



Igniting energy for change

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@HelenBevan

#QS2015



Creating a mass movement of people working together in and with the NHS demonstrating the difference they can make, by one simple act for sustainable improvement

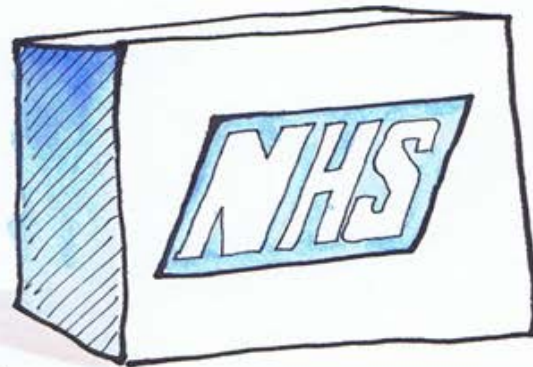


Probably the biggest day of collective action for improvement in the history of the NHS



Honestly.....
go ahead

Do we really
have permission?



Change Day 2014:

hello my name is...

more than 800,000 pledges to take action

- 81 separate Campaigns
- 86 million twitter impressions
- 35,400 video views
- 95,000 daily reach on Facebook



NHS CHANGE DAY **NHS**
Do something better together

i pledge to...

Undergo the same preparation that my patients do for CT colonography so that I have a better understanding of how it feels.

Dr Vikas Shah | Consultant Radiologist | Leicester



What is this?



What is this?



jim thornton @jimthornton · Mar 5

@NHSChangeDay #lithotomy challenge. Not happy as I look. Undignified & disempowered. Avoid if poss @FWmaternitykhftas
pic.twitter.com/vSQ1MhtpUI



