Q&A WITH PAUL ELLINGSTAD, Director, Global Social Innovation, Hewlett-Packard Company

Following the 2011 mHealth Summit, GBCHealth sat down with Paul to hear more about HP’s global health programs and partners. Utilizing their expertise in innovative technology, HP aims to strengthen health systems and to increase access to better care. Through collaborations with partners like Clinton Health Access Initiative, HP is leading the way in creating mHealth solutions that can be shared far and wide. This interview will give you the opportunity to understand HP’s work and to learn how you can further your own health projects with valuable partnerships.

HP’S APPROACH TO PARTNERSHIPS IN HEALTH

First, tell us a little about HP’s approach to corporate social responsibility.

HP’s model is best described as a “creating shared value” model, which was introduced by Michael Porter and Mark Kramer in 2006 through Harvard Business Review.

Social innovation at HP centers on the belief that the same passion, energy, and culture of innovation that make HP a successful company can also be used to make a profound and positive social impact in the world. We believe that corporate success and social welfare are interdependent. As the largest technology company in the world, we’re in a unique position to use our global reach to serve billions, improving quality of life, revolutionizing how businesses operate and strengthening communities worldwide. We aim to enrich society and drive sustainable economic growth by giving people and businesses innovative ways to be more creative, productive and successful through the power of information.

Our approach to corporate responsibility is an integrated part of HP’s overall business strategy, helping us create long-term value that will benefit customers, shareholders, consumers and our communities. The innovations driven through our social innovation program broaden our understanding and perspective on customer needs, creating a virtuous cycle of business development.

We take a focused approach to social innovation, addressing education, entrepreneurship, community involvement and health.

What are the Global Social Innovation team’s areas of focus in the health sector?

HP believes technology plays an integral enabling role in the improvement of access, quality and efficiency of global health. We engage in programs that drive transformation of health systems and processes at scale at national, regional, and/or global levels.

HP has embarked on innovative programmatic work in: infant HIV testing; disease surveillance and early warning systems; patient feedback tools via mobile phones; state-of-the-art hospital design and construction; acceleration of genomic research and personalized medicine; health information system design and integration; Ministry of Health technology and information infrastructure transformation and upgrades; and more.

DEVELOPING STRONG PARTNERSHIPS

What is HP’s philosophy on partnerships?

Collaboration is fundamental to HP’s approach to problem solving and innovation. Solving tough,
complex problems demands fresh thinking and diverse perspectives. Our strategy is to bring together wide-ranging experts across borders, industries and institutions, collaborating to explore the root causes of key challenges and pioneer solutions that can be scaled globally.

Our holistic and sustainable approach to improve global health is achieved by partnering with governments, NGOs and other private sector partners. Together we can systematically address issues related to the access of healthcare, as well as the quality of available care and the efficiency of the system in which it is delivered.

**How do you go about identifying the right partners to work with?**

There is no exact science to identifying and selecting the “right” partners. We begin with a clear definition of the problem that we, and our potential partners, seek to address. We try to do an exceptionally good job defining and scoping the problem/opportunity upfront, which allows us to determine the capabilities required. We then vet prospective partners, setting clear expectations around roles and responsibilities.

**Are there specific guidelines that you use to evaluate potential partners?**

A well-defined, transparent project scope helps us match partner capabilities to program needs and requirements. Partners are vetted in terms of specific competencies and contributions for which they will be utilized on the project.

We also take into account the principles and culture of the prospective partner organization. Experience and the capacity of the organization are also critical. We have found that “one man band” organizations usually do not have the flexibility to scale.

Finally, partners should be vetted along the lines of prior work – on results and outcomes, as well as how they work in collaborative situations. To ascertain this we solicit feedback from partners from previous projects. We also evaluate how they work under pressurized, volatile and ambiguous situations. This will indicate how well they can handle change.

**How are you able to gain consensus and common purpose within a partnership?**

Clearly defined governance, agreed upon ahead of time, usually helps, coupled with a well-documented statement of purpose with clearly defined roles and responsibilities. Trust and respect among partners should not be underestimated in terms of effectiveness of working partnerships and decision-making therein.

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**BIO IN BRIEF | PAUL ELLINGSTAD**

Director, Global Social Innovation, Hewlett-Packard Company

Paul Ellingstad leads the office’s global health partnerships and initiatives, a vital new strategic priority for the organization. Upon joining the team in October 2009, he developed the group’s health strategy and helped launch it in early 2010. With the support of a high-caliber international team and recognized leaders in global health as partners, Paul is collaborating to drive transformational IT implementations to strengthen health systems and accelerate the adoption of mobile solutions within the health sector. Paul has worked in the technology sector for 19 years.

