

The Ideal: Innovation and Transfer



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Across the Kaiser Permanente (KP) program innovative solutions to problems are developed and implemented daily. Frequently, in program offices, in a region, in a medical center, or in other business units, these processes are identified as being successful practices and leadership encourages their transfer to other locations. Unfortunately, as in most large organizations, the frequency of transfer within KP tends to be low.

Leaders recognize that in an ideal situation innovations would diffuse effortlessly across the program, resulting in consistently high performance in clinical quality, the patient care experience, and financial outcomes. The costs associated with “reinventing the wheel” would be eliminated and the “not invented here” attitude inhibiting adoption of successful practices would disappear. However, the complexity involved in transferring successful practices is often underestimated; it requires much more than knowledge of the technical aspects involved. In fact, cultural issues usually present the most significant challenges.

In The Special Section

This special section of *The Permanente Journal* describes several innovative projects developed within KP and introduces key concepts in diffusion of innovation. It draws on the insights and experiences of KP physicians, nurses, and employees involved in various regional efforts to innovate and transfer successful practices.

In “Innovation in KP Colorado,” William Marsh, MD, and David Price, MD, (page 40) report on the infrastructure they have developed—a knowledge management process and Innovation Support Team—to facilitate the sharing of successful practices.

Christi Zuber, RN; Marilyn Chow, RN; and Victor Alterescu, RN, describe their experiences using a process developed by the IDEO company to improve the postpartum experience of new mothers in “Fail Early to Succeed Sooner: Adventures in Innovation” (page 44). They demonstrate that the techniques used to create successful innovations inside and outside the health care industry can be successfully applied within KP.

In “The Care Management Institute: Harvesting Innovation, Maximizing Transfer,” (page 37) Helen Pettay, Beth Branthaver, Kristene Cristobal, and Michelle Wong describe CMI’s model in which a central hub collects and develops guidelines, metrics, and programs and supports local implementation. Those local experiences are

fed back to CMI and help to inform extensions and refinements to the programs.

In “Practical Steps for Practice Transfer: The Four A’s of Adoption” (page 50), Hannah King, Karen Tallman and I suggest a practical approach—a framework for assessing readiness for transfer and initiating implementation planning.

Two years ago, the Care Experience Council chartered a workgroup to explore the transfer of successful practices within KP. This study, the results of which are summarized in “Stealing Shamelessly: Practice Transfer Success Factors” (page 52) by Karen Tallman, Hannah King, and me, concluded that the factors associated with successful transfer within KP are consistent with those reported in the literature. This is an encouraging finding, laying to rest the widespread perception that as an organization we are different from everyone else and that approaches found to be effective elsewhere don’t apply to us.

In “Finding a Sponsor to Study and Transfer Your Innovations” (page 55) Robert Sachs, PhD, presents the critical importance of sponsorship and cites practical advice for generating effective sponsorship.

As an extension of the work of its Transfer of Successful Practices Workgroup, the Care Experience Council sponsored a one-day meeting in Oakland in November 2004. Physicians and employees from across the regions spent the day discussing diffusion of successful practices and made recommendations for increasing both the effectiveness of meetings and conferences and the spread of practices already validated and recognized by KP: the Vohs and Lawrence awards. Excerpts from this rich conversation, including the recommendations appear in the “Roundtable Discussion” (page 56).

The Commitment

As an organization, we must continue to innovate. But our greatest opportunities lie in spreading those things we already do exceptionally well. If we are to increase the frequency and effectiveness of transferring successful practices within KP, we must increase organizational awareness of these practices, enhance our capabilities to transfer, and perhaps most importantly, demonstrate the commitment to do so. If we can do these things, then someday in the not-too-distant future, one region’s innovations will spread smoothly and efficiently to other regions. At that point we will be much closer to realizing our full potential to provide our patients with high-quality, patient-centered, convenient, and affordable medical care. ❖

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