# HHS Ignite:

## Year 1 Observations &

## A Proposed Year 2 Structure

<table>
<thead>
<tr>
<th>Version</th>
<th>Date</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.0</td>
<td>10/21/2013</td>
<td>Initial Draft</td>
</tr>
<tr>
<td>1.1</td>
<td>10/22/2013</td>
<td>Delta Changed from 110k to 50k</td>
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<tr>
<td>1.2</td>
<td>10/23/2013</td>
<td>Fixed error in opening paragraph</td>
</tr>
<tr>
<td>2.0</td>
<td>11/04/2013</td>
<td>Incorporated R1 interview results</td>
</tr>
<tr>
<td>3.0</td>
<td>11/11/2013</td>
<td>Extended Background; Added new sections: “Progress...” and “Proposed...”; Revised Key Observations; Renamed the pathways</td>
</tr>
<tr>
<td>4.0</td>
<td>11/26/2013</td>
<td>Incorporated R2 interview results; Beta changed from 3 to 4mo; Added criteria for Ventures and the ‘Kick-Off Accelerator’</td>
</tr>
<tr>
<td>5.0</td>
<td>02/25/2014</td>
<td>For next year: Ignite Beta changed to simply Ignite, Ignite Ventures changed to simply Ventures. Updated Ventures eligibility requirements. Updated timeline. Ignite changed from 4mo back to 3.</td>
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<tr>
<td>5.1</td>
<td>05/22/2014</td>
<td>Cleaned up in prep for release (removed “Draft” marks, fixed misspellings, etc.)</td>
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Background

Building on the successes of the HHS Innovates Awards, a recognition ceremony that celebrates innovative efforts from across the Department, the HHS Innovation Council sought a complementary mechanism to spur new innovations, one that provided support for the testing of new ideas.

In March of 2013, the Secretary announced HHS Ignite. Launched in “beta”, the first year was to be a small-scale test of the larger hypothesis: That by directly supporting HHS staff with potentially game-changing ideas, we can positively impact ways in which the Department carries out its mission while broadly cultivating a culture of experimentation.

A cross-departmental Implementation Team was brought together to shape the details of the initiative. This team also conducted simple outreach through their networks and over three structured mechanisms for prospective applicants that included an open conference call presentation, one-on-one office hours, and a “YamJam”.

At close of the application window, over 65 teams representing all OpDivs of the Department submitted the two-page Ignite project proposal. Sixteen judges from across HHS and 4 judges from outside of HHS (GSA, DARPA, VA, and NASA) scored the proposals based on criteria provided to all applicants. These scores were factored into a short list given to the Secretary who selected 13 teams for participation.

These 13 teams represent eighty-six (86) people across eight (8) OpDivs. They are supported by staff in the HHS IDEA Lab, the HHS network of innovators, and funds of up to $10,000.

This document is a reflection on the beta year of Ignite. Included are observations and direct comments from the Beta teams aggregated into actionable feedback. It concludes with a recommendation to continue the Ignite effort but with modifications that recognize these observations.
The above chart plots the teams across two axes:

- Across the x-axis: Project Progress (How far along in their project are they?)
- Across the y-axis: Demonstrability of Results (How useful do we think their results will be based upon their methodology and metrics being captured?)

Their placement is qualitative based upon meetings with the teams and their regular self-reporting. While subjective, most teams have validated that they agree with their placement.

The desired trajectory of the teams is towards the upper right which would indicate that they’re far along in their project and are expected to and/or have already obtained very actionable results.
We can then find how each proposal was scored. It’s also useful to identify three clusters:

Cluster 1
ave = 68.1

Cluster 2
ave = 66.9

Cluster 3
ave = 61.7

Numbers shown = Applications’ scores
Characteristics of Cluster 1:

- **Progress to-date:** Those in Cluster 1 are the furthest along in their project implementation and are expected to have quantitative and actionable results.
- **Average Application Score:** 68.1
- **Scope of Application:** The proposals of these team included problem statements and project plans that have not have changed since launch. Our interaction with them has been minimal beyond the regular check-ins. Two of the five have had very technical and specific assistance overcoming an internal hindrance.
- **Team makeup:** In each of these teams, the team-members are in the same OpDiv. In four of the five teams, the team members are in the same office and already worked closely together prior to Ignite.
- **Geography:** No team-members in this cluster work in Regional Offices. All are in DC and there is one CDC team in Atlanta.

