Change
Management:
Making Sure
Changes Spread
& Stick



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Part 3 of Change Management Webinar Series sponsored by California Primary Care Association

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## My Introduction

- ▶ Consultant, Coach & Trainer
- Former Director of Quality Improvement,
   OLE Health
- ► Founding Executive Director, California Health Care Safety Net Institute
- Partners with health care organizations & leaders to build capabilities for transformation, so that they can dramatically improve community health.



## Goals for Today's Webinar

- I. Provide framework for thinking about spread and sustainability
- II. Offer tips and tricks on methods for spread and sustainability
- III. Share a few stories from the field
- IV. Provide a tool to support your organization in spreading and sustaining change

## Change Is Difficult, Messy & Often Not Successful

►80% of change efforts result in limited success or outright failure



-- Eric Beaudan, "Making Change Last: How to Get Beyond Change Fatigue". Ivey Business Journal, Jan/Feb 2006)

## Common Reasons Change Falters or Fails

- Weak case for the need/purpose for change
- Insufficient resources (time, materials, tools, training, leadership, \$, attention)
- ► Failure to anticipate and/or respond to factors or events that can derail change
- Not enough communication (about purpose, what's in it for us, results, successes)
- Not enough effort to engage people in the change effort over time

### Common Subconscious Beliefs About Change

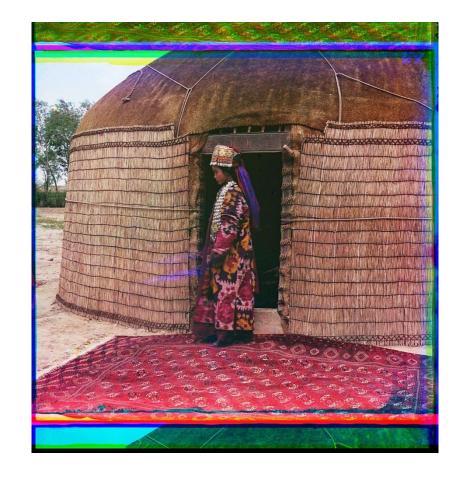
- ▶ It doesn't improve things
- We never finish it
- ► Resistance will always kill it
- Managers can't lead it
- It ruins what we had which was always better



## ReFRAME the Change

- If leaders can view change as what your organization is about, and process that can be managed, we can influence how people think about it, participate in it and respond to it.
- ► Reframing the change, and becoming influencers, will help spread the change.

So how can leaders be influencers?



# Lifecycle of an Improvement Initiative: Moving into Stage 3

## Lifecycle of an Improvement Initiative

Phase 1

•Develop & Communicate Vision & Strategy
•Lay the Foundation for Transformation

Phase 2

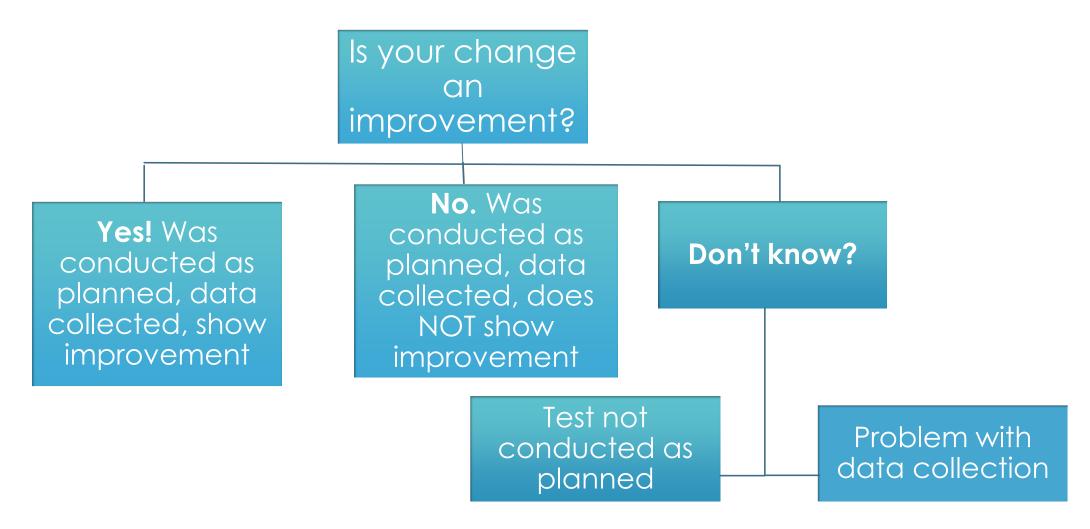
•Generate & Test Change Ideas
•Create Standard Workflows/Processes

