

Chief innovation officer for Boston Children's Hospital explains how to cross the O-gap

July 10, 2012 11:56 pm by [Stephanie Baum](#) |



If ever there was an overused word in the coverage of new developments in the life science and healthcare industries, innovation may top most lists. This journalist holds her hand up high in guilty acknowledgement on that score. So a presentation by the chief innovation officer for [Children's Hospital of Boston](#) was particularly helpful in probing the deeper meaning of the word both for what it is and what it isn't.

Naomi Fried also mapped out a pathway for how to achieve it in a clinical setting.

First of all, innovation and invention are not the same thing. By definition, innovation is about trying out new ideas. The word "try" suggests a risk of failure before eventually achieving better results.

Here's one approach to innovation in a healthcare setting:

Identify the problem you want to solve For instance, Children's Hospital of Boston took an approach to infant cardiovascular surgery in which the body temperature is kept quite cold. But one nurse wondered about the best way to help reheat these tiny bodies.

Don't be afraid to fail At first the nurse in question tried knitted caps but they kept falling off.

Close the "operationalization" or "O-Gap." This is the administration or bureaucracy resistant to change that's present in most organizations. Experts who believe in the idea's development can help shrink it.

Idea Part 2: The nurse saw a marathon race in which participants were wrapped in [Mylar blankets](#). She developed a turban-style hat with the material for use after babies have been through surgery. The "Mylar blanket hat" concept ended up being one of the [hospital's seed grant funding projects](#). The idea has been patented and is in process of clinical trials.

Read more: <http://medcitynews.com/2012/07/chief-innovation-officer-for-childrens-hospital-of-boston-puts-innovation-in-perspective/#ixzz34pIQf83j>