The February 2018 edition of Health Affairs focuses on the critical issue of diffusion of innovation within healthcare. With support from the Peterson Center on Healthcare, Blue Shield of California Foundation, The Leona M. and Harry B. Helmsley Charitable Trust, and the Agency for Healthcare Research and Quality, this issue takes a closer look at how innovation happens, best practices for scaling and spreading innovation, and what we can learn from successful diffusion efforts.

In This Health Affairs Issue

Key studies in the issue include:

- **Taking Innovation to Scale in Primary Care Practices: The Functions of Health Care Extension** – Sarah S. Ono et al.
- **Data-Driven Diffusion of Innovations: Successes and Challenges in 3 Large-Scale Innovative Delivery Models** – David A. Dorr, Deborah J. Cohen, and Julia Adler-Milstein
- **Learning Collaboratives: Insights and a New Taxonomy From AHRQ's Two Decades Of Experience** – Mary Nix et al.
- **Overcoming Challenges in Codifying and Replicating Complex Health Care Interventions** – Tim Horton, John H. Illingworth, and Will H.P. Warburton
- **Integrating Social Needs Into Health Care: A Twenty-Year Case Study of Adaptation and Diffusion** – Rebecca D. Onie, Risa Lavizzo-Mourey, Thomas H. Lee, James S. Marks, and Rocco J. Perla

Innovation is often lost in the huge, sprawling healthcare sector, but lessons learned are invaluable to keeping innovative ideas moving and spreading.

- Ono and Horton explore challenges and opportunities in scaling and spreading quality improvement innovation, including designing programs that build and sustain commitment.
- Dorr analyzes three large-scale healthcare delivery innovations—accountable care organizations, advanced primary care practice, and EvidenceNOW—to assess where data-driven innovation occurs and the challenges it faces. Often, the high costs and burden incurred during implementation limit organizations’ ability to address challenges.
- Nix proposes a taxonomy to help decision makers and funders improve how they develop and evaluate learning collaboratives. Building on AHRQ’s 20 years of experience sponsoring such efforts, Nix et al. characterize attributes, identify factors that contribute to their success or failure, and assess the challenges they encountered.
- Onie examines a case study of health leaders and the five stages of diffusion:
  - Testing and learning
  - Standardization
  - Replication
  - Shifting from doing to enabling
  - Catalyzing broad adoption

The Center’s Work

Health Affairs has made a significant contribution to our collective knowledge about diffusion of innovation in healthcare. It also suggests the sector has much more to learn. One particular challenge that remains is translating this research into actions that providers, system leaders, payers, and policymakers can take to create a new standard of care.

The Peterson Center on Healthcare is committed to accelerating adoption of innovative care delivery that improves quality and lowers costs. By bridging the gap between knowing what to do and knowing how to do it, we can make high-performance healthcare a reality for all Americans.

Health Affairs’ February Issue: Diffusion of Innovation