

How to build unstoppable change



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#NHSchange

#noeinnovation

Five ways to create unstoppable change



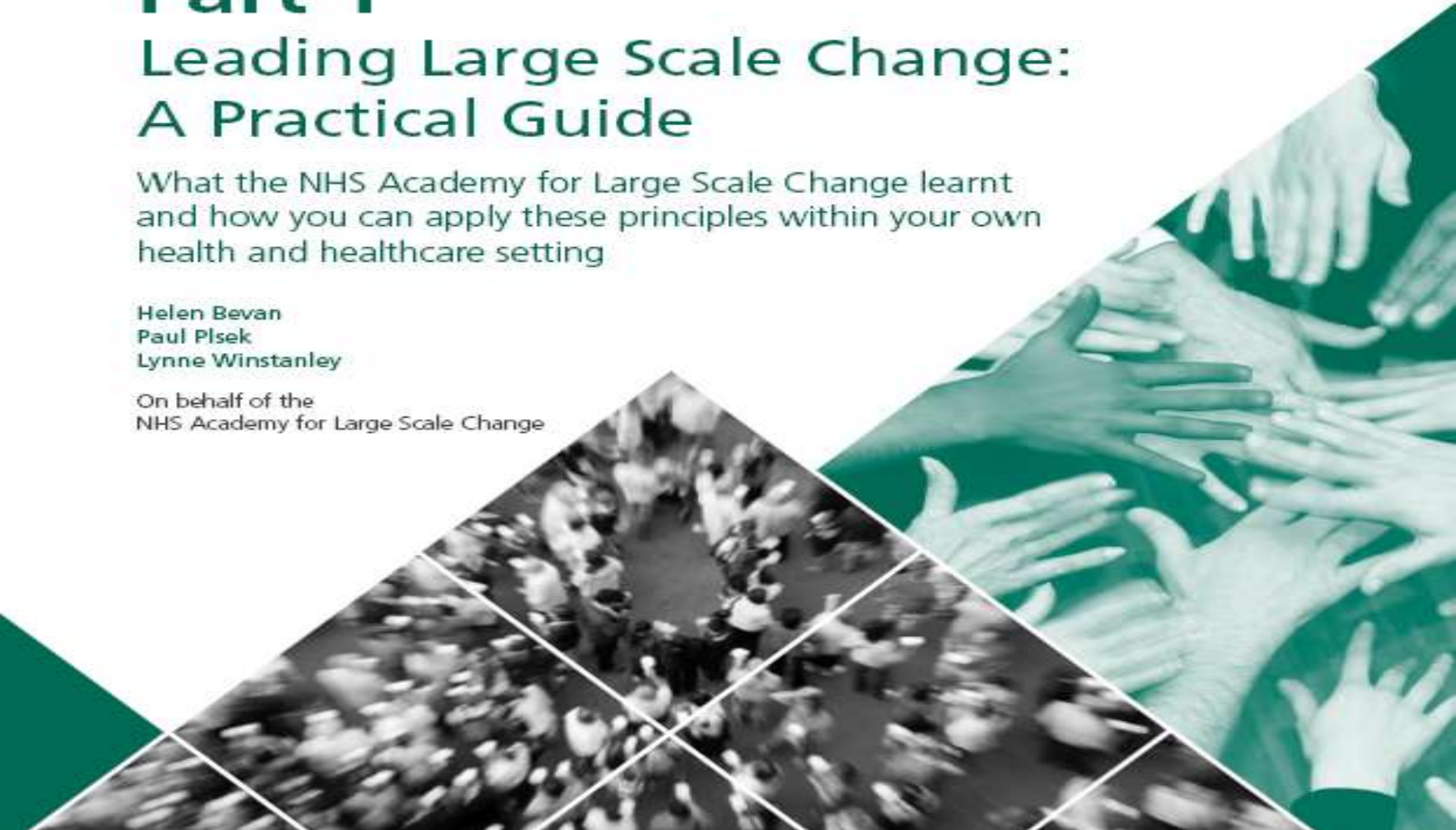
Part 1

Leading Large Scale Change: A Practical Guide

What the NHS Academy for Large Scale Change learnt
and how you can apply these principles within your own
health and healthcare setting

