How to make innovation “stick”

Transcript

00:00:08:01 - 00:00:26:13
DAVID TYLER:
I think all of us have experienced some level of innovation in recent years, whether it’s in direct response to COVID or some other outside stimuli. One of the things that we tend to help our clients with a lot is how do we make innovation stick? And you mentioned we had a spike to 60%, Dr. Brown of telehealth visits and then it dropped back to ten.

00:00:26:27 - 00:00:35:10
DAVID TYLER:
What do you think helps innovation stick in an environment? And we’ll start with you, Dr. Brown, and work our way back this way. What drives that from a cultural perspective?

00:00:35:13 - 00:00:05
CHARLIE BROWN:
You know, I think it starts from the top. It’s a it’s got to be a culture that is central to the organ, the mission of the organization. And, you know, we’ve got the center of Piedmont health care, quality, safety and service as the is the center target of our of all of our strategic angles. And when it’s when that is the fundamental premise and the patient being the true north of whatever we do.

00:01:00:19 - 00:01:16:21
CHARLIE BROWN:
But you can kind of drive that culture. Hey, this is this is patients love this. Patients need this. And it’s in it’s better it’s bringing better health care to the patient base that it kind of sticks in the culture of the organization. But it’s got to start with the fact that that’s why we’re here. That’s our mission.

00:01:17:26 - 00:01:36:28
ROBERT BUNCH:
I yeah, I think Dr. Brown’s spot on. I mean, I think it takes a commitment. I think you have to be committed to it, certainly top down commitment. And what we have found is pulling in our customers and letting our associates also be a part of this. So we have sandbox type opportunities where people can throw out any idea.

00:01:36:29 - 00:01:54:16
ROBERT BUNCH:
We acted on those ideas a lot of times, and some of them have turned into some pretty meaningful innovations. And I think at the end of the day, innovation is great, but if you can start to prove that it’s working, that is simplifying things, it’s making things easier, that’s improving things. And that’s a really big deal. And you have to be, again, the word commitment.

00:02:00:24 - 00:02:28:26
SHERRY FARRIGUA:
You’re absolutely right. And for me and for us, it’s really I focus on three things. One is to build a fear free environment. Okay. If people are afraid to speak up my eyes, my ideas do. But I don’t have a Ph.D. I’m not an M.D. No one’s going to listen to me. You will not be successful because innovation comes from the most unexpected places.
SHERRY FARRIGUA:
So that’s number one, really feeds into number two, which is build a diverse team. You get a bunch of people in the room who think alike and look alike and act like big up. Nothing comes out of that. All right. And 911 was the best example. That’s how we solved a lot of those problems. Homeland Security said, I want a room full of people who come from all walks of life.

SHERRY FARRIGUA:
So that’s the second. And the third really goes back to something you both said, which is to engage the stakeholder who is the stakeholder we’re here to solve real clinical problems, patient problems. And if you do that, then you have impact and you have to evangelize that impact because when your team sees that you’re evangelizing what they did and that impact, there is a sense of pride that comes with that, that let’s do this again.

SHERRY FARRIGUA:
You know, that was really hard, but it was fun in the end because we made a difference.