Abstract guidelines for innovation projects

All abstracts must be relevant for a medical humanitarian audience. The total word count that the system will allow is 400 across all the sections listed below. Please read the guidelines below.

Please note, we are very interested in 'failed' projects where useful learning was gained - see this presentation from 2016 for an example.

Language: We can provide live translation for French speaking presenters at the MSF Scientific Days in London; however, the editorial process will be conducted in English so all abstracts and all slides must be in English.

Abstract Deadline: February 6, 2017

We are also interested in updates on projects presented in 2015 or 2016 (for a 'Where are they now?' session) where there are new processes, implementation, or outcomes to report. If you are reporting an update please add: "update on 2015/2016" to the end of your abstract title.

Stage of innovation

In the abstract submission system there is a box to tick to note whether your innovation project is at the Initiation, Development, or Implementation stage. See the Annex for more on these stages, to help you determine which stage best fits your work.

While we are particularly interested in projects that can show evidence of effect (ie outcomes – usually projects at the late Development or Implementation stages), we also value abstracts about early-stage projects (Initiation or early Development stages) that convey useful knowledge about processes. Please use the guidelines below to decide whether to report on process or outcomes.

Some projects may have a mix of process and outcome data to report – particularly if they are radical innovations - in these cases please choose your strongest data that can be reported within the word count.

Introduction

Describe the background to your project - the performance area or problem it is addressing, why that performance area or problem matters, including, if appropriate, why MSF should be addressing this issue.

Describe briefly what the innovation is, its characteristics, and the initial objective for the project – ie the change it is/was expected to bring.

Innovation projects reporting outcomes (at the late Development or Implementation stages)

Methods – *if you are reporting outcomes*

- Describe how and what baseline data were collected (ie data that allow you to know if your innovation provides benefit over existing solutions). If no baseline data were collected please note why and what was done to compensate.
- Describe how you analysed the outcomes of the innovation project. Eg, describe how and what indicators of success were measured, such as quality of care, reach, price, efficiency. Ensure the methodology is clear.
- Describe how any unintended consequences of your innovation, good or bad, were measured.

Results - *if you are reporting outcomes*

- Report the results of baseline data collection.
- Describe the outcome data that show whether or not the innovation offers a better solution to the problem it seeks to address compared to other/current approaches. Ensure that what you are reporting matches with the objectives in the Introduction.
- Describe any 'unintended consequences', good or bad, that derived from the innovation.
- Describe any uptake of the innovation in operations/programmes (beyond pilot level) and the outcome/how was it received outside the pilot/testing ground.
- Describe any sustainable integration of the innovation.
- Describe any scaling of the innovation (beyond limited contexts) including to what level (MSF Operational Centre, across MSF, externally). If it wasn't scaled, why not?

Innovation projects reporting processes (at the Initiation or early Development stages)

Methods – *if you are reporting processes*

- Please describe how and what baseline data were collected (ie data that allow you to know if your innovation provides benefit over existing solutions). If such data were collected please describe why these data were collected? If no baseline data were collected please note why and what was done to compensate.
- Describe how and what initial 'existing solution' scoping (market scanning and benchmarking) was conducted (ie data that allow you to know if you are 'reinventing the wheel'). If this was not done please state why not.

- Describe stakeholders involved in the innovation process (within MSF, other organizations, universities, companies, etc.), their roles and contributions. If none were/are involved, why not?
- Describe how the project was/is managed and resourced.

Results – *if you are reporting processes*

- Baseline data – report results of baseline data collection.
- Did the proposal follow the initially described objective? If yes, was it revised/challenged during the process and if so, how and by whom? If not, how did it change and who was involved in the identification of the new objectives?
- Describe any practical implications (administration, field access, resource issues, etc.) and if they were/are managed? If so, how? If not, why not?
- If you started this project all over again, what would you have done in another way or what should be different/what are the lessons learned?

Data reporting standards – all projects

- If you have quantitative data give actual numbers not just percentages. Do not use phrases like 'around half' unless supported by underlying numbers. Ensure that the denominator is clear throughout the analysis and include where needed.
- Means need standard deviations (SDs); medians need interquartile ranges (IQRs). Give 95%CIs and p-values where appropriate.

Conclusions – all projects

- Is the project ongoing? If yes, what are the next steps? If not, why not? Is it because it reached its objectives? Or was it stopped early ('a fail') – how was this 'fail' learnt from? (I.e. was it a good or bad fail?)
- Explain the implications (potential impact) of your work – what this means for practice, policy or advocacy for MSF or others.
- How will the learning from your innovation project be used by MSF?
- What should happen next in this area of innovation/with this project?

Ethics

All abstracts must contain an ethics statement. For innovation projects that do not involve research on human subjects, there is a self-guided, brief ethics framework for innovation projects available here. This should be consulted by the responsible owner for the project (e.g. an Operational Director). If the Innovation Ethics Framework has been followed, please tick the appropriate box in the submission system.

