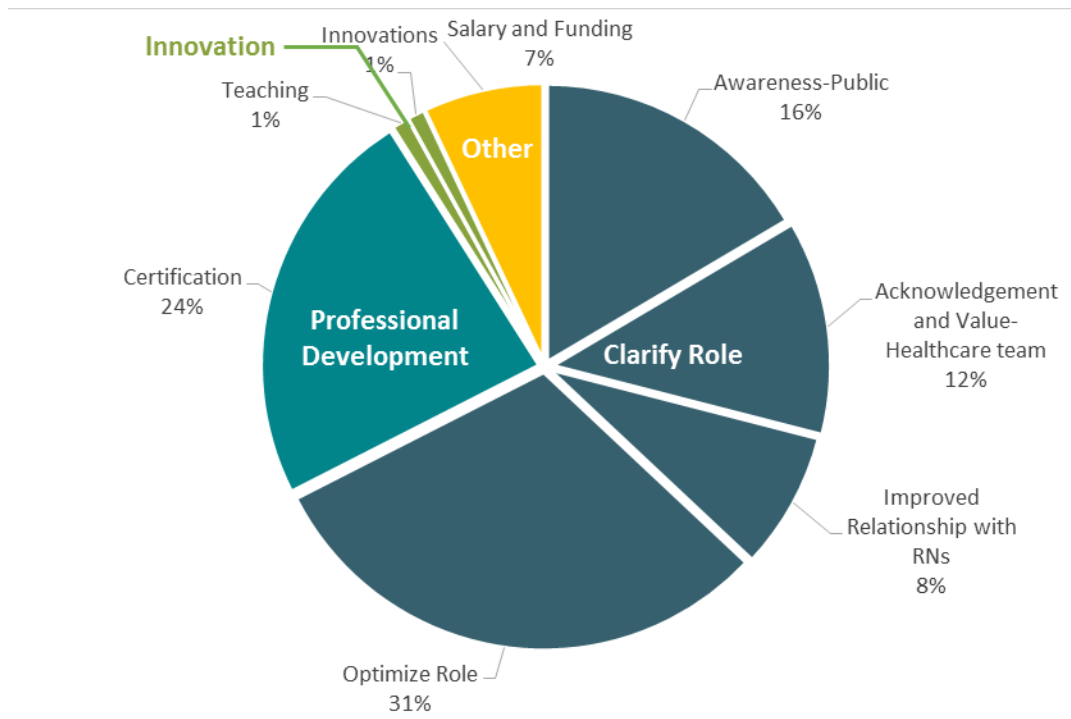
The following is one snapshot from the Mind Mapping session that illustrates how RPNs do not feel properly valued in the health professional team:



In the Mind Mapping sessions, RPNs were most often focused on ideas around role clarity and professional development. The example Mind Map below shows many of the common ideas that were illustrated. In this Mind Map, the focus is on learning more, doing more, and telling others more about the RPN role, however, ideas related to innovation outside of changing the RPN role are not seen as strongly.



In the survey question, “Imagine the Future: It is the year 2027, what has the Innovation Fund accomplished? Please describe in 1-3 sentences.”, RPNs also focused on clarifying the role an professional development. The open text feedback is themed in the following pie chart.



(Note: The Optimize Role category includes descriptors such as ‘optimize’, ‘articulate’ and ‘define’ the role of RPN, ‘role clarity’, ‘role expansion’, ‘have RPNs work at full scope’. The number of respondents for this question was 140)

Overall, few ideas were seen that focused on developing new ideas to improve how care is provided to clients.

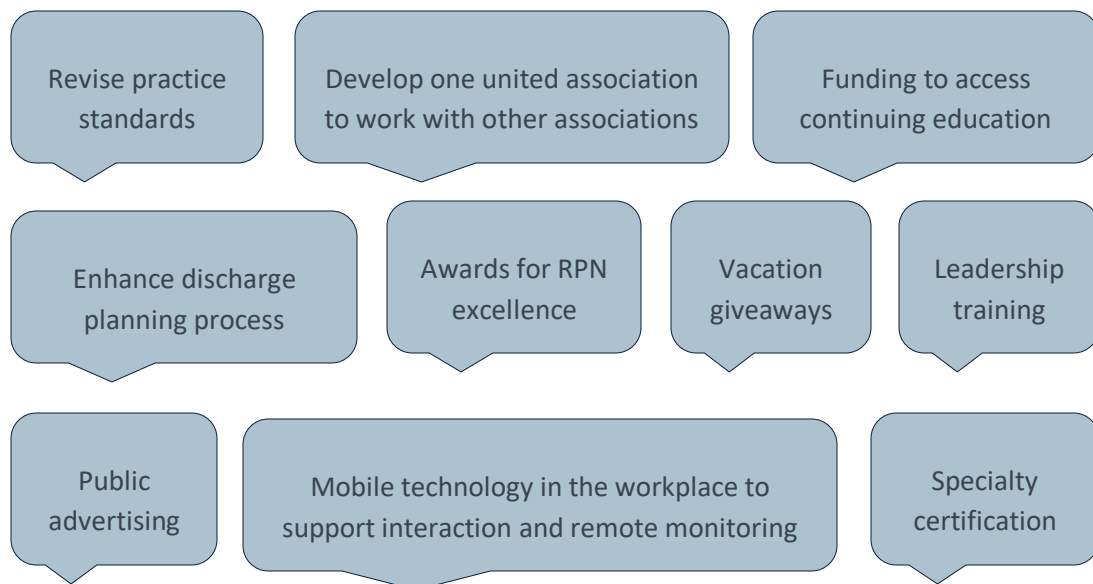
Implications: Change management will be key to shifting RPNs to a mindset of innovation. To enable RPNs to focus on innovative transformation, progress must be made on activities that help the broader community see and acknowledge the value that the RPN role brings. This means that:

- A portion of the Innovation Fund may best be used to resolve the perceived RPN role clarity issue
- RPNs may need to see and feel the effects of RPNAO working to provide role clarity before they are ready to take on the challenge of being seen as innovators. RPNAO will need to communicate this progress to RPNs
- Change management and a culture shift is needed to shift RPNs thinking towards innovation

5.2 Leadership is needed to create a vision for transformative innovation and RPN role optimization

RPNs appear focused on prioritizing traditional activities of incremental improvement, while desiring transformative change.

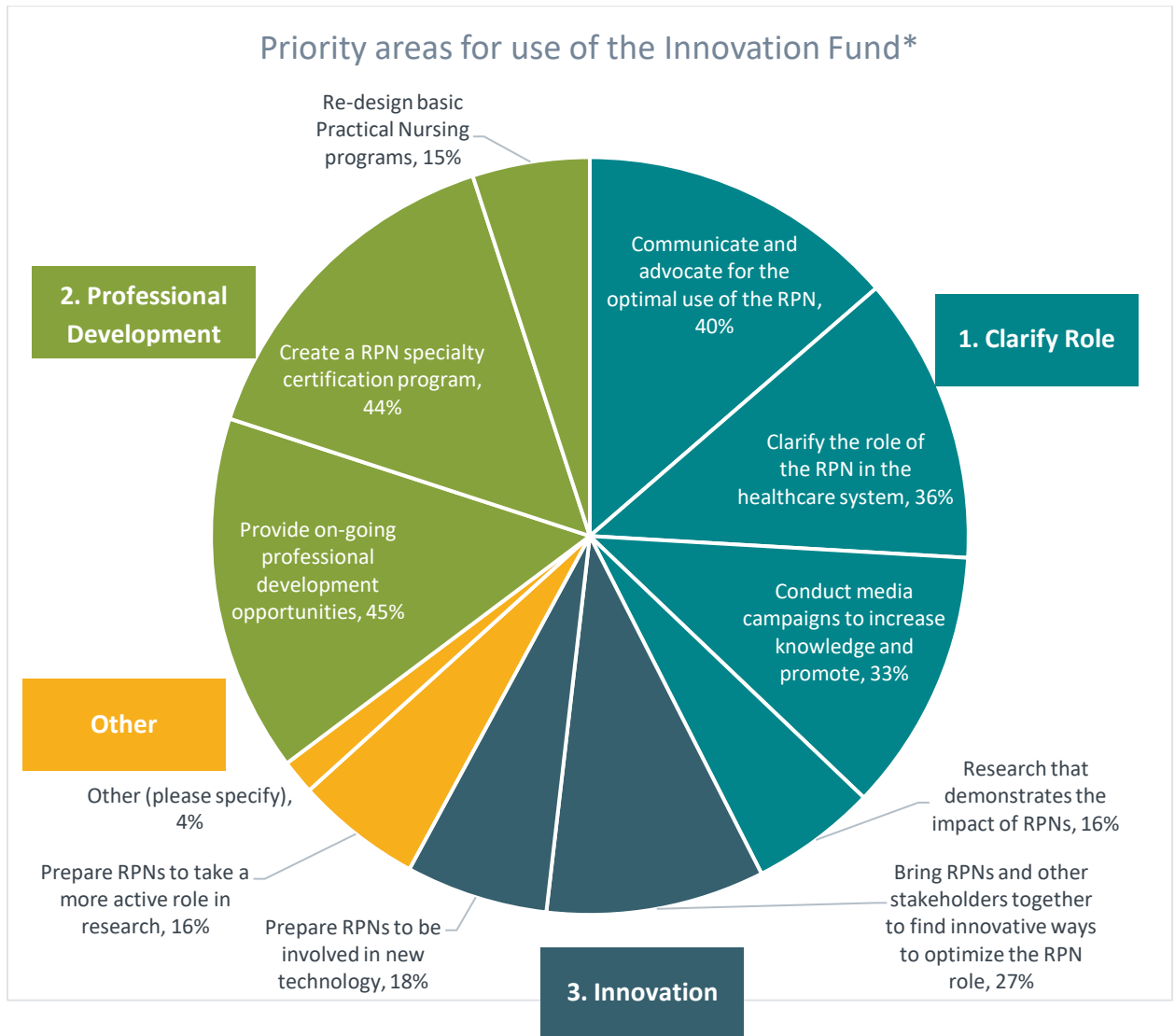
On the Mind Maps, RPNs listed a broad range of ideas, and while there was a thematic focus on role clarity and professional development, differences in the vision for the Innovation Fund were seen. The following thought bubbles are meant to illustrate the range of ideas (but not frequency) that were discussed during the Mind Mapping sessions.



These ideas all have value, yet the range of ideas shows that work is needed to create a common vision for transformative innovation.

Through the Innovation Fund survey, 10 ideas relating to the Innovation Fund's 3 Areas of Focus (Role Clarity, Professional Development, and Innovation) were presented to identify which would be seen as priorities for the fund. Responses are similar to what survey respondents said they want to accomplish, and as seen in the following graph, there is significant focus on continuing professional development activities or clarifying the RPN role both which are activities that have been underway for several years. This is in contrast to prioritizing innovative activities that might show the value of RPN care or improve role clarity:

- Only 16% of survey respondents saw research to demonstrate the impact of RPNs as a top 3 priority
- Only ¼ of respondents saw collaborating with other health professionals to clarify the RPN role as a top 3 priority



*Note: Each survey respondent was asked to select three top priorities. Percentages represent the percentage of survey respondents that selected the option as one of their 3 choices. The pie graph represents all responses and so total percentages equal approximately 300%

Self-admittedly, 90% of survey respondents stated that it would be helpful for the Innovation Fund to illustrate why innovation is important. RPNs do not currently see a strong link between innovation and the achievement of their goals.

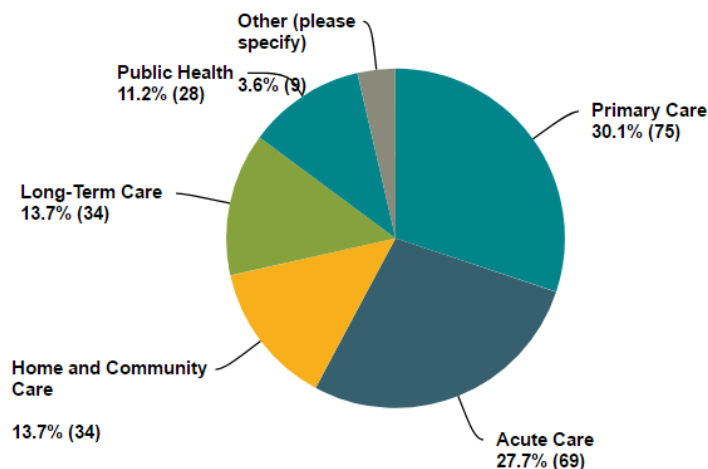
Implications: The Innovation Fund will need to prioritize and fund activities that RPNs do not see as high priority. To avoid disillusionment and create buy-in, the fund will need to create a vision for how different priorities are actually in RPNs interests and will achieve their goals. This vision

needs to be clearly communicated, and will allow the Innovation Fund to maintain a focus on system transformation for RPN role optimization while continuing to involve RPNs.

5.3 Specialization is an opportunity to clarify, differentiate, and demonstrate value in the RPN role

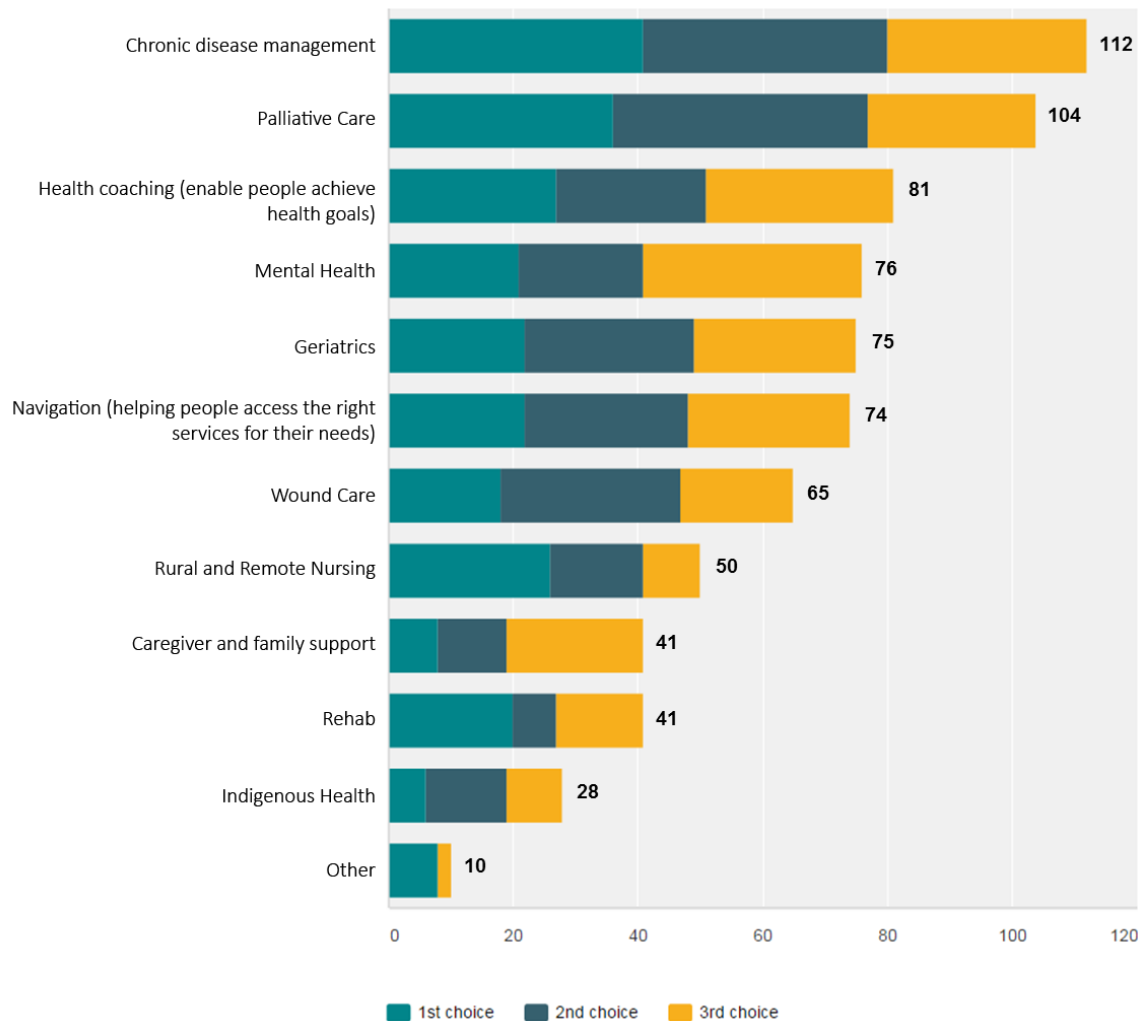
RPNs want to optimize their role across the continuum of care, and see opportunity to specialize. While there are different ideas as to which areas the role can best be optimized, top sectors and top practice areas can be seen in the following graphs.

Survey Question 8: *“If we think about the continuum of care and health system of the future, what is the sector where the RPN role can be optimized to have the greatest impact on client care and outcomes? Please select your top choice.”*



Primary Care and Acute Care are seen as top sectors from the survey findings. In the Mind Maps, participants listed comments related the following sectors, often in the context of topics for further training, including: Long Term Care, Home and Community Care, Acute Care, Primary Care, and Public Health. For example, further training in geriatrics and chronic disease was more commonly seen. Through the interviews, Home and Community Care as well as Long-Term Care sectors were seen as areas of growing care needs that RPNs are well positioned to serve.

Survey Question 9: *“Looking to the future, in what practice areas or roles can the RPN role be optimized and focused to best support clients and families? Please rank your top 3.”*



In the interviews, practice areas for RPN role optimization included gerontology, mental health, chronic disease prevention and management, rehab, and support for caregivers. The need for more health coaching, navigation, and care coordination was also identified.

While Primary Care and Acute Care are seen as the top sectors for RPN role optimization in the survey, a few thought leaders in the industry who were interviewed as part of this project discussed the idea that the stability of clients should possibly be considered in matching health professionals to client needs. It was identified that currently the idea of complexity is considered when determining which health professionals should be involved in client care, however, RPNs currently deal with complexity and client complexity is increasing (e.g. those with Chronic Disease). It was stated that possibly stability rather than complexity of clients would be a better lens through which to consider matching client needs to professionals. This was not to say that RPNs should not be involved in Primary Care or Acute Care, but that there are considerations to

help in determining the best way health professional teams can be arranged to use the various areas of expertise in an optimized manner.

The data sources for this consultation differed somewhat on which areas had the greatest potential for optimization. In interviews with thought leaders, areas for potential optimization were seen as Home and Community Care, Long Term Care, Gerontology, Chronic Disease management, and support for caregivers. During the tour of Ontario Home and Community Care and Long-Term Care were highlighted. In the survey, Chronic Disease management, Palliative Care, Health Coaching, Mental Health, and Geriatrics and Navigation were the top areas for potential optimization, and Acute Care and Primary Care were the top two sectors.

