

## **James L. Holly, M.D.**

### **Innovation, Diffusion of Ideas, and the Medical Home**

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I just received the above. All of SETMA can be proud. The note stated, "Larry, I always enjoyed reading your articles. We have launched an Innovation Zone in our medical community and SETMA serves as a wonderful example for us." The subject line on the e-mail stated, "thank you for the comprehensive information on SETMA's website."

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<http://healthinnovators.blogspot.com/2014/01/innovation-diffusion-of-ideas-and.html>

### **Innovation, Diffusion of Ideas, and the Medical Home**

"Early in my medical school education, I heard about the "science to service gap", i.e. " it takes 13 years for proven medical improvements to become mainstream." But after 20 years of clinical practice and 17 years of work with informatics, I consider it a truism.

During my medical informatics work, it has become more than a curiosity as to why the "science to service gap" exists. About 5 years ago, I discovered a series of books that explain the [Diffusion of Innovations](#) by Everett Rogers who was a professor of communications. It helped me to understand that there is a natural variation, a bell curve of sorts, for how any group adopts innovation. Since negative news travels fastest, physicians often get a bad rap when it comes to adopting health information technology (HIT) due to the vocal nature of what Rogers called "laggards." That is a complex topic for posts in the future. I would encourage anyone interested in innovation to read Rogers 2003 5th edition of [Diffusion of Innovations](#) as it includes many lessons learned during the 40 year period following his 1st edition in 1962.

**I recently re-visited a web site which comprehensively documents the 19-year journey of a medical home practice that was formed in 1995, called [SETMA](#). The link to the SETMA site is a great example of how diffusion of innovation can happen within an organization with visionary leadership. I had the pleasure of meeting Larry Holly, MD,**

**the founder of SETMA and I would encourage anyone interested in how to create a cultural framework for innovation to read his web site, which is beyond comprehensive in its depth and breadth of information shared.** (emphasis added)

Believe it or not, in 2013, the medical home is still being questioned as a valid approach. So perhaps the “science to service gap” for team work, process improvement, and user-centered design in health care is a bit longer than 13 years. I am encouraged by the work being done in both my local medical community as well as at the national level -- American health care really needs the medical home innovations more than ever.”