81



71

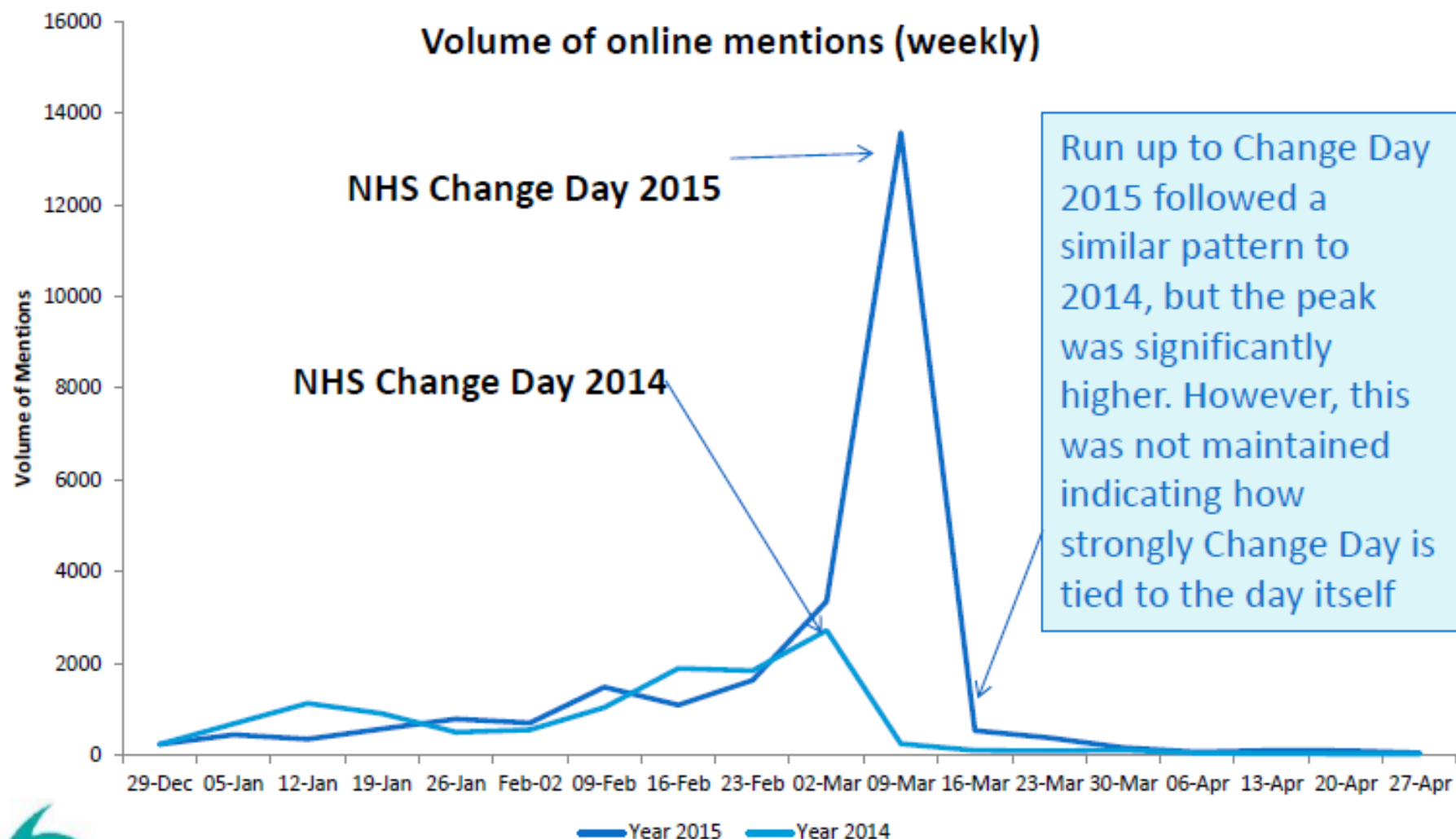


The #LithotomyChallenge

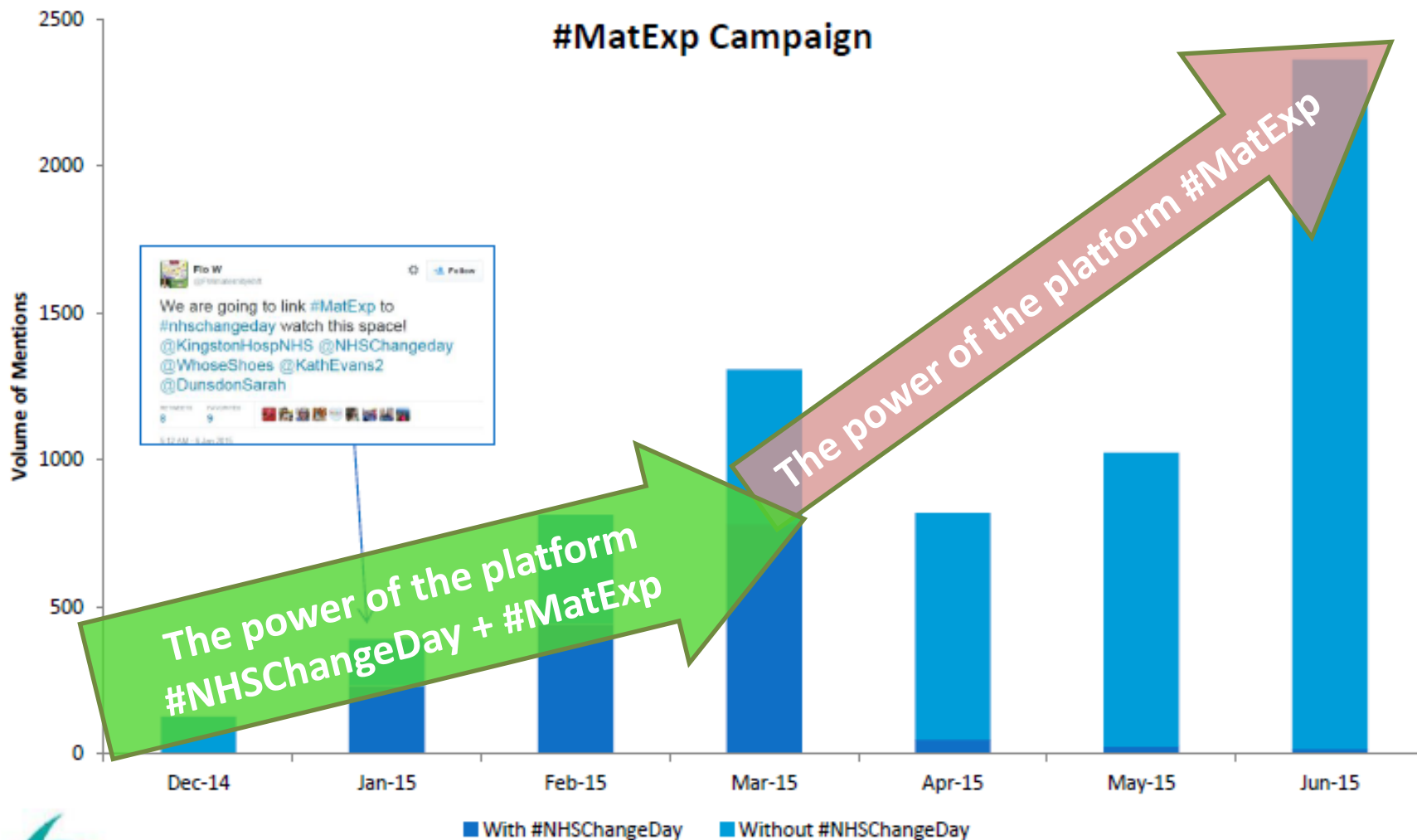


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Change Day 2015 generated almost 6 times as many mentions as 2014 with a steady build-up, but equivalent drop post-event



The MatExp campaign harnessed NHS Change Day through January, February and March, but its continued and growing attention since then highlights its life outside of Change Day



Talk to the person next to you



Remember a time

When you felt really energised about change.....

When everything came together.....

When your efforts surged with energy....

When you were part of an unstoppable force for positive change.....



Being “in the flow”

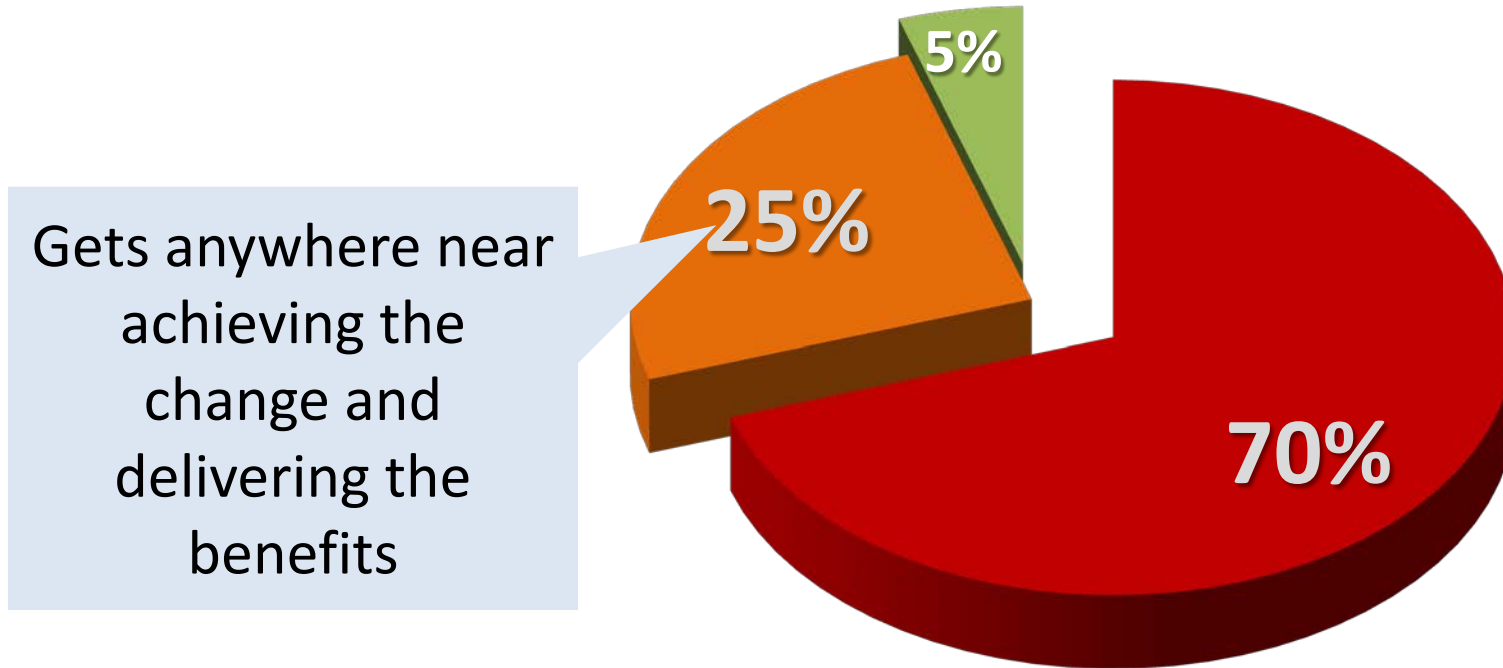
1. Intense concentration / not distracted
2. Fusion of action and awareness
3. Greater sense of agency
4. Increased levels of intrinsic motivation
5. Distorted sense of time
6. Balance of challenge and skill
7. Sense of progress (immediate feedback)

Source: [John Spencer](#), based on ideas from [Mihály Csíkszentmihályi](#)



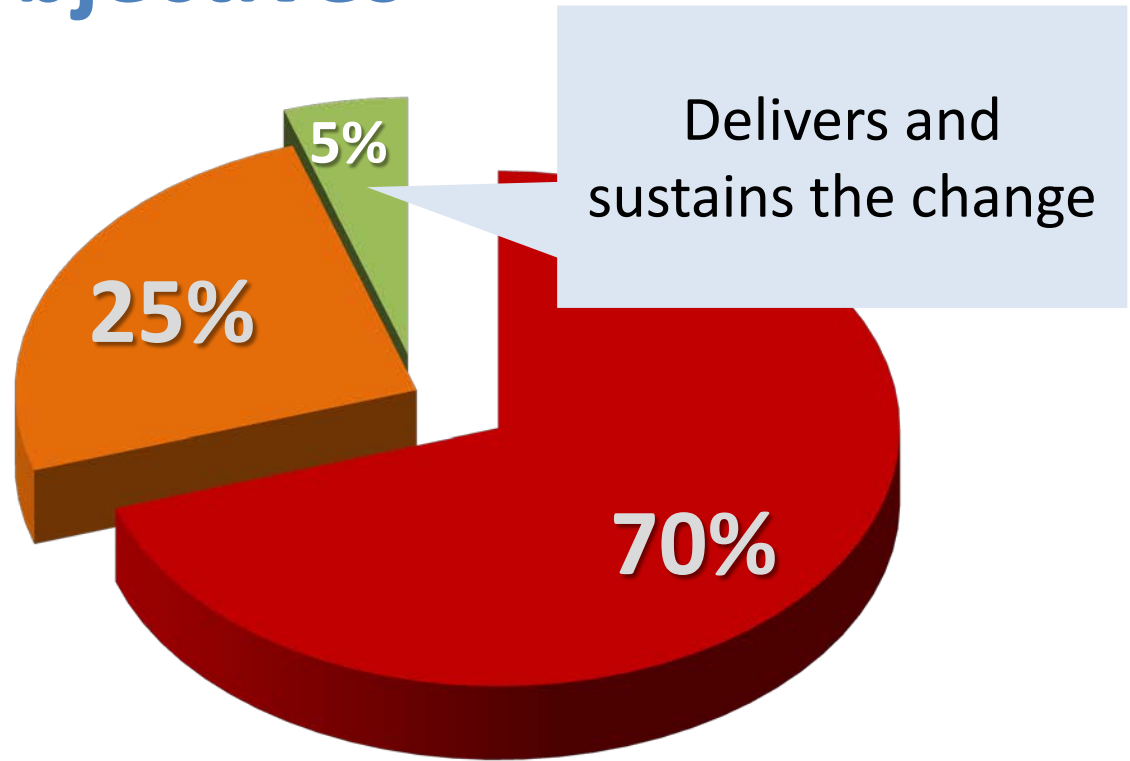


Most change programmes fail to deliver their objectives



Source: *McKinsey Performance Transformation Survey*, 3000 respondents to global, multi-industry survey

Most change programmes fail to deliver their objectives



Source: *McKinsey Performance Transformation Survey*, 3000 respondents to global, multi-industry survey

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: <http://www.nhs.uk/8530.aspx>



Typically, around any change effort, there is an initial spike of tangible energy, and change, but when leadership loses interest, the momentum of change slows down drastically.”

