Creating tangible outcomes in large scale change and transformation projects:

Setting the stage

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Based on collaborative work with Goran Henriks, Jönköping Region, Sweden

To "set the stage"

**Create the conditions:
to increase the likelihood
that something will
happen**

- Transformation challenges in a wider context
- Conditions for transformation as "simple rules"
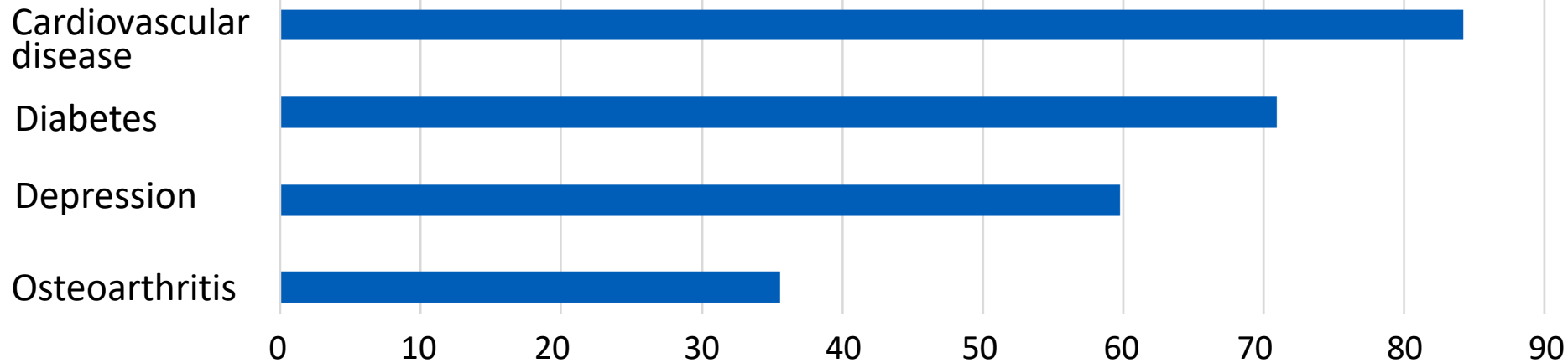- Outline the potential of some of the key rules

Neighbour conversation

What's your large-scale change and transformation agenda?

What's on your mind as you come to this session?

The challenge in numbers

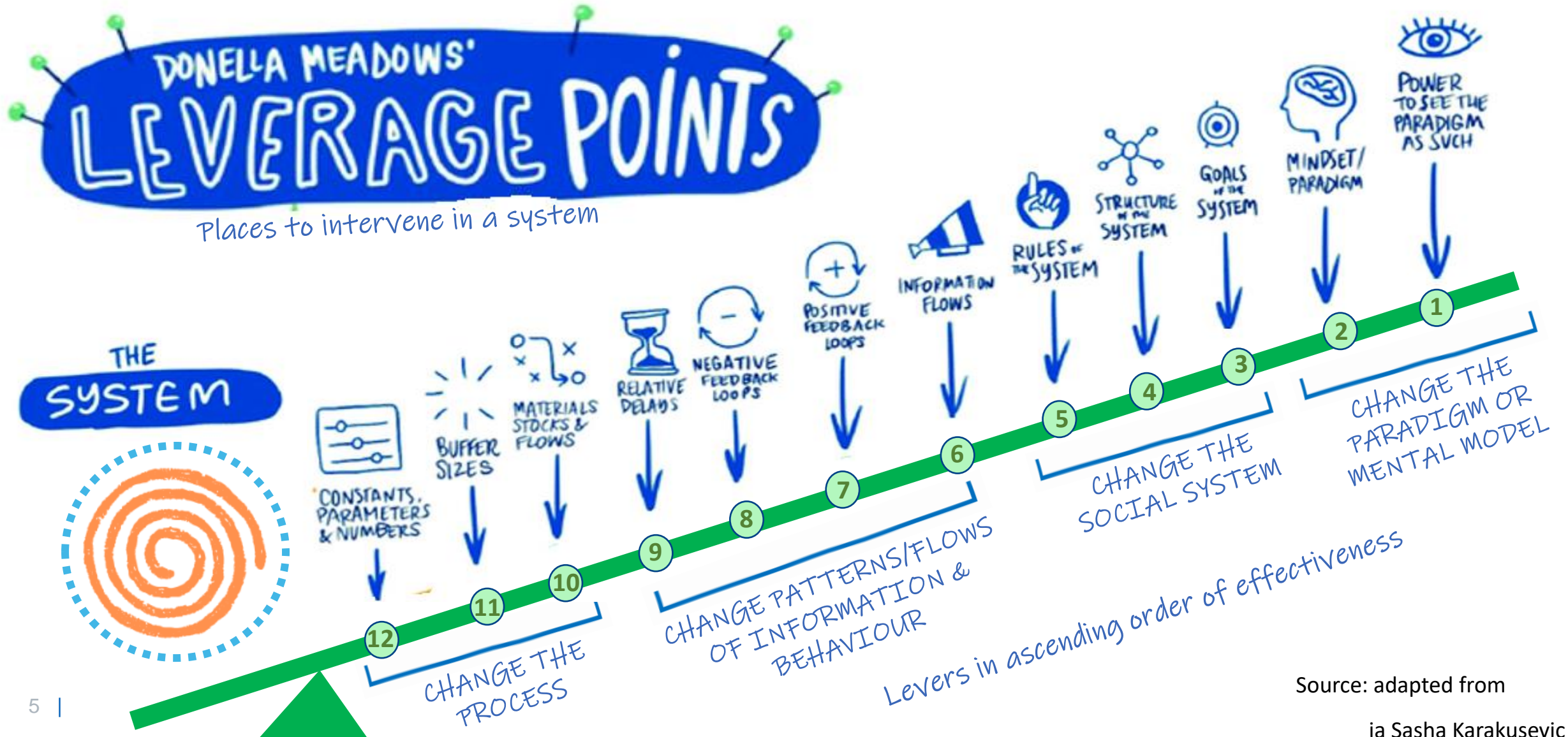% of quality indicators for healthcare received by participants

