



Change Management



ACKNOWLEDGEMENTS

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CHANGE MANAGEMENT IN QUALITY IMPROVEMENT

This primer addresses the principles and practices of change management and its application to quality improvement. It is intended to be used as a guide for the design and implementation of successful change efforts, and to better understand how individuals, teams and organizations shift or change from a current state to a future state.

This primer is based upon several theories of change management, primarily Chip and Dan Heath's *SWITCH: How to Change Things When Change Is Hard*. This work was chosen because it is applicable to any change initiative, big or small, health care or otherwise. We recommend reading this text in its entirety as it contains many examples and cites interesting research that will be helpful in managing change processes.

Additional Reading:

1. Haidt, J. (2006). *The Happiness Hypothesis: Finding Modern Truth in Basic Wisdom*. New York: Basic Books.
2. Kahneman, D. (2011). *Thinking, Fast and Slow*. New York: Farrar, Straus and Giroux.
3. Kotter, J. & Cohen, D. (2002) *The Heart of Change: Real-Life Stories of How People Change Their Organizations*. Boston: Harvard Business Press.

WHY THINK ABOUT CHANGE MANAGEMENT?

Change can be challenging—whether the change is for individuals, teams, organizations or societies. If you are involved in introducing a new way of doing something, you are managing a process of change, whether you realize it or not. It has been estimated that 70% of change initiatives fail¹ because:

- Change plans do not include those affected early enough in the planning
- Change plans do not consider "human factors," i.e., motivations and human behaviours
- Individual barriers to change are not directly addressed
- Sustainability is not built in from the beginning.

Applying the principles of change management mitigates the above concerns and increases the likelihood of experiencing successful change. Change management draws upon research in psychology and sociology to make change easier and more sustainable.

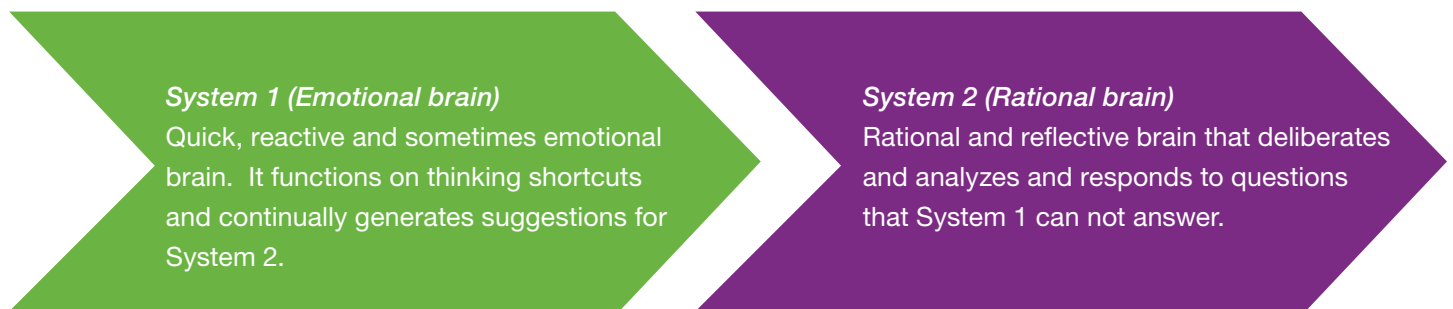
Even altering the morning routine at home so everyone leaves the house one hour earlier than usual is a process change. For example, making lunches the night before instead of in the morning requires changes to routines. Now, due to the change in lunch making, preparing hot soup for lunch is no longer an option. This small change means that you need to alter your grocery list to reduce the amount of soup you buy and increase the amount of bread for sandwiches.

A significant amount of research has been done to identify the steps necessary in an effective change process. Authors Kotter and Cohen present an eight-step plan in their book *The Heart of Change*.² These change steps are summarized below.

1. Create a "burning platform," in other words, an extremely urgent or compelling business case to convey, in the strongest terms, the need for change
2. Gather a guiding team/steering committee
3. Have the team create a vision of the future and action plans
4. Communicate upcoming changes
5. Make change steps easy and clear
6. Create ways for quick wins to be seen and felt by those affected
7. Build on the quick wins, learn from the challenges and continue on
8. Plan for sustainability

In addition to following the change management steps outlined above, it is important to consider the psychology of the individuals making the changes. As we conduct our daily affairs and think about the large and small challenges we face, make decisions, act and reflect, we draw upon two different parts of our brains. Psychological research has demonstrated that these two parts correspond to two distinct modes of thinking: an emotional mode and a "rational/logical" mode.