Tara Paluck



Anatomical
approach

Physiological
approach



Anatomical approach

The shape and structure of the system; structures and processes to deliver health and healthcare

- Improving clinical systems
- Seeking to reduce harm and reduce risk
- Redesigning pathways
- Standardising
- Measuring



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Physiological approach

The vitality and life-giving forces that enable the system and its people to develop, grow & change

- creating higher purpose and deeper meaning
- Leading through values
- building commitment
- creating hope and optimism about the future
- calling to action

Anatomical approach

The shape and structure of the system; structures and

It's all about energy!

harm and reduce risk

- Redesigning pathways
- Standardising
- Measuring

Physiological approach

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The reality

“What the leader cares about (and typically bases at least 80% of his or her message to others on) does not tap into roughly 80% of the workforce’s primary motivators for putting extra energy into the change programme”

Scott Keller and Carolyn Aiken (2009)

The Inconvenient Truth about Change Management



Source of image: swedenbourg-openlearning.org.uk

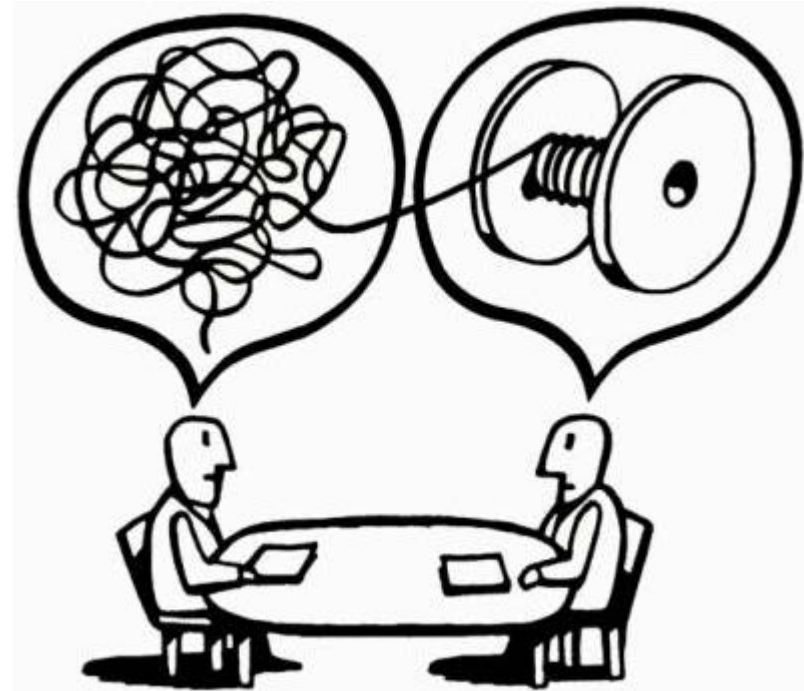


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Leaders ask their staff to be ready for change,
but do not engage enough in
sensemaking.....

Sensemaking is not done via marketing...or
slogans but by emotional connection with
employees

Ron Weil



“ *Resistant behaviour is a good indicator of missing relevance*

Harald Schirmer

<http://de.slideshare.net/haraldschirmer/strategies-for-corporate-change-the-new-role-of-hr-driving-social-adoption-and-change-in-the-enterprise>



Two kinds of people at work

The contributors



- Feel connected to a higher purpose
- Controlled & coordinated through shared goals & values
- Collaborate
- Embrace change
- Work to who they are

The compliant



- Feel disconnected from purpose
- Controlled & coordinated through performance management & standardised procedures
- Hold back
- Resist change
- Work to a role specification

Two kinds of people at work

The contributors



Contributors

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- Controlled & coordinated through shared goals & values
- Collaborate
- Embrace change
- Work to who they are

The compliant



Gallup global research:

- Only 13% of the workforce are engaged (*contributors*)
- *Contributors* create six times the value to an organisation compared to the *compliant*

<http://www.gallup.com/poll/165269/worldwide-employees-engaged-work.aspx>



Intrinsic motivation

People engage in the activity for the pleasure and satisfaction of doing it

Invokes many positive behaviours



Extrinsic motivation

People engage in the activity for the rewards or avoiding punishment

Any external influence is referred to as extrinsic motivation



Images: pixgood.com



The power of extrinsic drivers

 Helen Bevan retweeted

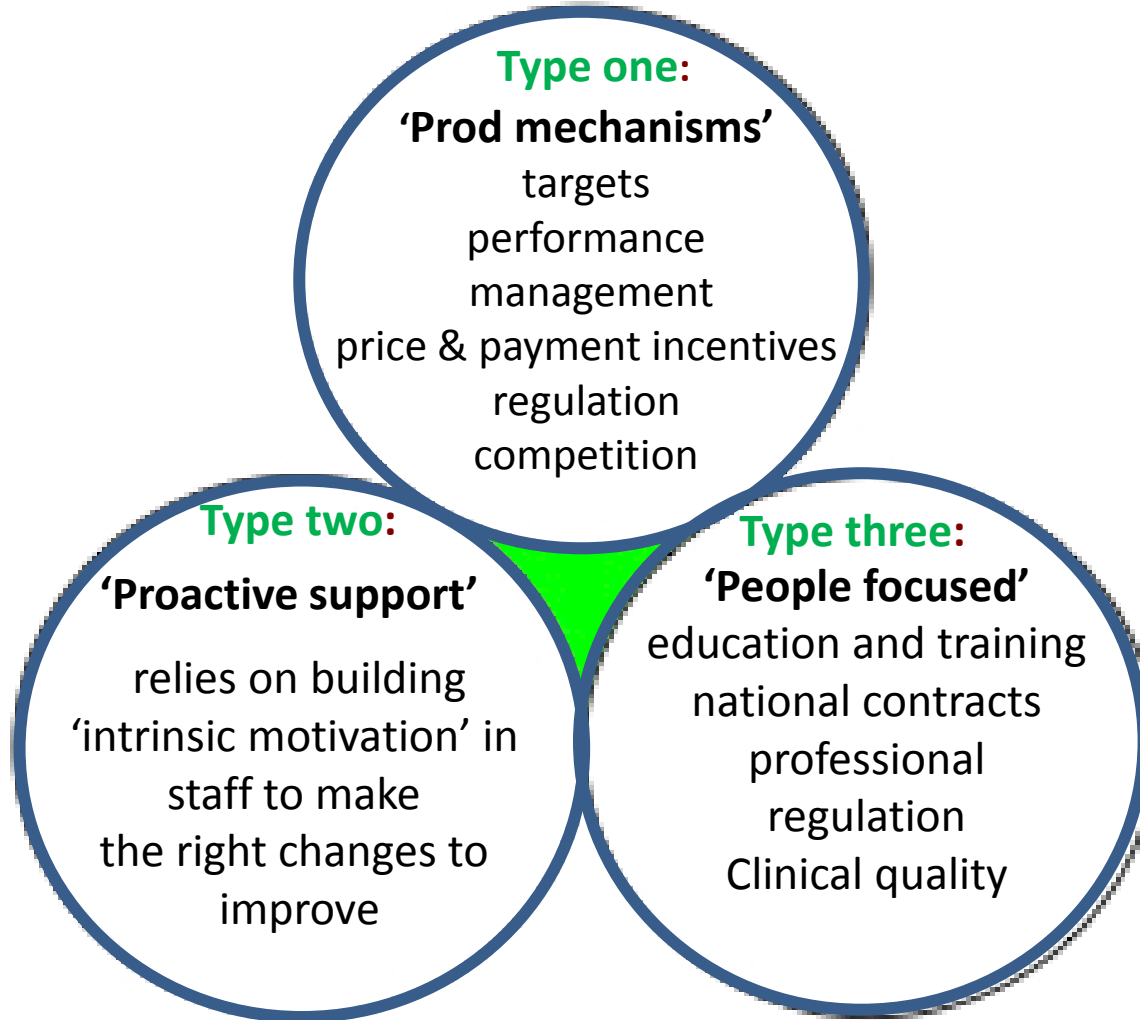


[NPC](#) @NPCthinks · May 22

Our @IonaCJoy tells @TheEconomist: 50% charities measure their #impact to please funders, only 5% to improve services ow.ly/Ng9C2