Taking the sectors and practice areas together across data sets, there are a number of areas where the RPN role may be optimized. The best opportunities appear to be in supporting clients and families through health coaching and navigation in addition to current clinical care, with a focus on Chronic Disease Management, Mental Health, Palliative Care, and Geriatrics. Sectors more frequently identified as most promising for RPN role optimization appear to include Home and Community Care, Primary Care, and Long-Term Care. However, some of the practice areas identified above would likely be relevant in Acute Care and Public Health. The opportunities for optimization are broad, and while the RPN role can be optimized within certain sectors and practice settings, the value it brings across the continuum of care should not be understated.

Optimization and specialization will require significant training and education, and RPNs have significant desire and energy for professional development. Of survey respondents (question n=254), almost half saw on-going professional development and specialty certification as top priorities. A significantly high 9/10 of survey respondents (question has 206 respondents) said they would be very likely to pursue specialty certification if it was free. Possible areas of specialty certification include those areas of potential optimization listed above, as well as specialty certification in leadership and management.

While interest in specialty certification is high, RPNs appear price sensitive at around \$500, with 83% would still be interested at cost of \$100-500, but dropping to 50% at a total cost of \$500-\$1000. This shows that RPNAO will need to clearly demonstrate the tangible value of a specialty certification if RPNs are to show interest and actually complete a specialty certification.

Implications: The Innovation Fund should consider specialty certification as a strategic way to clarify, differentiate, and optimize the RPN role within certain areas of care.

5.4 The time to act is now

There is energy and urgency for change. Frustration with the status quo has created circumstances where people are ready for change. While planning and strategizing is required, it

is a time for action and “doing”. RPNs are interested in being involved to support the activities of the Innovation Fund, with approximately 1/3 of survey respondents saying that they would like to be involved somehow with the Innovation Fund.

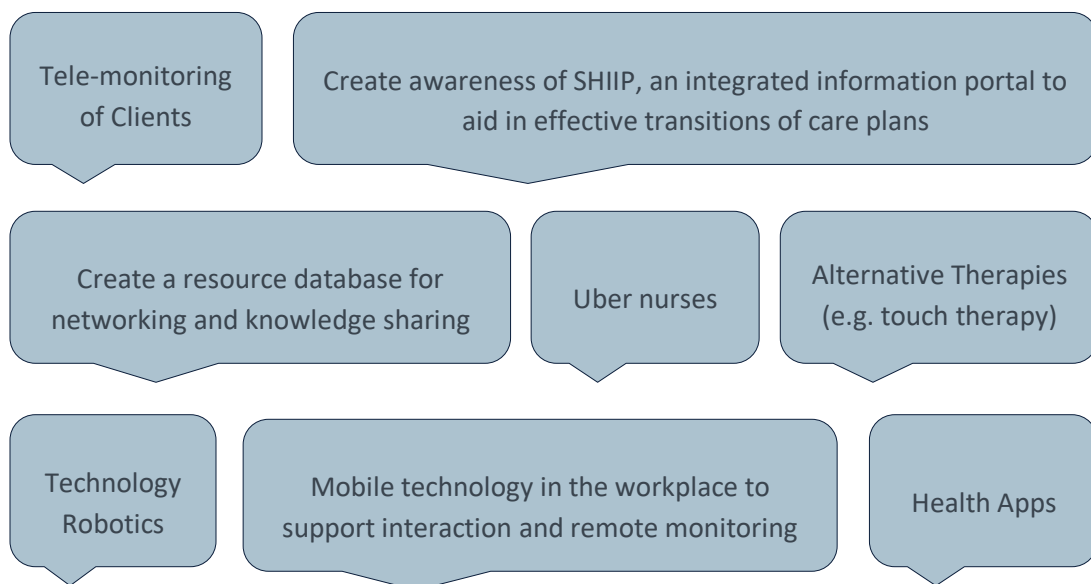
Implications: The Innovation Fund will need to focus on action and trialing solutions. RPNs should be involved in this work, and the Innovation Fund has an opportunity to partner with RPNs and use their efforts to further innovation. While the value of the RPN role may need to be demonstrated through research in the long-run, training of RPNs in areas where their value is most likely to be recognized should start soon.

5.5 RPNs may have unused innovation potential

RPNs indicate that they have innovative ideas they want to explore and develop, yet need help in overcoming barriers to seeing these ideas to maturation. Over 90% of survey respondents indicated that the following would be helpful:

- A vision for what the future of health care could look like
- Support in sharing, exploring, and building on the ideas RPNs have
- A process that can be used to make innovative ideas a reality

While ideas for transformative health system change were not frequently identified, through the Mind Map consultations a number of innovative ideas were suggested that could be explored further, including:



In the innovation process, all steps within the innovation cycle are required for success:



RPNs are interested in participating in the Innovation Fund activities, and their participation will be valuable to the innovation process if used effectively. In the survey, RPNs identified that they are interested in having support related to a number of areas related to the innovation cycle. Over 96% said an innovation process would be helpful. Other ideas that had very high support were: helping RPNs test out their ideas, helping RPNs envision what the future of health care could look like, and helping RPNs explore, share, and build on the innovative ideas they have. RPNs also are interested in participating in pilots once ideas are ready for testing.

Research shows that online innovation platforms are increasingly common place for organizations that are looking for tools to support innovation. These platforms assist in the gathering, sharing, and ranking of ideas, however, they do not necessarily enable all aspects of the innovation cycle. (For full innovation research findings see the Appendix)

These findings from the survey and Mind Maps align with what thought leaders said in the interviews related to enabling innovation. The thought leaders advised that RPNAO will want to enable innovation in partnerships with other organizations. This may be especially relevant in relation to selecting where RPNAO wants to focus its energies along the innovation cycle. There may be greater need for support on certain steps and other organizations may already be supporting some of these steps. RPNAO can look to partner in order to focus its funds towards the “weakest link” in the innovation cycle chain, as each step must be completed. Thought leaders also commented on the need for balancing technological knowledge-sharing tools (interactive digital platforms, idea clearing house) and in-person (e.g. advisory groups, forums, etc.) innovation enabling mechanisms.

Implications: Spending at least some Innovation Fund monies on providing RPNs with supports for innovation (i.e. a vision to spur further ideas, an innovation process, and idea sharing) may activate the potential for RPNs to develop innovative ideas and promote the idea of RPNs as innovative thinkers and doers.

Piloting an online innovation platform will allow RPNAO to better evaluate the innovative potential of RPNs, while gathering ideas from across the province. RPNAO will need to identify what aspects of the innovation cycle it wants to specifically enable and focus on. There may be other partners in the health system that are already enabling specific aspects of this cycle. Once RPNAO’s focus has been determined, online tools can be considered that enable the selected innovation cycle step(s). In addition to online tools, use face-to-face focus groups/workshops that will help take viable ideas into deeper development. Open the idea generation phase

externally to gain insight from patients, providers and researchers to help generate ideas with different perspectives

6. Prioritizing Potential Activities to Fund

While the Innovation Fund has clear goals and Areas of Focus, the wealth of ideas from RPNs and stakeholders for what activities the Innovation Fund should support means that the fund will need to prioritize these ideas for proper fund stewardship.

6.1 Potential Prioritization Criteria

The following suggested prioritization criteria consider the opinions of RPNs and stakeholders, what activities might be truly transformational, what is strategic, and what is realistic as lenses through which to prioritize activities. Weightings may be applied based on the needs of those directing the Innovation Fund; in this report the last 5 criteria are weighted together when applied to activity ideas.

Suggested Prioritization Criteria	Definition
Member Driven Interest	The idea is one developed from the ideas of members and RPNs and best serves their interests
Maximum Transformational Impact	The idea will have meaningful and positive impact on the lives of RPNs and care of clients, creating system transformation
Strategic	The idea is aligned with RPNAO's strategy and positions the organization well for the future
Feasible	Idea can be done within Ontario without significant system, regulatory or legislative change
Timely	Idea can be implemented and deliver subsequent impact in a meaningful timeline
Adoptable	The change environment exists to implement the idea
Scalable and Adaptable	The idea can be responsive and scalable to diverse and changing needs
Financially Sustainable	The idea has a cost structure that will allow the Innovation Fund to continue sustaining operations

6.2 Applying the Prioritization Criteria

The Innovation Fund will quickly be depleted unless potential activities are prioritized with only the top priorities funded. The following table provides a tool that can be used to prioritize ideas for the innovation fund. The degree to which each idea matches the prioritization criteria is rated as high, medium, or low, with a colour assigned.

Level of Alignment

High	Medium	Low
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Ratings are tallied by assigning a number to each rating and then summing the total. (high = 1; medium = 0; low = -1). The following table provides illustrative colour ratings for the first 4 columns.

Proposed Prioritization Criteria		Potential Activity				
		1. (Idea 1)	2. (Idea 2)	3. (Idea 3)	4. (Idea 4)	5. ...
Member Driven		Medium	Medium	Medium	Medium	
Transformational		Low	High	Low	High	
Strategic		Medium	High	Medium	High	
Realistic	Feasible	High	Medium	Medium	High	
	Timely	High	Medium	Medium	High	
	Adoptable	High	Medium	Medium	High	
	Adaptable	High	Medium	Medium	High	
	Sustainable	High	Medium	Medium	High	
Total		Medium	High	Low	High	

Weightings to the prioritization criteria can also be added to shift focus to what is seen to be the more important criteria.

6.3 Next Steps

To identify which ideas for the Innovation Fund should be prioritized, ideas should be filtered through the prioritization criteria and ranked using the above tool. Further discussion can be used to clarify priorities and allocation of funds. To start, the survey results on priority areas for the Innovation Fund (see Appendix 7.3.2) as well as ideas within each Area of Focus can be prioritized, with additional ideas added as appropriate.

7. Appendices

7.1 Appendix: Mind Maps – Group Consultation Themes

Consultations were held with RPNs during a cross-provincial tour. Mind Maps, paper on which people write down and visually connect and explore their ideas, were used to gather input. Consultations are on-going and for this report 48 mind maps were reviewed and consolidated to form themes.

April Update: Throughout April 2017 16 mind maps were received for theming in addition to the original 32 mind maps, and this section has been updated to reflect this. Similar ideas were seen in the additional 16 mind maps, and these ideas are aligned with the original idea categories. Within these idea categories, further ideas for use of the Innovation Fund include:

- Creation of mentorship and coaching programs to train experienced RPN's in coaching newer RPN's
- Creating and educating RPN's on travelling care plans and discharge planning programs including "SHIIP" which is an integrated information portal currently available
- Considering specialty certification programs in areas of high RPN involvement
- Preparing RPN's to be politically active and providing further education on unions and applicable legislation
- Creation of resource databases/interest groups at the provincial and regional levels for networking and knowledge sharing

June Update: An additional 17 mind maps were received on June 2, 2017 from 5 regions; Dryden, Sudbury, Timmins and West Haldimand, one mind map was received from the Dorothy Wylie group. Within these regions there were a few additional comments that stood out as well as a greater focus on innovation within service delivery.

- Creative scheduling platform to support seasonal staffing and self-scheduling
 - Coordination & facilitation of relationships including sharing of resource pool
- Partnering with like organizations to create new entities and leverage common goals
- Streamline Charting, currently too many places it can be done
- Create wellness committee and promote health and wellness programs for RPN's
- Provide education as new laws regarding healthcare come out

7.1.1 Mind Map Theming Methodology

The Mind Maps were received in 3 sets corresponding to the timing of the provincial tour of consulting with RPNs, and a thematic analysis was performed. The first set included 32 Mind Maps. These maps were initially reviewed to gather a sense for the ideas that participants had written. After this high-level survey of the Mind Map data, preliminary draft theme categories were developed. Each idea written down on each Mind Map was then reviewed to assess for fit within one of the preliminary draft theme categories. These ideas were then summarized within the category. If a set of ideas did not fit the preliminary draft theme category, a new category would be created. The same process of identifying whether the ideas in each of the each of the Mind Maps in the second and third sets fit the categories was used to summarize the remaining data. As data within the categories grew, sub-categories were developed to better describe the data within each category. An additional high-level review of the data was used to identify commonalities in the “story” that participants were looking to communicate. Differences in geography were also considered. Mind Maps were reviewed according to the groupings of north, central, east, and west Ontario to see whether the themes varied across geographies.

7.1.2 Mind Map Visual Summary

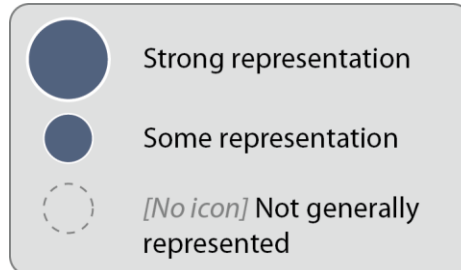
5 idea categories were identified in the mind maps:

Idea Categories

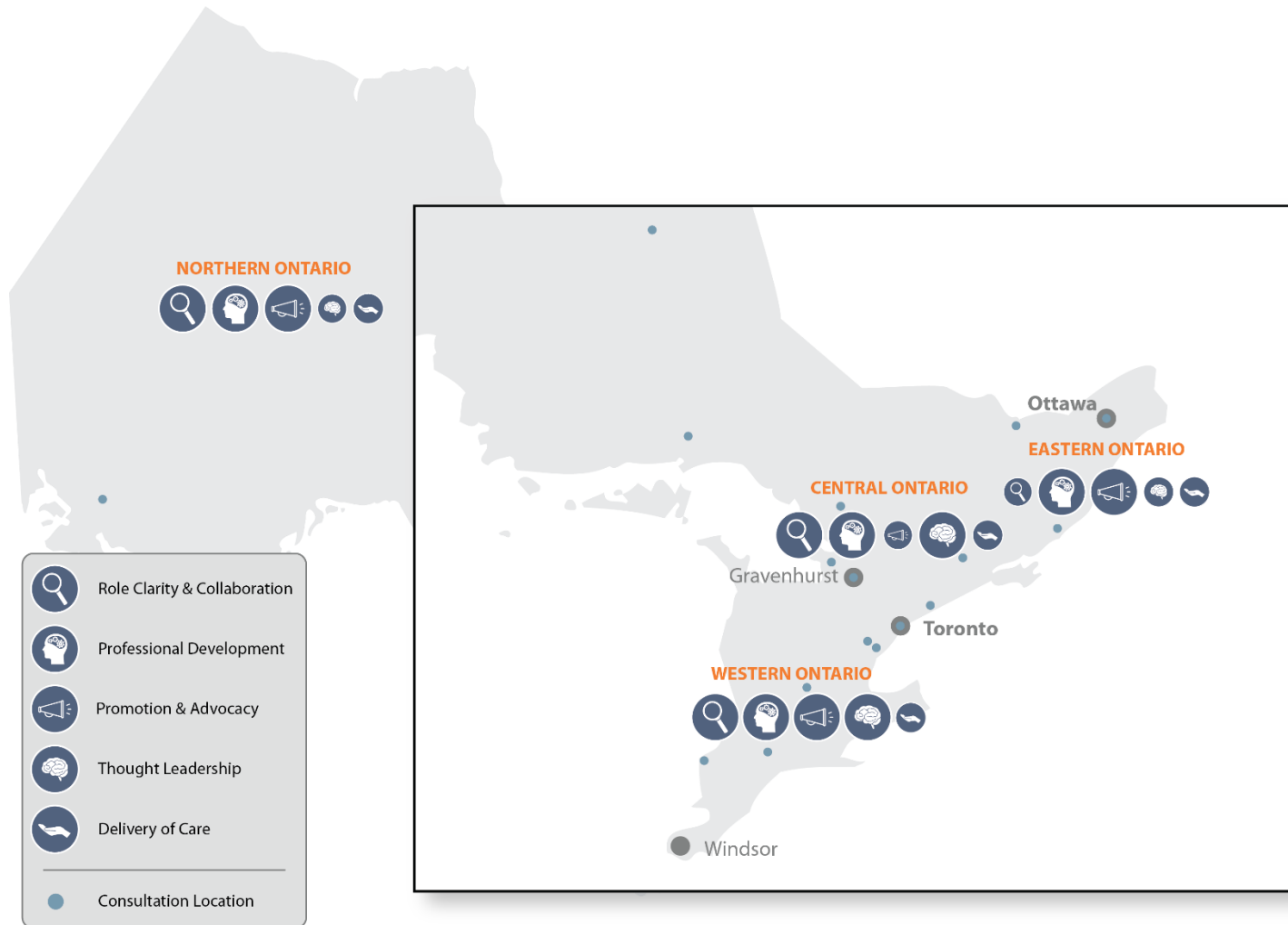


The map on the following page illustrates regional differences in the idea categories.

A larger icon signifies an idea category with strong representation, a smaller icon signifies an idea category with some representation, and the absence of an icon signifies that the idea category was not generally represented. Small blue dots represent the location of consultations.



Participants across Ontario saw professional development as a potential direction for use of the Innovation Fund. Role clarity and collaboration was seen strongly in central and western Ontario, and promotion and advocacy was seen more strongly in western and eastern Ontario. Thought leadership was seen more strongly in central and western Ontario.



The following table provides more detail about the idea categories across the different regions and consultation locations. The above map was created from consolidating information in this table.

Legend

- ✓ = strong representation of idea category
- ✓ = some representation of idea category
- (no symbol) = idea category generally not represented

Jurisdiction	Location	Role Clarity	Professional Development	Promotion and Advocacy	Thought Leadership	Delivery of Care
North	Dryden		✓	✓		
	Sudbury		✓	✓		
	Timmins	✓	✓	✓		
Central	Brampton	✓	✓		✓	
	Mississauga	✓	✓		✓	
	Newmarket	✓	✓	✓	✓	✓
	North York	✓	✓	✓	✓	
	Ontario Shores	✓	✓	✓	✓	
	Toronto	✓	✓	✓	✓	✓
	Barrie	✓	✓		✓	✓
Gravenhurst	✓	✓	✓			
East	Kingston	✓	✓	✓		✓
	Ottawa	✓	✓	✓		✓
	Pembroke	✓	✓		✓	
	Peterborough		✓	✓	✓	✓
West	Kitchener	✓	✓	✓	✓	
	London	✓	✓	✓	✓	
	Sarnia	✓	✓	✓	✓	
	West Haldimand		✓	✓		✓

Jurisdiction	Location	Role Clarity	Professional Development	Promotion and Advocacy	Thought Leadership	Delivery of Care
	Windsor	✓	✓	✓		✓
Other	Nursing Leadership Network (NLN)		✓			
	RPNAO Board	✓	✓	✓	✓	✓
	Dorothy Wylie		✓	✓		✓
Total		✓	✓	✓	✓	✓

The following sub-sections provide additional detail about what was found in the mind maps. Those categories that were identified more frequently are listed first (i.e. Professional Development, Role Clarity, and Promotion and Advocacy), followed by the other categories.