•Implement Standard Processes
•Spread & Sustain Standard Processes

#### Throughout Each Phase:

- Model New Behaviors
- Recognize & Reward People
- Align Organizational Practices to Support Changes

## When to Shift from Testing to Implementing?



--Institute for Healthcare Improvement's Open School's Online Course: Q1102 Lesson 5: <a href="https://www.youtube.com/watch?v=eYoJxjmv\_Ql">https://www.youtube.com/watch?v=eYoJxjmv\_Ql</a>

## Key Tasks

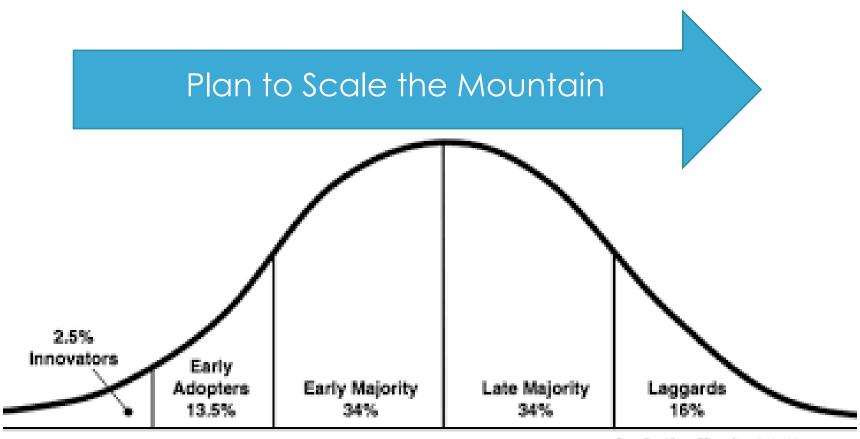
## Implementation -> Spread

- Ensure new processes are adopted in 1 unit or site
- Develop system for feedback and continuous measurement of results
- Embed ("hardwire") new standard processes
- Develop spread plan; ID resources or support needed

- Develop communication & dissemination plan
- Package content for easy adoption by new sites/teams
- Spread to additional sites, monitor adoption & performance

## Spread

## Roger's Diffusion Theory of Change

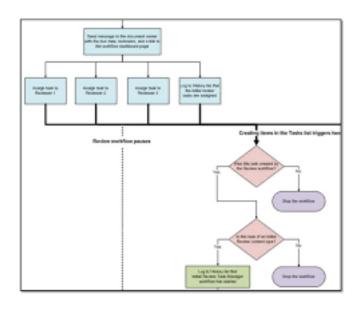


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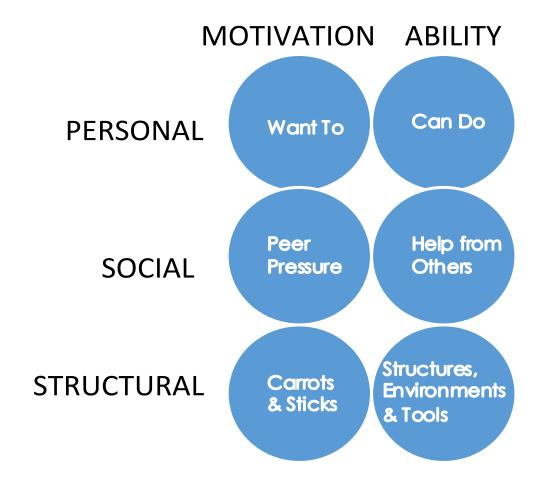
## What Methods Do You Use to Influence Employee Behavior?







#### Six Sources of Influence



--Grenny, Patterson, et al, <u>Influencer</u>, 2013.