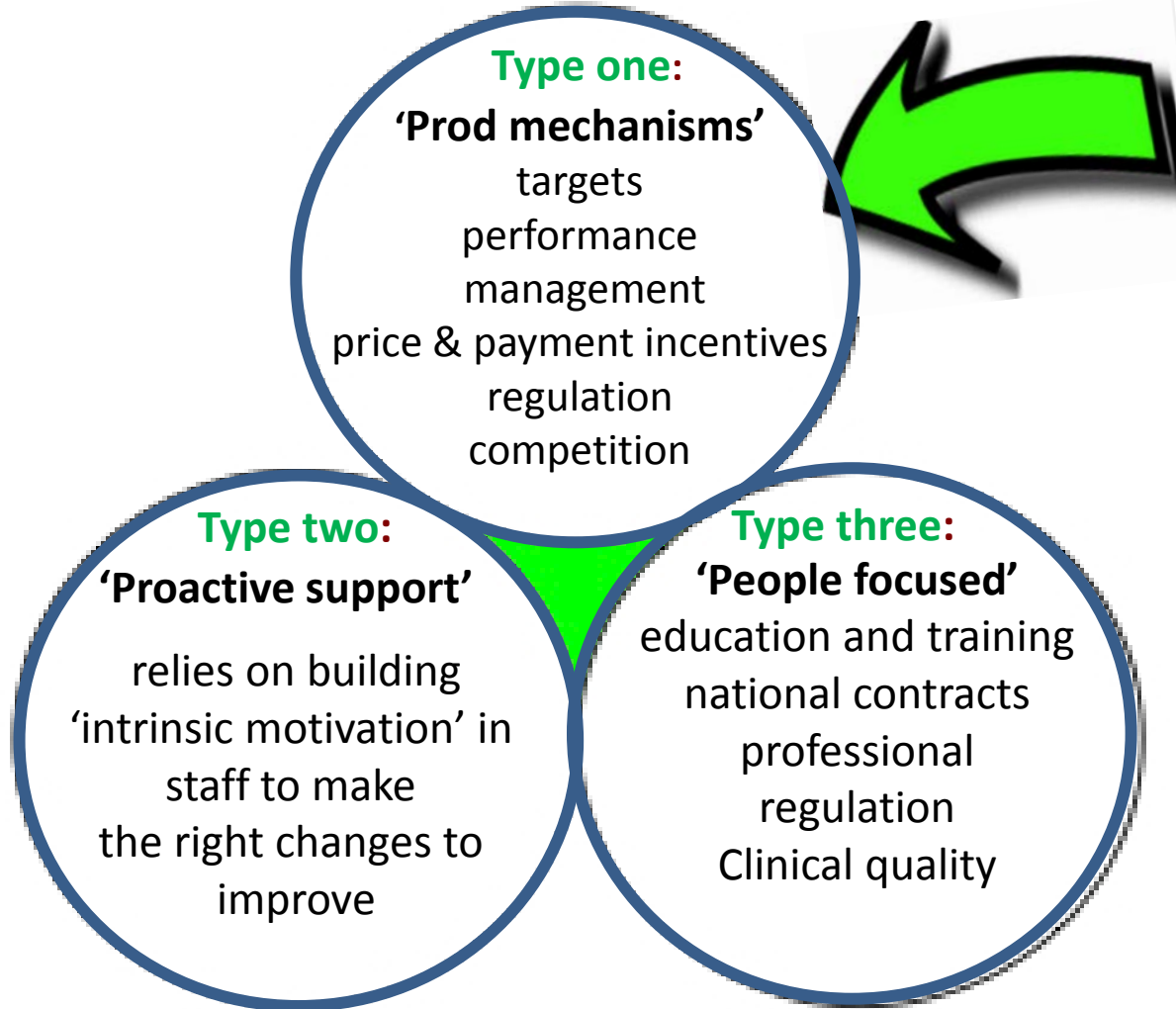
Three types of levers for large scale change



Source: Health Foundation report [*Constructive comfort: accelerating change in the NHS*](#) 2015



Three types of levers for large scale change



Less than 10% of the potential for improvement at system level can be delivered through type one change

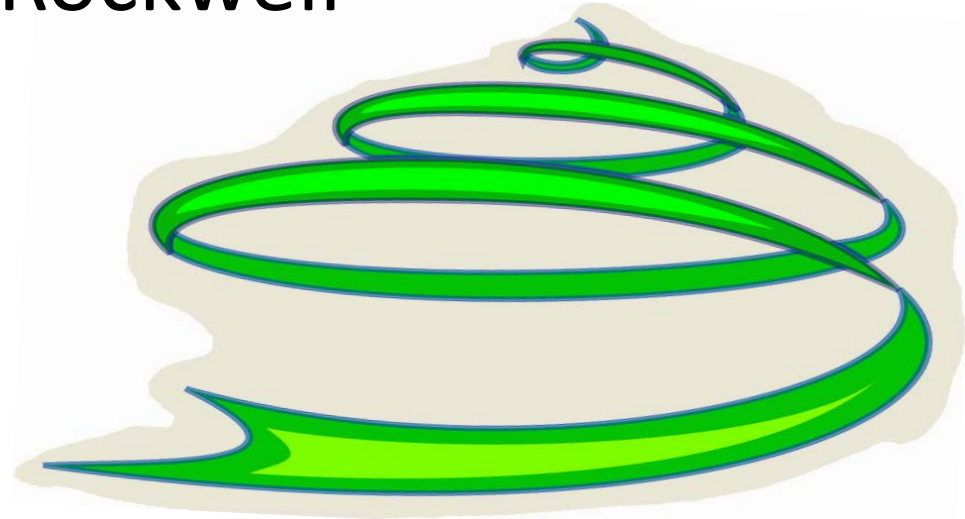
Source: Health Foundation report [Constructive comfort: accelerating change in the NHS](#) 2015



“

*Persistent application of power
and authority drains energy
from those in its wake*

Dan Rockwell



Bruch and Vogel research

Organisations with HIGH productive energy scored higher on:

- overall performance - 14% higher
- productivity – 17%
- efficiency – 14%
- customer satisfaction – 6%
- customer loyalty – 12%



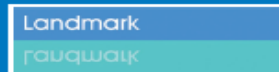


Building and aligning energy for change

A review of published and grey literature,
initial concept testing and development

Final Report January 2013

MARTIN LAND - Director, Landmark Health Consulting
NICK HEX - Associate Director, YHEC
CHRIS BARTLETT - Research Consultant, YHEC



Energy for change

The capacity and drive of a team, organisation or system to act and make the difference necessary to achieve its goals