Cardiovascular disease

Diabetes

Depression

Osteoarthritis

0   10   20   30   40   50   60   70   80   90

Hardcastle, A.C. et al. *The dynamics of quality: a national panel study of evidence-based standards* 2015

*Healthcare represents a paradox. While change is everywhere, performance has flatlined: **60%** of care on average is in line with evidence- or consensus-based guidelines, **30%** is some form of waste or of low value, and **10%** is harm. The 60-30-10 challenge has persisted for three decades.*

Despite impressive gains, notable shortcomings persist in normalising consistent, high-value, person-centered care. What is primarily missing is not progress in measurement, but progress in results. Changes in culture, investment, leadership, and even the distribution of power are even more important than measurement alone"

Braithwaite and Glasziou May 2020

D'Avena A, Agrawal S, Kizer KW, et al.: Normalising High-Value Care: Findings of the National Quality Task Force. 2020

What if the issue is the paradigm?

Source: adapted from

ia Sasha Karakusevic

What if the issue is the paradigm?

Paradigm: A set of assumptions, concepts, values, and practices that constitutes a way of viewing reality for the community that shares them

What kind of system do we want for the future?

Every system is perfectly designed to get the results it gets
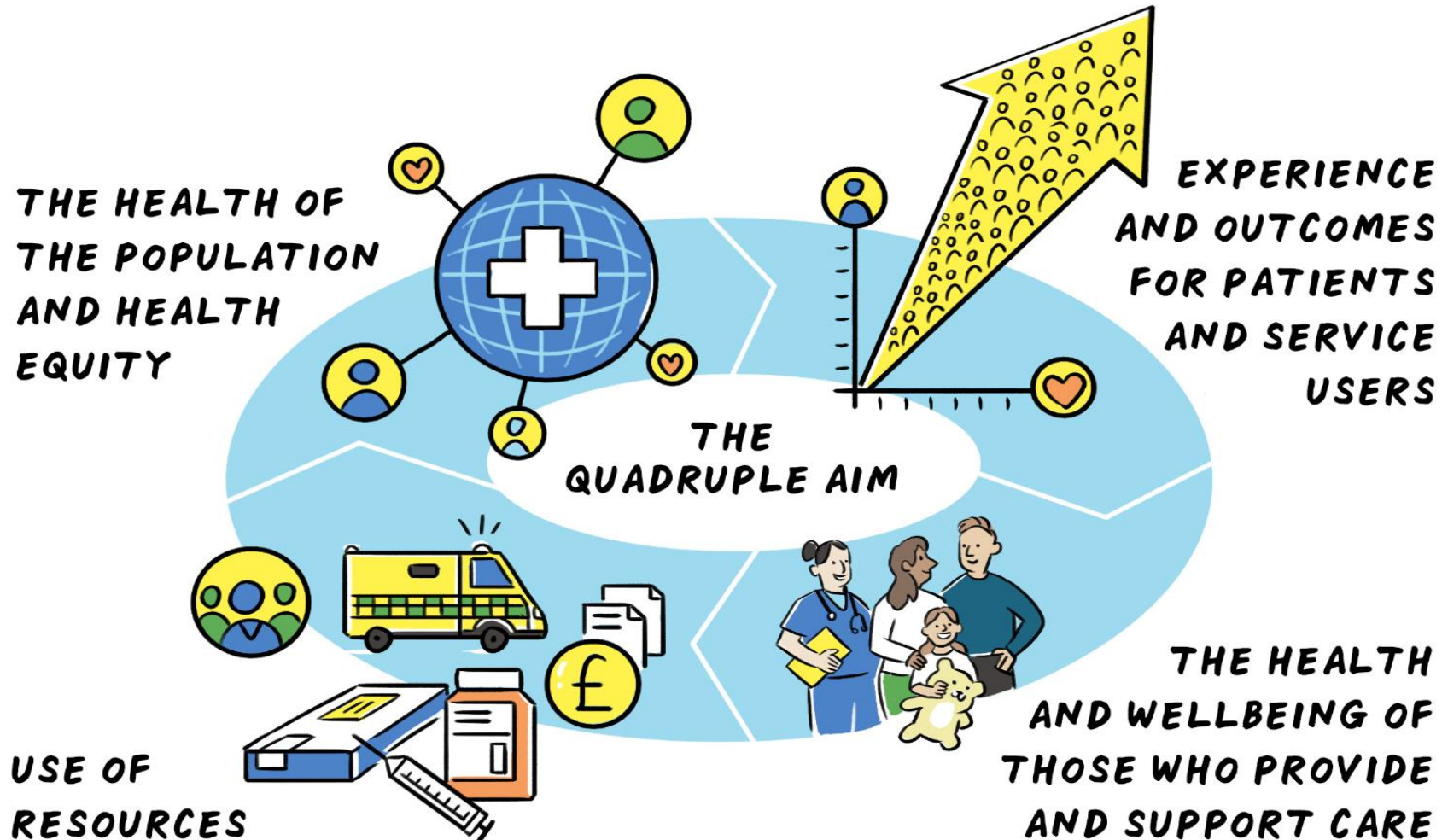
"For a good life in an attractive region"

Region
Jönköpings län

Our success is measured in lives and health

REGION JÖNKÖPINGS LÄN

Region Jönköpings län

The quadruple aim

THE HEALTH OF THE POPULATION AND HEALTH EQUITY

EXPERIENCE AND OUTCOMES FOR PATIENTS AND SERVICE USERS

THE QUADRUPLE AIM

USE OF RESOURCES

THE HEALTH AND WELLBEING OF THOSE WHO PROVIDE AND SUPPORT CARE

Source: Institute for Healthcare Improvement, USA

Focus upstream

Health in daily life

Support and rehab

Primary care

Specialised care

Region Jönköpings län

Draw a non-existent animal

Prediction

All these imaginary animals will consist of pieces of existing ones. For example, a beast may have claws, gills and wings at the same time. But these are parts of the existing creatures' bodies.