## Personal Motivation: Help Them Love What They Hate

- Connect desired behavior to intrinsic motives
- Create direct experiences
- Make it a game!
- ► Tell meaningful stories



## Personal Motivation - Telling Meaningful Stories: "DIEGO'S" STORY

- > 60 yr old disabled former truck driver
- Diabetes, dizzy spells, frequent skin abscesses
- Used ED for primary care
- ▶ Last abscess → infection → 7 wks in hosp

#### <u>Since enrolling in Complex Care Management:</u>

- Med adjustment & frequent insulin titration
- ▶ No ED or hospitalizations
- Calls Complex Care RN with any questions or concerns
- Reports ↑ happiness, self-esteem and level of activity

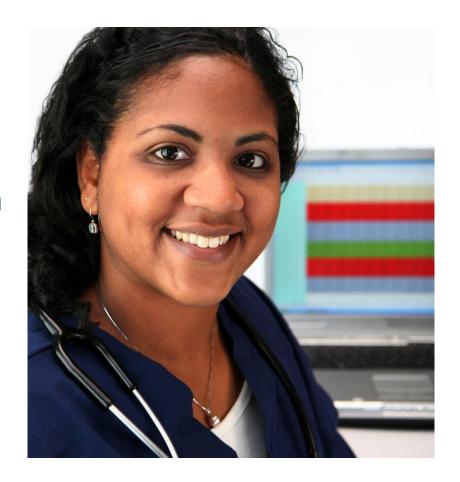
"I used to hate medical care, but now I feel that I can care for my own health"

--Used with permission from OLE Health



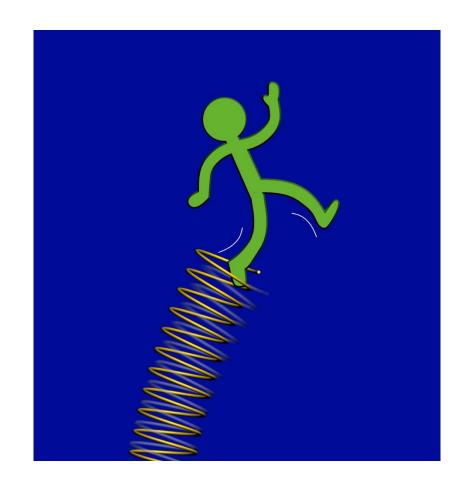
## Personal Ability: Changing Behavior Requires New Skills

- Deliberate practice in realistic conditions w/coaching & feedback
- Break behaviors into smaller actions
- ▶ Build in resilience so staff can recover from setbacks, difficult starts
- ► Train on problem-solving skills



## Personal Ability: Building in Resilience

- ► Performance Improvement embraces "failure"
- You can change how staff & providers face setbacks
  - "Aha! Thank goodness we just discovered what doesn't work. What can we try next?"



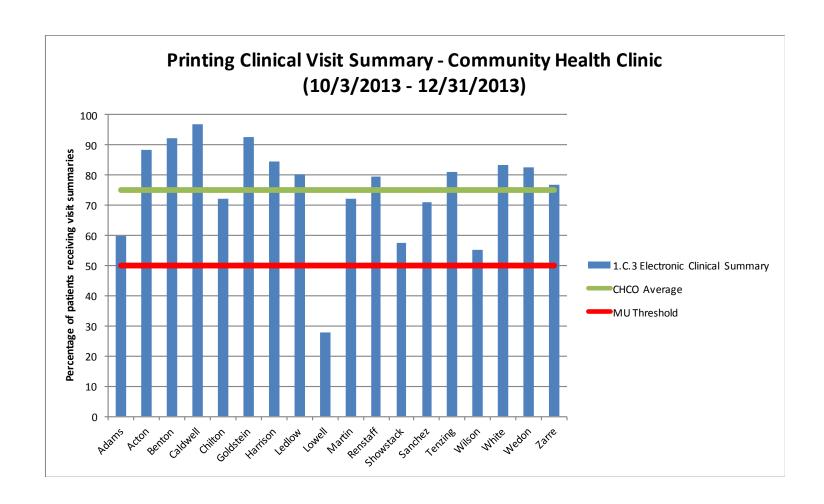
#### Social Motivation

- Opinion leaders and peer influence
- Changing norms



#### Social Motivation:

- Healthy competition
- Share data transparently



## Social Ability

- ► Engage social structure to reinforce desired behaviors
- Provide concrete assistance in crucial moments to help people change
- "Each one teach one"

#### Structural Motivation

- Attach appropriate incentives or sanctions to motivate people
- Use extrinsic rewards last, after maximizing use of personal and social motivators (which are more powerful and lasting).
- Extrinsic rewards should be:
  - ▶ Nearly immediate
  - Gratifying
  - Specific to behavior you're encouraging
  - Less is more