Helen Bevan
Paul Plsek
Lynne Winstanley

On behalf of the
NHS Academy for Large Scale Change



No. 1:
Pay as much attention to the
physiology of change as to the
anatomy of change

Anatomy of change

Physiology of change

Definition

Focus

**Leadership
activities**

	Anatomy of change	Physiology of change
Definition	The shape and processes of the system; detailed analysis; how the components fit together.	
Focus	Processes and structures to deliver health and healthcare	
Leadership activities	<ul style="list-style-type: none"> • measurement and evidence • improving clinical systems • reducing waste and variation in healthcare processes • redesigning pathways 	

	Anatomy of change	Physiology of change
Definition	The shape and processes of the system; detailed analysis; how the components fit together.	The vitality and life-giving forces that enable the system and its people to develop, grow and change.
Focus	Processes and structures to deliver health and healthcare	Energy/fuel for change
Leadership activities	<ul style="list-style-type: none"> ● measurement and evidence ● improving clinical systems ● reducing waste and variation in healthcare processes ● redesigning pathways 	<ul style="list-style-type: none"> ● creating a higher purpose and deeper meaning for the change process ● building commitment to change ● connecting with values ● creating hope and optimism about the future ● calling to action

Source:
Crump &
Bevan

**“You can’t impose anything
on anyone and expect them
to be committed to it”**

Edgar Schein, Professor Emeritus
MIT Sloan School

What is our approach to change?

From

Compliance

States a minimum performance standard that everyone must achieve

Uses hierarchy, systems and standard procedures for co-ordination and control

Threat of penalties/sanctions/ shame creates momentum for delivery

To

Commitment

States a collective goal that everyone can aspire to

Based on shared goals, values and sense of purpose for co-ordination and control

Commitment to a common purpose creates energy for delivery

**“Accept the fact that we have to
treat almost anyone as a
volunteer”
Peter Drucker**



No. 2:

Just focusing on “intrinsic” factors
isn’t enough

Just focussing on “extrinsic”
drivers isn’t enough

Intrinsic motivators

*build energy
and creativity*



Intrinsic motivators

- connecting to shared purpose
- engaging, mobilising and calling to action
- motivational leadership

*build energy
and creativity*



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Drivers of extrinsic motivation

*create focus &
momentum for
delivery*



Intrinsic motivators

- connecting to shared purpose
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*build energy
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Drivers of extrinsic motivation

- System drivers & incentives
 - Payment by results
 - Performance management
 - Measurement for accountability
- create focus & momentum for delivery***