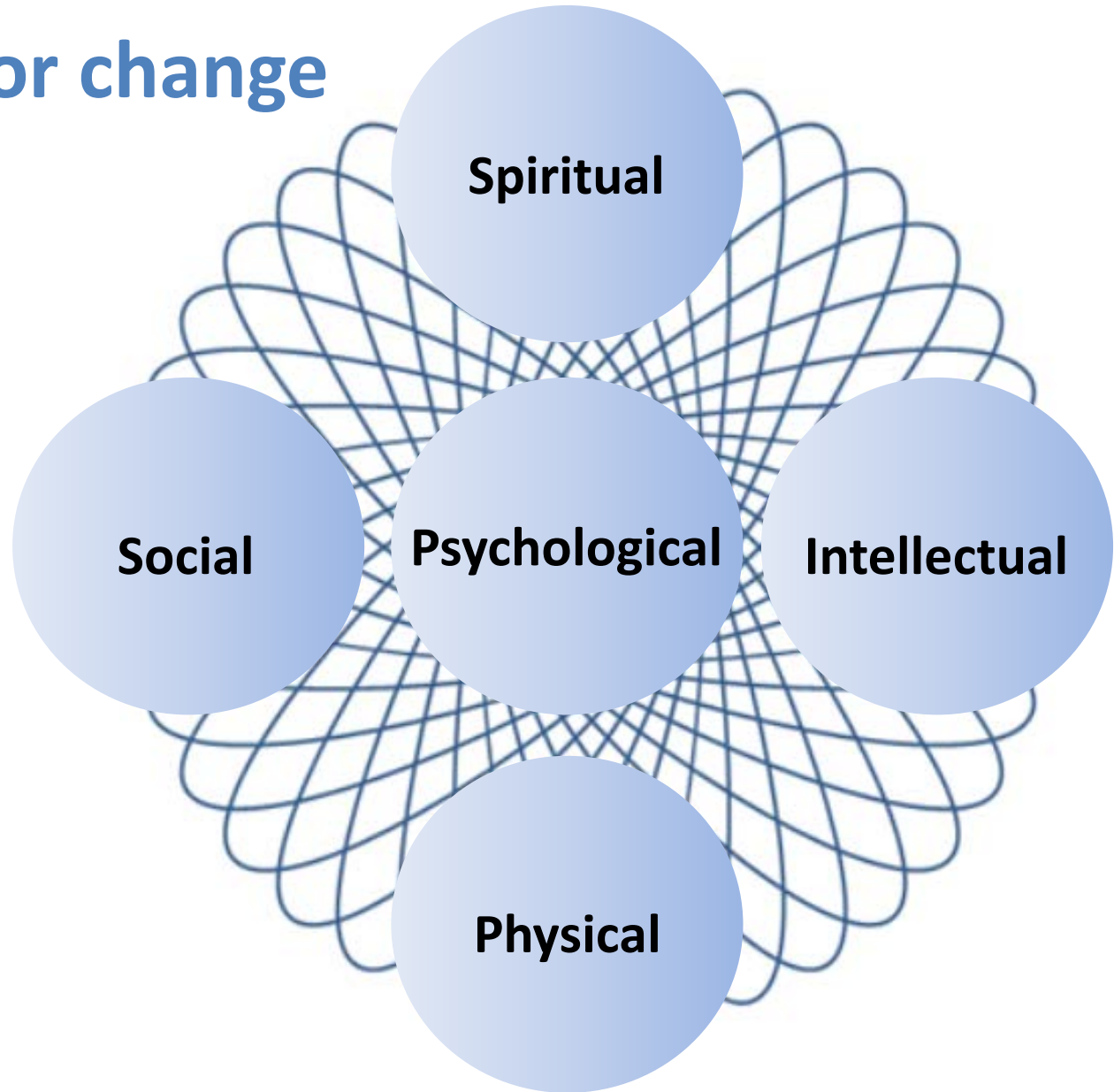
Building and aligning energy for change

A review of published and grey literature, initial concept testing and development

http://www.institute.nhs.uk/tools/energy_for_change/energy_for_change_.html



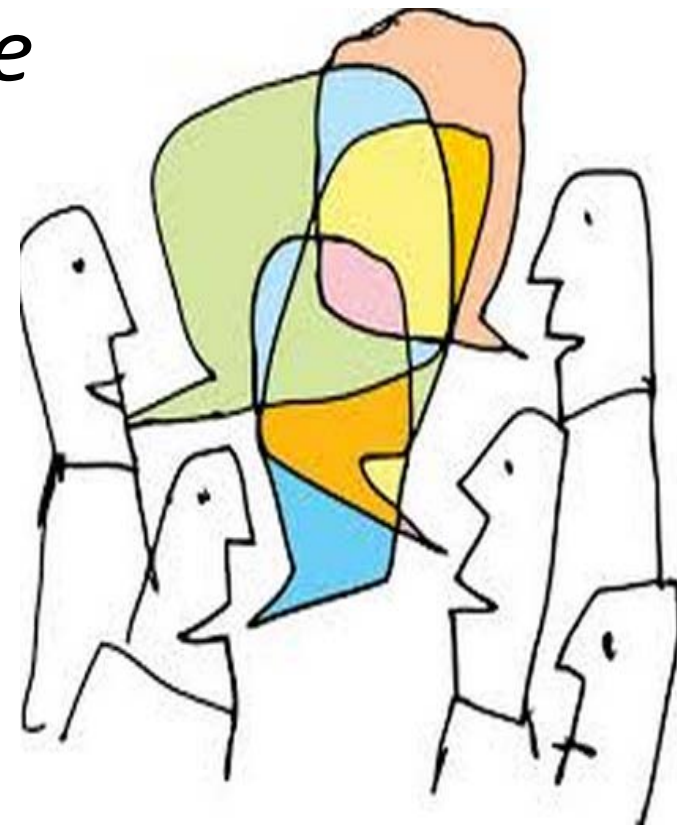
Energy for change



Social energy

*Energy of personal
engagement, relationships and
connections between people*

It's where people feel a sense of
“us and us”
rather than
“us and them”



Spiritual energy

Energy of commitment to a common vision for the future, driven by shared values and a higher purpose

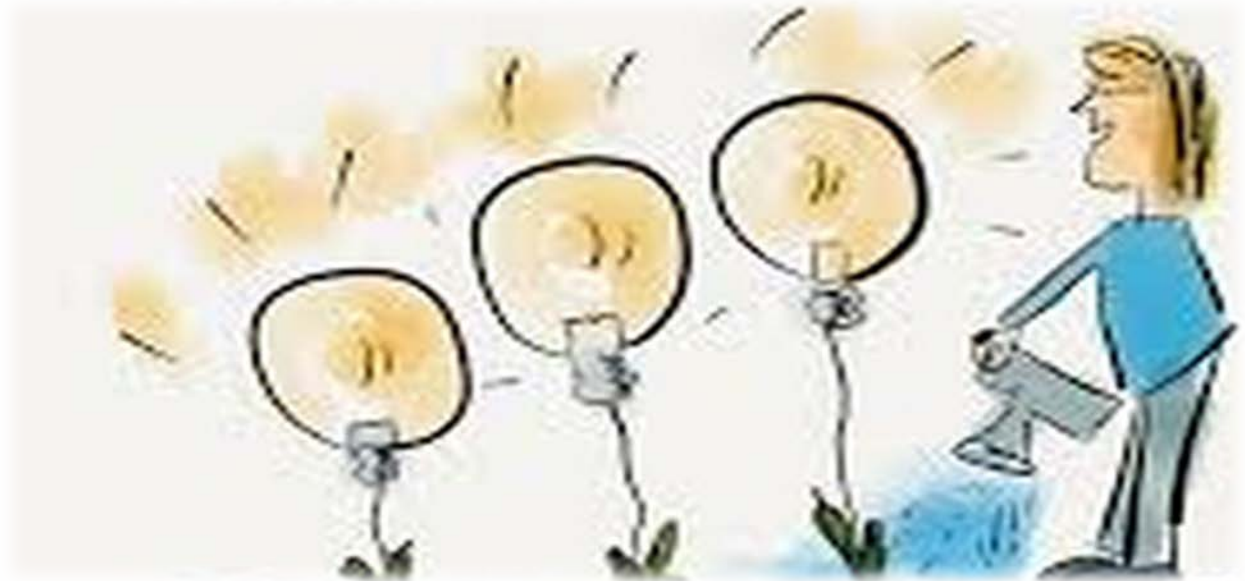
Gives people the confidence to move towards a different future that is more compelling than the status quo



Psychological energy

Energy of courage, resilience and feeling safe to do things differently

Involves feeling supported to make a change and trust in leadership and direction



