

CHANGE MANAGEMENT IN PRIMARY CARE TRANSFORMATION

FOUR STRATEGIES FOR MANAGING THE PEOPLE SIDE
OF CHANGE

WENDY JAMESON, CONSULTANT, COACH & TRAINER

A solid orange horizontal bar at the bottom of the slide.

WE'RE HIRING A
DIRECTOR OF CHANGE
MANAGEMENT TO HELP
EMPLOYEES EMBRACE
STRATEGIC CHANGES.

OR WE COULD COME
UP WITH STRATEGIES
THAT MAKE SENSE.
THEN EMPLOYEES
WOULD EMBRACE
CHANGE.

THAT
SOUNDS
HARDER.

TAKE HOME MESSAGE FOR TODAY...

- ❖ Your people are the secret to organizational transformation.



- ❖ Changing ourselves, as leaders, is the first step to creating an environment in which the people in your organization feel empowered & motivated to create real and lasting change.



Name	Age	Sex	Height (cm)	Weight (kg)	Blood Pressure (mmHg)	Cholesterol (mg/dL)
Patients						
John Doe	45	M	175	75	120/80	150
Jane Smith	32	F	160	55	110/70	120
Robert Johnson	60	M	180	90	130/90	180
Emily White	28	F	155	45	100/60	110
Michael Brown	55	M	170	80	125/85	160
Sarah Davis	40	F	165	60	115/75	130
David Wilson	38	M	172	65	118/78	140
Alice Taylor	25	F	158	48	102/62	115
James Anderson	50	M	178	85	128/88	170
Olivia Martinez	30	F	162	58	112/72	125
Benjamin Clark	65	M	185	100	135/95	190
Isabella Rodriguez	22	F	152	42	98/58	105
William Lee	48	M	174	78	122/82	155
Charlotte King	35	F	168	62	116/76	135
Christopher Hall	58	M	176	82	126/86	165
Ava Young	27	F	156	46	101/61	112
Matthew Scott	52	M	173	79	124/84	158
Mia Green	33	F	163	59	114/74	128
Anthony Adams	62	M	182	95	132/92	185
Sophia Baker	29	F	159	49	103/63	118
Daniel Garcia	47	M	171	76	121/81	152
Grace Hernandez	37	F	166	61	117/77	132
Kevin Lopez	57	M	175	81	127/87	162
Liam Miller	24	M	154	44	99/59	108
Nora Wilson	42	F	164	57	113/73	122
Oliver Moore	68	M	188	105	138/98	200
Penelope Taylor	21	F	151	41	97/57	102
Quinn Anderson	44	F	167	63	119/79	138
Samuel King	54	M	177	83	129/89	175
Victoria Scott	34	F	161	56	111/71	124
William Hall	64	M	184	98	134/94	195
Yasmine Young	26	F	157	47	100/60	110
Zoe Green	36	F	169	64	120/80	140
Adam Brown	56	M	179	84	128/88	168
Ella White	23	F	153	43	99/59	107
Frank Black	43	M	171	77	121/81	153
Grace Blue	31	F	160	54	110/70	120
Henry Gold	61	M	181	96	131/91	188
Ivy Silver	20	F	150	40	96/56	100
Jack Bronze	41	M	169	53	109/69	119
Karen Copper	39	F	167	60	115/75	130
Leo Nickel	59	M	176	80	125/85	160
Mia Zinc	28	F	158	48	102/62	115
Noah Iron	46	M	172	76	121/81	152
Olivia Tin	32	F	162	58	112/72	125
Peter Lead	63	M	183	97	133/93	192
Quinn Platinum	25	F	155	45	100/60	110
Samuel Gold	45	M	170	75	120/80	150
Tina Silver	35	F	165	60	115/75	130
Victor Bronze	55	M	175	80	125/85	160
Wendy Copper	27	F	156	46	101/61	112
Xavier Nickel	47	M	171	76	121/81	152
Yara Zinc	37	F	166	61	117/77	132
Zoe Iron	57	F	176	81	127/87	162
Adam Tin	24	M	154	44	99/59	108
Ella Lead	42	F	164	57	113/73	122
Frank Platinum	62	M	182	95	132/92	185
Grace Gold	22	F	152	42	98/58	105





Executive closed-door session...