Daniel Kahneman, in his book *Thinking, Fast and Slow*,³ described and characterized these two thinking modes as follows:



INCORPORATING THE TWO MINDS INTO CHANGE INITIATIVES

This idea of two modes of thinking is important to successfully bring about change. Considering the human factors in each step of the change journey will help ensure that the change is successful. Below is an illustration that links the idea of two minds in Kahneman's work to the change management theory outlined in Heath's text:

System 1:

This is the quick, reactive, sometimes emotional brain. It is automatic, initiated with no effort and very little control. Examples include perceptions, fears, innate skills, and skills that have become automatic through practice. It operates based on thinking shortcuts and continually generates suggestions for System 2.

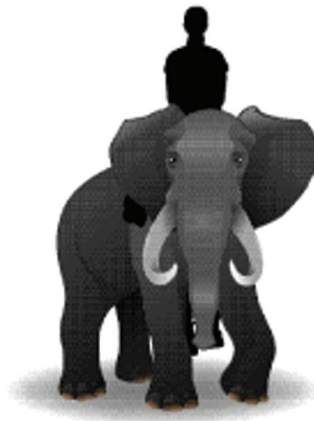
System 2:

This is the rational and reflective brain that deliberates and analyzes and responds to questions that System 1 cannot answer. Examples include filling out a tax form, checking the validity of a complex logical argument, planning, and managing behaviour in social situations.

Another way to understand System 1 and System 2 thinking, expressed by Jonathan Haidt in *The Happiness Hypothesis*, is to imagine a person (the Rider) sitting on top of an elephant, trying to control the movement of the large and powerful animal so that it will go in a particular direction. The Rider knows where he wants to go but is small and weak compared to the Elephant. He needs the cooperation of the Elephant to move forward. The ideal situation is for the Rider and Elephant to work together.

The Elephant System 1:

is the emotional, automatic brain. It is very powerful and if motivated can be a powerful driver for change. If the Elephant is unmotivated, or worse, spooked by a proposed change, then success is less likely.



The Rider System 2:

is the logical, more deliberate brain. The Rider is a good planner and director of action but can become powerless when overwhelmed by the force of a motivated or unmotivated Elephant.

Try it yourself

Over the next few days, pay attention to these two types of thinking in your day-to-day activities. You may start to notice how much of your thinking is sourced (at least initially) from System 1 (emotional/elephant) and then further processed and shaped by System 2 (rational/rider).

Switch Framework

According to Chip and Dan Heath, authors of *SWITCH*, the three main components of the change management framework are Motivating, Directing and Shaping.⁴ These components are explained in more detail below.

1. Motivating

System 1 (the elephant), is emotional, reactive and powerful. This component involves motivating the elephant so that you can use its power and force to compel action and sustain the momentum for change. It is also important to avoid ‘scaring the elephant.’

When motivating the Elephant, try to follow the first two (and ideally all three) of the following recommendations:

Find the feeling. Appeal directly to the emotions of your team (the Elephant, or System 1) — make people feel something. Strive to make the need for change visual and visceral, use emotion (negative or positive), or use a pivotal testimonial. This should compel people and motivate them to act. This is not about logic, it is about feeling.



Shrink the change. Break down the change until it no longer seems overwhelming. Identify an immediate goal that is easy to accomplish and provides the confidence and momentum to continue. This is about making the change feel small and imminently doable instead of scaring people away from making the change because it seems too overwhelming.

Grow your people. Cultivate a shared identity and common goals that will encourage all people to work toward the same objective.

2. Directing

System 2, (the rider) is the planner and thinker. The rider can provide direction to the powerful (but willful) elephant (System 1). However, the rider has a tendency to “over-think.” To optimize the effectiveness of the rider, follow these recommendations:

Point to the destination. This involves finding and painting a rich, compelling picture of where you want to go or what the destination looks like. A good way to test whether your destination (desired outcome) is clear

Fortunately, there are countless ways to “find the feeling” in health care. Just think of the passion that motivates health care providers to enter the field in the first place. Most are very dedicated to helping people realize the best health outcomes and a high quality of life. Tap into these motivations and passions and powerful rewards available to people and their families who benefit from quality health care. See yourself or your family as the health care recipient. Invite health care consumers to participate in your team’s co-design of new processes.

Instead of saying “we will decrease aggressive behaviours in all people with dementia”, shrink the change! Try focusing on one person that seems to exhibit aggression during dinner time. Try reducing the noise experienced by that person during dinner by switching to plastic plates instead of noisy china plates and see if it reduces the behaviour. If it does, try focusing on another person. Continue until all people with dinnertime aggression have some reduction in these behaviours.

