



EPISODE 1: BREAKING TRADITION TO TRANSFORM

PODCAST TRANSCRIPT

Tim Irvine (00:09):

As I'm sure you're feeling deep in your innovation bones, government agencies are navigating an accelerated tech landscape. It's managing increased customer demand and IT modernization, and they really require innovative ways to keep up and to adapt. And much of that adaption is really gonna require, you know, breaking convention and stepping outside of the usual boxes of government tech acquisition and processes. So when you're looking for novel, unexpected ways to create value, you know, it's really less about inserting technology. And it's more about putting humans at the center as an additional important point of orientation.

S. Wander (00:48):

That's right. Agencies today are looking away from traditional methods and instead tapping strategy prototyping to solve problems in new ways and prepare for the future of work. So how do they explore what's possible from a human centric perspective while keeping an eye on mission and how do agencies balance exploring what's new versus the safe and reliable delivery expectations required.

Tim Irvine (01:08):

And that's what we're here to discuss today on the federal innovator, it's a podcast for, and about the innovators that are taking on the biggest challenges in the federal government and making change that is more human, simple and enduring. You know, ultimately we all have

responsibilities as designers and innovators and technologists to simplify the complex. And there really is no more complex machine than the federal government. I'm your host Timmerman, managing director and studio lead of the Accenture federal digital studio.

S. Wander (01:40):

And I am Stephanie wander, deputy director and senior fellow at the Atlantic council geo-tech center. Joining us to discuss those issues is Ryan Becca, chief officer of healthcare and innovation and learning at the us department of veterans affairs.

Tim Irvine (01:52):

Ryan, thank you so much for, for joining us

Ryan Vega (01:55):

So much for having me today. I'll background practicing academic hospitalists. So providing care to patients when they're admitted to the hospital and working with Medis medical students and residents, and I got actually into the VA through a program called the chief resident for quality and safety. So my journey into innovation certainly is not one that I predicted, but I did sort of stumble my way into innovation through a number of different opportunities that I was really lucky to have one of those where I think I really gained an appreciation for human centered design and user centered design was while I was at the VCU health system, helping to deploy a



customized solution within the electronic medical record that really optimized both provider handoffs and provider rounding by really affording what I would call personalized clinical decision support. So it was the recognition that a group of orthopedic surgeons need very, very different when they're rounding on patients or they're handing patients off, then perhaps the folks in the pediatric ICU and while the electronic medical record was able to provide laboratory and vital data sort of in a consistent fashion, it wasn't really customized for the user in a way that it's meaningful for them that allows both efficiency and effectiveness within their workflows, allows them to better deliver care.

Ryan Vega (03:26):

And I think that was really my introduction, not only to how do you scale innovations across health systems, but really how you solve problems by bringing in that sort of requirements gathering or in the HCD language empathetic interviewing. So my journey sort of maybe wasn't all serendipitous but I've certainly been, been very fortunate to find new opportunities every day to sort of wake up and continue to serve our veterans across the country.

S. Wander (03:53):

Sorry for that incredible background. And I'm just really impressed with your work and in addressing electronic medical records and addressing data differently. I'm curious, it sounds like you've touched on an innovation in a number of ways through your work. What are some of the other innovations that you're working on currently that you're most proud of? Right.

Ryan Vega (04:12):

For me, what innovation is truly about, it's about the creation of value, meaningful value either for the patient or for the workforce value in it of itself is very multi-dimensional. So you can't create value and value for the patient at the full expense of deterioration on the value sort of horizon for the workforce is you'll eventually have burnout and no providers to sort of care for

those patients. So it's a tricky thing. And I think we often fall into the trap of being so consumed with day-to-day operations and obsessions with things like ROI that we don't fully appreciate the importance of value creation and value drive. So within that, that spectrum, there's a whole host of things that I think are really, to me, sort of driving and creating value for veterans. The first one that comes to top of mind is 3d printing, 3d printing is this amazing technology.