Problem defined as:

“Patient experience
data not always
available when
needed.”





Mismanaging change → Staff Confusion

- What are the priorities?
- What is the problem?
- How will this change fix the problem?
- Do people think we're doing a poor job?



Mismanaging change → Feelings of being:

- Overworked
- Under-appreciated
- Ignored



In summary: How did this executive team mismanage change?

- Talked only among themselves
- Defined the problem vaguely without looking for root causes
- Identified solution prematurely
- Kept those most affected by the change in the dark
- Did not ask for input from people closest to the issue or with most knowledge
- Communicated solution across the organization before communicating with those most affected

Leadership Behaviors: How to Manage Change & Unleash the Power of Your People



1. Relentlessly define the problem
2. Partner with front-line staff & patients to ID high-impact solutions
3. Prioritize & sequence change initiatives
4. Communicate frequently and transparently

CHANGE MANAGEMENT DEFINED

Change is persuading massive #s of people to stop doing what they have been doing, and start doing something that they probably don't want to do. (author unknown)

Change management is the discipline that guides how we prepare, equip and support individuals to successfully adopt change in order to drive organizational success and outcomes.
(www.PROSCI.com)



CHANGE FATIGUE EATS ORGANIZATIONAL
TRANSFORMATION FOR LUNCH, BREAKFAST AND
DINNER

© Randy Glasbergen for RapidBI.com



© 1998 Randy Glasbergen. www.glasbergen.com



**"Suspending your keyboard from the ceiling
forces you to sit up straight, thus reducing fatigue."**

How to spot Change Fatigue among staff:

- Disengaged
- Frustrated
- Fatigued
- Resistant
- Confused
- Cynical



We Must Nip Change Fatigue in the Bud Because It:

- Slows change efforts
- Changes won't stick
- Drains morale
- Symptom/cause of staff dissatisfaction
- Biggest barrier to organizational transformation



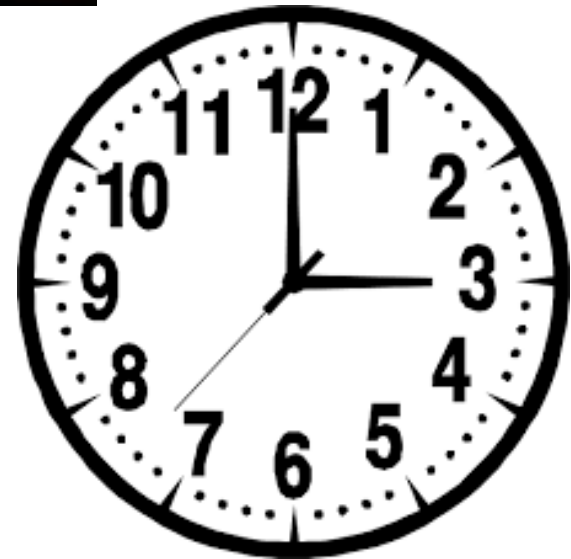
Leadership Behavior #1: RELENTLESSLY DEFINE THE PROBLEM

BE A PROBLEM DETECTIVE AND COACH OTHERS TO SEARCH FOR THE
TRUE PROBLEM, ALL THE WAY TO ITS ROOT CAUSES

➤ THAT WILL LEAD TO REAL SOLUTIONS

The Costs of Not Defining the Problem

- Wasted time and resources from working on wrong problem
- Reduced motivation to fix the real problem
- Negative impact from the original, ongoing problem





How executives & managers can help define the problem...

