

# Innovation Readiness and Experiment Map

A structured workbook for noticing useful problems, questioning assumptions, generating alternatives, designing responsible experiments, and learning from evidence.

## COMPREHENSIVE CLINICIAN PACKAGE

| Included                                    | Designed for                                                                                                                                                  |
|---------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Clinician guide and implementation sequence | Therapists, counselors, case managers, educators, coaches working within scope, program leaders, teams, and adults building practical problem-solving skills. |
| Comprehensive adult/client worksheets       | Individual, group, community, or case-management use                                                                                                          |
| Adolescent adaptation where appropriate     | Use with clinical judgment and developmental adaptation                                                                                                       |
| Processing questions and progress review    | Session use or structured between-session practice                                                                                                            |
| One-page client quick sheet                 | Printable and digitally fillable                                                                                                                              |

### Professional scope and safety

This original educational resource supports professional conversation, reflection, skills practice, service planning, and documentation. It is not a validated assessment, diagnostic instrument, psychotherapy protocol, treatment-plan substitute, risk assessment, crisis plan, or emergency intervention. Clinicians and programs are responsible for determining appropriateness, obtaining consent, adapting language, protecting confidentiality, and following applicable laws, ethical standards, agency policies, and supervision requirements.

Do not use this worksheet to delay emergency evaluation or mandated action. If there is concern about imminent danger, abuse, neglect, exploitation, grave disability, medical instability, or another urgent safety issue, follow local emergency and organizational procedures.

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# Clinician Guide

The Innovation Readiness and Experiment Map helps a person or team move from frustration or a promising idea toward a small, responsible test. It treats innovation as a psychological and behavioral process rather than a flash of inspiration. The tool supports curiosity, cognitive flexibility, tolerance for uncertainty, psychological safety, feedback, disciplined experimentation, and revision. It does not assume that every new idea is useful or that every established practice should be changed.

## Best-fit uses

- Clarifying a recurring problem, unmet need, or inefficient process
- Separating observations from assumptions about why the problem exists
- Generating several alternatives before becoming attached to one solution
- Identifying fear, conformity, overload, low autonomy, or ego-protection that may restrict exploration
- Designing a small, ethical, accessible, and reversible experiment
- Reviewing feedback and deciding whether to continue, adapt, pause, or stop
- Supporting collaborative problem-solving in clinical, educational, service, workplace, or personal settings

## Use additional caution or choose another tool when

- The proposed change could affect safety, privacy, consent, legal rights, clinical care, medication, finances, employment, housing, or access to essential services without appropriate authority and review
- The worksheet is being used to pressure a person to accept change, disclose private information, or participate in an experiment without meaningful choice
- Urgent stabilization, formal risk assessment, medical evaluation, mandated action, or emergency response is needed
- A real problem involving abuse, discrimination, coercion, unsafe conditions, or lack of resources is being reframed as an individual's resistance to innovation
- The decision requires specialized technical, legal, ethical, cultural, accessibility, or clinical consultation beyond the user's competence

## Suggested implementation sequence

### 1. Name the friction

Begin with a specific recurring difficulty, unmet need, missed opportunity, or process that creates unnecessary burden. Avoid starting with a favorite solution.

### 2. Define useful change

Identify who is affected, what matters to them, what should improve, and what must not be harmed or lost.

### 3. Question the current explanation

Separate direct observations from assumptions, traditions, predictions, and rules that may be incomplete.

### 4. Expand before choosing

Generate multiple options, including adaptations of current practice, environmental changes, support changes, and deliberately small solutions.

### 5. Examine psychological conditions

Identify curiosity, motivation, autonomy, psychological safety, uncertainty tolerance, workload, power, and identity concerns that may help or obstruct thoughtful experimentation.

### 6. Design the smallest responsible test

Specify the hypothesis, participants, consent, steps, safeguards, measures, time frame, stop criteria, and a realistic owner.

### 7. Learn without defending the idea

Compare predictions with observed outcomes, include unintended effects and dissenting feedback, and decide whether to continue, adapt, pause, or stop.