Ryan Vega (05:10):

And let me expand a little bit. It's really additive manufacturing, truly an amazing capability and technology that allows us to deliver personalized care. So this could be custom orthotics and prosthetics. So instead of us choosing the small, medium or large insert off the shelf, we're going to custom manufacture one for you at the point of care, meaning I don't have to worry about ordering it. I can produce it within the walls of the hospital and give it to you the same day pre-surgical planning or even planning within the hospital when it's also groundbreaking, but very proud to see some of my colleagues in VA take a role in it is it biofabrication within our lifetime, we will see the production and the implantation of organs that were fabricated through additive. And traditionally, just this notion of biofabrication, we will create bone and living tissues. So another practice that I'm really proud of and no pun intended, it's actually called pride.

Ryan Vega (06:09):

It is a 10 week course that two of our leaders in the VA, Tiffany and Michelle created specifically around helping veterans who identify as LGBTQ, navigate some of the complexity and really some of the challenges that these veterans face in navigating healthcare. Now as a provider myself, I don't remember. And it's because it didn't happen conversations when I was in clinical training or medical school around how do you have a conversation with a 60 year old male identifies as female around prostate cancer screening? And so what we traditionally do is just avoid these conversations, or we don't



ask, we don't bring it up. And the same thing goes for the patient. They don't feel perhaps necessarily comfortable having these conversations, or we don't even know how to start the conversation. And so what they did through this course was to bring veterans together like veterans together to really begin not only the dialogue, but to begin creating practice patterns, helping to inform clinicians, how do you bring it up?

Ryan Vega (07:11):

How do you talk through these? How do you sort of vocalize the, you know, this is who I am, and these are the things that matter to me. And these are the conversations I want to have, but I'm, I'm nervous about having these conversations with you. And so what's amazing about this is that we actually have been able to track real clinical outcomes. We're actually able to measure reductions in suicidality. We're actually able to measure reductions in generalized anxiety on the GAD questionnaire assessments. We're seeing better senses of belonging. And what's remarkable is that veterans who live 50, 60, sometimes even further miles from the VA that offer these courses, driving those distances to calm, because for the first time they feel part of a community, they feel accepted and they want to care for themselves, but these are hard conversations to start. And so giving them the opportunity to do so in very safe spaces with other veterans who are experiencing the same challenges is something that we're seeing and it's growing quite rapidly.

Tim Irvine (08:12):

As you talk about Tiffany and Michelle and how that how the pride effort went from pilot to, to scale. One of the things that I'm really curious about is how have you built kind of that organizational fitness around innovation. So so that, you know, folks like Tiffany Michelle are, are compelled to engage and then expand on you know, things that, you know, great ideas and, and personal passion. So how does it go beyond the, you know, special Providence of a focus group into something that can be

distributed and people are encouraged to to engage and continue to create that value that you're speaking.

Ryan Vega (08:52):

We like to think of innovation as a learning process. And I think if you really look at it from a true academic sense, it has to be embraced as a learning process, which means that it is cyclical, it's ongoing and, and learning is something that is supported. Learning is something that you have to empower. Learning is something that has to be a capability. And when you start to view it in that framework, it means organizationally you have to have the infrastructure to enable that to happen.

S. Wander (09:28):

I'm really curious how you, like, where did you hit a challenge in that process? Where were the biggest sort of bottlenecks to building that innovation culture for you? I mean, I'm thinking about the VA and how it's really about innovation in a high stakes environment. How do you, how do you help people buy into taking that leap? That innovation is a way to go, that you can pull it off in government at the VA. And then ultimately, where did you, where did you have the biggest list in terms of putting these cultures in place?

Ryan Vega (09:57):

I think one of the biggest challenges, particularly when we look at innovation and healthcare is, is a question that I hear often, and I hear not just from within government, how do you fund and sustain these types of activities? And, and it's, it's hard because the day-to-day operations will always consume the next crisis, right? And I think I've learned, never underestimate the power of a network and what a network can do to sort of mobilize a large organization. And so a lot of this was by finding those early adopters, those champions within the field, and really just beginning to build the network, build that sort of drum beat of excitement and people that were going to be resilient. You know, you start with

the grassroots movement and you let those networks sort of grow and learn from one another. And the voice of that network, I think can help really shape and mobilize a lot.