Why? We can't imagine beyond our current level of thinking and experience

"Consciously or unconsciously, leaders put in place structures & practices that make sense to them. These correspond to their way of dealing with the world & mean that an organisation cannot evolve beyond its leadership's stage of development."
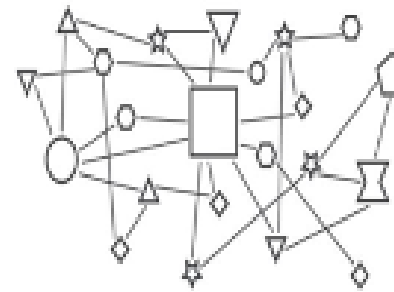
Paul Jocelyn

If we want to get a large group of people to behave differently, with everyone moving in a coherent direction, there are at least two approaches we can follow

1. Policies, approvals and top-down cascade
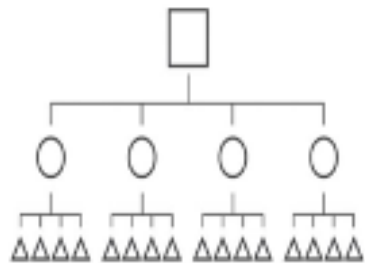
Create clear polices and operating systems & hold formal leaders to account

2. Alignment through simple rules

Identify a few simple rules that everyone is accountable for, operating in conditions of greater individual freedom

"A set of several simple rules leads to complex, intelligent behaviour. A set of complex rules often leads to a dumb and primitive behaviour." Michael Dubakov

Oldham's simple rules for managing COVID
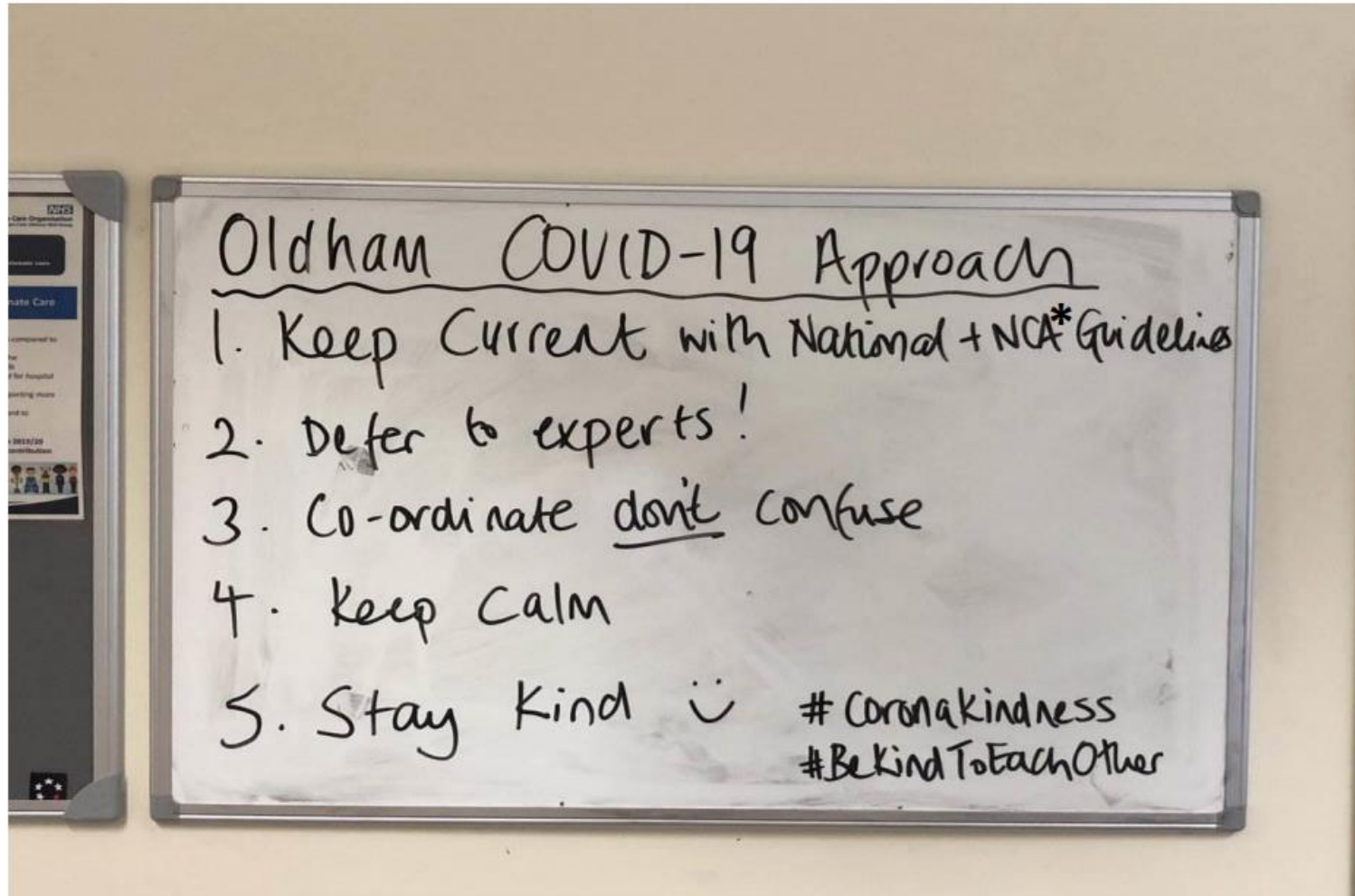
*Note: the NCA is the Northern Care Alliance, the local NHS system of which Oldham is part

https://blogs.bmj.com/bmjleader/2021/02/01/creating-tomorrow-today-seven-simple-rules-for-leaders-by-helen-bevan-and-goran-henriks/

Our + Shared + Purpose

Our

Who are the people who will be impacted by the change? Who will need to be part of the change?