## Suggested processing questions

- What problem have people learned to tolerate because it feels normal or permanent?
- Who experiences the burden, and whose perspective has not yet shaped the definition of the problem?
- What are we observing directly, and what are we assuming?
- What would count as genuinely useful improvement rather than novelty, appearance, or activity?
- What fear, status concern, workload, power difference, or attachment may be narrowing the options?
- What is the smallest test that can produce useful information without creating unnecessary risk?
- What result would lead us to revise or abandon the idea?
- How will feedback be gathered from people who may disagree or be affected differently?

## Conceptual influences

Conceptual influences include research and practice concerning creativity and innovation, divergent thinking, cognitive flexibility, intrinsic motivation, self-efficacy, tolerance of ambiguity, psychological safety, human-centered problem definition, behavioral experimentation, implementation, and feedback-informed learning. This original educational synthesis is not a validated measure of creativity, innovation potential, readiness, intelligence, personality, or organizational effectiveness.

# 1. Notice the Friction

Innovation often begins with a problem people have adapted to. Describe the difficulty before proposing a solution.

## Where the friction appears

Personal routine

Relationship

Clinical/service work

Case management

Education

Team process

Organization

Community

Access barrier

Communication

Technology

Other

**What repeatedly takes too long, causes confusion, creates burden, limits access, wastes effort, or fails to meet a real need?**

**Observable examples: what happened, when, where, how often, and with what immediate result?**

**Who is affected directly and indirectly? Include people who may experience the problem differently.**

**What have people learned to tolerate, work around, or stop expecting?**

A strong innovation question begins with a real need. Starting with a preferred solution can make the problem fit the idea instead of making the idea fit the problem.

## 2. Define Useful Improvement

Novelty is not enough. Describe what would become meaningfully better and what should remain protected.

**Desired change in plain language: what should become easier, safer, clearer, fairer, faster, more accessible, or more effective?**

**What outcome would matter to the people most affected?**

**What strengths, relationships, routines, cultural practices, rights, or safeguards should not be lost?**

**What would look impressive but fail to solve the actual problem?**

**How will we know that the change created value rather than simply creating activity?**

### 3. Challenge the Current Explanation

Established practices often contain both accumulated wisdom and untested assumptions. Examine both fairly.

#### Assumptions to examine

It has always worked

People will resist

Too expensive

Too difficult

No one has time

Policy requires it

Clients prefer it

Leaders will reject it

Technology will solve it

Failure would look bad

Nothing can change

Other

#### Direct observations and reliable information about why the current process exists

#### Assumptions, traditions, predictions, or unwritten rules that may be shaping the current process

#### What evidence supports those assumptions? What evidence weakens them or remains missing?

#### What constraints are real right now, and which might be negotiable, outdated, misunderstood, or testable?

Questioning a practice does not require disrespecting the people who built it. The goal is to distinguish what still protects value from what now preserves unnecessary friction.

## 4. Expand the Possibility Set

Generate before evaluating. Include modest adaptations as well as unfamiliar options.

**Option 1 - Improve or simplify the current approach**

**Option 2 - Change the environment, sequence, timing, communication, or support around the problem**

**Option 3 - Try a genuinely different approach**

**Option 4 - Borrow and adapt a useful practice from another setting without copying it blindly**

**Option 5 - What is the smallest possible change that might still matter?**

**What additional perspective, lived experience, discipline, or role could expand these options?**

## 5. Psychological Readiness Review

Ideas are shaped by the conditions surrounding them. Examine what may support or narrow honest exploration.

### Conditions present

Curiosity

Meaning/purpose

Autonomy

Confidence to try

Psychological safety

Time to think

Useful diversity

Leader support

Fear of criticism

Status concern

Overload

Pressure for certainty

**What makes this problem worth working on beyond recognition, novelty, or pressure to appear innovative?**

**What uncertainty, criticism, inconvenience, or temporary incompetence must be tolerated to test a better approach?**

**Where could power differences or fear prevent honest questions, disagreement, or negative feedback?**

**What part of the current approach or proposed idea feels connected to identity, expertise, status, or being right?**

**What conditions would make thoughtful participation safer, more accessible, and more realistic?**

Psychological safety does not mean every idea is accepted. It means people can raise questions, admit uncertainty, identify risk, and offer corrective feedback without humiliation or retaliation.