7.1.3 Professional Development

Provide Training and Mentorship

- Funding to access continuing education
- Mentorships/fellowships: revise and make it easier to access
- Create online training portal, accessible and virtual
- Decision support tools
- Formal and informal leadership roles/positions and opportunities
- Leadership training to support advancement and exposure (ex. Leading edge, NLN conference), some examples include:

<ul style="list-style-type: none"> • Access to participate in research • Training to help understand data and statistics • Self-management strategies and coaching to staff • Communication coaching “crucial conversations” • Conflict Management • Complexity science • Critical thinking 	<ul style="list-style-type: none"> • Change Management • Coping strategies for RPN’s related to patient and family care <ul style="list-style-type: none"> ○ Mentorship from experienced RPN’s ○ Workshops, role play scenarios ○ Health/patient coaching • Multidisciplinary conferences (bursaries made available) • How to be self-driven • Team empowerment and
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<ul style="list-style-type: none"> • Professional courage • Self-care 	<ul style="list-style-type: none"> • encouragement • Complaint resolution • Project Management
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- Training to support RPN's in the Workplace:

<ul style="list-style-type: none"> ▪ Mandatory Mental health – self care ▪ International transition ▪ Emerging specialties ▪ Geriatric (including younger gen. in LTC) ▪ Oncology ▪ Nephrology ▪ Health promotion and prevention ▪ Health literacy ▪ Community wellness coaching ▪ Wellness advocacy: nutrition, diabetes, stress mgmt., exercise, BP clinics ▪ Chronic disease ▪ Dialysis 	<ul style="list-style-type: none"> ▪ Facilities group (cognitive behavior therapy, dialectical behavior therapy, healthy living) ▪ Concurrent disorders ▪ Palliative care ▪ Teen pregnancy ▪ Rehab ▪ Rural / Home care ▪ Wound care ▪ Dementia care ▪ Caregiver/Families ▪ Aging population ▪ Ethics (culture sensitivity, end of life care, pain management) ▪ Emergency response 	<ul style="list-style-type: none"> ▪ Retention in the north (indigenous) - Aboriginal Studies ▪ Bullying & Violence in the workplace – self defense ▪ Insurance ▪ Medication Management ▪ Family counseling ▪ Emotional Counseling (EAP) Conflict resolution ▪ Horizontal violence prevention ▪ How to work to full scope of practice ▪ Travelling Care Plans ▪ Immigrants ▪ Suicide Prevention
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Formal Education and Certifications

- Certification in specialty areas: Mental health, addiction, gerontology
 - Consider for high volume specialties
- Joint RPN/RN programs with colleges and universities
 - Redesign curriculum to better understand scope of practice, increase leadership skills and offer mentorship workshops
 - Integrate RPN/RN/NP's into same classrooms
- Standards for student placements
- Support for RPNAO fellowship and look at application process
- Skills days with other service lines - "Day in the Life" with each role
- Additional scholarships / grants
- Increase in tuition reimbursement
- Funding for RPN to RN to bridge the gap
- Dorothy Wylie workshops (role clarity and leadership education)

Wellness supports

- Discounts to 3rd parties

- Funds to put towards RPN wellness (i.e. gym memberships)
- Vacation giveaways
- Wellness and lifestyle seminars

7.1.4 Role Clarity & Collaboration

Create clarity of RPN and other health professional roles

- Education of health system leaders on the roles of RPNs and how best to leverage their skills (suggested examples: Leaders interview tool, host executive education events, speak to Boards & CEO about roles)
- Role clarity champions for inter-professional team education and consulting with other organizations to use the RPN role
- Create/revise RPNAO practice standards in collaboration with RNAO
- Research the RPN role and evaluate the impact on health outcomes in different sectors

Expand the role of RPNs

- Expanded roles for RPNs: LHINs, clinics, telepractice, independent practice

Engage and collaborate with other RPNs and professionals

- RPNs engaging with RPNs – ways to engage could include: Virtual classrooms, Interactive platforms, team building activities such as Pub nights, unit councils, surveys, regional networks
- Increase collaboration with nursing associations and unions
 - Celebrate RPN success & skills
 - Develop one united association that can work together with other associations
 - Leverage political / lobby relationships
 - International Nurses Federation, CASN

7.1.5 Promotion & Advocacy

Promotion of RPNs in the Community and Advocacy for their role

- Workshops: For students / visit high school
- Help RPNs learn how to articulate their role and value (e.g. Elevator speech)
- Prepare RPN's to be politically active (committee, education on new laws)
- Aim to increase the number of RPNAO members
- Awards for RPN excellence
 - RPNAO nurse of the month (showcase good things RPNs are doing)
- Advertising
 - Campaigns
 - “imagine campaign”
 - “Walk in my shoes” - shadowing
 - Public Advertising to increase the community connection
 - Suggested ways to advertise include:

<ul style="list-style-type: none"> • Social media (Facebook) • Posters • Radio • T.V. Marilyn Denis, morning show • Advertisement for RPNs during nurses week • Rebrand Marketing lobby • Expand to community care • Toolkits • Webinars (web x) 	<ul style="list-style-type: none"> • Remote Huddles <ul style="list-style-type: none"> ○ PCVC (OTN Pilots) • Myth busting <ul style="list-style-type: none"> ○ Social media ○ Skill lists ○ Xanadu • More swag clothing • Bus stop Ad • YouTube • High School banners
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Education about the RPN role

- Within high schools before people become RPNs

7.1.6 Thought Leadership

- Conferences to present and create networking opportunities
- Appraisal of research articles
- White papers
- Develop Policies & Procedures to support standards
- Increase RPN teaching roles
- Create a resource database at the provincial level for networking and at the municipal level for knowledge sharing (creation of interest groups)

7.1.7 Delivery of Care

The following are ways suggested to innovate and provide better delivery of care:

- Provide System navigators – increase knowledge of what support / services are available
- Virtual care/ Telemedicine/ Tele monitoring
- Uber nurses
- Create awareness of “SHIIP” – an integrated information portal for all LHIN’s to aid in effective transitions of care plans
- Creation of mobile technology in the workplace to support interaction and remote monitoring (health App?)
- Enhance discharge planning program – how patients move from the hospital to home or vice versa (LTC included)
- Creative scheduling platform to support seasonal staffing and self-scheduling
 - Coordination & facilitation of relationships including sharing of resource pool
- Partnering with like organizations to create new entities and leverage common goals
- Streamline Charting, currently too many places it can be done

7.2 Appendix: Interview Themes

A number of leaders in the health and innovation industries were interviewed. Findings have been themed according to each of the four questions asked during these interviews.

7.2.1 Summary of Themes

Future Care Needs

The healthcare landscape is shifting, driven by an aging population, a desire to improve client care, and the reality of needing to slow the growth of health system costs. This shift is creating potential gaps in care. Need for care for the elderly is expected to grow along with this segment of the population. As people age, their friends and family will want to ensure they are well cared for and will provide some of this care. Care provided by these unpaid caregivers will be significant, and so supporting them will be important to preventing decline and possible need for acute care. People will want to age at home and so there will be a need for self-management, prevention of further disease, and navigation to help them access the services they need. This support should allow people to live at home where they want to be as they age. Health professionals may see their roles change as the navigation role becomes more important and clients want to be seen as partners rather than patients. The Home and Community Care and Long-Term Care sectors will continue to see increasing demand. Technology will also change how care is delivered, with care increasingly being provided remotely.

Best Using RPN Knowledge and Competencies

Yet RPNs do not see a clear role for themselves in the current health system. When RPNs look to the future they want their role clarified and respected. How do we best position RPNs for this clear role in the future? As the adage states, you can't be all things to all people, so how do we build on the strengths of RPNs to enable them do what they do best? There is a strong push to have RPNs specialize into areas where they are already set-up to become experts. These areas align with future trends and could include Home and Community Care, Gerontology, Chronic Disease management, support for caregivers, Long Term Care, and other areas. There are areas where clients are generally stable compared to acute care settings, and are well suited to RPN care. People who are stable will require coaching, navigation, and care coordination to help them self-manage their complex stable conditions. Once areas of care that are optimal for RPNs have been defined, RPNs need their education to be aligned and standardized to these areas, positioning them as the experts in nursing care for certain groups. This could include formal Practical Nurse education or the possibility of RPN certifications.

7.2.2 Question: 10 years from now, what do you think the top 3 patient/family care needs will be in our health system?

Section Summary: 10 years from now, what do you think the top 3 patient/family care needs will be in our health system?

- Care in the Community
- Client Partnership and System Navigation
- Self-Management and Prevention of Chronic Disease
- Caregiver Support
- Gerontology
- Evolving Health Professional Roles
- Virtual Care

Care in the Community: A shift away from providing health care in acute settings and towards care in the home and community

- Different models of community care: Decentralization of clinics; fluid health care teams that follow the client across sectors; hospital at home
- Better integration of community services
- Higher acuity of client needs

Client Partnership and System Navigation: Increasingly need for client-focused navigation of health services to assist clients in coordinating care and gaining access to the most appropriate services

- Partnership with clients with health care providers as consultants and coaches. Relationship based care with high value on humanity, respect, and trust

Self-Management and Prevention of Chronic Disease: Clients will need to care for themselves at home and the health system will focus increasingly on Chronic Disease prevention

- Coaching for self-management
- Focus on health promotion, wellness, and prevention
- Personal supportive care
- Client and family/caregiver partnerships

Caregiver Support: Support for, and partnering with, unpaid caregivers and family/friends so that they remain well and able to continue caring for their loved ones.

- Training to empower and enable caregivers for self-management of health conditions
- Caregiver respite
- Partnering to create better family care plans

Gerontology: With Ontario’s increasing average age, more care for people as they grow older

- Across sectors: public health, community
- Specific care for gerontology related health issues, often to prevent hospitalization: dementia, death and dying, falls prevention
- Keeping healthy seniors healthier longer
- Importance of hands on care in Geriatrics

Evolving Health Professional Roles: Better matching of health professional to client needs and understanding how to collaborate in a manner that leverages each group’s strengths without duplication

- Collaboration with NPs as primary care providers in the community
- Increasing RPN autonomy in home and community care
- Regulation of PSWs
- Nursing in independent manner (e.g. foot care specialists, health promotion, wellness services)
- Corresponding changes to the Regulated Health Professions Act
- Health professionals aligning themselves to a specialty population over a continuum of care in order to provide integrated services and care
- Decline of certain health professional groups: radiologists and radiology technologists with increasing artificial intelligence
- Remote monitoring and treatment of patients

Virtual Care: Care provided remotely, especially for those that are geographically distance from care locations

- Technology enabled care: virtual care, telehealth, tele monitoring
- Increased point of care testing with connectivity to health care provider for results analysis and adjustments to treatment

7.2.3 Question: What needs to change to enable RPNs to effectively meet these health needs?

Section Summary: What needs to change to enable RPNs to effectively meet these health needs?

- Clarify Roles and Specialize
- Professional Development
- Partner and Facilitate Collaborative Change
- Use of Technology

Clarify Roles and Specialize

- Leadership is needed so that the public and health professionals understand the role of RPNs; health service providers want to know how best to use RPN skills
- Determine the lens that the health system should use to think about dividing up tasks across different groups of health professionals
 - Stability vs. complexity may be a better way to frame the conversation around roles as many people are complex but stable in their health. As advances are made in medical care, complexity will continue to increase while instability may not
 - Is wellness a good lens to use? (Canadian Index of Wellness)
 - How to shift from task based areas of practice to knowledge based areas of practice?
- Identify what work RPNs are best suited to take on
 - What lens should be used to determine how work is best suited? Lens of complexity? Everyone has some degree of complexity
 - Should patients/clients have a choice of who their care provider is?
 - How would other health professionals interact with this role? How should work be delegated to regulated and unregulated health care workers?
- Identify areas where RPNs as a group can/should specialize. Suggested areas for specialization can be seen in several categories:
 - *Types of Health Conditions/Concerns*: gerontology and aging well at home (continence advisors, behavioural approaches), mental health and addictions, chronic disease management (Diabetes, Alzheimer's, Dementia, Arthritis), support for caregivers, rehabilitation, indigenous health, preventative care / social determinants of health
 - *Roles*: System navigation, care coordination, health coaching
 - *Locations*: home and community care, long-term care, public health, prevention in primary care teams
- Operational Ideas/Examples: Define the role in position papers

Professional Development

- RPN Certification
 - Canadian College of Health Leaders; Dorothy Wylie Nursing Health Leadership Institute
 - Take a population health approach to determine areas of certification (see above possible areas of RPN specialization)
- Formal Education
 - Update and standardize curricula across Practical Nurse programs
 - Consider restricting enrollment
 - Partner with clinical organizations
 - Enhance focus on inter-professional care and leadership

- Disconnect between our education system and practice. (e.g. millennials pick and choose what they want to do; teaching things that don't translate well into practice; don't prepare enough for other sectors of care besides acute care)
- Modular education may be more suited to today's needs
- Research
 - Research the impact of RPN care on nursing sensitive outcomes. Consider having a third party perform the research to increase credibility
 - Research ways to improve care based on the areas of RPN specialty

Partner and Facilitate Collaborative Change

- Need to bring together RPN groups at a national level
- Advocate for RPNs and correct misconceptions with key decision-makers from policy to front-line managers
- Change needs to be facilitated in a collaborative manner and in co-creation with RPNs and RNs to identify the care models of the future
- Consider partnerships with:
 - academic institutions, RNs, and employers to provide education and develop a learning academy
 - Chief Nurses, Canadian Nursing Association, LHINs

Use of Technology

- RPNs need to be expert consumers of technology, ready to use it for assessment, communication, sharing health information, and care delivery
- Ideas/Examples: PPNO listserv
- RPNs will need to be able to support remote testing and monitoring of patients

7.2.4 Question: How RPNAO can use the RPN Innovation Fund to enable RPNs to effectively meet patient/family care needs?

Section Summary: How RPNAO can use the RPN Innovation Fund to enable RPNs to effectively meet patient/family care needs?

- Research and Thought Leadership
- Clarify the Role of the RPN
- Identify an Area for RPN Focus
- Innovation Platforms
- Standards and Certification
- Build Competencies and Educate

Research and Thought Leadership

- Research on models of care and RPN outcomes and impact
 - Do primary research on RPN impact and outcomes
 - Partnership and secure additional funding (suggestions: CIHR, private foundations, CARP, OLTC, larger academic organizations)
 - Look at what is working in other jurisdictions
 - Large vs. small research projects – varying opinions
 - Consider a larger project so can better show RPN impact
 - Consider smaller projects that replicate other studies in Ontario to demonstrate value in specific situations (ideas: Fast Track, Post-Partum)
 - Consider smaller projects in smaller locations of high need that are earnest for change
 - Include economic analysis
 - Specific topic ideas: clinical and fiscal value; client-centered care; RPNs in primary care, prevention, coordination; barriers to managers utilizing RPNs in practice or to full scope; concept analysis of nursing innovation;
- Research on Technology
 - Identifying the technological trends that can improve care and educating RPNs to become early adopters
 - Artificial Intelligence and how RPNs can work in synergy with Artificial Intelligence
- Build policy competency: Literature Reviews and Environmental Scans; Write Position Papers on defining the role of the RPN
- Consider research fellowships

Clarify the Role of the RPN

- Identify where RPNs can be most effective and focus there
- Develop tools to help leaders and middle managers better apply the Three Factor Framework
- Research competency driven human resource planning (what competency gap is there in any given population and who is the best to meet it)
- Develop joint programs for clinical simulation involving RPNs and different health professionals (partner with or leverage prior work of Health Force Ontario)
- Collaborate with the Practical Nurse programs to understand the role clarity work; Collaborate with Nurse Practitioners/NPAO to understand their view on role clarity

Identify an Area for RPN Focus

- Select a sector/area/population where RPNs and the Innovation Fund can have the most impact per dollar spent

Innovation Platforms

- Call for RPNs for abstracts on innovation to share at a conference
- Innovation boot camp: resources to prepare for innovative projects

Standards and Certification

- Certification: mixed thoughts on the value of certification with some seeing as very valuable and others thinking not a good place to focus the Innovation Fund
 - Specialty area ideas: wound care; end of life care; chronic disease management, gerontology; mental health; dementia care; responsive behaviours
 - Could be further frustration for RPNs if they can't use their knowledge or other health professionals don't recognize their expertise and ability
- Standards for Education and Curriculum
 - Identify standards for education for Practical Nurses across Canada
 - Lead development of inter-professional curriculum with educational institutions across different types of nursing education
 - Distance learning for rural and remote

Build Competencies and Educate:

- Create or link RPNs to education programs related to:
 - Using technology to advance care
 - Defining career paths for Practical Nurses
 - Skill sets in nursing sensitive indicators (e.g. gentle persuasive approach, pain management, etc.)
 - Patient and family education

- Leadership development and opportunities (including topics around advocacy, advanced communication skills, assertiveness; specifically in certain sectors where there would be larger impact, such as LTC)
- Mentorship
- Evidence informed practice and quality improvement
- Consider significant investment in leadership development for a limited group of RPNs who can be put in positions of influence and be champions of the value of RPNs
- Additional online education (ideas: interactive education tools, avatar, gaming software, webinars)

7.2.5 Question: What advice do you have for RPNAO about the development of an innovation program or platform to help us keep our Innovation Fund investments dynamic and progressive over the next decade?

Section Summary: What advice do you have for RPNAO about the development of an innovation program or platform to help us keep our Innovation Fund investments dynamic and progressive over the next decade?