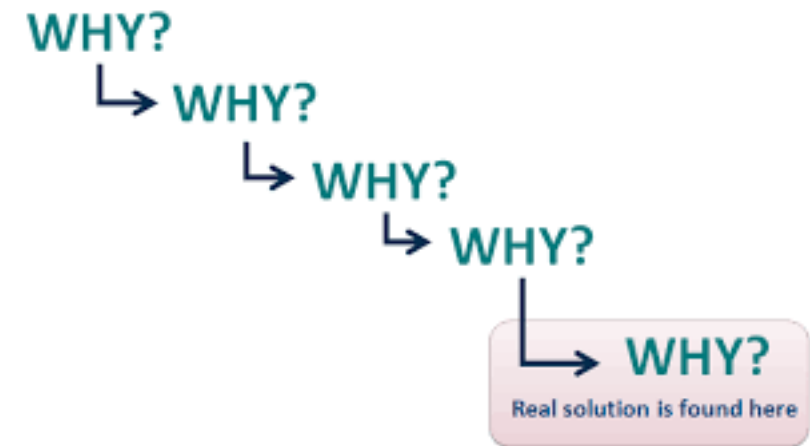
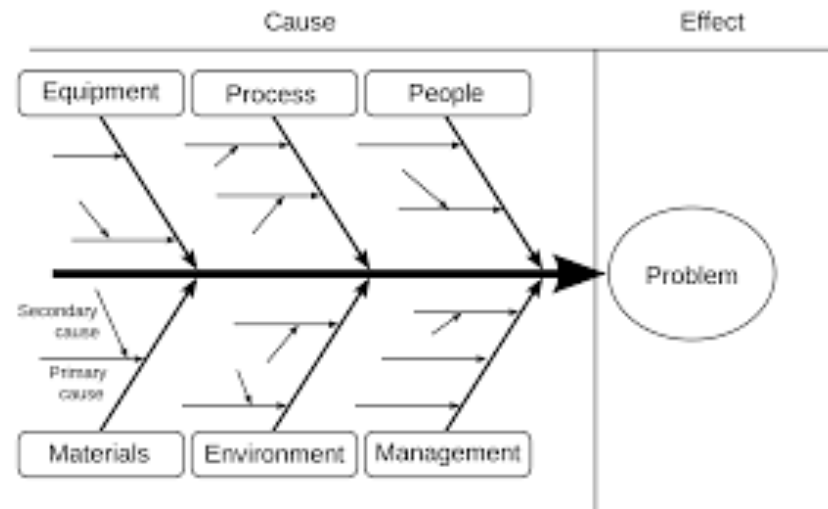
- ❖ Get perspectives of front-line staff closest to the issue, & patients
- ❖ Observe the process
- ❖ Use tools like Fishbone diagram, process mapping, 5 Whys

Questions executives & managers should continuously ask

- ❖ What is the problem we are trying to solve?
- ❖ What does it look like now?
- ❖ What would it look like if it were working well?



Use tools for defining the problem with front line staff and patient perspectives



Leadership Behavior #2:
PARTNER WITH FRONT LINE
STAFF AND PATIENTS TO ID
HIGH-IMPACT SOLUTIONS

Identify *Vital Behaviors*

--Joseph Grenny, Kerry Patterson, et al, Influencers

PARETO PRINCIPLE (AKA, THE 80-20 RULE): FOR MANY PROBLEMS, 80% OF THE EFFECT COMES FROM 20% OF THE CAUSES.

FINDING SOLUTIONS WITH THE BIGGEST IMPACT

How one man saved
millions of lives by
identifying “vital
behaviors” &
stopping rampant
spread of AIDS in
Thailand.



Dr. Wiwat Rojanapithayakorn, World Health Organization, Mongolia
Formerly Minister of Health, Thailand

ID & Spread a Vital Behavior:

Whether sex
workers request
that clients use
condoms



YOUR TURN...What are some potential vital behaviors in primary care transformation?

PROBLEM: Patient not taking medication correctly, leading to poor outcomes

Potential Vital Behavior:

- Medication reconciliation, including best practices like “closing the loop” so patient demonstrates understanding of how to take meds

PROBLEM: Diagnostic reports from specialist are not available at the next primary care visit

Potential Vital Behavior: ***PLEASE SHARE YOUR IDEAS THROUGH THE CHAT BOX***

PROBLEM: Meetings conclude with participants unclear of action plan or what was decided at the last meeting

Potential Vital Behavior: ***PLEASE SHARE YOUR IDEAS THROUGH THE CHAT BOX***

ID & test solutions: Questions executives & managers should continuously ask

- ❖ What ideas do you have for a change that could help us get there?
- ❖ How could we try out that idea on a small scale, and what do you think will happen?
- ❖ What are our next steps: who is going to try it, when, and how?