Ryan Vega (10:55):

And then you have to have what I believe is sort of this continuous push of demonstrating the value that you are creating. And I can't overstate this enough, but oftentimes because of the work you, you know, that you do in innovation, it's challenging, it's hard, it's sometimes it's frustrating. And you, you have to be resilient and, and sort of continuously showing, even if you aren't projecting some massive ROI in the next year, right? How are you continuously helping to push the way that veterans and in my case veterans, but you know, if I'm relating this to the private sector, patients, you know, their experience, improving outcomes for them, and that's in sort of reducing costs on the back end. So I think it's about just continuing that drumbeat and never really giving up.

S. Wander (11:49):

That was pretty incredible. Can you speak to how you navigate the tension between openness to risk

Tim Irvine (11:54):

And, and failure inherent to the innovation process?

Ryan Vega (11:58):

Failure is, okay. You can learn what didn't work. You can learn how to get better next time. But particularly the idea of holding on to legacy projects, holding on to legacy innovations just eats up bandwidth. It eats up capital. And a lot of times it sort of eats at the culture because people aren't willing to explore a dry further. So I think by de-risking, by pushing things through a stage of maturation and allowing things to fail and fall off, and then move things through sort of this pipeline and by equally, and sort of flipping the value paradigm and saying, we're going to

really focus more in the early stages of development. What is the impact of the workflow or the patient experience? How does this conform, is this innovation accessible? Is it affordable? Is it even practical really thinking through those and then pushing those through in terms of, as you're going through maturation, what happens is, is that when you get to something that's ready to go to market or an essence scale, you've got a solution that hasn't only been tested right through multiple different lenses, but the adoption curve is going to be substantially easier than forced functioning something into the workflow that will have a dramatic impact on productivity, or that you'll see slowing of adoption because folks don't really want to acquiesce to it.

Tim Irvine (13:17):

I was just going to ask you, Ryan, how has, how has your work at the VA spoiled you for the private sector

Ryan Vega (13:22):

Future? That's a good question. So look, one of the things I think I am so fortunate to have is the opportunity to operate at scale. And I have to think about the complexities of solutions and whether they're going to fit into a market like Alaska, as well as Ford. And so that has forced me, and, and like I said, you know, two years ago, I can not have this level of conversation with you. Right. what this position has, has granted me is the everyday challenge of having to learn and read. And it's, it's been quite humbling to just constantly be reminded of how much I don't know, but I think the one thing that that is that I've learned and that's important is that, you know, every day you can continuously sort of get better in your approach. You can continuously improve your understanding. And that, that confidence that is continuously built, that resiliency that's continuously developed and hardened by sort of constantly moving through the challenges and the obstacles, you know, you will inevitably make, make a difference or make an impact. So



Tim Irvine (14:49):

A ton of ground that I I'm really grateful with your expertise and really grateful for your time today, Ryan pleasure to be on with you all and just happy to share the successes and the experiences that we're having at VA. I think this work it's gotten a lot of attention and deservedly, so there's hundreds of individuals who are certainly responsible. And, and for me to just be a small part of their team and their successes is both a humbling and just something I'll always be grateful for.

S. Wander (15:20):

Thank you, lots, lots of great stuff to dig in and, and, and hope to stay in touch with you and follow your incredible work.

Tim Irvine (15:26):

Awesome. Well, I really appreciate it and thank you for the opportunity. That was incredible. I I mean, when you think about the biggest healthcare system in the world, and then you think about a nuanced expression around innovation and building a learning organization I thought that was fantastic.