- Planning, Frameworks, and Models
- Oversight and Evaluation
- Partnerships
- Communications and Branding
- Mechanisms for Innovation
- Professional Development

Planning, Frameworks, and Models: RPNAO and the Innovation Fund will need to be very clear on its vision for what the Innovation Fund will accomplish so that spending is focused

- Identify strategic priorities that will guide where Innovation Fund monies are spent
 - Questions:
 - What are the objectives of the innovation?
 - What question do we hope to answer?
 - How do we define innovation?
 - Should be focused on the needs of RPNAO members
 - Consider whether the Innovation Fund will focus on specific target areas for RPN work (i.e. areas, such as home and community care, that were identified as areas that RPNs are well suited to serve)
- Share these priorities publically
- Filter ideas through the strategic priorities

- Develop any additional frameworks that would be used (e.g. Concept Analysis framework; evaluation frameworks to measure impact of the Innovation Fund)
- Understand what the innovation model and structures will look like
 - Should ensure innovation has uptake to replace the old way of doing things
 - Look at the structures of other innovation funds (e.g. MaRS)
 - Understand how will sunset projects

Oversight and Evaluation

- Have an Advisory Board/Committee to oversee investments and evaluation
- Ensure there is a set of criteria against which to measure impact/outcomes

Partnerships: The impact of the Innovation Fund will be greater and have more likelihood of success if work is done in collaborative partnership that leverages other’s strengths

- Partners could include people or organizations from inside and outside of Nursing:
 - RPNs
 - Clients
 - Should involve different types of nurses: RNs and NPs in addition to RPNs
 - Nursing Organizations (e.g. CNA)
 - Partners in research (e.g. CARN)
 - Partners in safety, quality, and best practices (e.g. CPSI, HQO, CFHI, Accreditation Canada)
 - Educational Institutions (e.g. de Sousa Institute)
 - Industry: Artificial Intelligence, Gaming Industry
 - Nationally/internationally (e.g. IHI)
- Partnerships could be used to:
 - Identify innovative solutions
 - Educate nurses
- Partners will need to be chosen carefully, as some organizations or individuals may want to hinder RPNAO’s work

Communications and Branding: The Innovation Fund and RPNAO will need to openly communicate about the fund and should consider branding the work so that it is recognizable by health professionals and the public

- Develop a Communications Plan to properly roll out communications and build on the successful communications RPNAO already does
- Identify which partners can help disseminate your messages
- Positioning
 - Stay positive; keep talking and promoting

- Show authentic leadership so that people continue to see RPNAO as a credible voice
- Need to be transparent as to how funds are being used and differentiate how these funds are being used differently from others
- Advocate for change by communicating with the public and government decision-makers
- Consider establishing a National Practical Nurse journal

Mechanisms for Innovation

- Bringing People and Ideas Together
 - Cross Jurisdictional/Provincial Think Tank
 - Advisory Group: innovators, nurses, thought leaders, sector leaders, etc.
 - Yearly Forum
 - Delphi Approach
 - RPN forums
- Technological Knowledge-Sharing Tools
 - Interactive digital platform
 - Cloud-based platform
 - Soapbox
 - Listserv
 - Idea/knowledge clearing house
- Demonstration Projects
 - Boldly choose a sector and do clinical demonstration research to demonstrate the impact of RPNs
 - Rapid trail of projects – PDSA cycle
 - Demonstration projects to illustrate innovative roles that contribute to quality outcomes
- Research: Topics could include skill mix outcomes and nursing models, resilience in the workplace
- Consider research fellowships

Professional Development:

- Certification and Competency Assessment
 - Will be expensive to administer. Consider “advanced practical nursing”. May use a different model that assesses competencies in a different way other than an exam
 - Some concern that certification may not lead to real positive impact for RPNs.
 - There is value proposition for the employer for having an RPN with better skills, however, must ensure a clear value proposition for the nurse
 - Consider partnerships for developing/administering the certification or other way to assess competencies (e.g. CNA, CCHL, DWHLI)

- To be more valuable, certification should be recognized across jurisdictions

7.3 Appendix: Innovation Survey

7.3.1 Survey Methodology

The survey methodology included 3 stages.



The purpose of the survey was to capture insights of RPNs and other stakeholders in Ontario on the perceived priorities and use of the Innovation Fund. Objectives of the question categories were defined in consultation with RPNAO to ensure that the survey output would align with RPNAO’s needs. These categories included demographics, nursing profession, Innovation Fund and Moving Forward.

The survey was deployed using a web-based survey tool, and RPNs were notified of the survey and provided with a link through multiple channels:

- Emails: Emails were sent to RPNs on RPNAO’s email distribution list
- Social Media: The survey information and link were distributed through Twitter, Facebook, and various list serve networks (i.e. PPNO)

The survey was open for 6 weeks, from April 17th, 2017 to May 29th, 2017, and was intended for qualitative and quantitative feedback from any RPN in Ontario. There were a total of 308 responses.

Responses were seen across the different demographic indicators. There were two general cohorts of respondents that were seen when combining age groups. The younger group ranged from 18-29 years of age and had 0-7 years of experience. The older group ranged between 55-64 and had over 21 years of experience. These two groups will be commented on throughout the analysis of the results where significant differences are seen in the results when stratified by the two groups.

For more information on the Demographics of the respondents see the Survey-Supplementary Information section below.

7.3.2 Survey Findings

Innovation Fund Prioritization

To understand how the Innovation Fund can impact the care setting, respondents were asked to prioritize the key ideas identified during the initial Mind Mapping and Interview sessions with RPNs thought leaders from across the province. Respondents were asked to envision the future of the healthcare system and identify where RPNs would have the greatest impact on client care, outcomes, and specific care areas.

The top three ideas for the use of the Innovation fund revolved around ongoing professional development opportunities, clarifying the RPN role, creating specialty programs and communicating and advocating the RPN role in the healthcare system. About 2/3 of the respondents felt that RPNs can have the most impact in Primary, Acute, Home and Community Care when it comes to client care and outcomes. It was identified that RPNs should focus their role in chronic disease management, Palliative Care and health coaching practice areas amongst other areas.

Clarifying or optimizing the role of RPNs is seen to have multiple benefits, including:

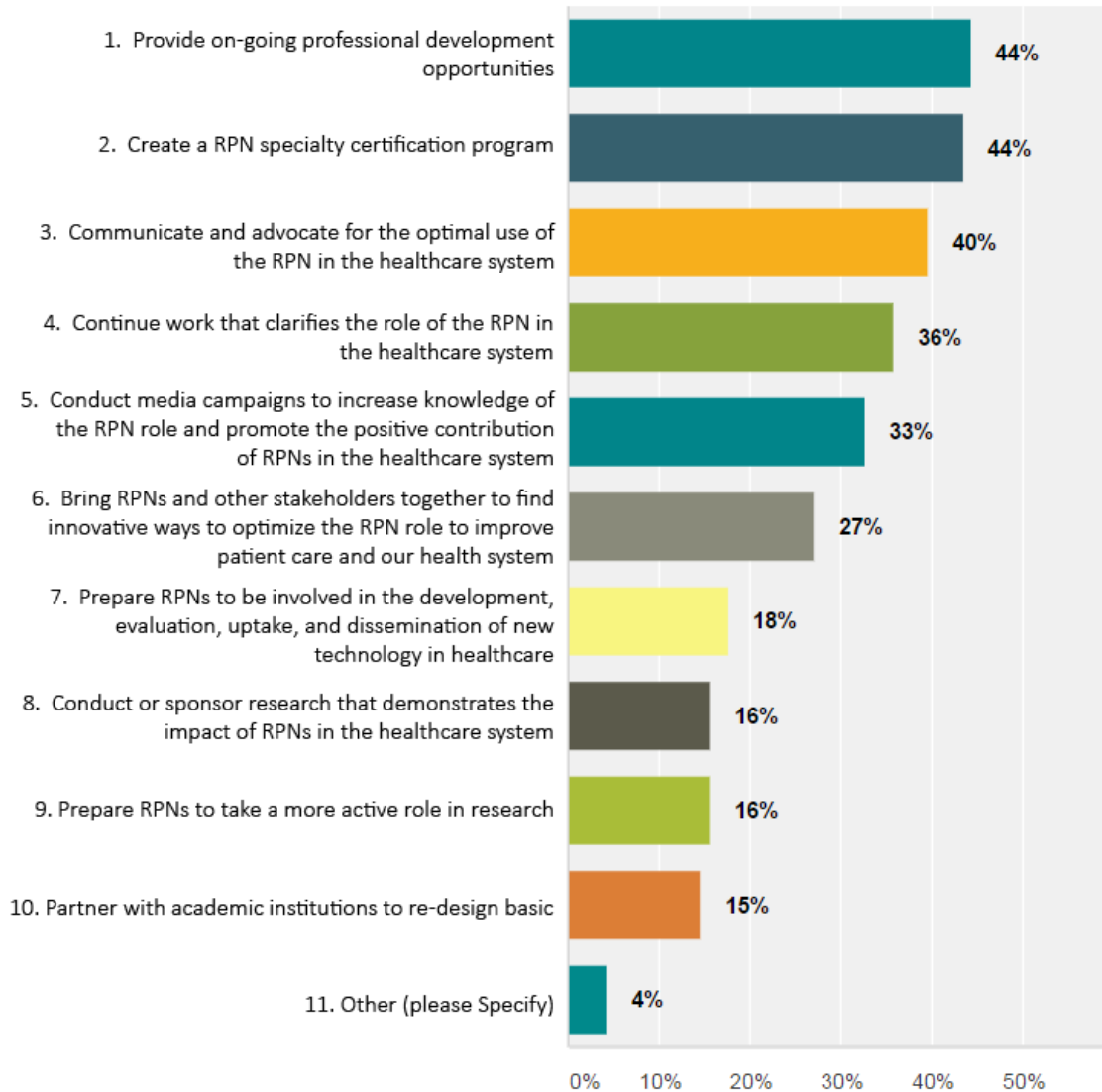
- improving the relationships between the RPNs and RNs
- providing value and acknowledgement of RPNs by their healthcare colleagues
- raising awareness about their role to the general public.

RPNs are also interested in specialized certifications. In addition to certifications, RPNs can also provide teaching to further enhance their role, amongst their healthcare service provider team members and amongst the general population. Increased utilization of technology can also aid in achieving these practices.

When stratifying the priorities by the two age groups, the key difference is that the younger group would like to focus the most efforts on communicating and advocating the role of RPNs in the healthcare setting and the older cohort believes focusing efforts on continuing to clarify the role of the RPN in the healthcare setting is a larger priority. Both groups agree that a RPN specialty certification program is a high priority and one of the top three priorities for the use of the Innovation Fund.

Prioritize ideas for the use of the Innovation Fund

Question 7: “Through focus groups and interviews ideas were gathered about what the priority areas for the use of the Innovation fund should be. Please select 3 ideas from the list below that you believe should be prioritized for the use of the Innovation fund”



The priorities found in the survey results support our previous findings outlined in the Engagement Themes Report. Priorities were grouped into three major groups.

“Other” responses include:

- Prepare RPN's to be knowledgeable and skilled in nursing management and leadership skills
- teach RPN's better communication techniques
- promote RPN for community/outpatient jobs
- more access to RPN to BCSN for experienced RPN
- increase RPN wages as scope of practice increases

- Increase compensation
- bridge the knowledge and clinical skill gap of RPNs who graduated from more than a decade ago
- specialize in procedures- Echo EEG, TEE
- Create an appropriate pay scale effective province wide
- create a route towards RN that better reflects RPN skills and knowledge they already have

Groupings were seen in these responses:

Priority: Clarify Role, Professional Development

This group includes ideas that will help pave the way for innovation, namely clarifying and finding a focus for the RPN role and aligning RPN knowledge and competencies to their best role. Half of the priorities listed above are grouped into this category. “Providing on-going professional development opportunities” (44% of respondents), “Creating a RPN specialty certification program” (44% of respondents) and “communicating and advocating for the optimal use of the RPN in the healthcare system” (40% of respondents) were the top three priorities.

Priority: Innovation

Ideas directly related to innovation and applying innovation are included in this group. The top three ideas are “Bring RPNs and other stakeholders together to find innovative ways to optimize the RPN role to improve patient care and our health system” (27% of respondents), “prepare RPNs to be involved in the development, evaluation, uptake, and dissemination of new technology in healthcare prepare RPNs to be involved in the development, evaluation, uptake, and dissemination of new technology in healthcare” (18% of respondents), and “Conduct or sponsor research that demonstrates the impact of RPNs in the healthcare system” (16% of respondents).

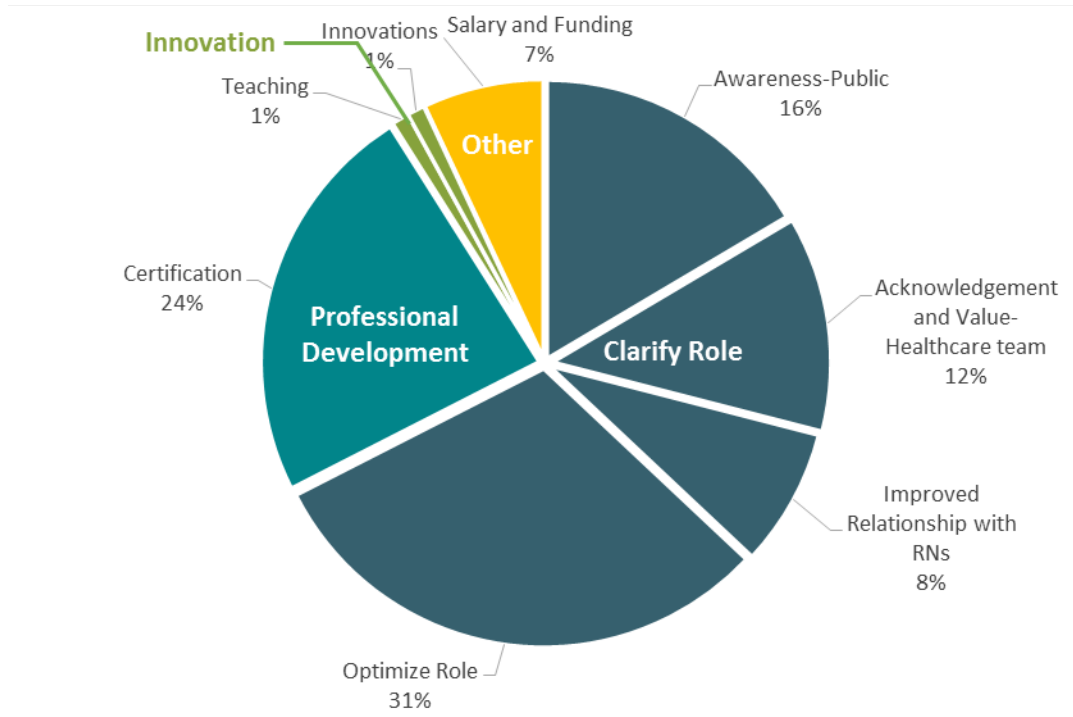
Other

The ‘Other’ category was a total of 4% of all respondents and specific responses are seen in the table above.

In light of the above observations, the two age cohorts (younger and older) differed in their top priorities. The younger group felt that “communicating and advocate for the optimal use of the RPN in the healthcare system” was the top priority (55% of the younger cohort) and the older group felt that “Continuing work that clarifies the role of the RPN in the healthcare system was the highest priority (49% of the older cohort). The two groups agreed that “creating a RPN specialty certification program” is a top priority for the Innovation Fund (43% of the younger cohort and 36% of the older cohort).

Accomplishments of the Innovation Fund in the Future

Question 13: “Imagine the Future: It is the year 2027, what has the Innovation Fund accomplished? Please describe in 1-3 sentences (50 words or less)”



There were 140 respondents who provided open text responses. Common descriptors became evident in the responses and these descriptors created the categories seen in the chart above. The findings aligned well with the themes seen in the mind maps and initial interviews: Clarify Role, Professional Development and Innovation.

Clarify Role:

Optimizing the role of RPNs is the largest category of responses (31%). It includes key descriptors such as ‘optimize’, ‘articulate’ and ‘define’ the role of RPN, ‘role clarity’, ‘role expansion’, ‘have RPNs work at full scope’. The other expectations of the Innovation Fund are that it has allowed RPNs to gain **acknowledgement and be valued by the other healthcare service providers** (12% of responses), **improved the relationship with RN colleagues** (8%), and generated **awareness of the RPN role for the public** (16% of responses). All four of these groupings represent 67% of all responses.

Professional Development:

Having the ability to obtain specialized **Certification** was also a popular descriptor in the responses (24% of all responses). The specific subjects that were reported for certification, in no particular order, included Long-term care, geriatrics, mental health, oncology, ER, Neurology and Cardiology, leadership and management.

Innovation:

Teaching as a subject did show up but did not score very high (1% of all responses) and ideas around **Innovation** were equally low (1% of all responses).

Other:

Other areas included the desire that the Innovation fund will increase salaries and provide funding (7% of all responses).

Certification

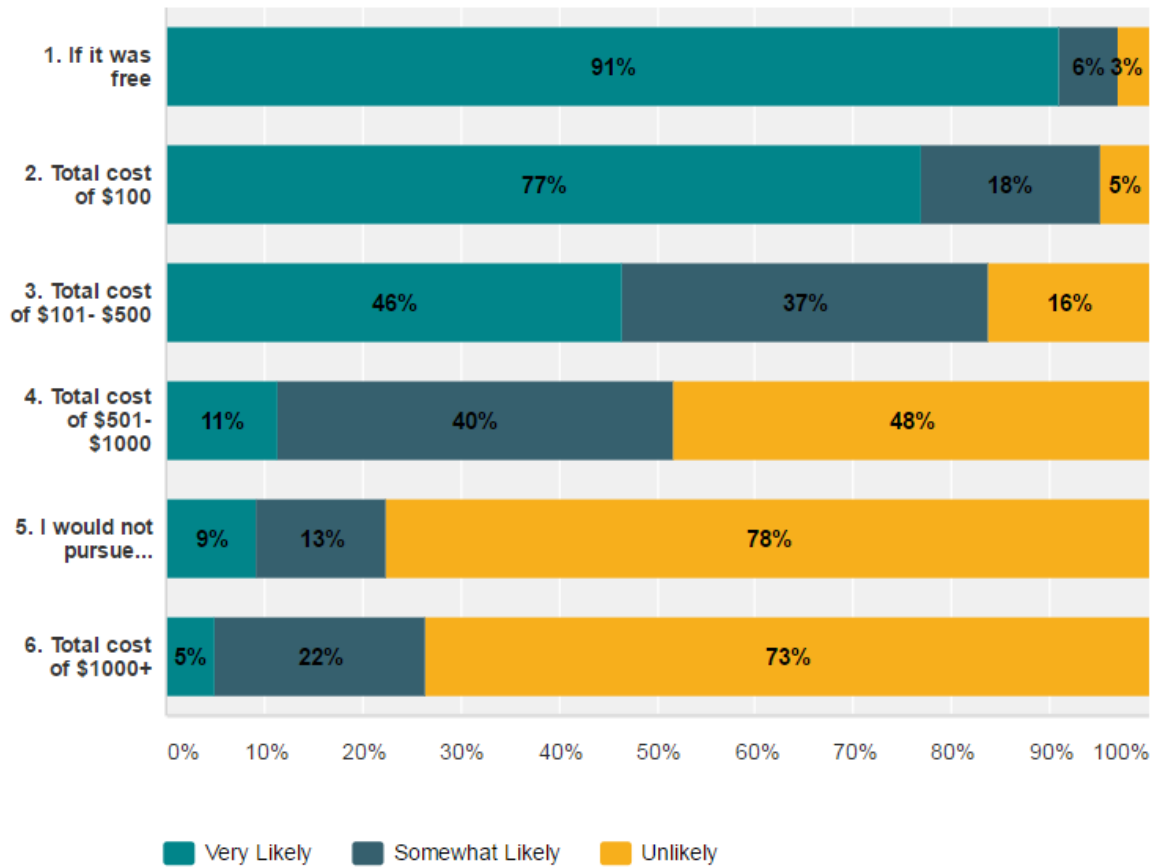
The survey also inquired about Certification. The respondents were asked to identify key priority sectors and practices areas where it is felt that the RPN role can be optimized and focused to provide the best support for clients and families.