+

Shared

What unites us?

+

Purpose

Why are we taking action? How does it connect with the things that really matter to us?

#EndPJparalysis
GET UP, GET DRESSED, GET MOVING

Source: @BrianwDolan

Old Framing	New Framing
Falls Prevention	Safer mobility
Reducing LOS	Giving patients back time
Days in hospital	Days away from home
Hospital in the home	There's no ward like home

Nursing Times
HOME | NEWS | CLINICAL | LEARNING UNITS AND PORTFOLIO | STUDENTS | OPINION

HOSPITAL

Campaign to 'end PJ paralysis' saved 710,000 hospital days

Our   Shared   Purpose

Who are the people who will be impacted by the change? Who will need to be part of the change?

+

What unites us?

+

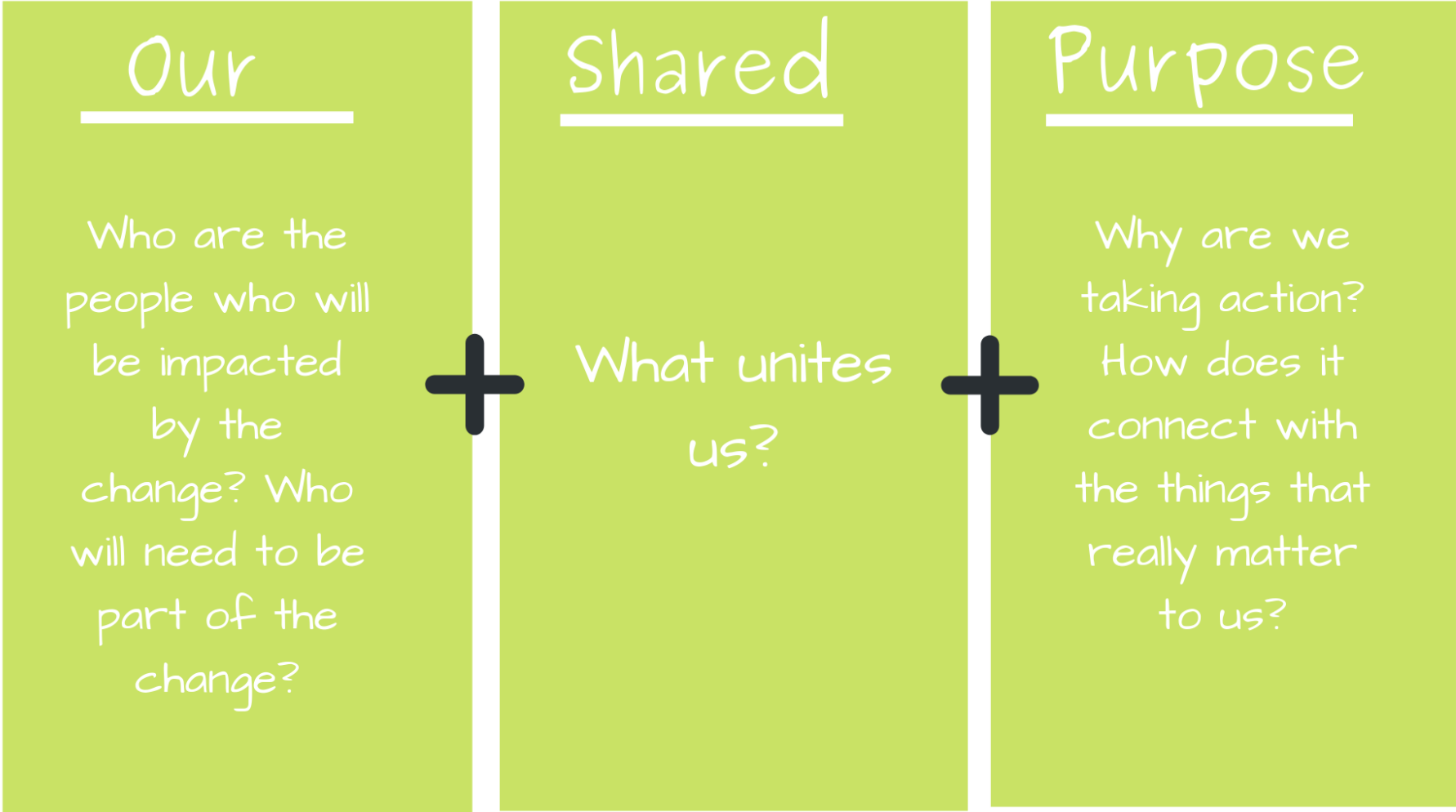Why are we taking action? How does it connect with the things that really matter to us?

endpjparalysis.org/

#END PJ PARALYSIS

OUR Patients
Nurses Families
Physios Senior leaders
Doctors Care assistants
Students

SHARED Anger & outrage
at older patients deteriorating
when we can do something about
it

PURPOSE To make sure
that every person in a
hospital bed gets mobilised when they
are ready (clinically & personally) & that
every person gets choice & a chance
for the future life they want

Belonging

Someone belongs at work when they are:

- seen for their unique contributions

- feel connected to their co-workers

- supported in their daily work

- supported in their career development

- proud of their organisation's values and purpose.

A quantifiable definition based on research from
The Center for Talent Innovation

Building a sense of belonging is one of the most critical tasks in leading change.