Characteristics of Cluster 2:

- **Progress to-date:** These projects are closest to the median in terms of project progress and demonstrability of results.
- **Average Application Score:** 66.9
- **Scope of Application:** These projects came in with relatively defined project plans that generally haven’t changed since launch. Their project plan perhaps has been refined or they asked for early support to overcome technical questions or to explore what exactly implementation of their test might look like, but initial conversations were sufficient to ensure they got on the right path.
- **Team makeup:** Two of the four teams are have members from multiple Agencies. The other two are composed of individuals that reside in the same office.
- **Geography:** One of these teams resides in a Regional Office.

Characteristics of Cluster 3:

- **Progress to-date:** Those in Cluster 3 are currently earlier in their project progress and have less demonstrable outcomes expected. Though it should be noted that this is based on information from Week 11 (of 28). Also, three of the four have had significant pivots in their project plan since launch.
- **Average Application Score:** 61.7
- **Scope of Application:** Of all the Beta projects, those in Cluster 1 came in with the least defined plans of action. This was encouraged during Beta application process as the “support” offered to Ignite teams included access to experts to help flesh out the plan of action. These projects, you could say, were a greater test of the “incubator” aspect of Ignite.
- **Team makeup:** One of the four teams is cross-Agency.
- **Geography:** Three of four are being led by individuals in Regional Offices across the country.
Key Observations from the Beta Year

As Ignite is a new approach to spurring innovation, there was uncertainty at launch as to how to the best structure of the initiative, whether the operational structures were in place to, and - at a more basic level - if the demand for this type of initiative even existed among HHS staff.

Therefore, a key goal of the Beta year has been to learn. Six important observations have emerged:

1. **There is staff demand for this type of initiative.** Much of the Implementation Team’s outreach was targeted to specific “early adopter” personal networks over a short period of time. Thus the expected number of project proposals submitted was low (about 25). In the end, we received more than 65 proposals. We feel this indicates pent-up demand.

2. **The operations can support this type of initiative.** This first year validated many operational components required for Ignite including: Delegation of funds, Contract mods, Obtaining supervisory support, Yammer as a collaboration platform, Agency approvals, and others.

3. **The scores of the Reviewers are predictors of early success.** The scores of the proposals generally trend up and to the right, though outliers exist. This serves as early validation of our review and selection process.

4. **Greater up-front communication of the commitment and goals is needed.** Many Beta teams are contributing more time than they anticipated. They average percent time committed is 29% (range = 5%-60%) of total work hours. Further, a few teams have indicated difficulty in putting their selected idea into the Ignite framework, one meant to encourage multiple iterations and end-user engagement towards a small project. Many are going beyond Proof-of-Concept and Prototyping phases of product development.

5. **The non-monetary support has been valued more than the monetary.** The selected teams have stated this near-universally: Dollars are useful (and for most of them, essential), but even more useful is the access to leadership, the “air-cover”, and the opportunities that comes with being a Secretary-level project.

6. **For the teams that relied on the “incubator” aspect of Beta, the support has been insufficient.** Ignite was launched as “part incubator”, and thus teams were encouraged to apply without a proposed concrete solution to their problem. A few of these teams were selected to be part of the Beta year. While we have provided some access to experts and some exposure to new tools and methodologies, a much deeper engagement was 1) expected by these teams; and 2) needed by the teams for them to achieve their stated goals.

7. **Teams want more interactions with the other teams.** There hasn’t been a strong sense of camaraderie among the individuals and teams involved. As we didn’t include any structured interactions, this year has operated more as 13 separate projects instead of 1 class.
Proposed Changes for Year 2

The following is a list of recommended changes for the Innovation Council to consider in planning Year 2 of HHS Ignite.