If your MSF innovation project, or the tests of your innovation project, involved research with human subjects, this must have ethics oversight by the relevant

Medical Director from the Operational Centre responsible for the research. Please see here for MSF ERB guidance.

In the submission system, you will need to choose from one of the options below:

- This study was approved by the following Ethics Review Board (ERB) (insert name of ERB, e.g. MSF ERB).

- This research fulfilled the exemption criteria set by the MSF ERB for a *posteriori* analyses of routinely collected clinical data and thus did not require MSF ERB review. It was conducted with permission from the Medical Director or delegated representative [insert name of Medical Director and Operational Section]

- This description/evaluation of an innovation project involved human participants or their data, and has had ethics oversight from the medical director or delegated representative according to the initial MSF Ethics Framework for Innovation or equivalent.

- This description/evaluation of an innovation project did not involve human participants or their data. Please select this option to confirm that you have applied the initial MSF Ethics Framework for Innovation (or equivalent) to help identify and mitigate potential harms.

- Other - please describe if your study does not fit into any of the above categories.

Conflicts of interest

- You will be asked to declare any conflicts of interest
- A conflict of interest exists when professional judgement concerning a primary interest (such as patients' welfare or validity of research) may be influenced by a secondary interest (such as financial gain). Financial relationships are easily identifiable, but conflicts can also occur because of personal relationships or rivalries, academic competition, or intellectual beliefs. A conflict can be actual or potential, and full disclosure is the safest course. Failure to disclose conflicts might lead to withdrawal of abstracts or presentations from the conference. All submissions must include disclosure of all relationships that could be viewed as presenting a potential or actual conflict of interest. Such disclosures will be published in the abstract booklet if they are believed to be important. Agreements between authors and study sponsors that interfere with authors' access to all of a study's data, or that interfere with their ability to analyse and interpret the data and to prepare and publish work independently, may represent conflicts of interest, and should be avoided.

- All authors must disclose any financial and personal relationships with other people or organisations that could inappropriately influence (bias) their work. Examples of financial conflicts include employment, consultancies, stock ownership, honoraria, paid expert testimony, patents or patent applications, and travel grants, all within 3 years of beginning the work submitted. If there are no conflicts of interest, authors should tick the box to state that there are none.

Please note that all MSF abstracts will be sent to the relevant Medical Director so that they are aware of what has been submitted.

If you have any questions, please get in contact with us: scientificday@london.msf.org

Annex: Stage of Innovation Project

Below is a diagram and list of components to help you choose the stage of your innovation project. Innovation projects will in reality not fall into these neat categories, but please select the stage most relevant for your project.

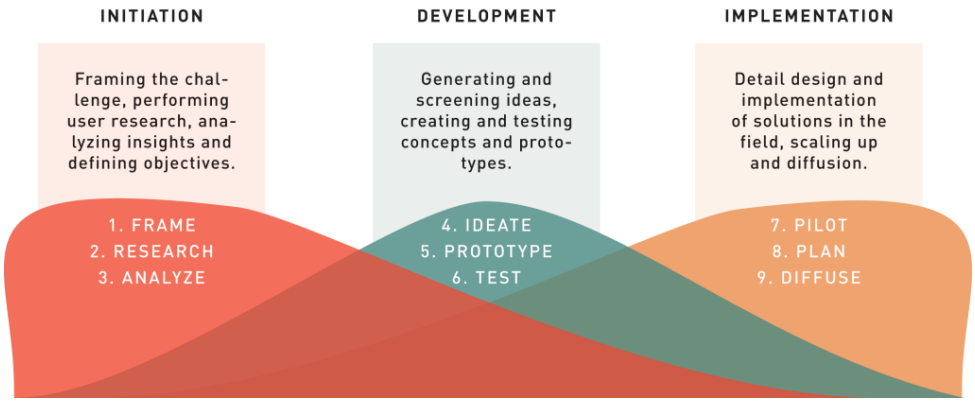

Figure 2. Generic innovation process, MSF Sweden Innovation Unit/Andreas Larsson

Generic innovation process as described by the MSF Sweden Innovation Unit.

Initiation

1. *Frame:* Making sure we have identified the right problem to solve
2. *Research*: Understanding the needs of patients, beneficiaries, users and other relevant stakeholders
3. *Analyze:* Turning data into insights to identify innovation opportunities

Development

4. *Ideate:* Creating and screening a wide range of innovative solution proposals
5. *Prototype:* Making prototypes of the most promising concepts
6. *Test:* Testing of prototypes in laboratory or testing ground settings

Implementation

7. *Pilot:* Testing and refinement of prototypes in a field environment
8. *Plan:* Planning and preparation for production and diffusion
9. *Diffuse:* Spreading products, services and practises as widely as possible so they can be scaled up for maximum impact