Physical energy

Energy of action, getting things done and making progress

The flexible, responsive drive to make things happen



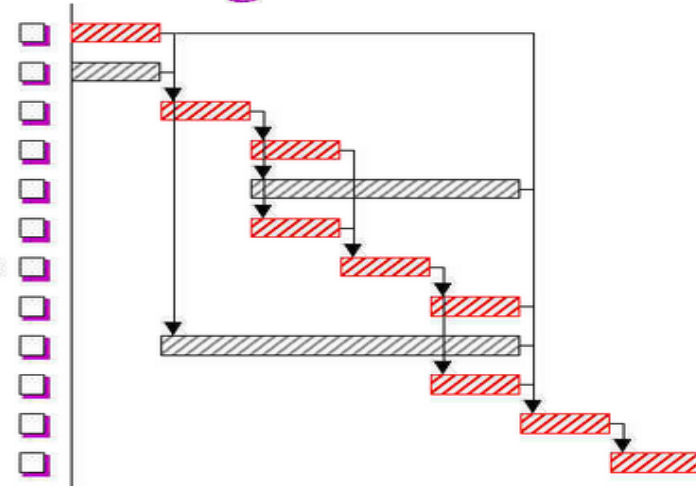
Intellectual energy

Energy of analysis, planning and thinking

Involves gaining insight as well as planning and supporting processes, evaluation, and arguing a case on the basis of logic/ evidence

Project Planning Chart

- Define objectives
- Document overview
- Prepare WBS
- Prepare estimates
- Document assumptions
- Define dependencies
- Assign and level resources
- Define milestones
- Define and analyze risks
- Prepare budget
- Compile project plan
- Get approval for plan



High and low ends of each energy domain

	Low	High
Social	isolated	solidarity
Spiritual	uncommitted	higher purpose
Psychological	risky	safe
Physical	fatigue	vitality
Intellectual	Illogical	reason

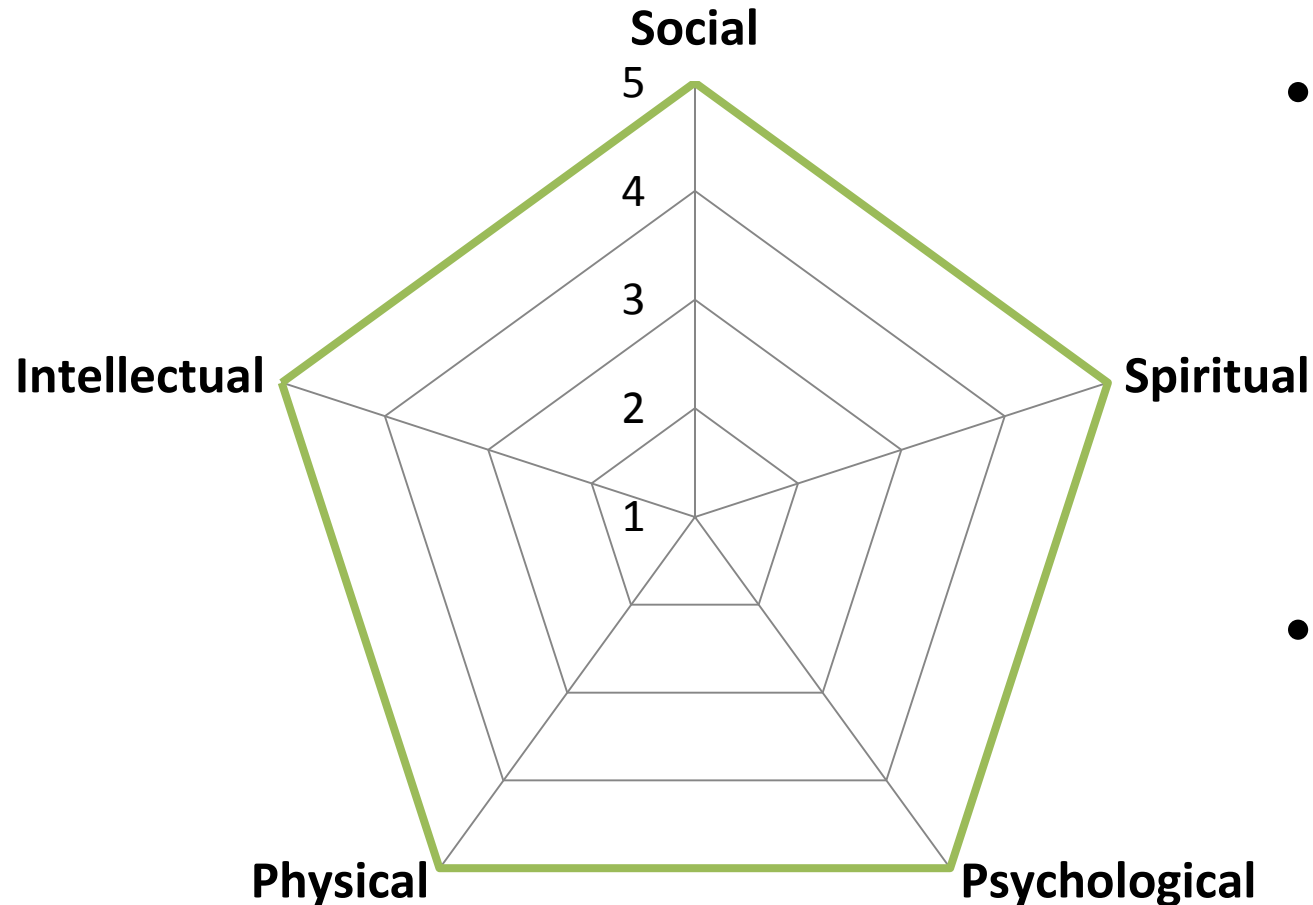


Some questions

- Which group likely to have higher spiritual energy scores (clinicians/non clinicians?)
- Nearer to CEO, higher or lower energy scores?