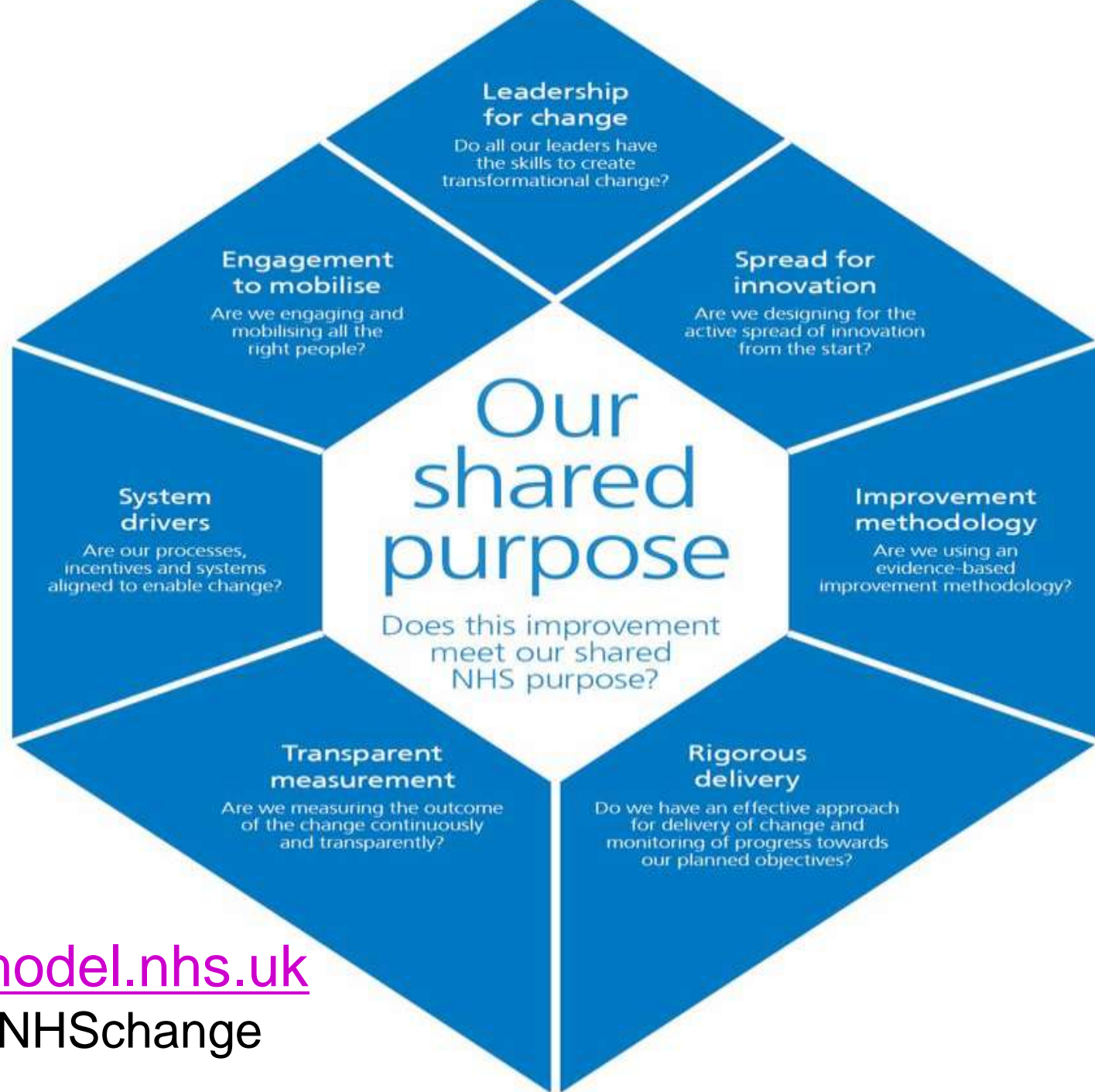
Drivers of extrinsic motivation

- System drivers & incentives
- Performance management
- Measurement for accountability