1. **Better communicate the benefits and commitments of being selected**
   a. Emphasize the non-monetary support; de-emphasize the funds
   b. More clearly communicate the concepts of prototyping and measurability
   c. Provide indication of the time/effort commitment to be expected

2. **Invest less in the project and more in the individuals**
   a. Decrease the monetary and increase the non-monetary support
   b. Require applicants to spend more time describing the problem they’d like to address and less on what they’d like to do
   c. Require top applicants to “pitch” before being selected

3. **Offer deeper support early before providing funds**
   a. Provide more direct training to teams on tools and methodologies
   b. Provide access to tools that teams generally aren’t able to use (MailChimp, Google Docs, SurveyMonkey, etc)
   c. Have extended multi-hour deep dives very early with each team to explore and better understand their problem statement and game plan.

4. **Determine actual monetary award amount only after project gets solidified.**
   During the year, we awarded teams their requested amount based upon their initial project plan. We then challenged that project plan, and many teams shifted to an approach that used their funds differently. As a result, a number of teams either used the funds inefficiently or ended up returning them.

5. **Provide a competitive Phase II opportunity.** A number of the Beta projects are expected to project significant efficiencies and/or efficacies if scaled. A limited number of “Phase II” opportunities with more time and funding should be offered to support this scaling of proven concepts.

6. **Develop procurement vehicles and in-house for teams to leverage.** Significant time and energy went into ensuring the funds were utilized. Delegating small amounts of funds to an OpDiv may be inefficient. Further, teams were dependent up vehicles available to them, and making modifications to their existing contracts for very small amounts may be inefficient. Providing additional services (developers, designers, lean experts) and procurement vehicles for products (white boards, web services, project-specific products) would level the playing field and provide more flexibility in the types of tools and resources that could be put toward a problem.
Proposed Initiative Details

HHS Ignite

The first true year of HHS Ignite (the first year after the beta year) should support up to 10 early stage projects that can be completed in 3 months or less. Projects should be exploratory in nature and intentionally small-scale. They may test an untested concept or to develop a prototype for a proven concept. Each project should not exceed $5,000 in costs.

Period of Performance: June - September 2014

Eligibility. All HHS Staff members are eligible to apply for HHS Ignite Beta.

Additional Information:
- Ignite should be more “incubator” than “seed-fund”
- Emphasis should be on the notion of “experimentation” and “end-user engagement”, either through prototyping, MVP, user-interviews, or other
- Final deliverables include those that “test a concept”. This could be a working prototype, a minimally viable product, or a scientific paper, a report to be published, or other means by which data-backed results are presented.
- Teams should be no larger than 5 individuals
- At least 2 members of selected teams should be required to attend a 3-day Accelerator in-person

HHS Ventures

Ignite Ventures will support at least two "Phase II" projects that can be completed in 9 months, each project not to exceed $50,000 in costs.

Period of Performance: June 2014 - March 2015

Eligibility. Not everyone is eligible for Ignite Ventures. Only the projects are eligible to apply:
1. Projects that have gone through HHS Ignite
2. Projects that have been awarded an HHS Innovates Award
3. Projects that have gone through HHS Entrepreneurs
4. Projects that come with the endorsement of an OpDiv head

Additional Information:
- Ventures should be more “seed-fund” than “incubator”
- Preferences should go to cross Agency teams and projects
- Ventures projects should go through multiple phased implementations or iterations to yield full or close to full implementation of the effort
- Selected teams should be required to attend a 3-day Accelerator in-person
Time line

Begin Promoting: 12/15
Application window: 03/03-03/28
Judging / Ap Scoring: 03/31-04/14
Top 15 Pitches: 04/22-04/24
Teams notified: 05/06
Kick-off Accelerator: 06/09-06/12

Notes on the Kick-Off Accelerator:

06/09/2014 – 06/12/2014 | 10am - 5pm ET each day | Location TBD

Ignite Beta participants not in the DC area may attend remotely. Ignite Ventures participants must attend in-person. HHS should cover travel and hotel costs if necessary.

There are three high-level goals:

1. Provide space for refining project plans that include their problem statement, project scope, appropriate methodology, how funds should be used, and an elevator pitch. Plans should emerge detailed, though pivots of course would be allowed / encouraged after testing begins.

2. Build camaraderie among the team members and with IDEA Lab staff and the larger network of innovators.

3. Facilitate administrative functions such as training on tools such as Yammer, Adobe Connect, others.

To accomplish these goals, the Kick-Off Accelerator should include scheduled meetings, open time for the teams to work, access to inside experts, and presentations / workshops provided by outside experts.