Session Objectives

1. Discuss how to improve the allocation of resources for innovation.
2. Describe the challenges faced by leaders of innovation in health care delivery.
3. Elaborate on the power of full time teams for innovation efforts.
4. Set realistic expectations for staff that are contributing to an innovation effort part time.
5. Identify the specific ways that senior leaders can support innovation efforts in order to maximize the probability of success.
Who invited this guy?
The Cheap and Curative Pill
A Cheap and Curative Pill

Innovation in Aggregate
Biosciences-Driven Innovation

The Cost Wall
What Now?
A Second Kind of Innovation

Innovation in Health Care Delivery

Cost Constraint

Biosciences Driven Innovation

The Climb to the Summit
Innovation is a two-part challenge:

IDEAS

EXECUTION
The EXECUTION challenge:
Underestimated
Underinvested

An Exception to the Rule

<table>
<thead>
<tr>
<th></th>
<th>IDEAS</th>
<th>EXECUTION</th>
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<tbody>
<tr>
<td>Biosciences Driven Innovation</td>
<td>REALLY HARD</td>
<td>HARD</td>
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<tr>
<td>Innovation in Health Care Delivery</td>
<td>REALLY EASY</td>
<td>HARD</td>
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Innovation in Health Care Delivery
Four Categories, Four Simple Ideas

1. Standardization
2. Coordination
3. Prevention
4. Improved Medical Decisions

Bright and Shiny New Objects
A Simple Innovation Map
Where is the Opportunity?

Physics of Innovation

$$R_{tot} = R_{ops} + R_{inn}$$
The Critical Resource: TIME

Ongoing Operations

Part Time Contributions from All

Ongoing Operations

Innovation
The Fundamental Limitation

*Project Size*

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**Full Time Contribution from a Few**

Ongoing Operations

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Innovation with Full Timers

- Bigger Projects
- Resources are More Reliably Available
- Ability to Practice Clean Slate Team Design (Without Breaking Anything)

This Approach Does Not Enable Clean Slate Team Design
A Simple Innovation Map
Where is the Opportunity?

Small

All, Part Time

A Few, Full Time

Large

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A “Lab” or “Innovation Center”
May Not Be the Answer
Team Redesign ...

...lies at the very core of innovation in health care delivery.

Team Based Medicine

Step One:

*Build New Teams From Scratch*
A Simple Innovation Map
Where is the Opportunity?

Small
Comfort Zone

Large
Bright, Shiny, and New

Small Full Time Teams
For Single Initiatives
To Redesign Care From Scratch
AND Deliver Better Care
For A Selected Patient Population
Old Ideas, Gold Results

Primary Children’s Hospital (Salt Lake City)

The Population
Children with Complex Medical Conditions.

The Intervention
Heavyweight Primary Care. More care planning, care coordination, and close contact with families.

Results
Outcomes up. Costs down >10%. Patients more satisfied.
What Innovation Leaders Do

1. Choose a Patient Population
2. Understand the Needs of the Population
3. Design and Build Teams From Scratch
4. Invent Operating Routines From Scratch
5. Measure Costs and Outcomes

University of Pennsylvania Health System
Philadelphia, PA

*The Population*
Low income patients at high risk of readmission.

*The Intervention*
CHWs matched with hospitalized patients. CHWs guide patients through discharge and recovery, until they are in primary care.

*Results*
Readmissions down. Improved access to primary care. Patients more satisfied. For every dollar spent on the program, UPHS saves $1.80.
Quick Exercise: Part 1
Silent Individual Work

1. Choose a Patient Population
2. Describe the Needs of the Population
3. Redesign a Care Team *From Scratch*
   - What Does Everyone Do At Work Each Day?
   - What Does the Patient Experience?

**You Have Three Minutes**
Quick Exercise: Part 2
Sharing and Listening

If you care to, share your idea with a neighbor.

You Have Two Minutes

The Happiest Physicians
Why So Happy?

- Point of Pride: Better Care
- Point of Pride: No Wasted Dollars
- The Joy of Teams
- Unparalleled Autonomy

Greater Autonomy

Plus

Greater Accountability
The Prescription

Grass Roots Innovation
Tens of Thousands
Of Innovation Initiatives

Senior Leaders:

1. Accelerate the Transition to Value-Based Payments

2. Make More Bets on Full Time Teams
   ... that Design and Deliver Better Care
   ... for a Specific Patient Population
Questions

A Special Kind of Team
You CAN ask the Shared Staff to do MORE work ...

But you CANNOT ask the Shared Staff to do DIFFERENT work.
The Shared Staff Can Only Take on Tasks that:

1) Are Familiar or Quickly Learned
2) Fit Existing Workflows
3) Fit Existing Roles

A Special Kind of Team

Shared Staff

Dedicated Team

PARTNERSHIP
A Special Kind of Team

Shared Staff

Dedicated Team

PARTNER-SHIP
Management Structure

- Senior Leader
  - Ongoing Ops
    - General Manager
    - Innovation Leader
      - Partnership
      - Dedicated Team
    - Functional Heads
  - Shared Staff
  - All Other Staff

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