GUIDELINES FOR SUBMITTING AN INNOVATION PROJECT ABSTRACT

Wordcount: 400

What is an innovation project?

In MSF, an innovation can be the creation and implementation of new or novel products, services, or strategic approaches. Or, an innovation can mark an advance on an existing product, service, or strategy.

Any MSF innovation project is designed to benefit or improve an aspect of healthcare delivery either for patients, communities or for MSF staff.

This doesn’t mean the project you describe in your abstract has to be medical in nature, but it must improve the way MSF provides medical care (for example, developing new systems for regenerating boreholes).

We are looking for abstract submissions for the MSF Scientific Days – Innovation that show evidence of impact, either in the outcomes that new approaches bring or in the development of improved processes or understanding for MSF.

What kind of innovation projects can be submitted?

When you submit your abstract, you need to indicate which stage your innovation project is at (see the diagram below):

- Initiation
- Development
- or Implementation stage.

We welcome abstracts from all the above stages. However, we don’t accept projects which are at the idea or design stage. The MSF Scientific Days are special because they focus on improving our work in the field through evidence and rigorous evaluation / analysis.

What does this mean? It means that, ideally, you have developed and tested your innovation (i.e. gathered data to analyse whether it worked and the impact it had or could have), and can submit an abstract based on the outcomes, how you achieved them and what they might mean for MSF’s work. A good example can be found, [here](#).
We are equally interested in ‘failed’ projects as successful ones. We know that not all innovations achieve the hoped-for outcome or impact - we need to ‘fail forward’ and learn. This year, one of the sessions is dedicated to those of you who are brave and willing to present your failures. See a good example, here.

You can submit an abstract for a project at the Initiation or Development stage as long as you can conclude learnings from analysis of data. These learnings could be in the form of a new process for MSF or a new perspective on a field challenge. Here are two examples:

Luc has an idea of how to solve a field challenge, but through his analysis of that challenge, he finds that it is actually a symptom of a wider problem. He then explores this wider problem and generates a new idea of how to solve it. Because Luc’s project already has relevance for MSF’s work and is based on evidence and analysis, he can submit it as an abstract as long as he can describe how he obtained the evidence and what analysis he did.

Pascale is creating a new tool for nurses in the field. She tests a new approach to developing this tool and subsequently discovers a much more effective way to gather and communicate MSF nurses’ requirements to the design team, meaning time and money are saved. If she can demonstrate through data how that process has improved upon what already exists, she can submit it as an abstract. See an example of this, here.
What are the next steps?

Submit your abstract
Please be aware that all abstracts must be relevant for a medical humanitarian audience. Submissions from other disciplines are welcome, but they must have the objective of improving medical impact.

Discuss your project with a mentor, first
We recognise that those of you not involved in research may be unfamiliar with the concept of submitting work in the form of an abstract. If this is the case, and you would like support with the process (or even if you would like to discuss whether your work is relevant to submit), please get in touch via scientificday@london.msf.org. If you do need support, please let us know by the end of December 2017, so we have time to help before the abstract deadline.

Introduction
Your introduction should describe the background to your project:
- What challenge or opportunity is your project addressing?
- Why does that challenge or opportunity matter and why should MSF address it?
- What is/was objective for the project – i.e. what change is/was it expected to bring?
- What’s different about what you’re doing? Has anyone tried it before? If so, what happened?

Methods
Your methods section should describe how you collected and analysed your results:
- Did you collect baseline data, so you could compare your results with what the situation was before?
- How did you collect it? What were your sources? Did you get your own data?
- How did you analyse the outcomes of the innovation? For example, what indicators of success did you measure (quality of care, reach, price, efficiency etc) and how did you measure them?
- If anything unexpected happen during your project, how did you measure its impact?
- Did you realise your initial objectives were wrong and change them? How did you make that decision?
- What did you learn from this? For example, do you now have new insights into a challenge? Did you have to develop new processes to make this work?
- Make sure your methodology is clear – it is important to show that the evidence you are providing was gathered in a rigorous manner.
Results

Your results section should describe the data with which you evaluated your project and what your analysis of this data showed:

- What did your baseline data tell you?
- What change have you seen from the work you’ve done? Do you feel like it was a worthwhile experiment?
- Are you sure that your work caused this change? (it’s all right if not, but discuss this question).
- Did your evaluation show whether your innovation offers a better/cheaper/faster/easier solution compared to other/existing approaches? Did it do so in the way you were expecting?
- If anything unexpected happened what was it and how did it affect your project?
- Are people still using it? Where? What feedback have you had from ops/programmes?
- Is the innovation being used beyond the initial context (has it already scaled)? If so, to what level (other projects, countries, MSF Operational Centres, externally)? If not, is something blocking uptake? Is it context-specific?
- If the project changed from its initial objective or process, what evidence did you use to make that decision? What was the result of the change?
- If you started this project all over again, what would you do differently - what are the lessons learned?

Conclusion

Your conclusions should describe the implications of your work and any recommendations you may have for its future:

- Is your project ongoing? If yes, what are the next steps?
- If the project has ended, did it reach its objectives or was it stopped early?
- If it stopped early, how was any ‘failure’ learnt from (i.e. how did you fail forward and learn)?
- What are the implications (potential impact) of your work, for practice, policy, programmes or advocacy for MSF or others?
- How should the learning from your innovation project be used by MSF?
- What should happen next in this area of innovation / within your 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 innovation ethics framework that should be consulted by the Project Sponsor or whoever is responsible for oversight of the initiative (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 involved human subjects or their data, this must have ethics oversight by the relevant Medical Director from the Operational Centre responsible for the research. Please see here for MSF ERB (Ethics Review Board) 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) (you will be asked to insert name of ERB, e.g. MSF ERB).

- This research fulfilled the exemption criteria set by the MSF ERB for a posteriori analysis 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 (you will be asked to insert the name of Medical Director and Operational Section).

- This description/evaluation of an innovation project involved human participants or their data, but has been approved by the Medical Director or delegated representative as not requiring ERB review. The medical director or delegated representative therefore has provided ethics oversight.

- 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 MSF Ethics Framework for Innovation (or equivalent) to help identify and mitigate potential harms.

- Other - please describe if your study doesn't fit into any of the above categories.

Conflicts of interest

You will be asked to declare any conflicts of interest. Failure to disclose these might lead to withdrawal of abstracts or presentations from MSF Scientific Days. All conflicts of interest will be published in the conference booklet.
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).

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.

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 best practice.

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 submissions must include disclosure of all relationships that could be viewed as presenting a potential or actual conflict of interest.

If there are no conflicts of interest, authors should tick the box to state that there are none.

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

Data reporting standards

- If you have quantitative data, give actual numbers, not only 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.

Get in touch

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