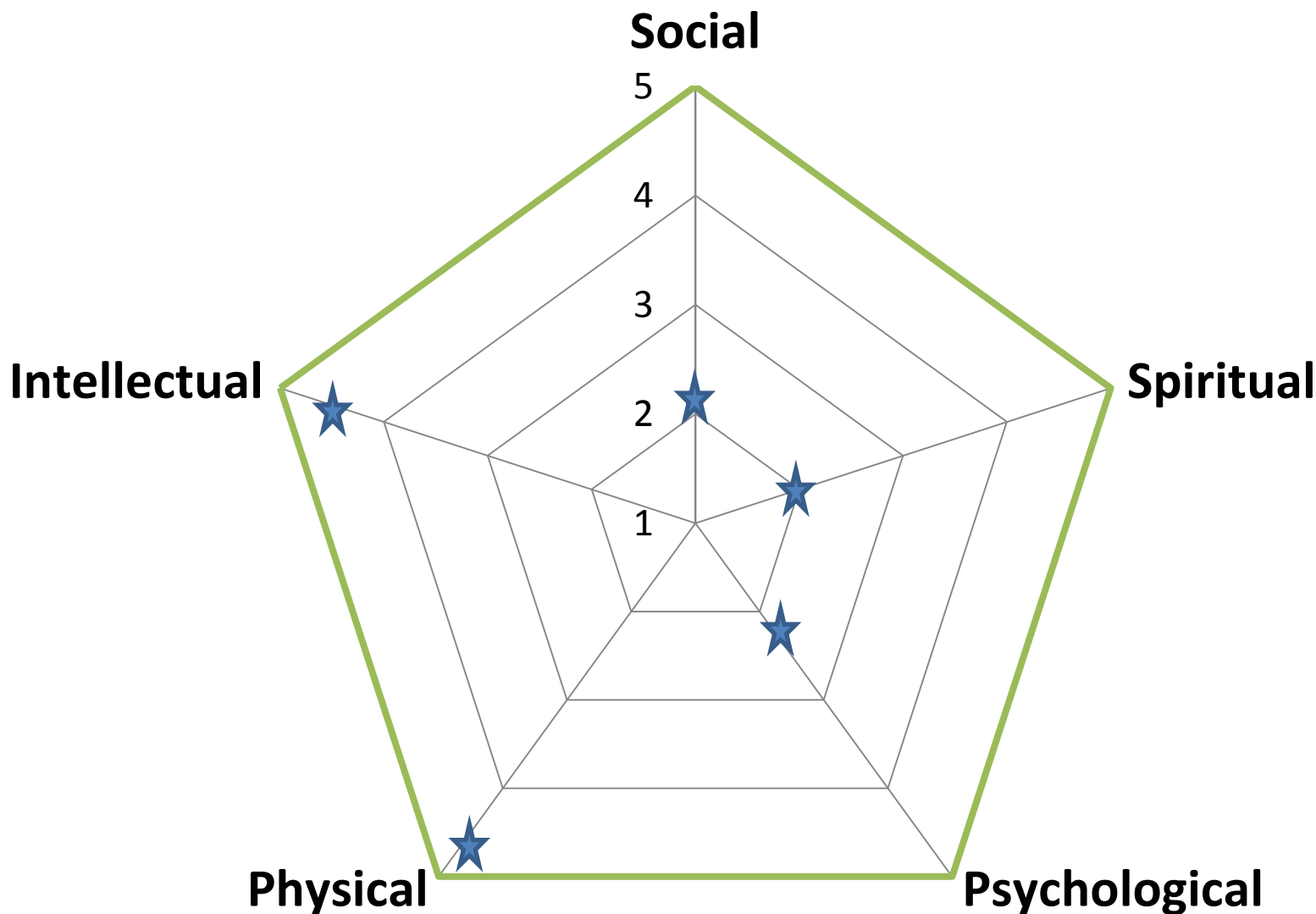


Energy for change profile

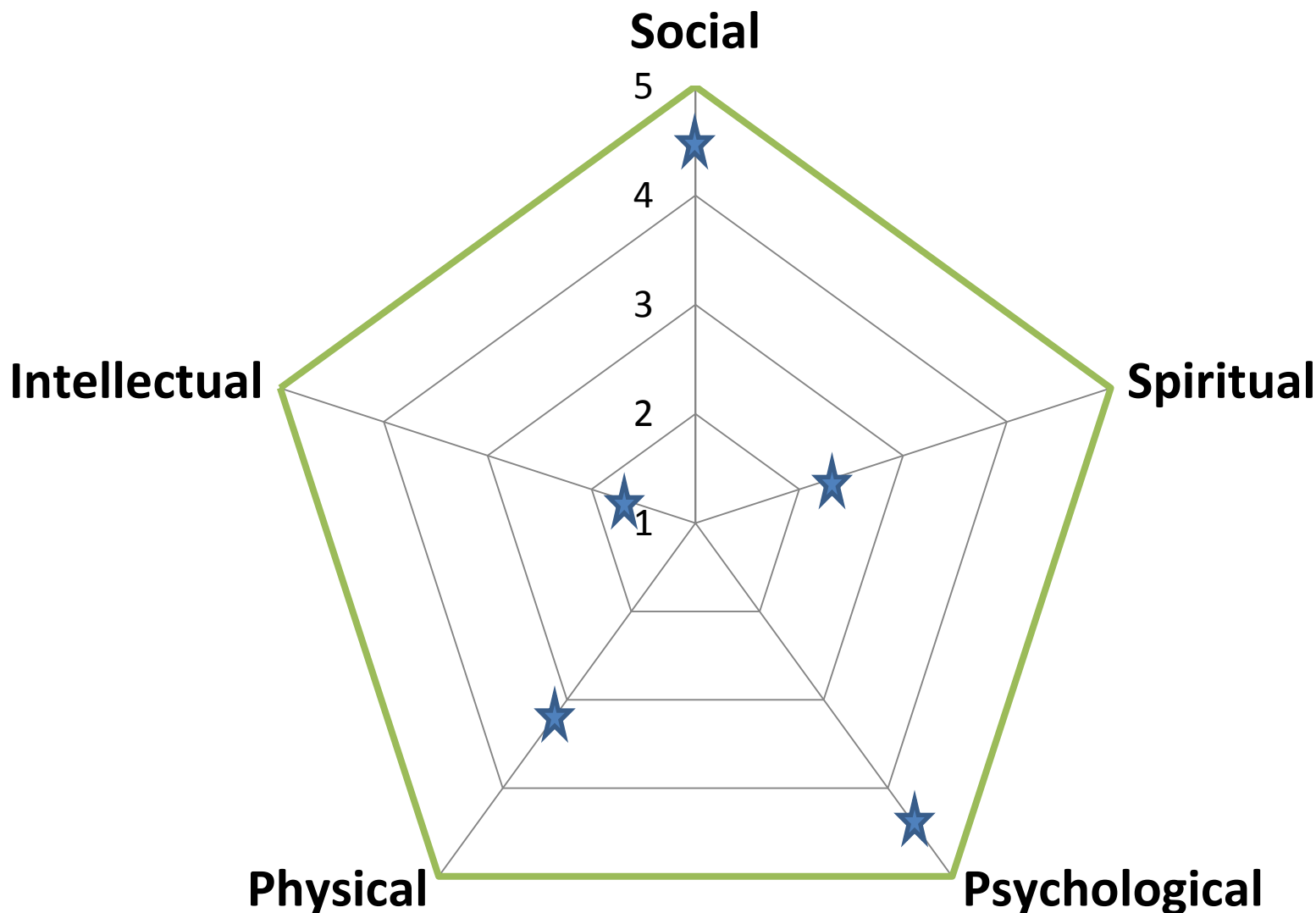


- Are particular energy domains more dominant than others for our team at the moment?
- Is this the optimal energy profile to help us achieve our improvement goals?

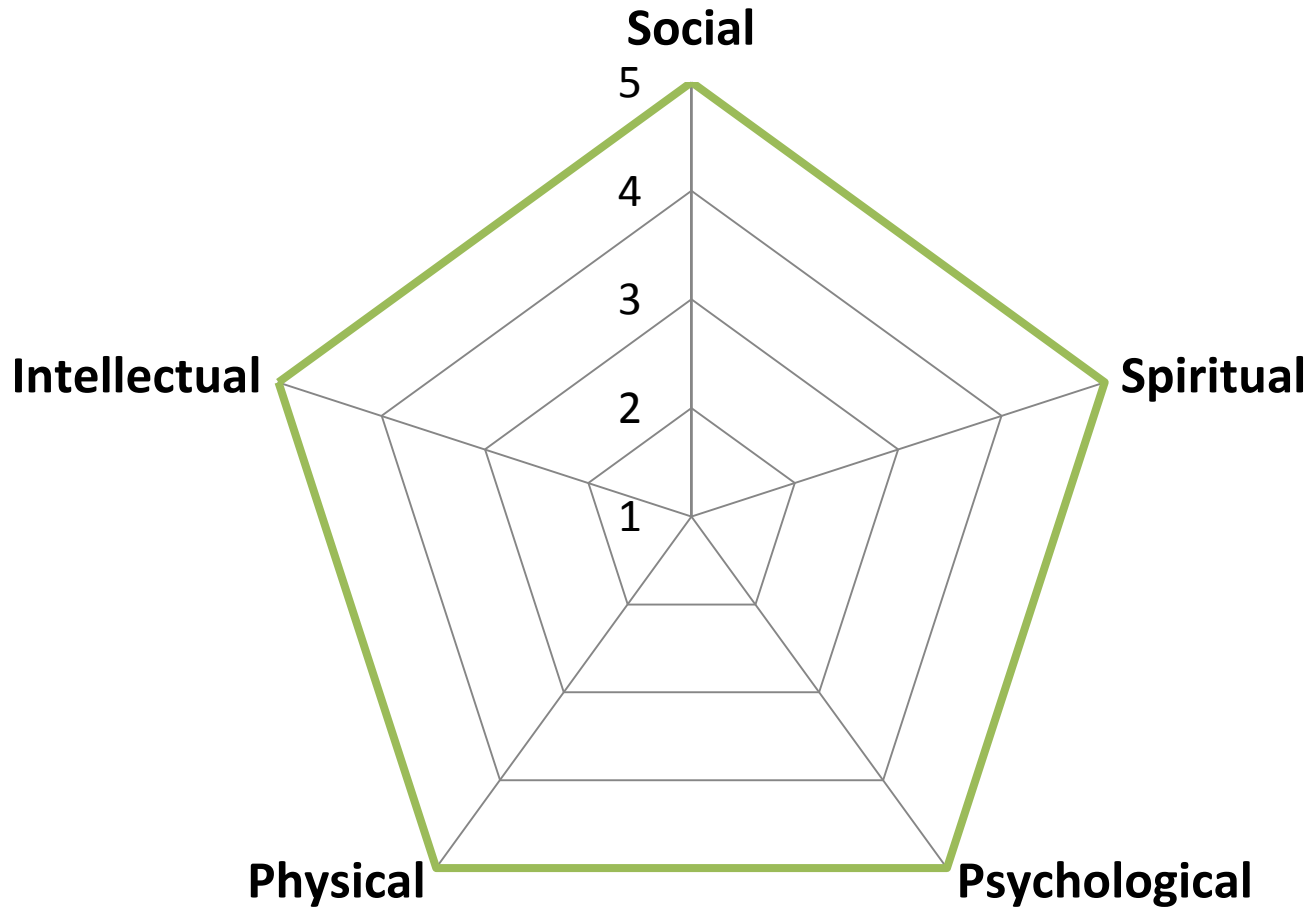
Team 1: what's your assessment of their energy for change?