**create & focus
momentum for
delivery**



The NHS Change Model improves our ability to deliver change at scale



www.changemodel.nhs.uk

#NHSChange @NHSChange

No. 3:
Frame your change message to
appeal to hearts AND minds

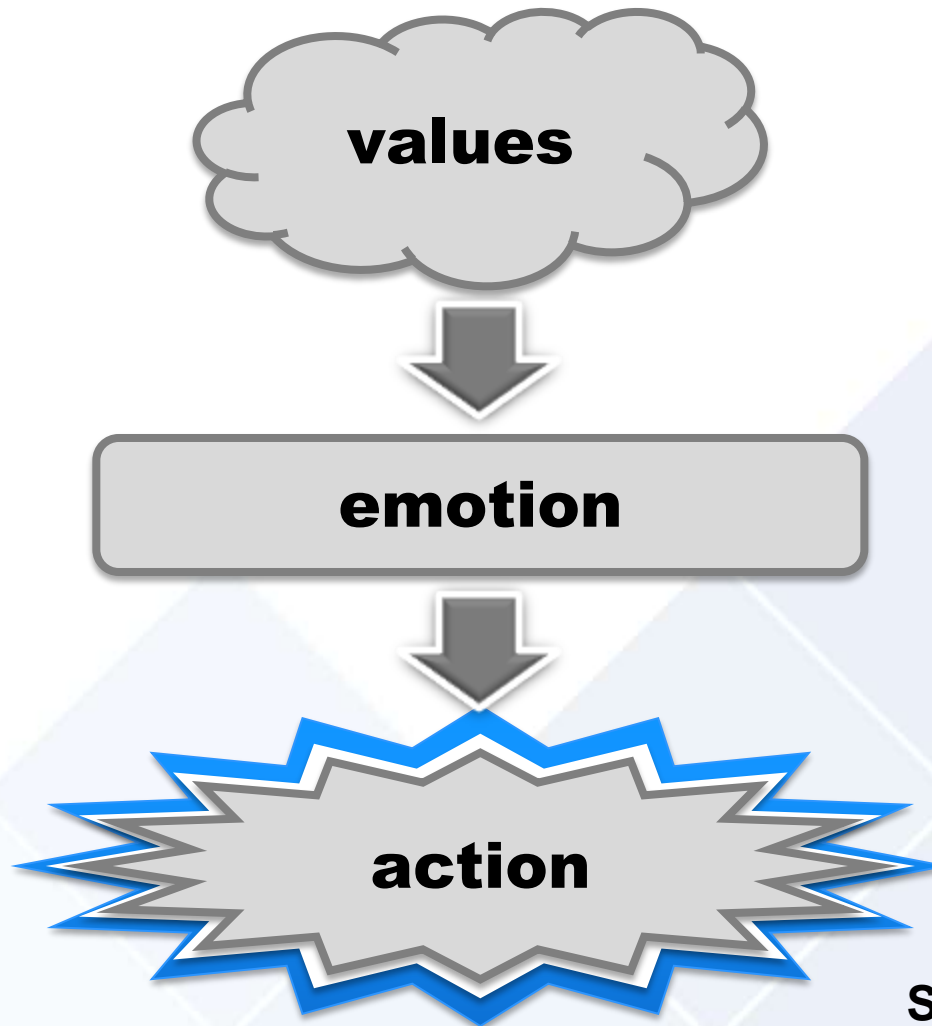
Framing

Is the process by which leaders construct, articulate and put across their message in a powerful and compelling way in order to win people to their cause and call them to action

Snow D A and Benford R D (1992)



If we want people to take action, we have to connect with their emotions through values



Source: Marshall Ganz

But not all emotions are equal.....

Action motivators

urgency

anger

hope

solidarity

you can make
a difference

Action inhibitors

inertia

apathy

fear

isolation

Self-doubt

Overcome



Three components of a great narrative (story)

- ***Diagnostic*** – what is the problem that we are addressing? What is the extent of the problem? What is the specific source or sources?
- ***Prognostic*** – what could the future look like? What is our “plan of attack” and our strategy for carrying out the plan?
- ***Motivational*** – why is this urgent? What is our call for action that connects with the motivational and emotional drivers of the audience?



No. 4:
Make deliberate efforts to build
energy for change

What happens to large scale change efforts in reality?

In order of frequency:

1. the effort effectively “runs out of energy” and simply fades away
2. the change hits a plateau at some level and no longer attracts new supporters
3. the change becomes reasonably well established; several levels across the system have changed to accommodate or support it in a sustainable way.

Source: Leading Large Scale Change: a practical guide (2011), NHS Institute



Four sources of energy

Source: adapted from Steve Radcliffe

Energy	Description
Intellectual	Energy of analysis, logic, thinking, rationality. Drives curiosity, planning and focus
Emotional	Energy of human connection and relationships. Essential for teamwork, partnership, alignment and collaboration
Spiritual	Energy of vitality, passion, the future and sense of possibility. Brings hope and optimism and helps people feel more ready and confident to build the future
Physical	Energy of action, making things happen and getting them done. Key part of vitality, maintaining concentration and commitment



Our “energy for change” project

- Currently creating a schema with York Health Economics Consortia
 - “five energies”
- WebEx presentation 2nd November 8.30-9.30am
www.changemodel.nhs.uk
- Literature and practice review to be published by beginning of December 2012
- Resource for assessing and building energy for change by March 2013



burning platform
versus
burning ambition
@PeterFuda



Lessons for transformational change

1. In order to sustain transformational change, we as leaders need to move from a burning platform (fear based urgency) to a burning ambition (shared purpose for a better future)
2. We as leaders need to articulate personal reasons for change as well as organisational reasons
3. If the fire (the compelling reason) goes out, all other factors are redundant