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**OVERCOMING CHALLENGES AND LEARNING FROM FAILURE**

**Have you had any negative experiences in trying to structure a partnership? What are the “red flags”?**

Inaccurate representation of competencies, objectives and commitment to the partnership and the project are definite red flags. Also, a heightened sense of urgency to “get going on this now”—trying to short circuit the vetting process — is always cause for concern.
What are the toughest hurdles you’ve faced in developing partnerships and how have you overcome these challenges?

One of the biggest hurdles is time. There is enormous pressure to initiate partnerships and programs quickly with limited time to adequately vet prospective partners. Referrals and recommendations from established partners and expanding existing partnerships - i.e. creating multilateral partnerships from bilateral partnerships - have been a few successful techniques we’ve employed to tackle these hurdles.

I would suggest that companies avoid trying to do too much too fast with too many partners. Don’t overestimate the capabilities and capacity of your own organization or prospective partners. Weigh the opportunity costs of any partnerships and avoid leaping into what appear to be opportunistic “quick win” situations—lunches are rarely, if ever, free.

Have you experienced failure and what have you learned? How are you applying these learnings to future programs?

Yes, failure is part of a healthy innovation process and we’ve learned not to take failure personally. And we try not to make the same mistakes twice! I would advise others to be very open about failure and success, offering the insights and explanation behind both.

SCALING mHEALTH PROGRAMS

In your opinion, what elements are needed to bring programs to scale?

This varies by partnership and program. Generally speaking, though, consensus among key partners and a clear, committed plan for funding, implementation and maintenance are key factors in scaling up a program.

What are some of the challenges you’ve faced in scaling up programs from a pilot stage?

Recruiting new partners in new countries for funding and implementation can pose challenges. Also, the level of customization and reworking of the problem definition and scope to reach consensus with new partners (i.e. government) can pose problems.

There is a general notion that mHealth programs are not scalable because viable business models have not been established. What is your opinion?

mHealth programs are still in their infancy, and more focus has been placed on proof of concept - getting useful solutions up and running first. There is obvious and justified concern over who should pay for certain mHealth services. Even what the value of certain services is—to the patient/citizen, to the public health system and even to society, can be a question.

With maturity of the mHealth marketplace there will be viable business models established soon enough. In the meantime, we are very much in the “early adoption” phase of products and solutions.

MAINTAINING AND EXITING PARTNERSHIPS

How do you maintain your partnerships over time?

A well-documented partner agreement is fundamental to maintaining a successful, long-term partnership. Ideally, partnerships are defined on an approximately three year basis with quarterly reviews and the formalization of the strategic plan is properly managed.

How do you protect the long-term impact of the program, especially when your role in the project ends?

Inherent to our model, strategy and plan, the Ministry of Health (MoH) is the primary client and has ultimate accountability for the programs we run with or on behalf of the MoH.

In addition, we seek to partner with local organizations and institutions to build capacity locally. For example, in our work on Early Infant Diagnosis with Clinton Health Access Initiative and the MoH in
Kenya, students and faculty from Strathmore University worked within the consortia to develop software applications and will support the MoH for upgrades and maintenance on the applications.

**FINAL WORDS OF ADVICE**

Any specific advice you would like to offer about working with private sector partners?

Ensure continuity of commitment to projects and partnerships beyond the immediate financial quarter or year, or current leadership team.

What about working with government and implementing partners?

With government partners, we follow the same guidelines that we do with private sector partners. In addition, we place an emphasis on schedules and timing of project milestones and critical dependencies within the project.

Regarding implementing partners, clarity of capabilities, roles and responsibilities, along with evaluation and measurement of deliverables, are key. Continuity planning and how to deal with the unexpected and/or changing environment for a project are also important.

Finally, if you could offer one piece of advice to those who are developing partnerships in mHealth – or, for that a matter, partnerships for any programs, what would it be?

Relentlessly pursue transparency and clarity—of the problem/need or the collaboration model (roles, responsibilities and capabilities of all stakeholders), and clarity of objectives and tangible deliverables.

**REFERENCES AND RESOURCES**

For more details on HP’s global health strategy, partnerships and programs, please visit http://www.hp.com/go/socialinnovationhealth

GBCHealth Case Study Publication — Building Partnerships that Work: Practical Learning on Partnering in mHealth

mHealth Summit 2012 http://www.mhealthsummit.org/