The survey indicated that the respondents are quite eager to obtain specialty certifications and are quite likely to pursue a specialty certification if it was free or up to a cost of \$500 per certification. The younger age cohort reflected the findings of general survey responses however the older age group is more likely to pursue a certification if it was \$100 or below.

The overall respondents and the younger age cohort indicated that they were also more likely to re-certify between 3-5 years post-certification. The older cohort indicated that they are more likely to re-certify after 5 years of certification.

Likelihood to obtain certification

Question 11: *“If a RPN specialty certification program was developed how likely would you be to complete at least one certification? Approximately 2-4 months of studying for a number of hours per week and an exam would be required. (e.g. RPN – LTC Specialization)”*



(Question number of responses = 206)

The respondents displayed a strong desire to pursue certification at a low cost, between \$0 to \$500, with a cost of \$501 being the tipping point for all respondents.

The respondents are very likely to complete at least one certification if the certification was free (91% are ‘very likely’), or cost \$100 (77% are ‘very likely’). There are less respondents who are ‘very likely’ to complete a certification if it was between \$101-500 (46%). A few respondents were ‘very likely’ (11%) and ‘somewhat likely’ (40%) to complete at least one certification if it was between \$501-\$1000. The respondents are not likely to complete a certification if it cost more than \$1000 (73% were ‘unlikely’).

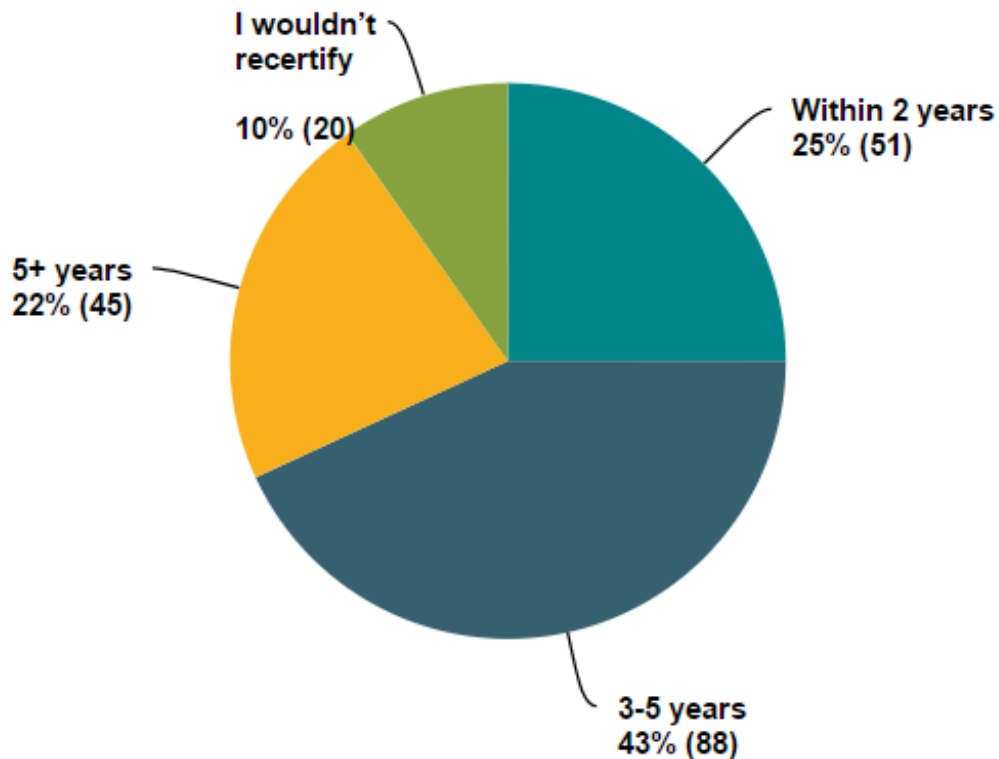
Overall, the respondents are displaying a strong desire to pursue a certification as the “I would not pursue certification did not score high (78% voted ‘unlikely’ for this category).

When comparing the two age cohorts, the younger group is representative of the general response seen, having a strong willingness to pursue certification up to a \$500 cost (“very likely” dropped from 20 respondents in the \$101-\$500 category to 6 respondents for the \$501-1000

category). The older group is more cost sensitive and is only likely to pursue certification if it is below \$101 (“Very likely” dropped from 12 respondents in the \$100 category to 6 respondents in the \$101-500 category).

Frequency of re-certification

Question 12: “To ensure continuous improvement in skills and the best patient care, specialty certification programs can require re-certification. If you achieved a RPN certification, how often would you be likely to re-certify to maintain the specialty certification?”



The respondents were most likely to re-certify between 3-5 years post-certification (43%) and less like to recertify within 2 years (25%) or above 5 years (22%). A handful of respondents (10%) indicated that they would not recertify at all.

Similar to the previous question, a difference is seen between the two age cohorts and the time they are likely to recertify. The younger group is more likely re-certify after 3-5 years (40% of

cohort) and the older group is more likely to recertify after 5 years or more (36% of the respondents).

Optimize Role

This section indicates the priority sectors and practice areas where the respondents felt RPNs would have a stronger influence or impact for client care and outcomes.

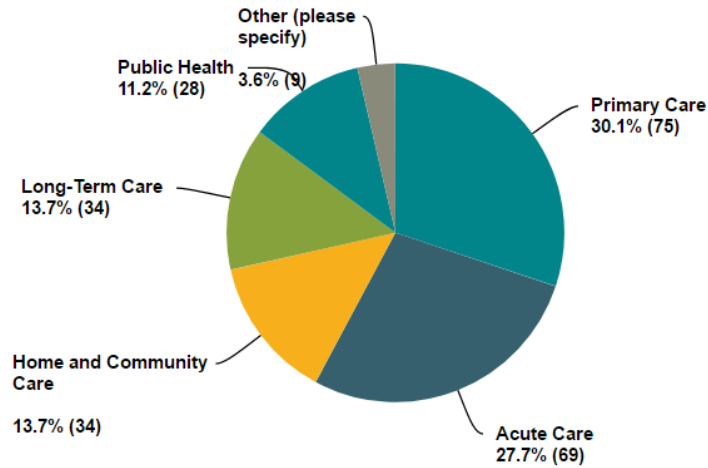
RPNs see optimization opportunities in the Primary and Acute care sectors (30% and 28% respectively) as the respondents felt these two sectors would have the largest impact on future client care and outcomes. Home and Community care, Long-Term care and Public Health (38% combined) sectors were a lesser priority for RPNs, at just over 10% each.

Chronic disease management and Palliative Care are the top practice areas RPNs saw as priorities to optimize. These areas are in line with the primary care sector identified for optimization. Other top priorities include Mental Health and Geriatrics, Health Coaching and Navigation.

The responses between the two age groups were similar to the total group of respondents. Chronic disease management scored the highest, and the younger group scored Palliative care as the next practice area however the older group scored Caregiver and family support as the next practice area that the RPN role can be optimized to be best support client and families.

Sector where RPN role can be optimized for greatest impact on future client care and outcomes

Question 8: *“If we think about the continuum of care and health system of the future, what is the sector where the RPN role can be optimized to have the greatest impact on client care and outcomes? Please select your top choice.”*

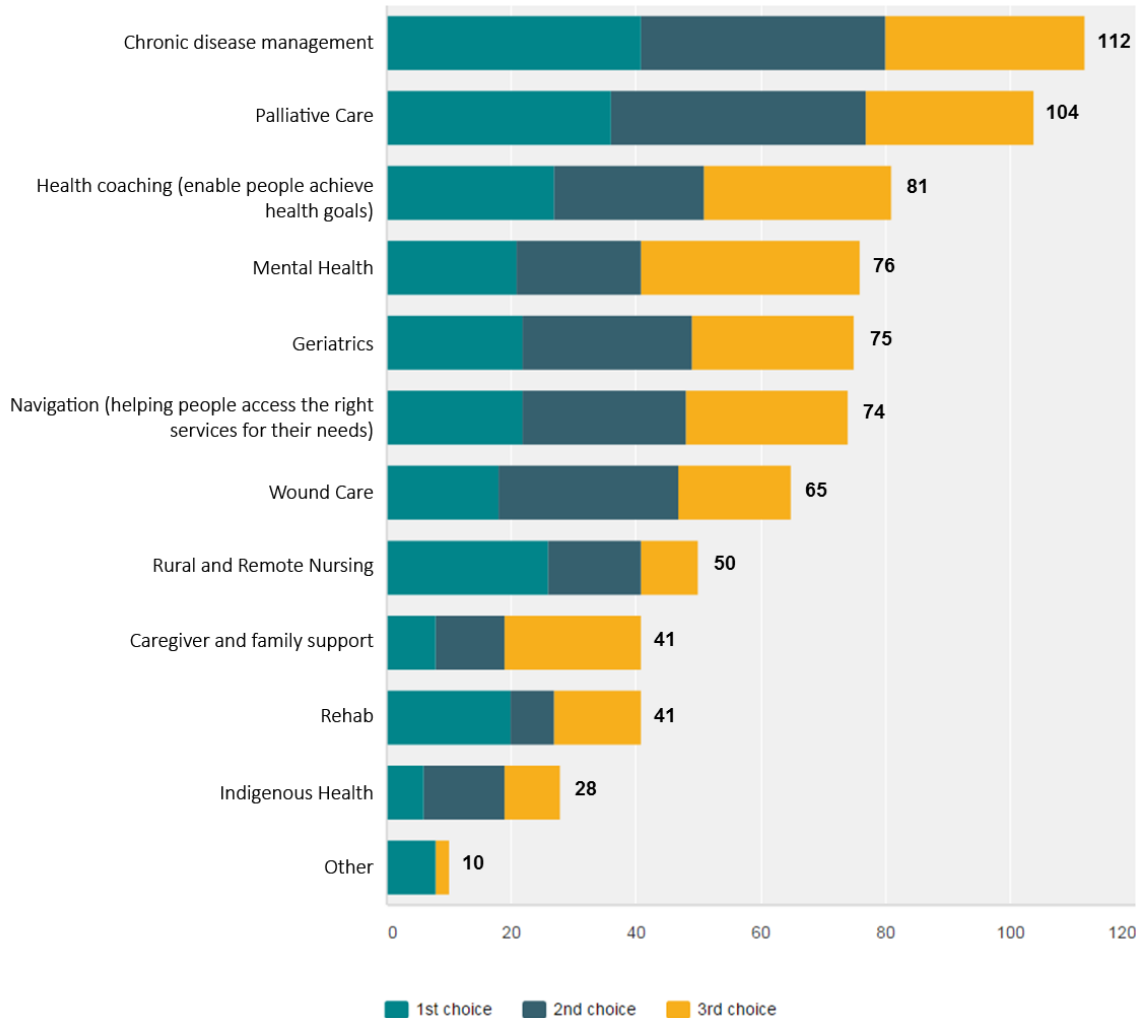


The respondents felt that they can have the most impact on client care and outcomes by optimizing their role in Primary Care (30%) and Acute care (28%) sectors. Combined, these two areas account for more than ½ of the sectors believed to provide the most impact if optimized. Home and Community Care (14%), Long-Term Care (14%), and Public Health (11%) make up the remaining sectors and were not identified as priority areas for optimization. The ‘Other’ areas include ER, Mental Health care, and Rehabilitation.

In this section, there were slight variations in the responses from the two cohorts. Both groups indicated Primary Care as the sector where they will have the largest impact when optimized (31% for the younger group and 34% for the older group). Similar to the general respondents, the younger group ranked Acute Care as the next sector (29%). The older group prioritized Long-Term Care as the second most impactful sector (25%).

Practice Areas the RPN role can be optimized and focused to best support clients and families in the future

Question 9: “Looking to the future, in what practice areas or roles can the RPN role be optimized and focused to best support clients and families? Please rank your top 3.”



The respondents prioritized the practice areas identified by RPN groups during the mind mapping and interview exercises. The top three practice areas are Chronic disease management (112 votes), Palliative Care (104 votes) and Health coaching (to enable people to achieve their health goals) (81 votes). These three practice areas were also the top 1st choice areas for the respondents (represented by cyan bars), further exemplifying their focus. Mental health (76 votes), Geriatrics (75 votes) and Navigation (74 votes) were similar in priority and identified as

the next practice areas. Wound care (65), Rural and Remote Nursing (50), Caregiver and family support (41), Rehabilitation (41), Indigenous health (28) and Other areas (10) were lower priority areas. The ‘Other’ practice areas included acute care, maternity care and preventative medicine.

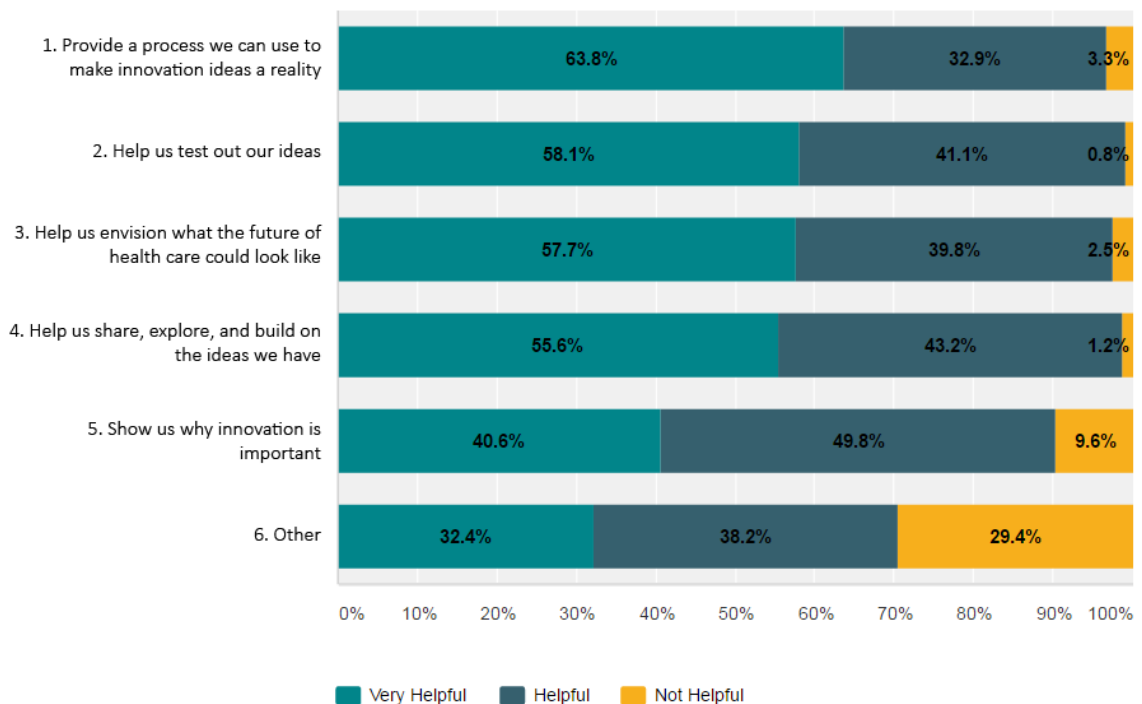
Innovation Enablers

Innovation enablers will facilitate RPNs to carry out their innovations. RPNs envisioned achieving the above ideas by acquiring a process to make their ideas a reality, obtain help in testing their ideas and help them share, explore, and build on their ideas.

There were no significant differences in the priorities between the two age group cohorts.

Uses of the Innovation Fund to help innovators improve client outcomes

Question 10: *“How can the Innovation Fund be used to help people become better innovators to improve client outcomes? Please indicate how helpful each of the following would be in enabling RPNs and others to innovate.”*



The respondents were asked to rate each use of the Innovation fund in order to help them become better innovators to improve client outcomes. The table and graph above are ordered by the “very helpful” rankings. The most helpful task is to “Provide a process we can use to

make innovation ideas a reality” (64% thought it was very helpful) followed by “Help us test out our ideas” (58% thought it was very useful).

The task with the highest overall score is “Help us test out our ideas” (only 0.8% thought it was not helpful) and the next useful task is “Help us share, explore, and build on the ideas we have” (1.2% thought it was not helpful).

Within the “Other” category, 34 responses were received, and comments include ideas related to:

- Provide a mechanism for RPNs to gather and discuss new ideas (e.g. quarterly meetings or conference)
- Improve patient to nurse ratios to allow for additional time to care for patients
- Align RPN pay scale and level of respect to what RNs receive, as the RPN role has “expanded to almost the equivalent of RN”
- Explore and encourage innovation with younger RPNs
- Improve RN, RPN relationships

Overall, providing an innovation process, helping RPNs share, explore, test, and build on their ideas, and providing a vision for innovation had high levels of support for ways the Innovation Fund could enable greater innovation.

Additional Advice

Respondents were asked to comment on their expectations and impact of the Innovation Fund in the future, how they would like to be involved and provide any additional comments/advice on how to develop the fund. There is overwhelming support to use the Innovation Fund to support Role Clarity & Collaboration and Professional Development.

Suggestions that were not seen elsewhere in the survey, and which are highlighted below, include the use of the Funds to:

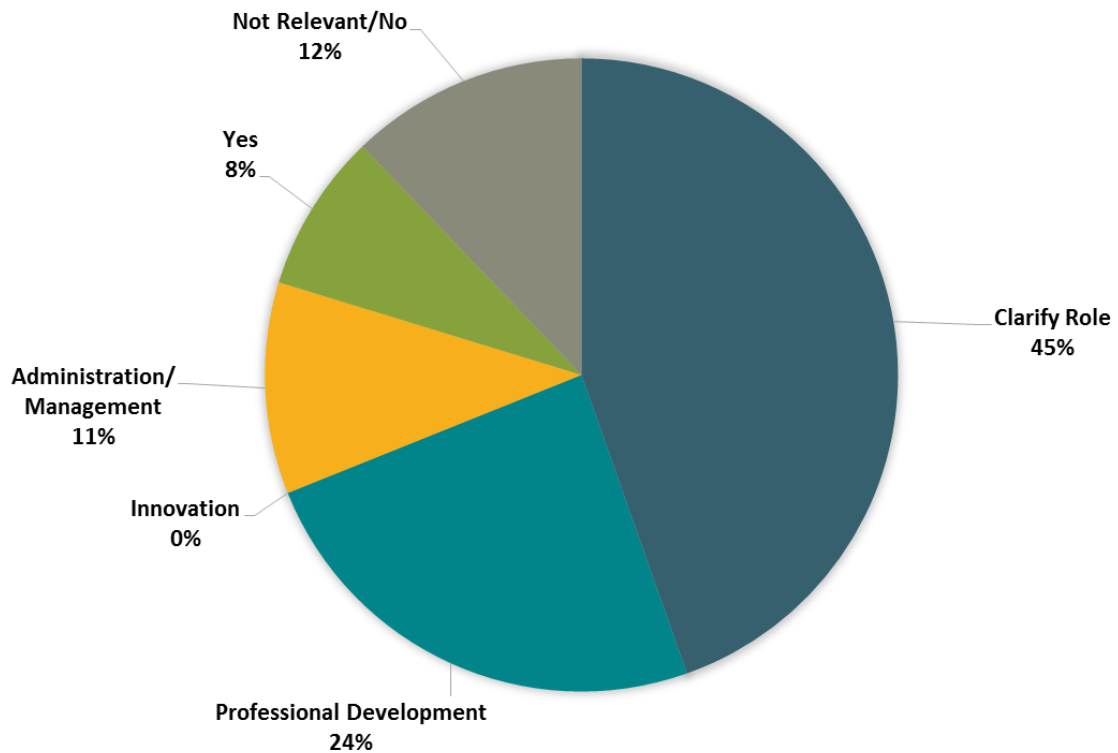
Clarify Role: Create synergies between RPN and RN roles, and potentially removing the word ‘practical’ from the RPN name as it does not reflect the larger scope of work RPNs and conducted research showing the benefits to care provided by RPNs as well as participate in pilot studies. Help RPNs promote their work to their family and social circles is another way of promoting awareness of the profession in the community.