@PeterFuda



No. 5:

Put more effort in building and maintaining shared purpose than into any other component of the NHS Change Model

*An organisation can only realise its
highest potential when each
individual is fully valued and feels
fully vested in a shared purpose*

The Energy Project

<http://theenergyproject.com/>



Discretionary effort



is contractual

effort

is personal



An anatomical perspective

There's a sense in which final causes - purposes and goals - have this kind of attractive quality. They draw things toward them.... This is completely different from the model of things being pushed from behind in the mechanical universe.

Rupert Sheldrake, *Cause and Effect in Science*



A physiological perspective

*‘Hurihia to aroaro ki
te ra, tukuna to
atarangi kia taka ki
muri i a koe’*

“Turn your face to
the sun and the
shadows fall behind
you”



We may have
come on different
ships, but we're
in the same
boat now.



[Shared] purpose goes way deeper than vision and mission; it goes right into your gut and taps some part of your primal self. I believe that if you can bring people with similar primal-purposes together and get them all marching in the same direction, amazing things can be achieved.

Seth Garguilo

Avoiding “de facto” purpose

- What leaders pay attention to matters to staff, and consequently staff pay attention to that too
- Shared purpose can easily be displaced by a “de facto” purpose:
 - hitting a target
 - reducing costs
 - reducing length of stay
 - eliminating waste
 - completing activities within a timescale
 - complying with an inspection regime
- If purpose isn't explicit and *shared*, then it is very easy for something else to become a de facto purpose in the minds of the workforce

Source: *Delivering Public Services That Work: The Vanguard Method in the Public Sector*

Leaders as “signal generators”

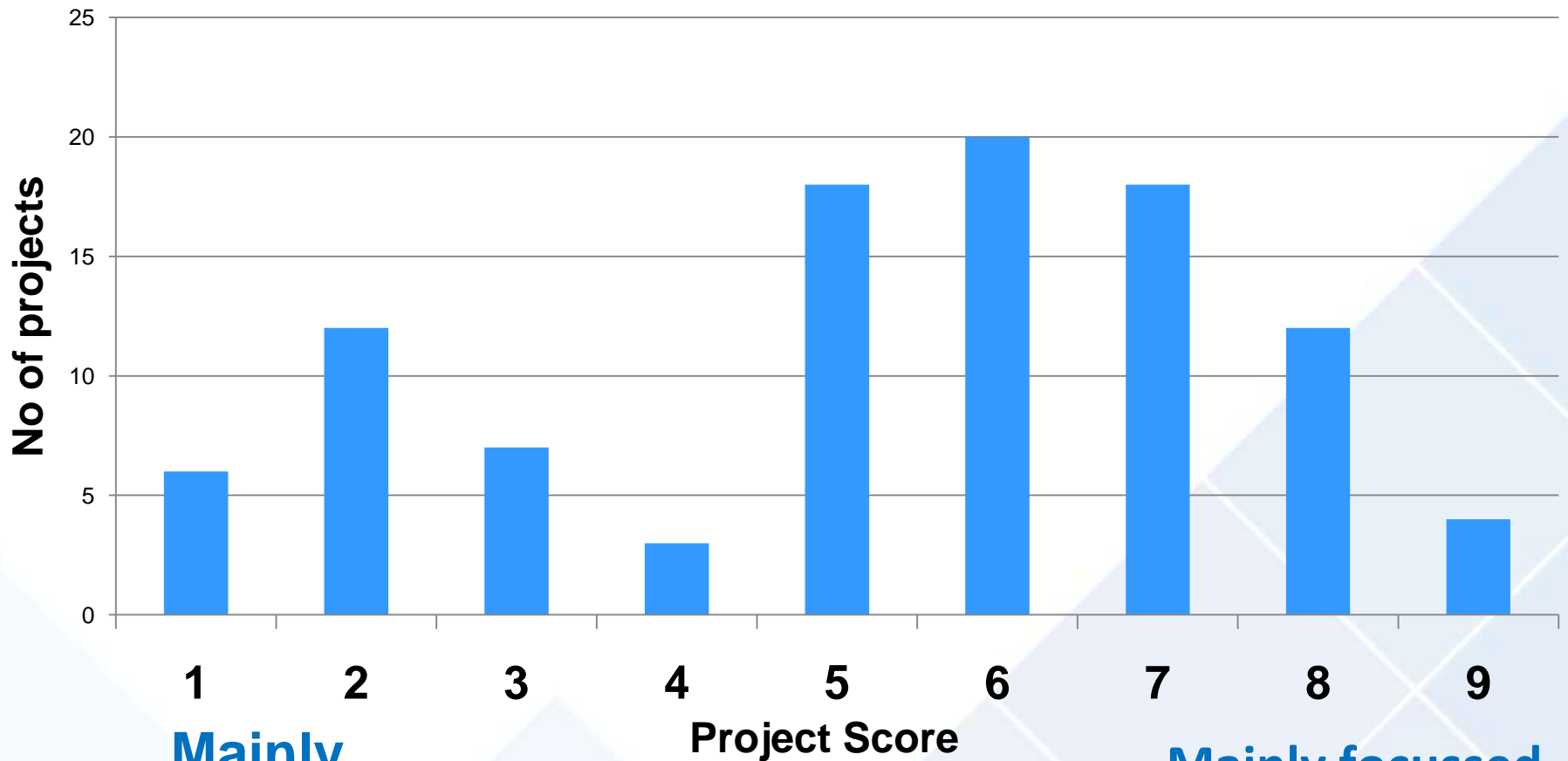
“As a leader, think of yourself as a “signal generator” whose words and actions are constantly being scrutinised and interpreted, especially by those below you [in the hierarchy]”