S. Wander (15:45):

I'm really curious on your take about something that he said, which is that he talked about sort of the, one of the secrets to scaling, being about having innovation at the grassroots level. And, and I would imagine that maybe a bit of a tension point between leadership and leadership directed initiatives and government versus grassroots endeavors. And what do you think it takes to, as you're thinking about how you coach leaders to enable that grassroots innovation and to do it, you know, across potentially many lines of, you know, managers and large operating structures

Tim Irvine (16:15):

Yeah. And, and hierarchical structures that it can be, or it's not difficult daunting. So, you know, I

would go back to kind of, you know, a realization or recognition that all of us are smarter than any one of us. So I think when you have a commitment to looking for great ideas anywhere and incenting, you know, ultimately a learning organization, which is really what Ryan was describing in the VA, it's, it's a building a culture and an infrastructure that enables, you know, folks on the front line to you know, to do things that are not just in isolation that can see the problem and they can have an opinion. And that opinion can be shared by a number of people, which then kind of, it takes on a life of its own. I mean, ultimately you're inviting people to participate in the mission of the company.

Tim Irvine (17:05):

And I think one of the beautiful things about operating in the federal space is that it's, it's entirely mission driven. Like these are the big problems that need to be solved, to affect many, many, many people. And, and so I think being able to listen to an individual at a very junior level, you know, perhaps, and giving them a forum to be heard, be supported and to affect change at a you know, at a significant level. I think that is that's a game changer. And I think organizations and leaders would do well to heed that ultimately, and recognize that it's in everyone's best interest, that you're serving people that, you know, have a passion. And and when you align your purpose and your mission with theirs as individuals that is an incredible multiplier for anybody operating in, you know, with any kind of hope to operate in kind of an innovation, right?

S. Wander (18:06):

I mean, my major takeaway from this whole interview was that for, you know, for, for running it, innovation is deeply personal, right? It's, it's human, it's everything from, you know, engaging in continuous learning to building a team that has resilience to leveraging and trusting your team to cultivating, you know, young talent to collaboration. It was all about things like empowerment capability. And, and I think those things are easy to say, and they're really hard to



sometimes develop and culture. And so I was really excited to hear that. And I think, and it was one of those things that struck me as really true. One of those tension points, like, as we say, were words where it's sort of right, where you're like, yes, that's really what innovation takes to succeed is great cultivation of people, but it's so hard to do in reality. And I can only imagine that given some of the operational constraints in the environment he's in that that's very difficult. So I have to say that kind of honestly, you know really shocked and surprised me yes,

Tim Irvine (19:04):

As we, as we talk about commitment to to learning and lifelong learning and really accelerating kind of perspectives pulled from any different part of the organization. I think one of the highest compliments, honestly, you could you could give someone is to say this, this person is cultivating a learning organization because that is, that is, there's a baked in resilience associated with that, which I find really compelling. And it was very much top of mind with Ryan.

S. Wander (19:36):

Yeah, I totally agree. I mean, I think that, that question, and if you can make that a part of your culture and a part of your leadership culture and the organization that you build, it really, I think gives you the framework for all the right ingredients. So, so Tim, one other thing that just, I wanted to really shout out Ryan's work at the VA for which is I think the incredible depth and consideration that they've given to their LGBT LGBTQ community. It's, again, it's one of those topics that's not easy, but I, I know from working with the social work community, that because of the VA's reach and because of their influence in the medical community overall that they've really had, I think, an outsize impact and improving the standard of care for diverse communities. And I think that's really needs to be highlighted and acknowledged

Tim Irvine (20:22):

Excellent point. I mean, pretty good. Particularly when you talk about building an inclusive environment, I mean, I can, you gotta be, you've gotta be thinking about that from your employees and the, and the people they serve, like this all comes back to purpose. Like why, why do you exist? I mean, it's caring for the whole person. If you don't recognize, if you don't recognize, you know, your multiple constituents and recognize their humanity, then just leaving a lot behind, you know? Yeah. I love that part. Yeah.

S. Wander (20:53):

Couldn't agree more. I think that's really, really, the key message from Ryan today is, is how do we really think about, you know, keeping the human at the center? So thank you, Tim. This is an awesome opportunity.

Tim Irvine (21:10):

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