Professional Development: Create opportunities for simulated learning in colleges and facilities; develop knowledge transfer opportunities from retiring RPNs, teach RPNs to navigate organizations

Innovation: Research ideas that are working on a global/world-wide level. For the RPN Coaching Role, implement and promote the use of personal devices to clients to promote active living and healthy eating; RPNs can receive this information as their coach

Involvement with the Innovation Fund

Question 14: “Do you hope to somehow be involved with the Innovation Fund? If so, how do you envision being involved?”



Only 76 respondents provided feedback. Similar to the previous question, the responses were applied to the major idea categories with a few additional categories relevant to the question. The need for Role Clarity was the largest category (45%) followed by Professional Development (24%). Administration/Management activities (11%) were present and scored low. There were no comments for Innovation (0%). A small percentage (8%) indicated that they would like to be involved but did not specify how, and 12% of the responses indicated that they would not like to be involved or provided feedback that was not relevant (12%). More detailed descriptions of how RPNs want to be involved or support the Innovation Fund’s work can be seen below.

Clarify Role

- Join the RPNAO
- Create additional job availabilities
- Develop a liaison program with RNs and RPNs working together

- Represent RPNs through leadership
- Promote RPNs within family, friends, and community/work groups
- Participate in public speaking and advocacy initiatives

Professional Development:

- Participate in the development of a specialty certification program
- Take certification courses/programs
- Advocate for continuing education

Innovation:

- Attend Meetings on how to use the fund
- Gain access to employment in Home Care, such as Case Management positions as most of these clients are seniors with stable chronic conditions (currently not available to RPNs, only healthcare professionals with Degrees)

Administration & Management:

- Participate in the planning and implementation of the fund
- Coordinate or participate on a local level

Developing the Innovation fund and getting RPNs ready for innovation

Question 15: *“What additional advice would you have for us in developing the innovation fund and getting RPNs and others ready for innovation?”*

Most responses were related to things respondents thought that the Innovation Fund should work to accomplish. Themes related to advice for developing the innovation fund related to:

- **Communication:** Respondents want to be informed about what the Innovation Fund decides to focus on and updates on its work. RPNs want to be engaged, and suggested methods included: on-going surveys, emails, and channelling messages through CNO. There is at least some excitement about the Innovation Fund and what it could accomplish so RPNs want to stay informed and involved and build further excitement and momentum
- **Encouragement:** Several respondents encouraged continuation of the work that is already happening, and appreciated the creative approach and engagement of RPNs
- **Partnerships and Collaboration:** Respondents see the need to collaborate with other organizations and health professionals.

7.3.3 Survey Sub-Appendix

Detailed Respondent Demographics

To better understand the demographics of the Ontario's RPN group, the survey explored the health profession groupings, primary responsibility in the care setting, the LHIN distribution of the respondents and the age group distribution.

The majority of the respondents are RPNs and 20% are RNs. All age groups are represented.

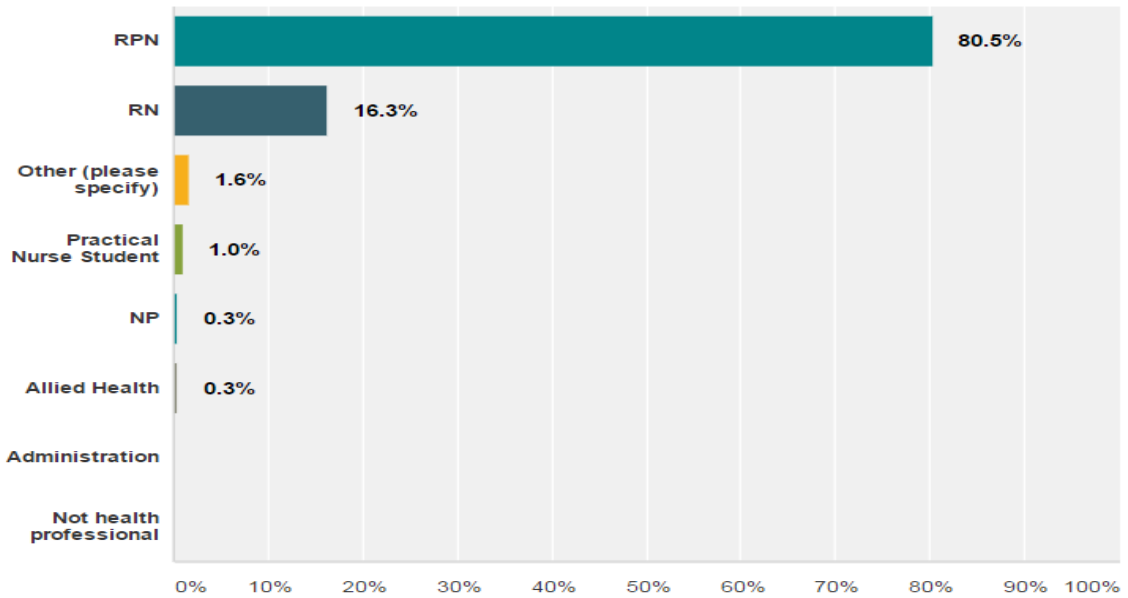
The survey also explored the number of years RPNs have worked and their employment status. While respondents represent all levels of experience, 1/3 of the respondents have more than 21 years of experience. Slightly over half of respondents work full-time, and the majority are direct care providers.

RPNs who responded to the survey came from different years of experience, work settings, and employment status, indicating that the survey responses represent perspectives of RPNs from different situations and experiences. There are also two cohorts of respondents forming the least experience and most experienced RPNs. The group with 0-7 years of experience are between the ages of 18-29 and the group that had over 21 years of experience are between the ages of 55-64 years.

While most respondents mainly provide direct patient care, this survey also captures the perspectives of members who also have healthcare administration and other responsibilities in the care setting.

Health professional group

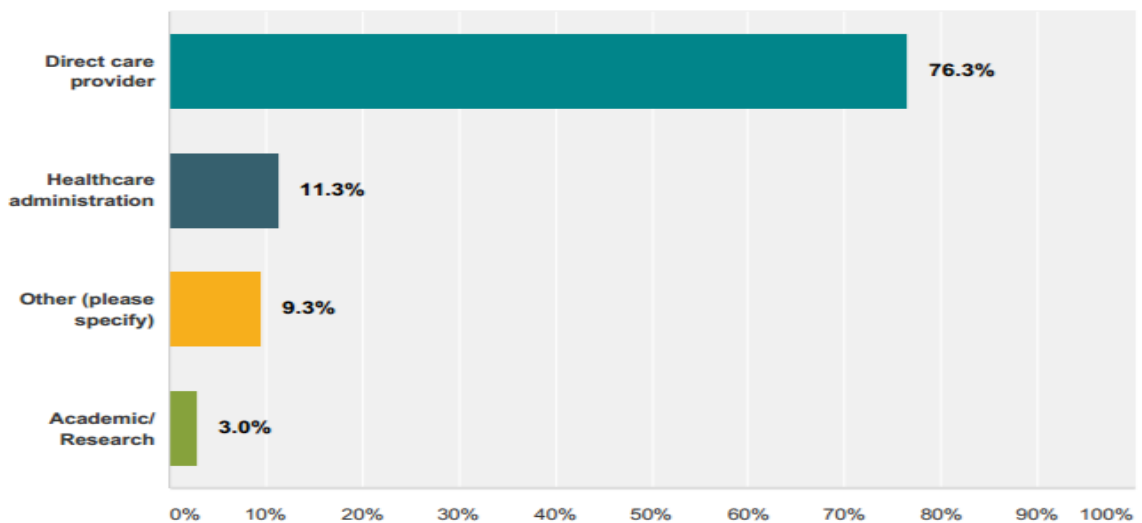
Question 1: Which health professional group do you belong to?



Over 2/3 of the respondents are RPNs and the second largest group are RNs (16%).

Primary Responsibility in the Care Setting

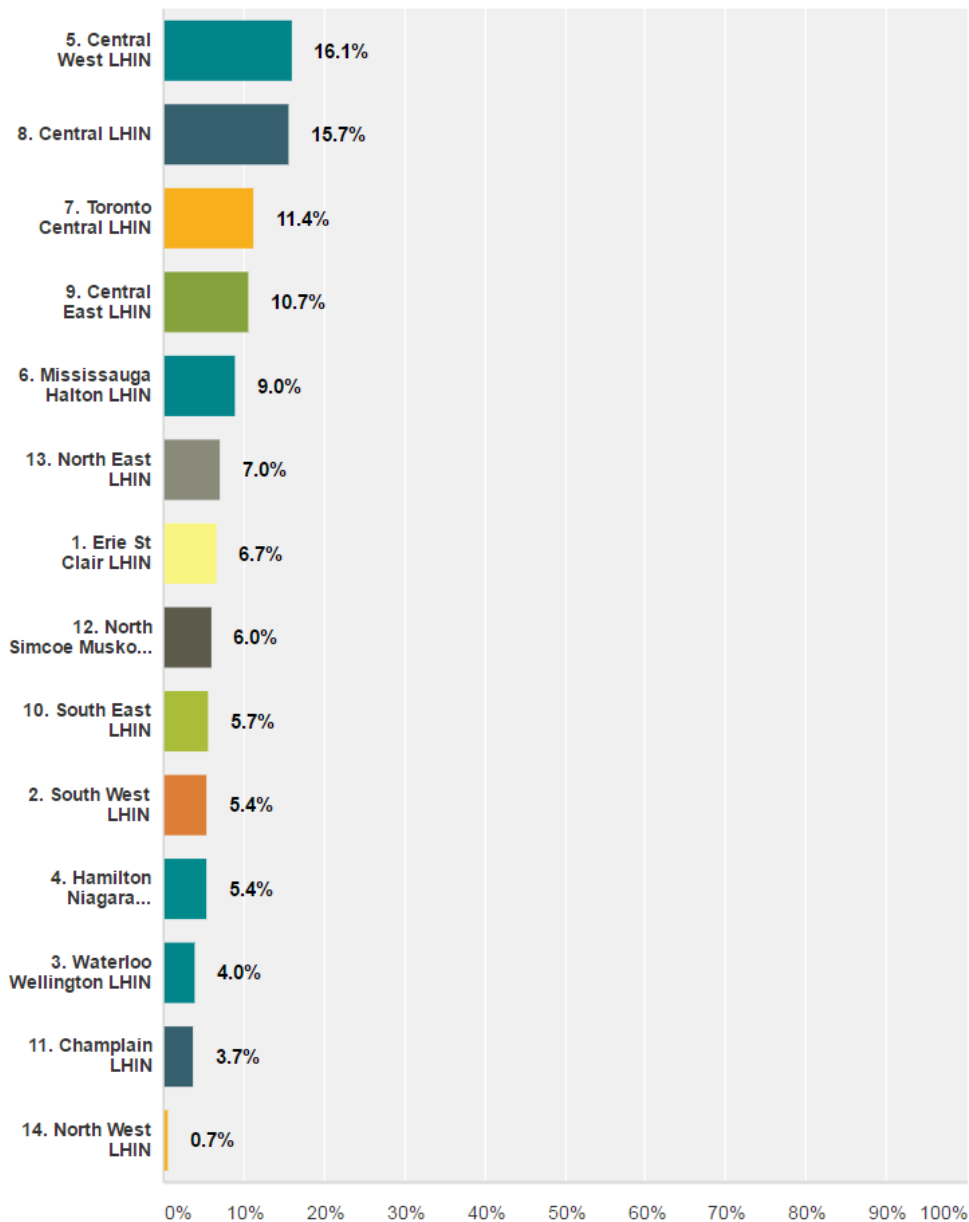
Question 2: What are the primary responsibilities of your role?



The majority (2/3) of the respondents are responsible for direct care, and about 10% of the respondents have healthcare administration responsibilities. Responses from academia or research were minimal.

LHIN distribution

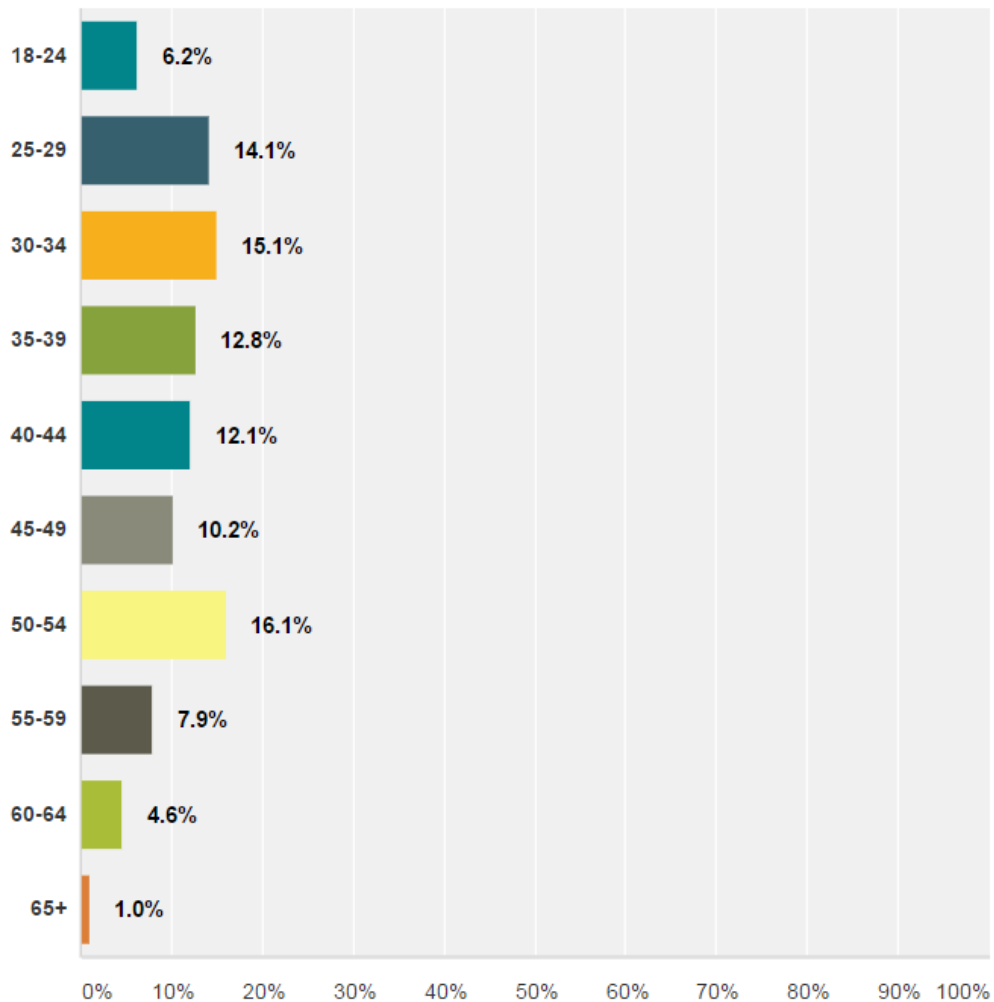
Question 3: Please check all that apply and refer to above image if needed.



There was broad representation from across the LHINs. There was greater representation from central Ontario, with just over half of respondents from this area (Central West, Central, Toronto Central and Central East LHIN).

Age Group Distribution

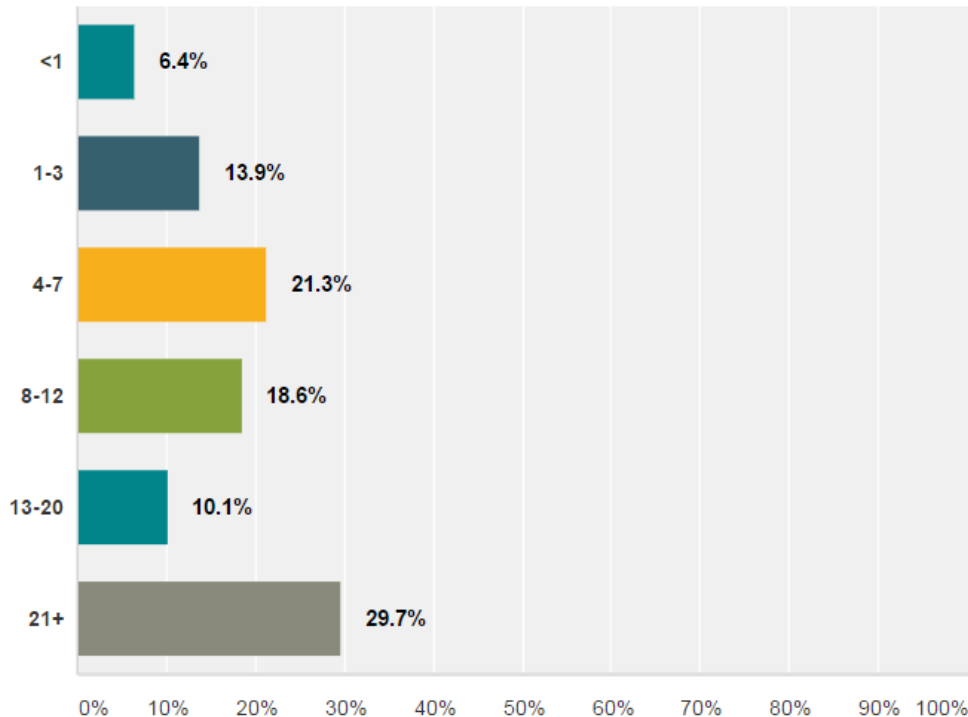
Question 4: Please select your age range:



The respondents were from all the age groups with the majority of the respondents being between ages 25-59 years of age (90%). The 50-54 age group was the largest single group (16%) and the 30-34 was the second largest group (15.1%).

