



Divisions of General Practice

Information Management Maturity Framework (IMMF)

Toolkit – Guidelines for change management training, including the use of PDSA cycles

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Information Management Maturity Framework (IMMF)

Toolkit – Guidelines for change management training, including use of PDSA cycles

Purpose

The purpose of the “Guidelines for change management training, including use of PDSA cycles” is to assist Divisions address the action task below.

Action Tasks	Capacity Gap	Element of IM
Implement staff training for change management and use of PDSA cycles.	Unaware to Reactive	Context

This task should have been identified from the IMMF gap analysis and toolkit specification.

This tool provides advice to CEOs who wish to begin a process to train staff in change management skills and processes, practical lessons learned are documented for discussion.

Knowledge of the checklist for change management training, including use of PDSA (Plan Do Study Act) cycles, is a fundamental pre-requisite for achieving IM maturity levels above reactive in all six elements of IM.

Explanatory notes

Change management (like project management) is a topic surrounded by an enormous amount of literature with different advice for every different situation. This tool has attempted to identify two approaches to change management that are applicable to every situation and are scalable so as to be useful in both smaller and larger organisations.

Transformational change

Transformational change is about doing something different, changing the workplace to achieve new outcomes or objectives. Guidelines for transformational change provide the CEO with advice for coaching and mentoring staff at all levels through the process of doing things differently. This implies challenging individuals’ basic values and beliefs to ensure that the Divisions are more accountable and collaborative as part of a unified national network.

Some examples of where Divisions may apply the guidelines for transformational change in this tool are:

- Establishing or managing changes to individual or group roles and responsibilities.
- Conforming to national standards or systems e.g. accreditation.
- Implementing local NPCC collaboratives and/or clinical programs.
- Providing support to general practice and primary care providers for the collection and utilisation of clinical data within practices.

Change for incremental or continuous improvement

Change for incremental or continuous improvement is about doing things better, changing the workplace to improve on existing outcomes or objectives. PDSA cycles have been a successful tool for incremental/continuous change for over five decades. In the context of the IMMF they are an invaluable tool for empowering all staff to participate in change for continuous improvement. They form a direct link with other tools such as IM issues and improvement registers, to support the integrity and consistency of the framework.



Some examples of where Divisions may apply the PDSA guidelines in this tool are:

- Improving Divisional IM maturity against each of the six elements of IM.
- Establishing or managing changes to improve productivity of individual or group work practices.
- Purchasing and implementing new technology e.g. a CRM system.

Instructional design

This tool consists of two parts

Part 1 - Guidelines for coaching and mentoring transformational change management.

Part 2 - PDSA (Plan Do Study Act) cycles for continuous improvement.

Part 1 - Guidelines for coaching and mentoring transformational change

CEOs should review the list of ten guidelines for change management for the professional development of staff throughout the Division. Starting with the executive team, all staff are introduced to the guidelines for transformational change and apply them to the practical change management challenges facing the Division.

Qualified SBO staff may be available to assist the review and to provide advice on the skills and processes that other Divisions have used for change management activities. CEOs should discuss their requirements with executive staff at other Divisions that have demonstrated a “defined” or “managed” capacity for IM Context.

After the review CEOs should be able to identify gaps in staff change management skills and knowledge; or in processes or procedures; than need to be addressed through training.

Part 2 - PDSA (Plan Do Study Act) cycles for continuous improvement

CEOs and their senior program staff should review the briefing on PDSA cycles. Approved SBO staff are available to assist the review and to provide advice on how to start a PDSA register and begin with some simple small improvement projects. There is also a wide range of PDSA material including clinical examples available through the National Practice Care Collaboratives.

CEOs should discuss the successful use of PDSA cycles with senior staff at other Divisions that have identified activities or processes for continuous improvement and shown how the PDSA approach works.

After the review CEOs should identify local objectives for improvement using a PDSA approach and establish a PDSA project register.

Summary of outcomes and resources

Workstreams	Outcomes	Resources
Skills or knowledge acquisition requirements for staff	<p>Senior program staff are aware of the guiding principles for transformational change and can apply them to practical situations within the Division.</p> <p>Selected staff can identify local objectives for improvement using PDSA cycles.</p> <p>Selected staff can plan and control a PDSA cycle within the Division.</p>	<p>Mentoring by CEOs of Divisions that have demonstrated a capacity for change management.</p> <p>Group workshops will be held to provide individual training for the new skills and knowledge required for using PDSA cycles.</p>
New processes or procedures to be adopted	<p>The Division has a PDSA register of projects for continuous improvement.</p> <p>Processes and procedures to classify and manage change as transformational or incremental.</p>	<p>SBO staff may also be available for facilitation and support for new processes or procedures.</p>
Culture and change management requirements	<p>There is active support for change initiatives from most staff.</p> <p>A structure exists to recognise individuals and teams whose initiatives improve IM outcomes.</p>	<p>Mentoring by CEOs of Divisions that have demonstrated a capacity for change management.</p>



Part 1 – Guidelines for coaching and mentoring transformational change¹

Within a particular Division the organisational capacity for change will be assisted by a clear understanding and analysis of the type of change required. There are two aspects to leading and managing change:

- understanding the change and designing an appropriate change strategy; and
- managing the transition process to a sustainable outcome.