Our most recent research into the successful leadership of large-scale complex change, pinpointed a vital ingredient omnipresent in all human systems: **our fundamental need to belong** *– to feel secure, included and part of something significant. If you feel you belong, loyalty follows, and with that the permission for risk-taking and innovation.*

Deborah Rowland and Paul Pivcevic
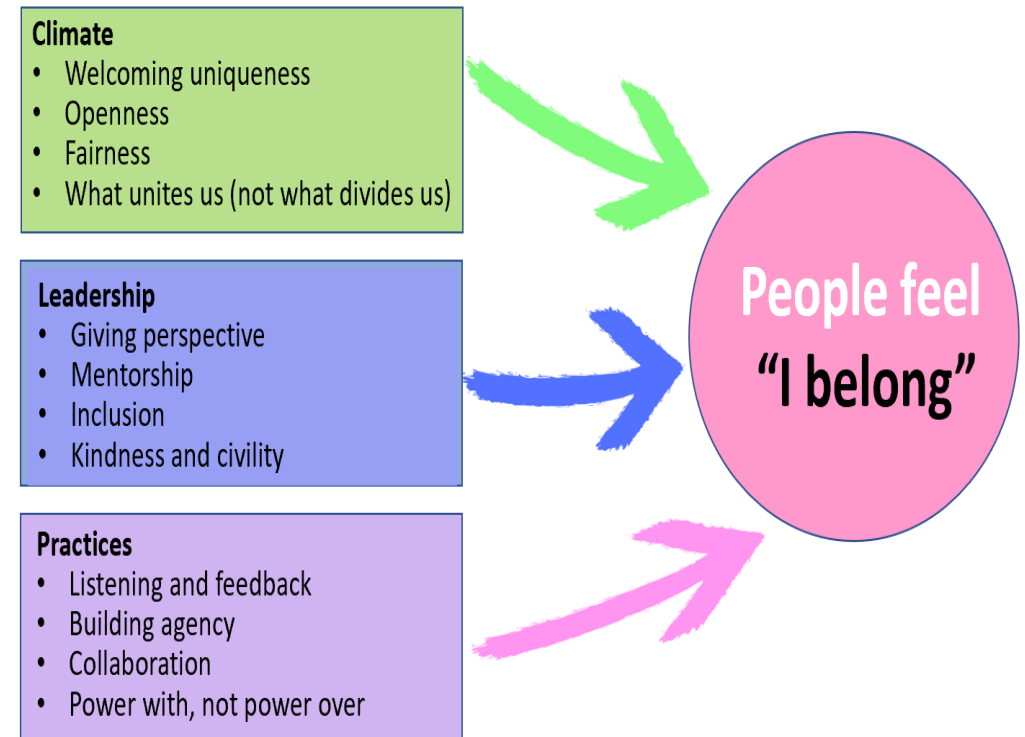*Leading change post pandemic: belonging*
https://blogs.lse.ac.uk/businessreview/2022/04/08/leading-change-post-pandemic/

Belonging: everyone is seen and valued for our own unique and authentic selves

	Low belongingness	High belongingness
Uniqueness is valued	**DIFFERENTIATION** I am different I am uncomfortable	**INCLUSION** I belong I can be myself
Sameness is valued	**EXCLUSION** I do not belong I am not welcome	**ASSIMILATION** I can fit in I have to be guarded

Sources: Inclusion and Diversity in Work Groups: A Review and Model for Future Research (2010) Lynn Shore and colleagues and Why belonging is such a big issue in business today (2020) Josh Bersin

Belonging: questions to reflect on

- To what extent are we really getting to know the people in our teams and understanding the unique gifts that each person brings?

- Are we making the space in a virtual world (where the lack of direct contact makes feelings, emotions and reactions harder to gauge) to build belonging?

- Are we asking people if they *feel* they are included, *feel* they have power (agency) over the work or role they are allocated, *feel* they are in the know, and *feel* that their ideas are valued?
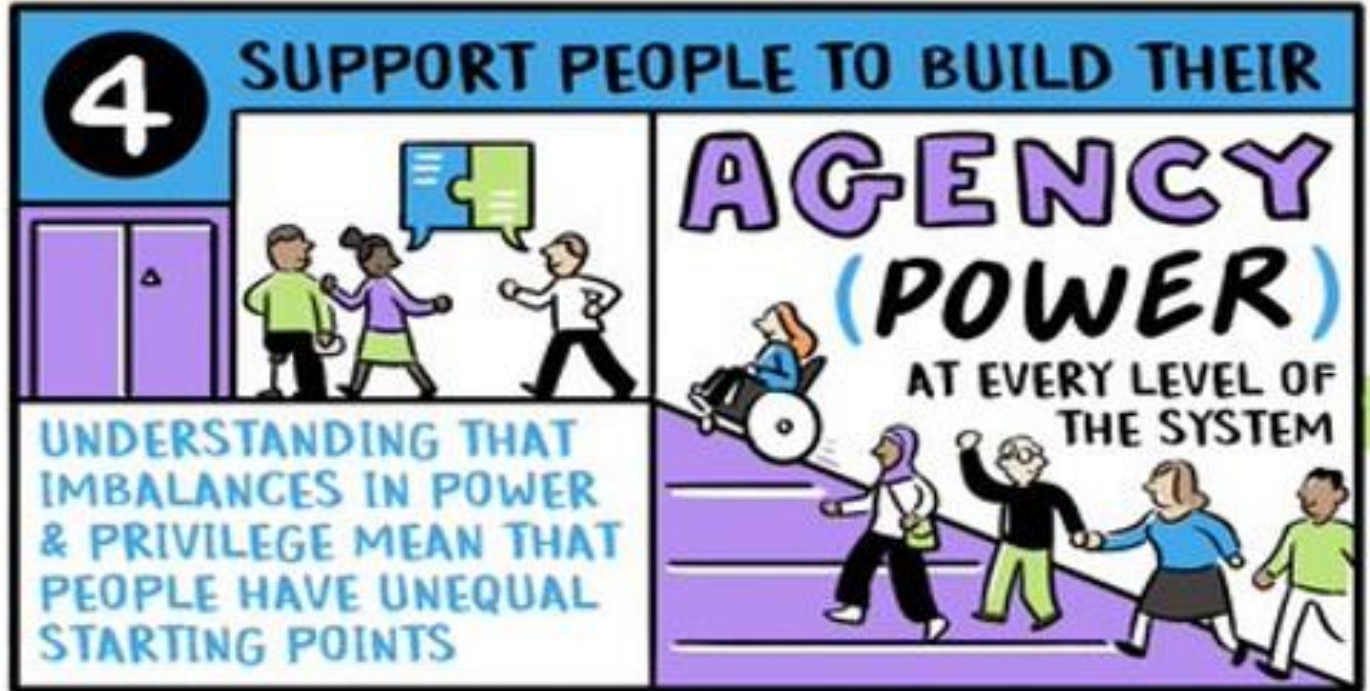
Climate
- Welcoming uniqueness
- Openness
- Fairness
- What unites us (not what divides us)

Leadership
- Giving perspective
- Mentorship
- Inclusion
- Kindness and civility

Practices
- Listening and feedback
- Building agency
- Collaboration
- Power with, not power over

People feel "I belong"

https://joshbersin.com/2020/08/why-belonging-is-a-big-issue-in-business-today/

Change efforts are far more likely to succeed because people perceive they have agency for change.