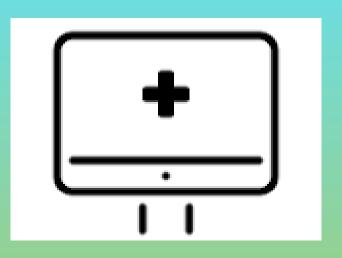
## Structural Ability

- Make sure that THINGS support the new behavior
  - ► Systems E.g., EMR
  - Processes
  - Reporting Structures
  - Visual Cues



## Strategies to Sustain the Gains



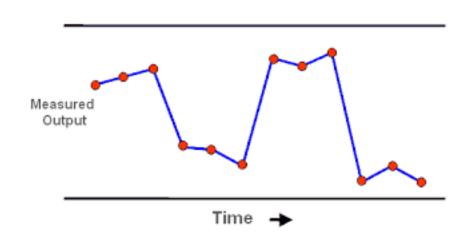




## Keeping the Change Aloft

- All change exhibits patterns of ups and downs
- ▶ To keep the change work from , losing momentum & stalling:
  - ► Focus on a strong start of initiative
  - Leadership team lead by word & deed
  - Pace the change to meet the urgency needs and capacity
  - Resolve to lead the change to the end
  - Deal with obstacles quickly (events, circumstances and people)

## Monitor for Slippage



- Performance data slipping
- > Missed meetings
- >Attitudes & teamwork deteriorating

## Visual Management (for sustainability)





## Allows you to detect quickly what is normal and what is abnormal

http://www.safetynetmedicalhome.org/sites/default/files/Webinar-Spread-Sustainability-MH-Transformation.pdf

## Visual Improvement Board

Clinic Vision/Aim

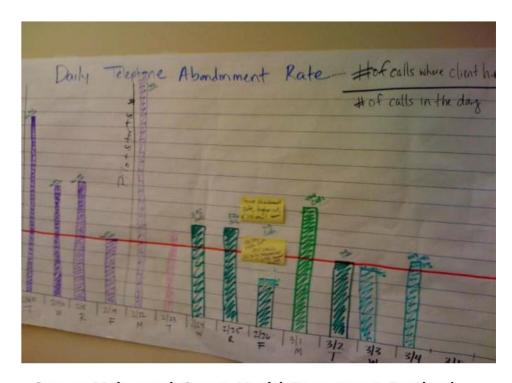
Outcome Measures Current
Improvement
Projects /
Process
Measures

Staff Engagement

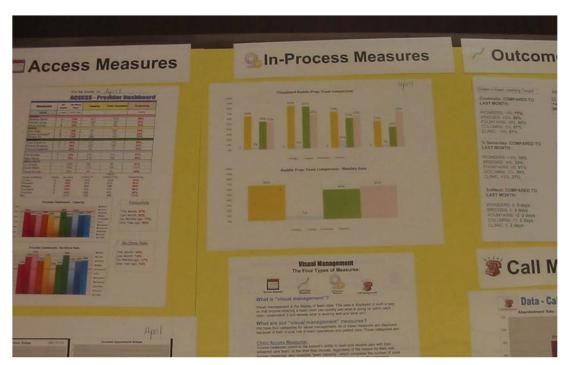
> Customer Service

Visitor Comments

## Visual Management



Source: Multnomah County Health Department, Portland OR, Telephone Improvement Kaizen



Source: Old Town Clinic, Portland OR, Leadership Improvement Board

### Final Thoughts

- ► Change by its nature is unpredictable and requires management
- Reframe the change in positive terms
- Start strong: build in spread plan from the beginning
- ▶ Use all six sources of influence to maximize spread
- Keep change aloft by monitoring it, visual management, dealing quickly with obstacles, and making it as easy & as possible for your staff and clinicians

## Spread Planner – Advanced Access and Efficiency for Primary Care

## Spread: Make a Plan

#### 1. Clarify what is being spread

As the team did with sustainability planning, prior to initiating spread it is important for the team to agree on what is being spread. Is the team attempting to spread a **specific change idea** such as max packing patient visits to do as much as possible with the patient at each visit? Or, is the team attempting to spread the **change concept** of reducing demand for visits through a number of change ideas (e.g., max packing but also reducing no shows, and extending revisit intervals)? The team could also be spreading a **new** or redesigned system of care such as advanced access.