The key to successful change within a Division of General Practice is engagement, consultation and education.

Change is mainly focused on implementation within an existing environment (i.e. existing staff at the Division). Consideration must also be given to the introduction of new staff in the Division. New staff bring with them differing backgrounds and skills that can add value to the Division. A key part of realising their value is ensuring they understand the environment they are now working in. It is a change of work practice and mind set for the new employee that should be included as part of the induction process.

Success at transformational change requires more than just plans and project management. It requires an intimate understanding of the human side, the Division's culture, values, people, and behaviours that must be changed to deliver the desired results.

Plans themselves do not capture value. Value is realised only through the sustained, collective actions of employees and members who are responsible for designing, executing, and living the change.

Long-term and significant change is characterised by duration and commitment:

- it affects all or most of the organisation;
- it involves significant alterations from the status quo;
- it lasts for months if not years; and
- it has strategic importance and the risk of failure (i.e. the organisation may become irrelevant).

Divisions will reap the rewards only when change occurs at the level of individual employee behaviour. Leadership teams that fail to plan for the human side of change often find themselves wondering why their best-laid plans go awry.

The CEO should mentor and coach individuals through periods of continuous change with frequent adjustments to priorities and stakeholders' demands. There are numerous theories and tools available that purport to explain this environment and provide advice on what to do. The content of this tool reflects one such approach, described in the theory as transformational change.

What follows is a list of ten guiding principles for transformational change that have been peer reviewed in the international business community.

1. Address the human side of change systematically

Any transformation of significance will create people issues. A formal approach for managing change, beginning with the leadership team and then engaging key stakeholders and leaders, should be developed early but adapted often as change moves through the organisation.

2. Speak to the individual as well as to the institution

Involve people in the change process. Change is a personal journey as well as an institutional one. It truly does happen one person and one team at a time. Individuals (or teams of individuals) need to know how their work will change, what is expected of them during and after the change program, how they will be measured, and what success or failure will mean for them. Be honest and as explicit as possible. Provide highly visible rewards (promotion, recognition, bonuses) as dramatic reinforcement for embracing change.

3. Change starts at the top and begins on day one

Change is inherently unsettling for people at all levels of an organisation. The leadership must change first to challenge and motivate the rest of the Division, speaking with one voice and modelling desired behaviour.

¹ Original material "Top 10 Principles of Change Management" attributed from Booze, Allen and Hamilton Consulting LLC.



At the same time, individual executive team members are going through their own personal changes and need to be supported so that they can be in agreement with their executive team members.

4. Real change happens at the bottom

Change efforts must include plans for identifying leaders and pushing responsibility for design and implementation down through the organisation.

Each staff team in the Division needs trained leaders who are aligned to the new vision and motivated to make change happen. These change leaders must be allocated time away from their current assignments and dedicated to the work of change as if they were assigned to a project team.

5. Confront reality, demonstrate faith, and craft a vision

- Confront reality.
- Articulate a compelling need for change.
- Demonstrate faith that the Division has a viable future and the leadership to get there.
- Provide a roadmap to guide behaviour and decision-making.

6. Create ownership, not just buy-in

Ownership is often best created by involving people in identifying issues and crafting solutions. It is reinforced by a combination of tangible (compensation) and psychological (camaraderie, sense of shared destiny) incentives and rewards.

7. Practice targeted over-communication

The best change programs reinforce core messages through regular, timely advice that is both inspirational and actionable. It should be targeted so as to provide employees the right information at the right time, to solicit their input and feedback and to check in on their emotional response to what they've heard.

The best change leaders speak from the heart and convey a deep sense of personal commitment. They tell a consistent story and view telling the story as a key responsibility in the change process.

8. Assess the cultural landscape early

It is critically important to understand and account for culture and behaviours at each level of the organisation. Organisations often make the mistake of assessing culture either too late or not at all. Cultural diagnostics can be used to assess organisational readiness to change, bring major issues to the surface, identify cultural factors that will support or inhibit change, and target sources of leadership and resistance.

9. Explicitly address culture and focus the cultural centre

Change programs often require amending, creating, retaining or merging culture to be successful. Culture should be addressed as thoroughly as any other area. This requires developing a baseline through a cultural/organisational diagnostic, defining an explicit end-state or desired culture, and devising detailed plans to make the transition.

Focusing the cultural centre of an organisation — the people or values that represent the locus of thought, activity, influence, or personal identification—is often an effective way to jump-start culture change.