Agency: *the sense of power, permission and safety to make change happen*

More important than improvement skills or resources or methodologies.

The hierarchy of capabilities: the further up the pyramid people go, the more we maximise the contribution everyone can make

Daring

Creativity

Initiative

Expertise

Diligence

Obedience

Qualities that leaders cannot command: people have to "want to"

Qualities that leaders can expect and command

Source of model: Gary Hamel, Michele Zanini (2020)

Humanocracy: creating organisations as amazing as the people inside them

We are never too young to build our agency

I dag händer det här:

Färdigt!

Embracing contradictions and tensions: "Opposable thinking"

Embracing contradictions and tensions

- Leading, holding and working with contradictions, polarities and tensions is a key role for leaders of transformation

- "*Creating tomorrow today*" is a contradiction and tension

- The act of creating tomorrow today is full of contractions and tensions:

  - Patient/citizen/community led versus clinically led
  - Personalised care versus standardised care
  - Care closer to home versus specialist services

- Most of them cannot be "solved" as there is no one right answer

- We need to name, reframe and hold the contradictions and tensions

- Contradictions, polarities and tensions drive the movement towards creating a different tomorrow

Six paradoxes, tensions or polarities that could undermine system working and delivery of our shared purpose

Local democratic accountability **AND** National democratic accountability

Our shared purpose as a system **AND** Meeting national imperatives

Single accountable leader **AND** Collective leadership

Place **AND** System

Management grip **AND** System health

High volume pathways **AND** Co-morbidities and health equity

A tension to address at the heart of integrated care

Inward mindset

Silos
Focus own outcomes
Justified blindness
Politics
Keep control
Use of official power
Blame
Circular meetings
Reliance on rules,
processes, structures
Lots of inertia

Inward Mindset Organisation

Outward mindset

Outward Mindset Organisation

Systems thinking
Care about their impact
Psychological safety
Trust
Give up control
Transparent conversations
Art of possible
Innovation
Collaboration
Accountability
Resilient/Motivated

Source: The Arbinger Institute

Working with contradictions and tensions

Reframe seemingly different views as contradictions and tensions to understand the interdependence between the views/values we hold: "*We need BOTH personalised care AND standardised care: how can we design a solution that maximises both of these for better outcomes?*"
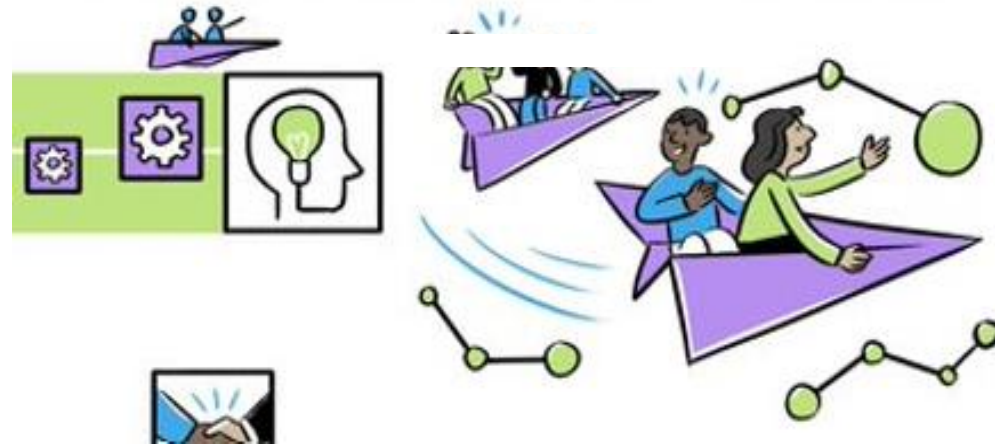
Polarities are the deepest form of collaboration

Source: CoCreative (2023) polarity resources

Source: @NHSChangeDay

What is psychological safety?

"A shared belief held by members of a team that the team is safe for interpersonal risk-taking".

"It describes a team climate characterised by interpersonal trust and mutual respect in which people are comfortable being themselves."

Amy Edmondson

The Fearless Organisation

The psychological safety scan

Willingness to help

The degree to which people are willing to help each other.