Number of years in the nursing profession

Question 5: Please select the number of years you have worked in the nursing profession:



Respondents had a range of experience, the majority of the respondents had more than 4 years of experience and approximately 1/3 of the respondents had 21+ years of nursing experience.

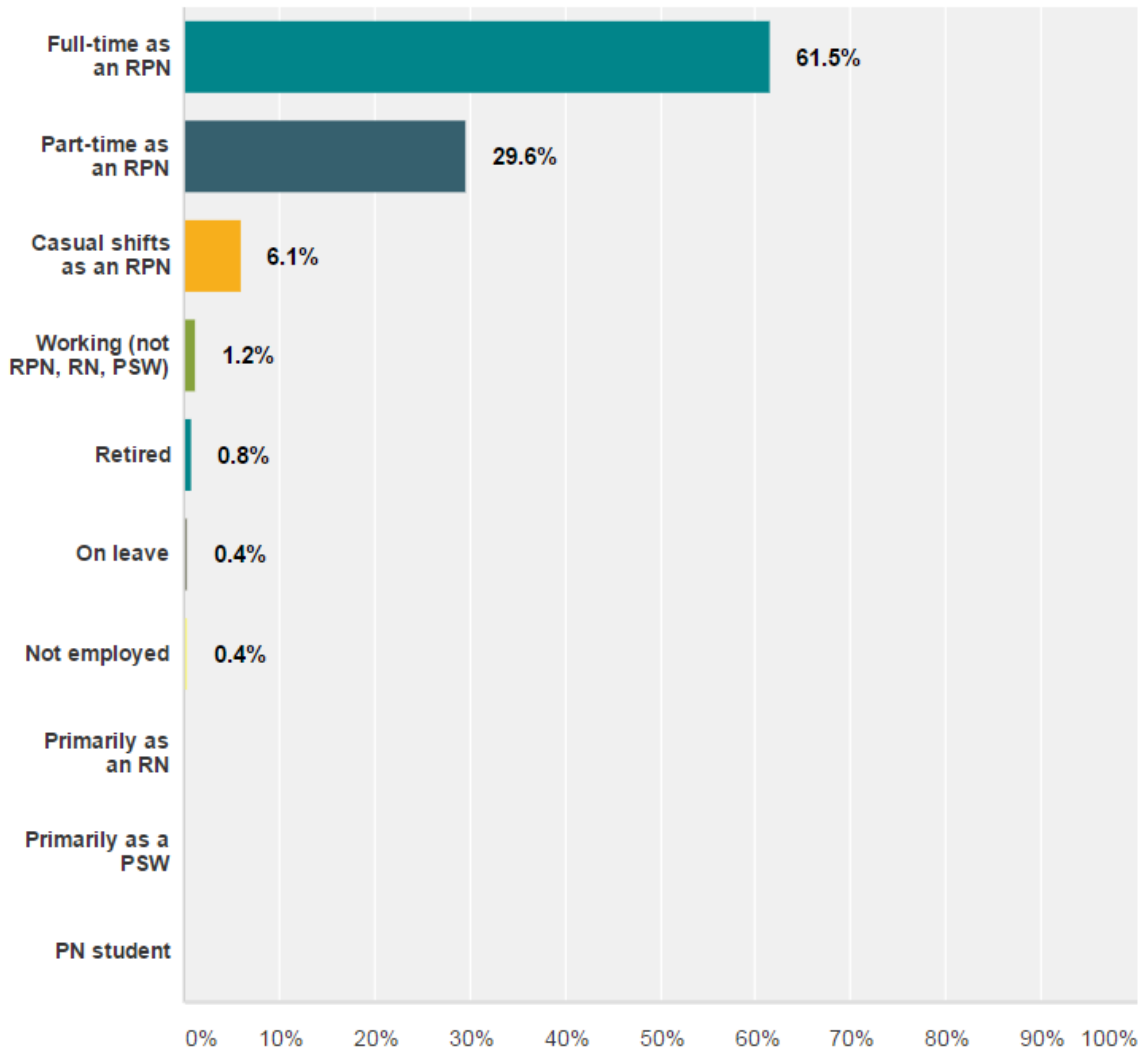
Comparing cohorts

It was possible to combine the age groups and years of experience to determine any correlations in the responses.

The two cohorts for comparison purposes were between 18-29 years of and 55-64 years. The younger group had 0-7 years of experience (95%) and the older group had 21+ years of experience (81%).

Employment Status

Question 6: Please select the answer that best represents your current employment status



Note that this question only appeared if the survey respondent selected that they are an RPN. More than half of respondents for this question work full-time as RPNs, and approximately 1/3 work part-time as RPNs. Those who are working casual shifts as RPNs, working but not as RPNs, RNs, or PSWs, retired, on leave, or not employed had lower response rates. Respondents who work primarily as RNs, as PSWs or PN students either did not respond or were not represented in the survey.

7.4 Appendix: Innovation Platform Research

7.4.1 Introduction

In the following report, we identify ways to capture, collaborate and explore innovative ideas on a continuous basis through an innovation program. Based on research of existing online/offline collaboration tools we will provide insights into how RPNAO can enable an on-going, implementable innovation program within the health system.

The primary question to guide this research is: *How can RPNAO, through the RPN Innovation Fund, nurture, collect, and use innovative ideas on a long-term basis so that innovation work supported by the fund continues to be relevant and dynamic.*

7.4.2 Summary

Innovation is supported through a cycle and process of events. While no commonly accepted model of innovation was seen, we identified 5 stages that are required to enable innovation.



To enable innovation, RPNAO will need to determine where along the process it would like to focus its efforts and the best tools to use for that stage of the process. While completing each step is critical to making ideas into sustained change, a partnered approach may work that leverages contributions from each partner to support the innovation process.

Through our research findings, it is evident that online innovation platforms are a leading trend in enabling innovation. Online tools have evolved to support organizations that are looking to create continuous innovation programs. Online innovation platforms assist in creating a continuous model and open channel for collaborative idea generation, sharing lessons learned and optimizing service offerings based on best practices from different regions. To gain further insight and development of ideas, offline face-to-face workshops or focus groups are helpful. It is important to leverage the tools required for the different phases of the innovation process.

There is a plethora of different idea management systems that exist. We have identified and researched several of these systems. These tools specifically focus on collaboration to foster innovation and the majority include different modules to support the innovation process. The cost of most of these

solutions are hard to determine up front as they are dependent on the size of your population, modules you want to use, customization and other variants.

Organizations have faced a number of barriers and enablers to innovation in the past. Some common areas within an innovation program that organizations often overlook, are:

- Creating engagement to generate ideas, and
- Outlining evaluation criteria to support the selection of ideas.

The outcomes of innovation need to be tracked to ensure goals are being met. The tracking of innovation Key Performance Indicators is increasingly common practice. Online innovation tools automatically track statistics to assist in understanding the success of an innovation program.

7.4.3 Methodology

Research was conducted through publically available online information sources. The following were some common search terms that facilitated findings:

- Open Innovation
- Continuous Innovation
- Idea Generation
- Idea management Systems
- Collaboration Tools
- Innovation Process
- Idea Generation tools
- Online vs Offline Innovation Platforms

7.4.4 Findings

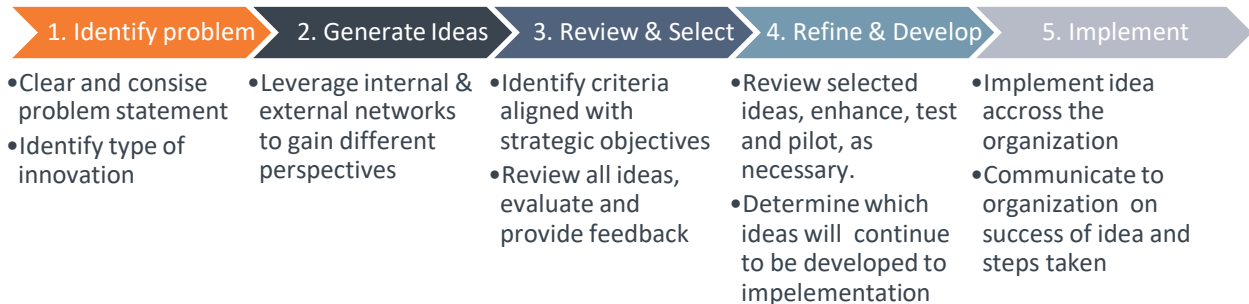
Innovation Process

Key Takeaways:

- There are five (5) main stages within the innovation process, and it is critical that all stages be completed for successful innovation
- RPNAO will need to determine where in the innovation process it would like to focus its efforts

In a world where people, processes and products are consistently evolving, organizations have to innovate or they risk becoming irrelevant to consumers.¹ Successful businesses not only respond to their current customer or organizational needs, but also anticipate future trends and develop an idea, product, service, process or tool that allows them to meet future demand rapidly and effectively.²

Innovation is frequently discussed, however no commonly accepted framework or process was identified. Through a review of several different approaches to continuous innovation, the following diagram summarizes five (5) recognized stages of innovation.



The following diagram provides an illustration of a sample innovation process found in the research that is aligned with the above consolidated process.



Within each stage of the consolidated innovation process there are several activities that need to happen:

- 1) **Identify the Problem:** Identify the problem and create the innovation opportunity. This stage will set the tone of what response is received from the users; the clearer the problem, the more responses will be useful. It is good practice to align problems with the organizations strategic goals, a good starting point is to understand what type of innovation is appropriate. Doblin’s Ten Types of Innovation provides some guidance on different types of innovation beyond product

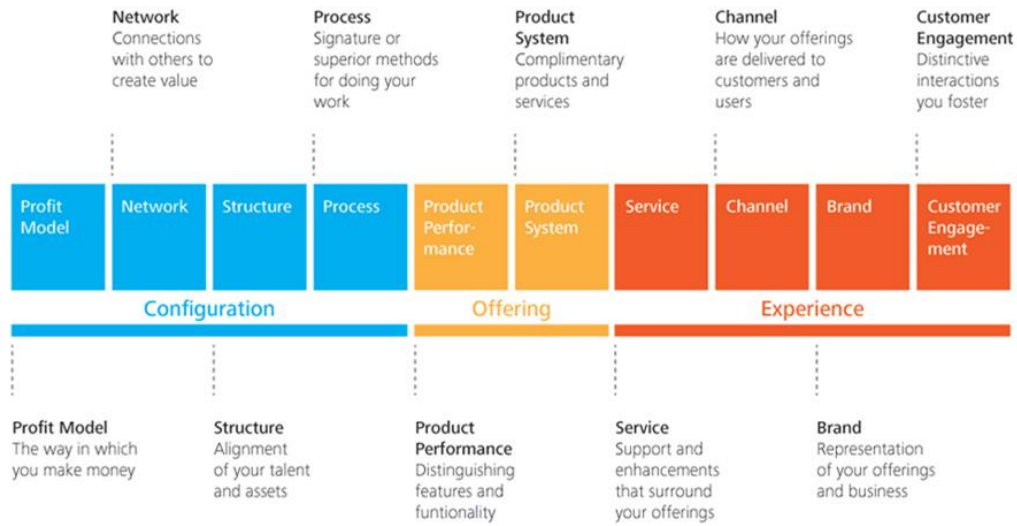
¹ Daniel Nolan, “6 Reasons Why Innovation Is a Survival Skill – Innovation Excellence,” accessed June 5, 2017, <http://innovationexcellence.com/blog/2016/01/05/6-reasons-innovation-is-a-survival-skill/>.

² Ibid.

³ “Innovation Tools, Models & Processes,” accessed June 12, 2017, <http://www.solutionpeople.com/innovation-creativity-tools-processes-models/#CI>.

development. Organizations use the Ten Types as a diagnostic tool to assess how to approach innovation internally, it can help analyze a competitive environment, and it can reveal gaps and potential opportunities for doing something different and upending the market.⁴ While directed towards the for-profit sector, it can also support the not-for-profit sector.

Diagram: Ten Types of Innovation⁵



- 2) **Generate Ideas:** Leverage internal and external networks to provide ideas that solve the identified problem. Open Innovation is a concept where organizations look beyond their R&D teams to enable innovation. They are looking inwards to individuals and teams, and outwards to suppliers, customers, and rivals to support their Innovation. This shift has led to a more creative process with ideas generated from individuals or teams with different outlooks on determining what the problem is or how to solve a problem. Through the use of tools, organizations can determine who they would like to participate in this phase. It is important for organizations to ensure that the problem they are looking to solution is structured and clearly defined. Sharing selection criteria is also encouraged to help users understand what the organization is looking for and to determine the elements of a “great idea”. The best way to gain insight and ideas is to look outside of the managerial/executive roles and to look to the individuals and teams that are working with clients, products and processes on a day to day basis, since they have the knowledge and experience to help generate the best ideas. In addition, people become more engaged when they see their ideas being used.⁶

⁴ “Ten Types,” *Doblin*, accessed June 7, 2017, <https://www.doblin.com/ten-types>.

⁵ *Ibid.*

⁶ Harvard Management Update, “Getting the Best Employee Ideas,” *Harvard Business Review*, February 28, 2008, <https://hbr.org/2008/02/getting-the-best-employee-idea>.

- 3) **Review & Select:** Identify prioritization criteria aligned with the organizational strategic objective and goals. Once you have received ideas from your network you will need to take the time to review and evaluate each one. This phase may be one of the more time consuming phases. Criteria used in the selection process varies from project to project but should generally line up with your strategic goals as an organization. Some potential items to consider are:
- a. *Impact: How will this help you and your team/organization in the future?*
 - b. *Interest: How does this relate to the needs and priorities within in your team or organization? Does this idea fill a practical need or meet some market demand? Is this idea a fad/one time need?*
 - c. *Balance: To what extent would this be relevant to the needs of you and your team across the organization (size, location, role)?*
 - d. *Cost: Are the costs in line with available budgets?*
 - e. *Profitability: will this idea create a revenue stream*
 - f. *Feasibility: project proposed is achievable based on timelines, available resourced, expertise etc.*
 - g. *Scalability: can the idea be duplicated with consistency?*
 - h. *Stickiness: Can the idea become a habit or trend*

In public health within Ontario, research funding prioritization criteria considers:

- **Interest:** How does this idea relate to the needs and priorities of your health unit? How interested is your health unit on developing this idea?
- **Impact:** To what extent would knowledge generated from this idea help your health unit meet the Ontario Public Health Standards?
- **Balance:** To what extent would this idea be relevant to the needs of health units of different sizes and in different regions?
- **Feasibility:** Project proposed is achievable based on the project timelines, available resources, and expertise of the project team

Similar themes can be seen across these two sets of prioritization criteria, including a focus on strategic needs and relevance, the degree of impact, and whether it is realistic to achieve.

- 4) **Refine & Develop:** Review selected ideas, enhance, test and pilot, if applicable. In most cases each idea will require further exploration and refinement. At this stage an idea that will be explored further becomes its own project, and should be treated through a Project Management lens. Resources can be dedicated to support the development of the idea and see it through to the implementation phase. Ideas that are selected to move through to the refinement and development stage do not always become implemented; further exploration or a pilot with the idea may provide further insight to deem it a “no go”.
- 5) **Implement:** Once an idea has run through a successful pilot or has been refined enough, it is ready to be implemented. Generally, a team will be dedicated to its success and a project plan will be developed. Some implementations may be larger than others which would dictate which methodology to use, however in all cases it is essential to the innovation program that the

success of the idea and story of its evolution is communicated to the organization. This will create interest in getting involved with the program and also provide context to individuals that were or have been involved in the process. They will see that the idea generation phase is important and how it has contributed to the overall success of Innovation within the organization.

Innovation Tools

Key Takeaways:

- There are several idea management tools that exist, once RPNAO determines what part of the innovation process they are interested in exploring. Additional research into the available tools can be completed
- There are several tools that can support online and offline innovation, understanding which type to use and when can help frame the overall continuous innovation program

Traditionally, innovation would happen in a physical setting; however, with increasing access to the digital world, organizations can now leverage online tools that support an innovation program. Organizations need to identify opportunities quickly that can help them keep their competitive edge and continuously gather insight from individuals and teams in different locations. An overview of some of the online innovation and communication tools are demonstrated below.

Tool	Innovate (PlanBox)	SoapBox	QMarkets (Ideation 2.0)	Brightidea	Spigit	Quip	Slack
Type	Idea Generation	Idea Generation	Idea Generation	Idea Generation	Idea Generation	Communication Tool	Communication Tool
Clients	Blue Cross, Bridgeston, Verizon, Willis Towers	Coca-Cola, Anthem, Dynacare, Viceroy Hotels, BMO, Metrolinx	Ford, Liberty Mutual, Lufthansa, Nestle, Swarovski, Vifor Pharma	GE, Cisco, HP, Amex, MasterCard, Southwest Airlines, Cathay Pacific	UnitedHealth Gorup, AT&T, Siemens, AAA Insurance, Pfizer, PWC	Facebook, Quora, LinkedIn, Pinterest	Nasa, Lush, SurveyMonkey, Airbnb, Harvard, LinkedIn, Autodesk, Ebay, Ogilvy
Platform	Cloud, SaaS	Cloud	Cloud, SaaS, Web	Cloud	Cloud, SaaS, Web	Cloud, SaaS, Web	Cloud, SaaS, Web
Mobile	No	Apple & Android	Apple & Android	Apple & Android	Apple & Android	Apple & Android	Apple & Android
Pricing	\$6/month/user	\$199 - \$1,430	N/A	N/A	N/A	\$30/month	\$8 - \$15 /user/month

		/month					
# of users	100-1,000+	100-1,000+	50-1,000+	500-1,000+	500 – 1,000+	10 – 1,000+	10 – 1,000+

As the innovation paradigm is shifting and the trend in innovation programs is moving towards online tools, many of leading tools are similar in structure. While the research identified a lot of content on innovation, there does not appear to be consolidation around leading ideas or tools. Much of the information on online innovation platforms was promotional in nature, including reviews on tools or articles written by leading software firms. Additional research and demonstrations would need to be completed to understand which platform would be the best fit for RPNAO.

Below are some of the common traits to look for in online innovation platforms.



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Regardless of new technologies, there are still benefits to “collaborating” in face-to-face settings. The best innovation environments combine the benefits of both – online and offline. Each stage of the

⁷ Ibid.

innovation process requires different user inputs and tools to reach the most successful solutions in the most efficient way. Momentum is key within an innovation program, in order to keep the collaboration process moving it is important to have a way to follow up with people and keep in touch with them. If innovation is fostered offline be sure to return online to continue collaboration efforts⁸.

⁸ QMarkets, "Innovation Ecosystem: Digital vs. Offline Innovation," *Qmarkets*, May 27, 2016, <https://www.qmarkets.net/bridging-the-gap-between-digital-and-offline-innovation/>.