## 6. Compare the Strongest Options

Choose an option because it fits the problem and context, not because it is the most exciting.

**Options being compared**

**Likely value for the people affected**

**Evidence, experience, or reasoning supporting each option**

**Risks, burdens, inequities, accessibility concerns, and possible unintended effects**

**Resources, authority, skills, cooperation, and time required**

**Selected option and the reason it is the most responsible next test**

## 7. Design the Smallest Responsible Experiment

A useful experiment is specific enough to learn from and limited enough to manage responsibly.

**Hypothesis:** If we change \_\_\_\_\_, then \_\_\_\_\_ may improve because \_\_\_\_\_.

**Who will participate or be affected? How will meaningful choice, consent, privacy, and accessibility be protected?**

**Exact steps, location, time frame, responsible owner, and resources needed**

**What will be observed or measured before, during, and after the test?**

**What result would support continuing? What result would require adaptation, pause, consultation, or stopping?**

**Safeguards, backup plan, and how the prior approach will be restored if needed**

Do not experiment casually with safety, essential services, confidential information, treatment, medication, legal obligations, or people's rights. Obtain the appropriate authority and specialized review.

## 8. Feedback, Learning, and the Next Iteration

The purpose of a test is to learn. Protecting the idea from evidence defeats the purpose.

**What happened? Record observable outcomes, participation, burden, errors, benefits, and unexpected effects.**

**Whose feedback was gathered, how was it gathered, and whose perspective is still missing?**

**What matched the prediction? What contradicted it or remains unclear?**

**What did the test reveal about the problem, the solution, and the conditions needed for implementation?**

**Decision: continue, adapt, combine, pause, stop, gather more information, consult, or refer**

**Next iteration: exact change, owner, time frame, safeguards, and review date**

# Adolescent Adaptation

Use a real problem the young person cares about. Keep the process collaborative, concrete, and small enough to test without turning it into an assignment or adult-led compliance exercise.

## Use with developmental and family-system awareness

- Let the young person define what is frustrating or unnecessarily hard
- Ask before involving caregivers, school staff, or peers except where safety or law requires action
- Include sensory, disability, cultural, family, peer, technology, and access factors
- Do not call refusal, disagreement, or boundary-setting a lack of creativity
- Adults remain responsible for safety, permission, resources, and appropriate limits

**Something that keeps feeling harder, slower, confusing, unfair, or less useful than it needs to be**

**Why it matters to me and who else it affects**

**Three different ways it could work better**

**The smallest safe idea I am willing to try**

**What adults or other people will do to support the test without taking it over**

**What happened, what I learned, and what I want to change next**

## Adult support without taking over

Adults can support innovation by taking the problem seriously, asking open questions, giving realistic choices, protecting safety, providing resources, and treating a disappointing result as information rather than proof that the young person failed.

# Progress Review and Clinical Integration

Use this page to review what changed, what remained difficult, and what should happen next. Avoid treating worksheet completion as proof of clinical improvement.

**What did the client notice or understand that was not clear before?**

**What skill, action, referral, support, or environmental change was attempted?**

**What was the observable result? Include client-reported benefit, burden, or unintended effect.**

**What barriers, cultural factors, accessibility needs, risks, or contextual pressures affected the result?**

**What should be continued, modified, stopped, or referred for additional support?**

**Clinical documentation note: objective summary, client voice, intervention, response, and follow-up plan.**

# Notice - Question - Imagine - Test - Learn

Use this page to move one useful problem toward one small, responsible experiment.

**NOTICE** - What recurring problem, burden, unmet need, or missed opportunity have I been tolerating?

**QUESTION** - What am I observing directly, and what might I only be assuming?

**IMAGINE** - List three different ways this could work better.

**CHOOSE** - Which idea best fits the need, context, people affected, and available resources?

**TEST** - What is the smallest safe, ethical, accessible, and reversible experiment I can run?

**LEARN** - What happened, whose feedback matters, and should I continue, adapt, pause, or stop?

Use this page as a conversation and reflection aid. It is not a diagnosis, assessment, safety plan, or substitute for individualized professional care.