Inclusivity & diversity

The degree to which yo_ can be yourself, and are welcomed for this.
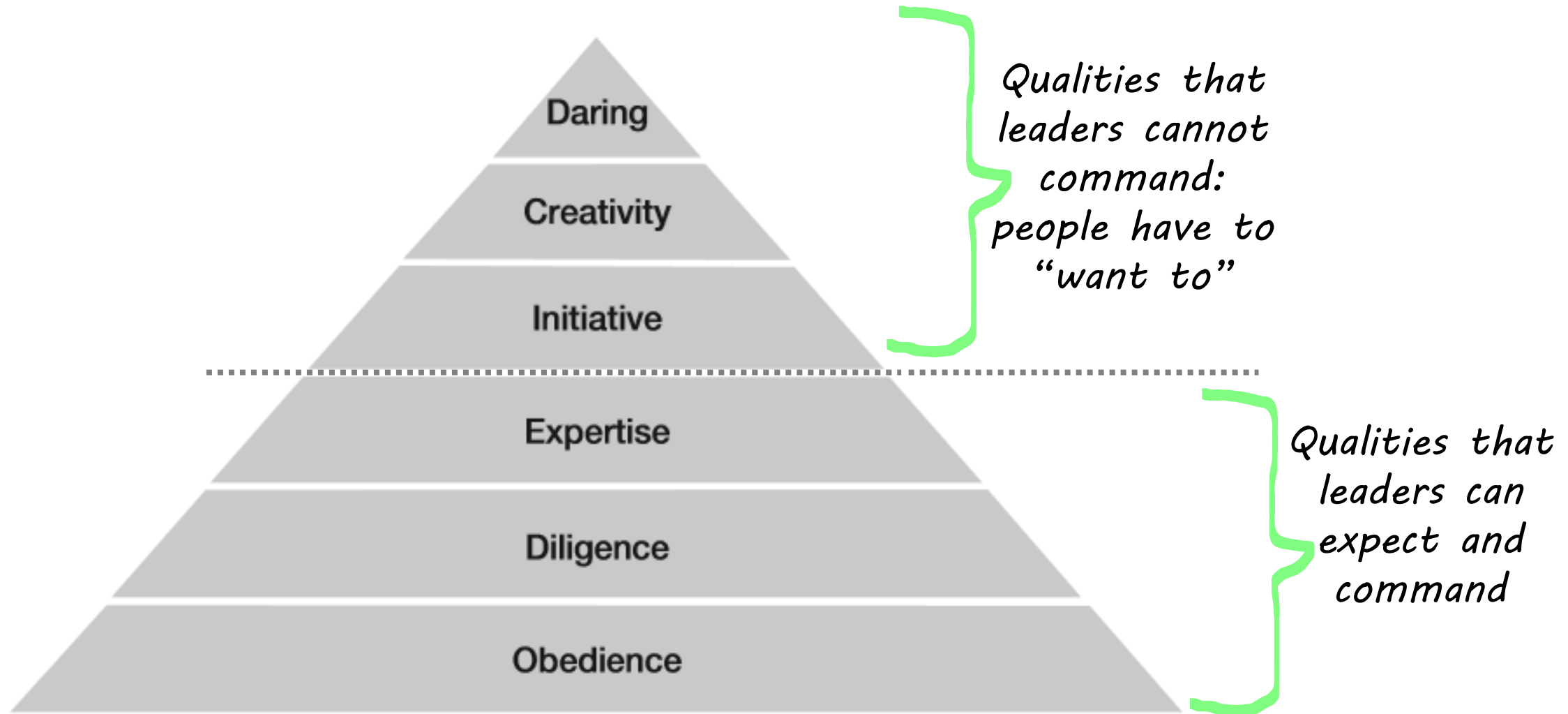
Attitude to risk & failure

The degree to which it is permissible to make mistakes.

Open conversation

The degree to which difficult and sensitive topics can be discussed openly.

The hierarchy of capabilities: the further up the pyramid people go, the more we maximise the contribution everyone can make

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Qualities that leaders cannot command: people have to "want to"

Expertise

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Qualities that leaders can expect and command

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Humanocracy: creating organisations as amazing as the people inside them

Embracing failure: "The right kind of wrong"

The World's Leading Expert on Psychological Safety

Basic failure: caused by carelessness or ignorance.

Complex failure: caused by multiple factors, none of which would have caused the failure on its own. Often the result of a complex system that is difficult to understand or manage.

Minimize the chances of both occurring by paying close attention and catching mistakes before they spiral out of control, e.g. checklists, teamwork, applying principles of psychological safety

Intelligent failure: arises from thoughtful actions or experiments and result in useful learning, allowing us to move forward

Failure: "an outcome that deviates from desired results"

Summary of the book from Harvard Business School Working Knowledge

Criteria for "intelligent failure"

TAKES PLACE IN A NEW TERRITORY

Curiosity in an uncertain territory with no readymade answers

OPPORTUNITY DRIVEN

Intelligent failure is a part of meaningful opportunity towards a valued goal

INTELLIGENT FAILURE

one that leads to unexpected discovery, doesn't cause harm and generate useful new learning

Occurs when answers are not knowable in advance

Intelligent failures are not errors

INFORMED BY PRIOR KNOWLEDGE

Hypothesis driven.

Based on sound homework and informed mental model to notice anomaly
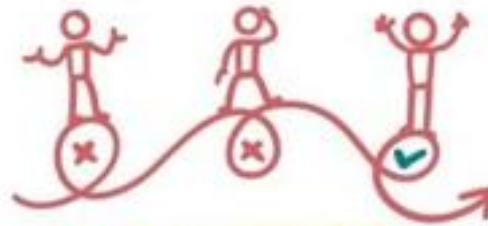
AS SMALL AS POSSIBLE

Design smart pilots to test new ideas before full scale launch

YOU LEARNED FROM IT

Failure's lessons learned and used to guide next steps

# Could we develop a "Trojan mice" strategy?

Having many people across the system who have the skills and agency to test out small, well focussed changes to address complex problems (Trojan mice) nearly always works better than large pilot and roll out projects (Trojan horses).

"Trojan mice… are small, well focused changes, which are introduced on an ongoing basis in an inconspicuous way. They are small enough to be understood and owned by all concerned but their effects can be far-reaching. Collectively a few Trojan mice will change more than one Trojan horse ever could."
(Jarche, 2012).