10. Prepare for the unexpected

People will react in unexpected ways, areas of anticipated resistance will fall away, and the external environment will shift. Supported by information and decision-making processes, change leaders can make the adjustments necessary to maintain momentum and drive results.



Part 2 – PDSA (Plan Do Study Act) cycles for continuous improvement

PDSA cycles are used to empower staff to make a difference and achieve measured success. Use of PDSA cycles is linked to staff suggestion or issues databases or registers within the Division. PDSA cycles can also be used to start work on large complex tasks or projects which cannot be resourced by the Division as a single activity. The use of smaller PDSA projects provides a means to snow-ball the success incrementally to achieve larger more complex changes.

The extract below is a copy of material distributed freely through the NHS National Prescribing Center in the UK².

There are many other references for the use of PDSA (or PDCA) cycles to enable change management and for continuous improvement. Divisions may wish to access other reference material in Australia or overseas, but the copy of material below has been reviewed and validated as suitable for use by Divisions of General Practice.

To link the PDSA process to a Division's practical needs, the tool can be used to address the topics listed in a Divisional IM issues and improvements register. If the Division does not have a register for staff to record ideas and issues for information management, the IMMF toolkit has advice about how to establish one.

Getting started

In order to get started the following high level steps are recommended:

- Determine the change management initiative required.
- Define the objective, outcome or success criteria.
- Establish the PDSA register for the change management initiative.
- Engage the major stakeholders and establish the type of consultation forum required.
- Monitor the progress of the change management initiative and communicate consistently with stakeholders.
- Announce the success and closure of the change management initiative.

What is a PDSA cycle?

All improvement requires change – but a change is not necessarily an improvement. When we talk about making changes within Divisions or facilitating changes in general practices, we are talking about making sequences of small manageable changes that build up over time into manageable, measurable, and sustainable improvement.

The PDSA method of introducing change gives us a way to break that big change idea down into small, bite-size chunks. And we really do mean small. You know that great idea you've got to improve your immunisation records system? (You know, the one you've never dared to suggest to the team because it's too big and you'll have a mutiny on your hands.) Break it down into small bite-size chunks. Get the whole team involved in planning and testing each small part of the change to make sure that things are improving and no effort is wasted. Think in terms of hours and days, not weeks and months.

When you've planned and done your test - review where you're at; look at the data you've collected, act on any suggestions from your review and plan your next stage. You're on to your next PDSA cycle - it really is that simple.

Before you know it you will be well on the way to achieving your original goal, and if it doesn't look quite right, or if the change isn't resulting in quite the improvement you were looking for, go back a stage. You haven't lost anything, simply go back to the last PDSA, revise your plans and do it again. Don't forget that we can learn as much from the things that don't work, as from the things that do. Remember - there is no right or wrong answer.

² Direct access to this information can be found at http://www.npc.co.uk/mms/FiveMinGuides/library/5m_pdsa.htm



Where do I start?

Before you think about planning your PDSA's, get together with your team and ask yourselves the following three questions:

- What are we trying to accomplish? What is the business outcome, objective, activity or process you want to improve?
- How will we know that a change is an improvement?
- What changes can we make that will result in an improvement?

Thinking about these questions really will help you to focus on what you are trying to achieve, how you'll know if you've got there, and the path you're going to take in order to get there.

What do I have to consider at each stage of the PDSA cycle?

PLAN – What is our overall objective? Do we have a hunch or an idea about a change we could make that might lead to an improvement towards achieving this objective? Have we broken it down to its smallest part? What do we hope to achieve by testing this hunch? Can we try to predict what will happen? What are we actually going to do – do we know who, what, when, and where? How will we know if the change has resulted in an improvement – can we measure it, and what data will we need to collect? When are we going to meet to discuss what happened? Answer all these questions before you start to 'Do'.

DO – Carry out the test as you've planned. Document any problems or unexpected observations; gather your data as you go.

STUDY – Review and reflect. Get your team together, gather your data and study it. Did it go as expected? Has there been an improvement? Compare the results of your data to your predictions. Summarise what was learned. What could have been done differently?

ACT – What changes can we make before we start the next cycle? After you have agreed what worked and what didn't, plan your next PDSA cycle and move another step nearer to your goal.

How will I know when we have got there?

Think back to the three questions for improvement:

- What are we trying to accomplish?
- How will we know that a change is an improvement?
- What changes can we make that will result in an improvement?

Have you really achieved what you set out to accomplish, or do you need to test out a couple more changes before you can honestly say that? Don't give up too soon.

You might have achieved considerable success in your attempts to improve from your starting position. However, perhaps with just one or two more PDSA cycles you could achieve that outstanding sustainable improvement. The one that could really make a difference for your staff or GP members, your colleagues, and anyone else involved in healthcare services in your locality.

So don't forget to collect your data along the way, and measure your improvement at each stage so that you know you're really making a difference, and the changes you're making are leading to improvement.

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