Leadership Behavior #3: PRIORITIZE & SEQUENCE CHANGE INITIATIVES

DECIDE WHAT CHANGE INITIATIVES YOUR ORGANIZATION CAN
POSTPONE OR NOT DO AT ALL, SO THAT YOU CAN WORK ON WHAT'S
MOST IMPORTANT NOW

A solid orange horizontal bar at the bottom of the slide.

Leaders tend to pile on multiple change initiatives without asking:

- Is this essential to meeting our strategic priorities?
- Is it critical to take on now?
- How can we create capacity to take this on? E.g., integrate it with current effort, or stop/postpone current change effort?



“A well-paced marathon can easily become 26 one-mile sprints— leading to exhausted and burnt out employees.”

---Ken Perlman, Kotter International

Denver Health
effectively uses *Lean*
as a change
management system
to:

- Prioritize & sequence change initiatives
- Hold teams accountable for progress



FIRST STEP TO PRIORITIZE CHANGE INITIATIVES:

Scan your
organization to
identify ALL current
change efforts



Inventory of Change Initiatives

PURPOSE: One of the most critical change management strategies is to prioritize only the most important change initiatives, and support those with adequate staff, attention and resources. The Inventory of Change Initiatives is a tool to catalog the existing improvement efforts in your organization. With this clear picture of what is already happening on the ground, leadership teams can make informed decisions in considering new change initiatives. The completed tool helps leaders: 1) gauge if there is bandwidth to take on new change initiatives; 2) highlight what staff/departments are most involved in change initiatives, and reveal opportunities to integrate new improvement work with existing efforts.

	EXAMPLE	Initiative A	Initiative B	Initiative C	Initiative D	(Continue...)
Name of Change Initiative	Referral Management					
Initiative Lead (Name of Individual, department or team/committee)	V. Ramos, Chair, Process Redesign Committee					
Aim of the Initiative (e.g. improve patient experience, reduce readmissions, decrease ER utilization)	Improve likelihood of patients completing referral appointment from 50% to 75%					
Impacted Groups (e.g., who needs to adopt and use the change for the expected benefits to be achieved?)	Referral Coordinators, Providers, Outside Specialist office staff					
Strategic Alignment Is this work reflected in your organization's strategic plan or, if not, visibly & concretely supported by leadership? (Yes, No)	Yes under "Enhance Care Coordination"					
Stage (I - Planning; II - Testing or considering different ideas/approaches; or III - Implementation)	I - Planning					
Expected Date of Completion	7/31/2016					
Impact to Date (none yet, modest impact, high impact)	None yet					
Level of effort involved (low, medium, or great effort)	Medium effort					

See Tab 2 for Instructions

How to Use Your Completed Change Initiative Inventory

When considering new improvement initiatives, you should ask 3 questions:

1. Is this new change initiative essential to meeting our strategic priorities?
2. Is it critical to take on now?
3. How can we create capacity to take this on? **Review your Change Initiative Inventory** to determine opportunities to:
 - Integrated into an existing initiative
 - Wrap up current initiative before starting a new one
 - Stop or delay current initiative
 - Postpone launching the new initiative until there is sufficient capacity

Leadership Behavior #4: COMMUNICATE FREQUENTLY & TRANSPARENTLY

DON'T LEAVE YOUR STAFF IN THE DARK

A solid orange horizontal bar at the bottom of the slide.

COMMUNICATE:

What changes are being worked on & why

Potential impact on people & on other areas needing improvement

Leadership support for the change process



TRY THESE
LEADERSHIP
BEHAVIORS AS YOU
MANAGE THE
CHANGES AHEAD:

1. Relentlessly define the problem
2. Partner with front-line staff & patients to ID high-impact solutions
3. Prioritize & sequence change initiatives
4. Communicate frequently and transparently

IN CONCLUSION...



QUESTIONS?



Wendy Jameson, Consultant/Coach/Trainer
wendyjameson@gmail.com