“Signal generators reduce uncertainty and ambiguity about what is important and how to act”

Charles O’Reilly, *Leaders in Difficult Times*, 2009



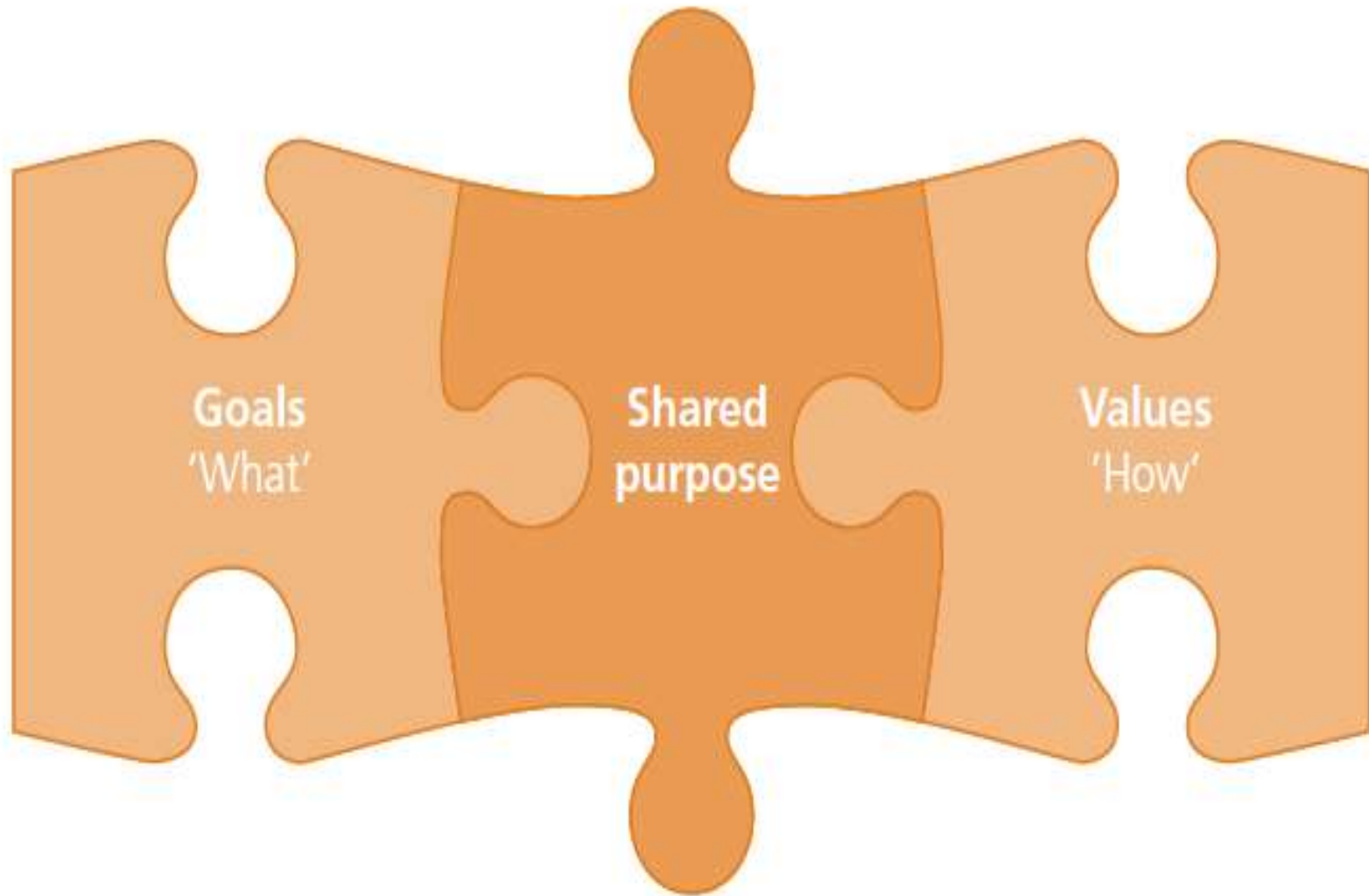
What focus for our improvement projects?



Mainly focussed on quality, safety and/or patient



Mainly focussed on cost, productivity or efficiency



Source: Chartered Institute of Personnel and Development:
Shared purpose and sustainable organisation performance

Building shared purpose

- 1. Create a clear narrative for the organisation or community** which defines purpose, values and goals
- 2. Unite staff/community members around the organisational or community story:**
organisational conversation: 'with' rather than 'to' people <http://bit.ly/LJO951>
- 3. Customise the organisational /community story:** encourage teams to tailor the narrative to fit their area and share these 'customised' versions around the organisation/community



Building shared purpose

4. **Be a role model for use of the NHS Change Model** in the way we build and champion shared purpose
5. **Keep refreshing the organisational/community story** so it remains relevant and energising, existing stakeholders stay engaged and new recruits are attracted to it
6. **Build internal systems that recognise values and behaviours** as much as 'harder' measures of performance and outcomes



Creating the foundations for unstoppable change

- What are your burning ambitions for change?
- Who do you want/need to engage and mobilise?
- What are the values of the people you want to engage?
- How might you define the shared purpose?
- How can you connect it with emotional and spiritual energy?
- How might you go about building shared purpose?



Stay involved with the NHS Change Model

- Next Twitter club today 4-5pm
just follow the hashtag [#NHSchange](#)
- Next webinar 2nd November 2012 8.30-9.30am

Website www.changemodel.nhs.uk

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@helenbevan



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Helen's favourite change management book of 2012

1. **Connections create value**
2. **Power in community**
3. **Collaboration > control**
4. **Celebrate onliness**
5. **Allow all talent**
6. **Consumers become co-creators**
7. **Mistakes can build trust**
8. **Learn. Unlearn. (Repeat)**
9. **Bank on openness**
10. **Social purpose unleashes ownership**
11. **(There are no answers)**



KEEP CALM^{AND}
CARRY ON?

NO THANKS.

I'D
RATHER

RAISE HELL

&

CHANGE^{THE}
WORLD