| Checklist   | We are spreading                                   |   |
|---|--|---|
| ☐The team has documented what they are planning to spread.  | We are planning to spread:                         |   |
| ☐The components of the change to be spread have been described.   |  |   |
| ☐The advantages of the change have been identified.   | Adaptation ideas are:                              |   |
| □Ideas for potential adaptation have been documented.   |  |   |
| ☐The changes are packaged in a way that they can be easily understood and tested by adopters.   | Materials (tools, process maps, spread activities: | etc.) we will distribute to support the                   |
| □Copies of helpful tools and methods used<br>by the pilot sites, copies of process maps<br>that outline the process, and policies and<br>procedures are gathered and ready to be<br>distributed as part of the spread activities. | Name   | Status (i.e., to be developed by, ready for distribution) |
|   |  |   |
|   |  |   |
|   |  |   |

## Spread: Make a Plan

Checklist

The team has identified who the change is being spread to.

## 2. Determine how best to spread the change

The best way to spread a change is unique to your individual practice and culture. In some clinics, talking with colleagues face-to-face about your experience and story might be the best way to spread a change; in other clinics, it might make a difference who delivers the message. Build on your past experiences.

| ☐The team has identified o  |                             |                                   |                          |       |
|-----------------------------|-----------------------------|-----------------------------------|--------------------------|-------|
|                             | _                           | nost important to each audien     |                          |       |
|                             | messages" – those that are: | simple, unexpected, concrete,     | credible, emotional, sto | ries  |
| (Heath & Heath, 2007).      |                             |                                   |                          |       |
| ☐There is a plan to provide |                             | _                                 |                          |       |
|                             |                             | ble with the practice/clinic's co | urrent culture and value | 5.    |
| ☐There is a mechanism to a  | acknowledge and address co  | ncerns.                           |                          |       |
| Our plan to best spread t   | he change                   |                                   |                          |       |
| Who are we spreading        | The best way to reach       | The message that will be          | Who will take the        | Ву    |
| the change to?              | each group we are           | the most important to each        | lead?                    | when? |
|                             | spreading to is             | group is                          |                          |       |
|                             |                             |                                   |                          |       |
|                             |                             |                                   |                          |       |
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|                             |                             |                                   |                          |       |

## Spread: Make a Plan

#### 3. Identify and confirm resources

There are resources required to support a spread initiative. Leadership support, someor charged with leading the spread efforts, trained staff, and the required equipment wil improve the likelihood of successfully spreading the improvement within your practice/clinic. It is helpful to identify these resources early in the spread initiative.

| Checklist  | Our plan  |
|--|---|
| ☐Leaders support the spread initiative.  | Resource areas we need to strengthen are:                             |
| ☐Someone has been assigned responsibility for executing the spread plan.   |   |
| ☐There is a team to support the spread plan implementation.  |   |
| ☐There is sufficient equipment and resources to support spread of the  | We plan to strengthen the resources to support our spread efforts by: |
| improvement.   |   |
| ☐Required training opportunities, changes in job roles and responsibilities and policies and procedures have been created. |   |
| ☐There is a plan for leaders to provide  |   |
| ongoing support and encouragement for the  |   |
| spread efforts.  |   |

### Spread: Make a Plan

## 4. Monitor and communicate progress

Planning how you will monitor and communicate your spread progress will support ongoing learning and improvement within your practice/clinic.

| Checklist  | Our plan to monitor and communicate progress   |
|--|--|
| ☐There is a mechanism to encourage communication between the spread team, original pilot members and the adopters. | We will measure our spread efforts by:   |
| ☐ Indicators for monitoring what is spread and the rate of spread and adoption have been determined.               |  |
| Someone has been identified to collect, plot and share the data.   | We will communicate across the practice/clinic/organization about our progress of spread by: |
| ☐The spread progress will be regularly shared across the organization.   |  |
| ☐There is a way to capture and share new learning and knowledge from the spread efforts.                           | We will capture and share new learning and knowledge from the spread efforts by:             |
|  |  |



It is not the strongest of the species that survives, nor the most intelligent, but the one most responsive to change."

- Charles Darwin

#### Sources

- ▶ Joseph Grenny, Kerry Patterson, et al, <u>Influencers</u> (McGraw-Hill, 2013)
- http://www.safetynetmedicalhome.org/sites/default/files/Webinar-Spread-Sustainability-MH-Transformation.pdf
- Health Quality Ontario (http://www.hqontario.ca)
- www.coachmedicalhome.org