Trojan mice fail often, fail early and learn greatly
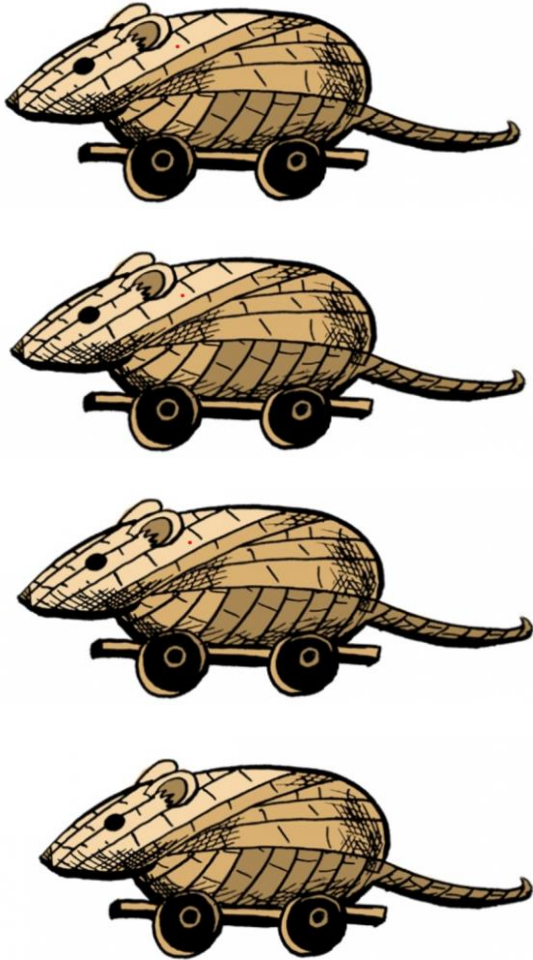
(Illustration by Elizabeth Beier)

Cost of an error

Experiment, fail and learn here

Too late

Launch

Project timeline
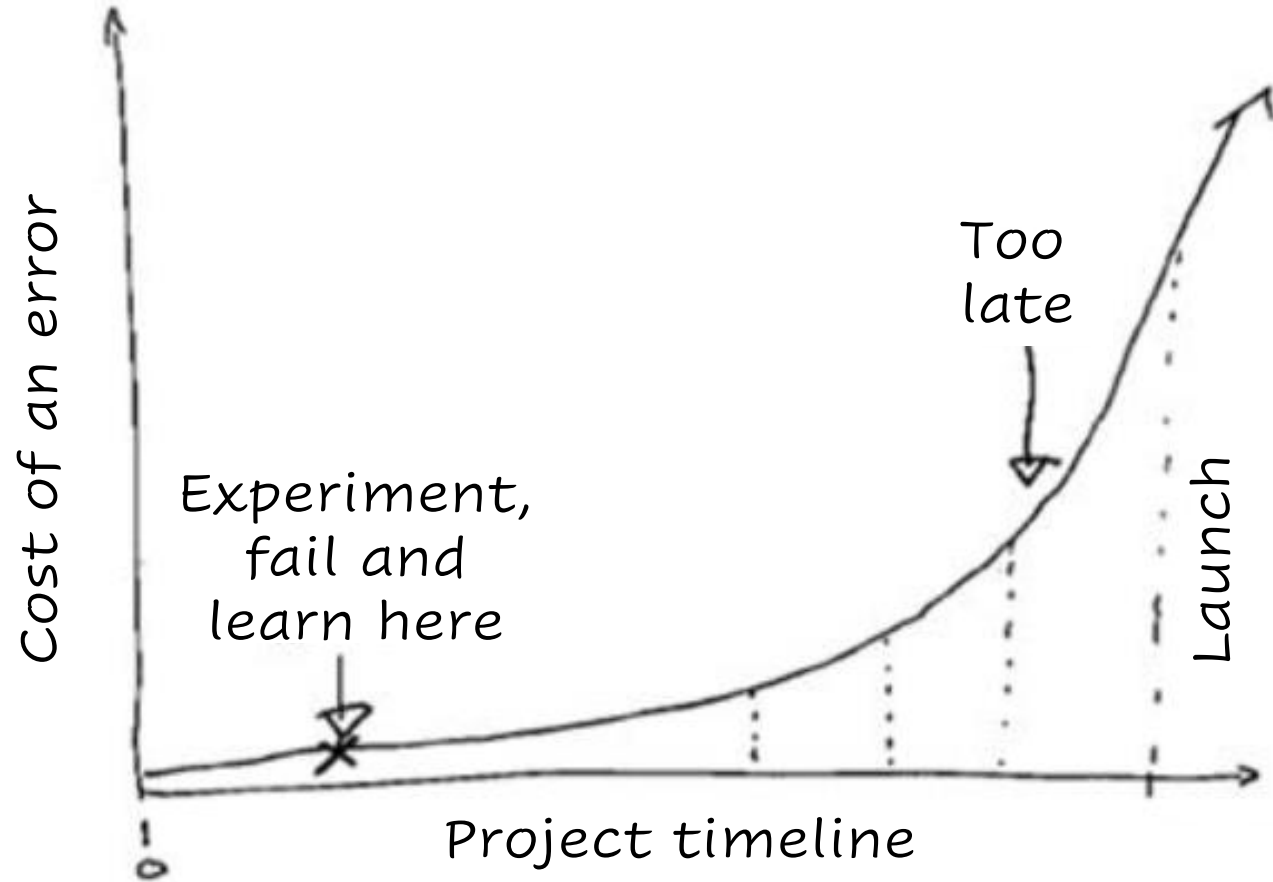
https://ssir.org/articles/entry/wheeling_in_the_trojan_mice#

Roles for leaders in building a learning culture through Trojan mice

1. Role model a high tolerance for failure through practical experiments ("intelligent failure")

2. Demonstrate that experimentation and learning is a core part of everyone's role: "*In healthcare everyone has two jobs: to do your work and to improve it.*" (Batalden and Davidoff);

3. Make sure that the work of Trojan mice teams is followed up organisationally, so that the teams can see a patient-centred benefit to the work they are undertaking;

4. Manage the tension/contradiction between experimentation and productivity (Taylor, 2017). The values of innovation (openness, diversity, experimentation, play) are typically different to the values of productivity (excellence, precision, standardisation, delivery). Trojan mice need to be supported to exist in both worlds simultaneously.

https://blogs.bmj.com/bmjleader/2021/02/01/creating-tomorrow-today-seven-simple-rules-for-leaders-by-helen-bevan-and-goran-henriks/