The following table outlines some supporting innovation tools:

Platform	Type	Description	Strengths	Limitations
Online	Open Innovation / Idea Generation Tools	Bringing internal employees, partners, customers and industry leaders into an online forum where ideas can be shared and solutions can be explored.	<ul style="list-style-type: none"> • Participation from all geographical locations • Extended time to think through concepts • Similar ideas grouped together • All participants are equal, less dominant personality comes through • Platform integration • Visibility to all team members • Ability to build off of created ideas, add comments, vote • Ongoing knowledge transfer 	<ul style="list-style-type: none"> • Overlook ideas that are not articulated well • Lack of response/engagement • Misinterpretation of ideas • Administration of tool and selection process (information overload)
	Surveys	Questionnaire that the target audience can complete over the Internet. Online surveys are usually created as Web forms with a database to store the answers and statistical software to provide analytics ⁹	<ul style="list-style-type: none"> • Low cost • No need for log in • Customizable 	<ul style="list-style-type: none"> • Responses are individual • Only through analysis can ideas be grouped • No collaboration of ideas or comments to support and enhance ideas
	Communication Tools	Communication boards, document sharing and group development tools to help keep everyone in the loop. Can be internal teams or a mix of internal/external. Seen as Instant messaging vs idea	<ul style="list-style-type: none"> • Participation from all geographical locations • Extended time to think through concepts • Visibility to all team members • Promotes collaboration which leads to innovation 	<ul style="list-style-type: none"> • No evaluation/selection methods

⁹ "What Is an Online Survey? - Definition from Techopedia," *Techopedia.com*, accessed June 7, 2017, <https://www.techopedia.com/definition/27866/online-survey>.

		management		
Offline	Workshops	Bringing together a group of individuals, usually for 1-3 days to review issues and develop solutions together. A facilitator will use different methods to drive the conversation i.e. Brainstorming, Mind-mapping, SCAMPER	<ul style="list-style-type: none"> • Focus is solely on innovation • Relationship building • Energy created through environment • Participants can build on responses 	<ul style="list-style-type: none"> • Lack of time to provide input • Strong personalities tend to dominate conversation • Scheduling issues, not everyone is available to participate • Expensive
	Innovation centres (i.e. Centre for Social Innovation, WeWork, MARs)	Co-working space where individuals in a community are invited to work together, share ideas and promote learning, brings together people who would not usually run into one another (purpose: encourage chance meetings, create community, foster education) ¹⁰	<ul style="list-style-type: none"> • Diversity in backgrounds and knowledge base • Serendipitous/ chance meetings • Relationship Building 	<ul style="list-style-type: none"> • Not inclusive of dispersed organizations • Expensive (real estate)
	Focus Groups	A face-to-face meeting with a sampling of customers that helps you learn about their needs and perspectives. Focus groups also enable your customers to find out more about your company ¹¹	<ul style="list-style-type: none"> • Quick and inexpensive to arrange • Participants can build on responses • Ability to engage internal and external parties • Live feedback or idea generation 	<ul style="list-style-type: none"> • Strong personalities tend to dominate conversation • Require a moderator • Analysis of compiled data requires skill and experience • Lack of time to provide input

Additional benefits to idea management systems can be found in the Research Report Sub-Appendix.

¹⁰ QMarkets, "Innovation Ecosystem."

¹¹ "Focus Groups | Customer Perspective on Your Product," *MaRS*, accessed June 7, 2017, <https://www.marsdd.com/mars-library/focus-groups/>.

Enablers & Barriers

Key Takeaways:

- There are some common areas within an innovation program that organizations overlook
 - Creating engagement to generate ideas, and
 - Outlining evaluation criteria to support the selection of ideas.

With any new program it is important to understand the common pitfalls and how to avoid making them. The following are barriers and enablers to successful innovation. ^{12,13}

Process Stage	Barrier	Enabler
Identify Problem	Limited understanding of problem	<ul style="list-style-type: none"> • Look at the problem from different lenses • Provide selection criteria when outlining problem • Provide type of innovation (i.e. product, process, service line)
Generate Ideas	Lack of Engagement From Users	<ul style="list-style-type: none"> • Provide Strong Communication & Feedback on generated Ideas • Look beyond your internal organization • Create incentives • Align Employee Performance Goals • Allow log in through integrated platforms, i.e. LinkedIn, Facebook • Anonymous participation • Note from sponsor
Review & Select	Vague evaluation criteria for selection of ideas	<ul style="list-style-type: none"> • Determine Selection Criteria in advance • Create Evaluation Committee “whole brain thinkers” • Develop Innovation Culture – how to frame ideas
Refine & Develop	Lack of funding	<ul style="list-style-type: none"> • Include budgeting criteria in evaluation • Ensure 10% of R&D budget is allocated
Implement	Lack of team to execute	<ul style="list-style-type: none"> • Ensure clarity in roles and responsibilities • Highlight individuals outside of innovation committee

¹² Ibid.

¹³ “Innovation Articles | Seven Strategies for Generating Ideas,” Innovation Resource, accessed June 7, 2017, <http://www.innovationresource.com/innovation-speaker-resources/seven-strategies-for-generating-ideas/>.

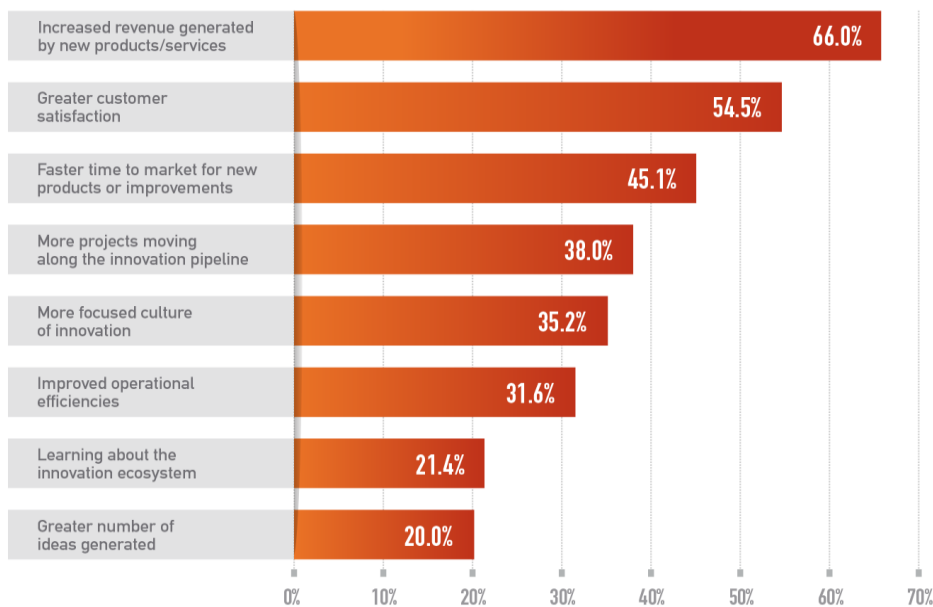
Reporting on Innovation

Key Takeaways:

- The outcomes of innovation need to be tracked to ensure goals are being met
- Online innovation tools automatically track statistics to understand the success of the program

When looking to create an innovation program one of the biggest questions is how to determine if your program is being effective. One of the most common metrics used is to measure ROI (Return on Innovation) and revenue generated from ideas, this is a misrepresentation of total success and should not be used as the only determinant. More organizations are turning to Key Performance Indicators (KPI's) to measure the success of their innovation programs in conjunction with revenue. The following diagram outlines some of the top measures of success for innovation in companies.¹⁴

TOP INNOVATION SUCCESS MEASURES



An organization should take into consideration where they are at in their innovation program; newer entrants into innovation may want to consider more metrics than raw revenues. There are critical

¹⁴ "How Corporate Innovation Programs Are Measuring Success | Web Strategy by Jeremiah Owyang | Digital Business," accessed June 7, 2017, <http://www.web-strategist.com/blog/2017/03/20/how-corporate-innovation-programs-are-measuring-success-yet-is-it-right/>.

metrics to consider tracking when communicating to leadership, including:

- Cost savings opportunities identified or generated
- Participants/level of participation
- New product opportunities discovered or launched
- New processes implemented
- Ideas generated
- Innovation challenges run per year
- Total outcomes¹⁵

More than 70% of corporate leaders see innovation as a top three business priority, but only 22% set innovation performance metrics.¹⁶ Most online innovation tools track this information on an ongoing basis and customize it into their program. Online tools succinctly represent data through live dashboards and analytics that are accessible at any time. These dashboards can provide an understanding of activity within the site to provide some understanding of how the organization is using the platform and how engaged they are. Within most platforms, you can identify how many users have logged in within a specified timeframe (i.e. last 7 days), how many ideas have been generated and how many comments have been submitted etc.

¹⁵ “ Successful Innovation Program Secrets 2016” accessed June 5, 2017, http://www.brightidea.com/wp-content/uploads/Successful-Innovation-Program-Secrets_2016.pdf

¹⁶ “How To Measure Innovation (To Get Real Results),” accessed June 7, 2017, <https://www.fastcodesign.com/3031788/how-to-measure-innovation-to-get-real-results>.

7.4.5 Research Report Sub-Appendices

Additional Benefits of Idea Management Systems

- **They focus employees’ creative efforts around specific organizational goals and objectives.** Research by two leading suppliers of idea management systems — Imaginatik and General Ideas — shows that when employees are asked to generate ideas or suggestions around a specific business problem or objective, the quantity and quality of ideas tends to increase significantly.
- **They encourage employees to capture all of their ideas.** In most types of businesses, employees rarely capture their ideas, and most of their “eurakas!” are lost forever. Idea management systems help to solve this problem. Employees can quickly jot down the germ of an idea, and then return to the system later to add details to their new creation. In addition, many idea management tools help employees to share ideas, comment on, add to and further improve each other’s ideas, and acquire knowledge by viewing others’ ideas.
- **Idea management systems collect ideas from all areas of the organization,** not just specialized departments like R&D and marketing.
- **By placing ideas in a shared repository, idea management systems promote greater transparency.** Employees can see the outcome of all of the ideas they have submitted, which increases their enthusiasm for and participation in idea campaigns. Also, these database-driven tools make it easier to measure how much each implemented idea has contributed to the firm’s bottom line. This makes it easier, in turn, to reward employees who have contributed winning ideas.
- **Idea management systems help companies to share best practices.** For companies that have multiple offices or locations, idea management systems enable them too quickly and cost-effectively share ideas and best practices that have been used successfully at one location with other locations. This allows them to multiply the bottom-line benefit of a single cost-saving idea many times over. Usually, corporate locations or divisions operate like silos, rarely sharing information, ideas and best practices. Web-based idea management systems can be accessed via any computer with an Internet connection, from anywhere in the world, vastly simplifying the transfer of valuable ideas and best practices across geographical and organizational barriers.
- **They help companies to increase their speed to market.** Idea management systems help companies to capitalize on their best ideas faster. They do so by providing a structured process for evaluating ideas and selecting the best for implementation, and by providing a set of checks and balances to make sure that all ideas are promptly reviewed and evaluated.
- **They can be used in many types of common corporate applications.** Idea management systems not only provide a valuable tool set for developing new product and service ideas, but can also catalyze greater results from corporate cost-reduction initiatives. You can also invite outside partners, such as suppliers, dealers and joint venture partners, to contribute ideas on a secure extranet site.

Why do companies innovate?

The following list outlines common reasons why companies innovate:

- **Increasing Competition:** Competitors are getting smarter, faster, and hitting the market with new and exciting products more rapidly. Additional competition is also coming from below in the form of startups. The hurdles for startups are shrinking.¹⁷
- **Increasing Globalization:** Companies, big and small, are all around the world and have global access. National boundaries are falling away where business customers are concerned.¹⁸
- **Increasing Consumer Expectations:** With social media and the continuing advancement of technology, marketing will become increasingly personalized for each customer. This will require new ways to market, advertise products and services, as well as gain and retain customers. The modern consumer is more informed and, thanks to globalization, has more options available to them.¹⁹
- **Advancing Technology:** Using new technologies in a new way and developing new technologies through innovation will be essential to meet the challenge due to the change in technology. Fight technology with technology. If a company is not using technology to the fullest and its competitors are, the organization's lifespan may be limited.²⁰
- **Changing Workforce Demographics:** By 2025, millennials will make up 75% of the workforce and top-line revenue growth will depend on the ideas of an engaged workforce. If an organization does not know how to inspire their millennial workers and how to refine their ideas into new programs, their business will fall behind.²¹ This shortage not only puts pressure on all companies to get inventive in attracting talent, but also in developing training, mentoring and development programs so they can build their own talent and leaders²²
- **Changing how we work:** The workforce is becoming more social and more mobile. All indications are that this trend will continue. The use of social media technologies is part of today's business culture. More tools are coming to facilitate learning, communication and collaboration. Younger workers and consumers are not only skilled at using these tools but are expecting them.²³

¹⁷ Nolan, "6 Reasons Why Innovation Is a Survival Skill – Innovation Excellence."

¹⁸ Ibid.

¹⁹ Ibid.

²⁰ Ibid.

²¹ "The Four Key Capacities to Successfully Engage Employees in the Innovation Process | Innovation Management," accessed June 7, 2017, <http://www.innovationmanagement.se/2015/09/18/the-four-key-capacities-to-successfully-engage-employees-in-the-innovation-process/>.

²² Nolan, "6 Reasons Why Innovation Is a Survival Skill – Innovation Excellence."

²³ Ibid.

Additional Enablers and Barriers

Barrier: Engagement with the Innovation Platform

- One of the most common reasons that idea management tools fail is due to lack of engagement from the users. You can spend all the time in the world customizing your platform, determining your problem statements and developing your evaluation criteria but unless you have engaged employees to interact with the system it will be for nothing. In addition, if an employee submits an idea and never learns what comes of it, it can result in that employee becoming cynical, and no longer contributing their ideas to the program. Employees performance metrics often are not aligned with innovation. While employees are told to be innovative, their performance goals and compensation packages don't create the incentives to do so.

Enablers

- **Strong Communication:** Once employees take the time to log in, provide ideas and comment on other ideas ensure that there is a closed loop. Regardless if their idea is selected to be further explored it is important to share either why it was chosen or why it was not chosen. This can be done directly as comment to the posted idea so that other users can also see what selection criteria is being used to help with future idea generation
- **Look outside your Organization for Ideas:** Invite everyone to join the quest for new ideas, involve customers (past, present and future) in the process of generating ideas. Learn by observing what they are not doing, listening to what they are not saying. Recognize the sources of their frustration and find potential ways of eliminating it. Involve suppliers in product innovation: Provide suppliers with problems you are trying to solve and have them idea-generating working in concert with yours.
- **Create incentives:** The first thought that comes to most minds when thinking about incentives is money, in some cases this is the most effective method however it can also generate a lot of ideas that have not been thought out and create more work for the evaluation team.
- **Align Employee performance goals:** Ensure you have incorporated your innovation plans into employees compensation and annual performance plans. This will further create an innovation culture and help employees understand the value the organization is placing on this.
- **Helpful Tactics:** If possible, prime your target audience with a note from a sponsor, the higher the better; Anonymity improves participation; do not require account creation or login



Barrier: Evaluation & Selection of Ideas

- This is one of the most important steps within an organizations innovation program and it is often the one with the least amount of framework. Sometimes the most outlandish ideas can actually be the most innovative. Often Ideas can get overlooked for several reasons:
 - they don't look attractive at first glance
 - they lack context to fully understand the idea
 - criteria has not been established or is not in line with company objectives

Enablers

- **Develop Innovation Culture:** Build a strong culture of innovation by bringing employees through a series of innovation workshops. Employees are taught not how to come up with new ideas, but rather what to do with the good ideas they come up with, from knowing who should hear the idea to what that person should be hearing.
- **Determine selection criteria in advance:** Most idea management platforms build evaluation models into their platforms and organizations can customize the criteria and scale used to apply to each problem they are looking to solve. One common criteria looked at within online tools is number of votes or comments, however these merely identify the first popular ideas submitted to the system and often overlook the most creative and original ideas, so it is recommended to avoid this method of possible.
- **Create an Innovation Committee:** This is common trait of highly innovative organizations, the committee is responsible for reviewing ideas, providing input to help users enhance their ideas and evaluate the ideas to selection. These individuals can also act as champions throughout the organization to support the innovation goals and educate others on what is happening and where the organization is in its innovation program. It is recommended that these committees have a mixture of both staff and management to be successful. Be careful that innovation committee members are not 'tainted' or 'institutionalized' insofar as their way of thinking is concerned. They must also have some level of authority over the selection process and not be subject to being overruled by short-term incentivized driven senior managers.

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²⁴ "Innovation Tools, Models & Processes."

²⁵ Steve Glaveski, "How to Run an Effective Idea Generation Program – Innovation Excellence," accessed June 7, 2017, <http://innovationexcellence.com/blog/2015/04/20/how-to-run-an-effective-idea-generation-program/>.

²⁶ "The Innovation Steering Committee as a Guiding Coalition to Change Culture," *Innovation Management*, August 18, 2014, <http://www.innovationmanagement.se/2014/08/18/the-innovation-steering-committee-as-a-guiding-coalition-to-change-culture/>.

²⁷ Stephen Wunker, "5 Strategies Big Businesses Use To Build A Culture of Innovation," *Forbes*, accessed June 7, 2017, <https://www.forbes.com/sites/stephenwunker/2015/07/29/5-strategic-big-businesses-use-to-build-a-culture-of-innovation/>.

Ideas to incentivize engagement

The following ideas may be relevant in incentivizing people to join and participate in online communities.

Short, Targeted Campaign

- The crowd is often more inspired when they are looking to solve a specific problem against a deadline. Creating time-limited challenges or specific questions that require specific answers often yields both a higher response rate and a higher quality of ideas.

Reward for Engaging Others

- Many community engagement programs offer incentives to contributors, but research shows that the best way to not only improve engagement, but also overall idea quality, was to offer rewards to members who generated the most participation from other members.

Problem Statement

- Get your best writers involved. A short, compelling brief or problem statement can truly help the crowd connect to both the problem and the solution. These statements should be easy-to-read, easy-to-understand, and generate some sort of heart response.

Be Responsive

- You can't (and probably shouldn't) deliver on all ideas, but organizations should respond to every idea. And, perhaps more importantly, when ideas are moved forward, selected, and implemented, these changes should be communicated to the author of the idea and the community.

Multichannel Invitations

- There is no silver bullet that's going to get people to participate in a new community. However, when there are multiple invitations from various sources, it is more likely that an employee or customer will engage. Links from various appropriate pages on a website, social media invitations, videos posters, emails, and stickers are all great ways to get people involved.

Reward Participation

- In order to get people on board, it can be useful to simply incentivize adoption. Some clients offer random prizes to employees who signed up, some clients evaluate employees more favorably in annual reviews if they've contributed to an IdeaScale community.