To direct the rider, articulate a tangible patient quality and/or patient safety outcome as your destination. Some examples of clear destinations might include reducing medication errors or reducing falls by 25%.

An example of scripting critical moves comes from SWITCH, which discusses a campaign to lose weight. Instead of telling people to “eat healthier food” or “exercise more”, people are told to switch their consumption of milk from higher fat content milk to lower fat content milk. This easy action produced weight loss in the population and provided a platform to build further weight loss “moves” upon.

An example of tweaking the environment is the process that banks developed to prevent ATM users from receiving their money before taking their bank card back from the machine. This “forcing function” was created because people were leaving their bank cards in the machine after receiving their money.

is to ask: Will you know when to have a celebration party? Clarity about the destination will satisfy the natural tendency to over-think things.

Script the critical moves. Be specific and very clear about the behaviours you are looking for with the process change. Be simple and don't overcomplicate the issue. Focus on the key behaviours and avoid getting bogged down in everything you want to accomplish. Instead, start with one fundamental action that you can build on. Once that action is firmly established, use the results of the changes to demonstrate benefits and rewards toward the desired goal. Once these benefits are seen, it will be exciting or interesting for those affected by the change to continue the new processes.

Follow the bright spots. This recommendation is about being able to say, “See, others are doing it. They did it successfully this way.” This step can be valuable when you are in the early stages of designing a change effort. When planning for change, it can be helpful to search for others who have successfully addressed the issue, investigate, understand why their measures worked, and then replicate them in your own setting. The knowledge that there are solutions and examples of more effective and efficient processes can serve as compelling evidence for your change initiative.

3. Shaping the Path

This component embodies some of the basic strategies used to provide external reinforcement for both the emotional and logical brain and also reflects insights from the field of quality improvement. “Shaping the path” is about removing obstacles and creating a change-friendly environment where change can take place.

Tweak the environment. This involves changing the physical surroundings so that a problem goes away or behaviour automatically changes. In quality improvement this is known as error proofing or a “forcing function.”

Build habits. These are action triggers such as checklists, posters or other ways of prompting and reminding us about desired behaviours and serve to reinforce and encourage the outcomes you are looking for.

Rally the herd. This is about making the behaviour contagious and spreading the change. The psychology used here involves tapping into the need to belong and to take behaviour cues from others. In the implementation phase of the process, communicating the new norm provides valuable reinforcement and solidifies the change. An example of creating a culture of changing social norms includes Mothers Against Drunk Driving (MADD), which reduced cultural acceptance of drinking and driving and increased social acceptance of using seatbelts while driving to reduce injury.⁵

➤ *Using a surgical safety checklist to validate patient information and verify specific operating room requirements prior to every surgical procedure in a hospital builds in the habit of ensuring that the right patient is receiving the right surgical procedure and that the room is adequately prepared.*

APPLYING THE IDEAS TO QUALITY IMPROVEMENT

The recommendations outlined above for Motivating, Directing and Shaping can be applied at any level, at any time in the change process. For example, you might want to ask the following during a change process:

As an individual: What is going on with *my own* emotional thought processes? What does my rational brain need to be able to participate in the change initiative? What can I do to shape the path so that the desired behaviours become automatic?

As a team leader or manager of a change process: What might my team or organization need to compel their emotions? What information do they need? What scripting is needed to ensure that we all work toward the same goals? How can I shape the path so the change is automatic and reinforced?

Example:	What part of the change management model should be considered: Elephant/Rider/Path?	Suggested actions
You have been asked to gain 100% patient satisfaction.	Change is too large and might seem overwhelming	Try working with one unit or one patient population or one clinic or one provider.

1 Kotter, J. (2013). The 8-Step Process for Leading Change. Retrieved from <http://www.kotterinternational.com/our-principles/changesteps>

2 Kotter, J. & Cohen, D. (2002). *The Heart of Change: Real-Life Stories of How People Change Their Organizations*. Boston: Harvard Business Press, pp. 3-7

3 Kahneman, D. (2011). *Thinking, Fast and Slow*. New York: Farrar, Straus and Giroux, pp. 20-21

4 Heath, C., and Heath, D. (2010). *Switch: How to Change Things When Change is Hard*. Toronto: Random House Canada, p. 8

5 Mothers Against Drunk Driving (2012). Goals and Strategies. Retrieved from <http://www.madd.org/about-us/madd-goals.html>

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