Team 2: what's your assessment of their energy for change?



Where is your team?



“Leadership is not about making clever decisions and doing bigger deals. It is about helping release the positive energy that exists naturally within people”

Henry Mintzberg

There has never been a time in the history of healthcare when this advice has been more pertinent

We know that ...

- Shared purpose is a common thread in successful change programmes*
- Organisations and change initiatives with strong shared purpose consistently outperform those without it.**

**What makes change successful in the NHS?* Gifford et al 2012 (Roffey Park Institute)

***Management Agenda 2013* Boury et al (Roffey Park Institute)



A 3-word concept

OUR

Who defines the benefit we're after?
Who is going to make it happen and who is it going to affect? All these people need to be involved in designing and delivering change.

+

SHARED

We all have individual values, experiences, beliefs and aspirations. We need to discover where these overlap. What is it we share? We can only find out by talking to each other.

+

PURPOSE

This is the 'WHY' not the 'what' or the 'how' of change. It is where vision, values and goals meet and create energy and commitment.

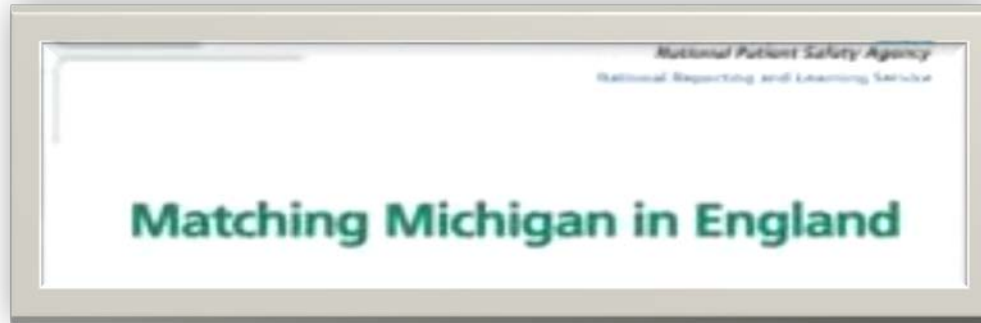


[Shared] purpose goes way deeper than vision and mission; it goes right into your gut and taps some part of your primal self. I believe that if you can bring people with similar primal-purposes together and get them all marching in the same direction, amazing things can be achieved.

Seth Carguilo



The power of shared purpose:



Perhaps the single most important influence on program response by individual units—either in promoting or resisting change—was the extent of consensus and coalition among the senior medical and nursing staff on individual Intensive Care Units....

[Consultant says] 'I think it's been successful because it's a unifying program, it's one of the few things that we've done that hasn't been just a doctor thing, or just a nurse thing, it's involved the doctors and the nurses together.'

<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3704826/>

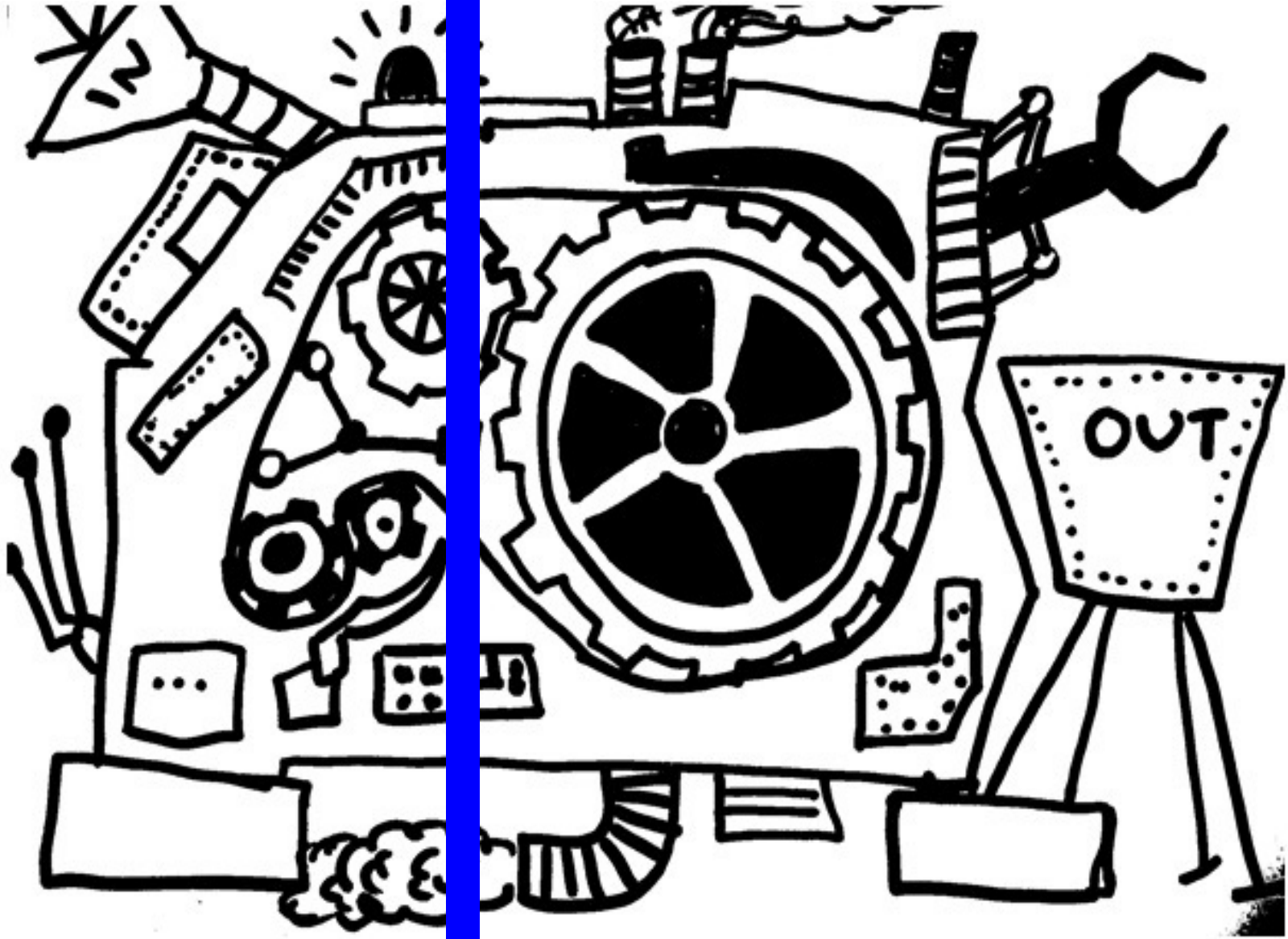


Avoiding “de facto” purpose

- 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
 - 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

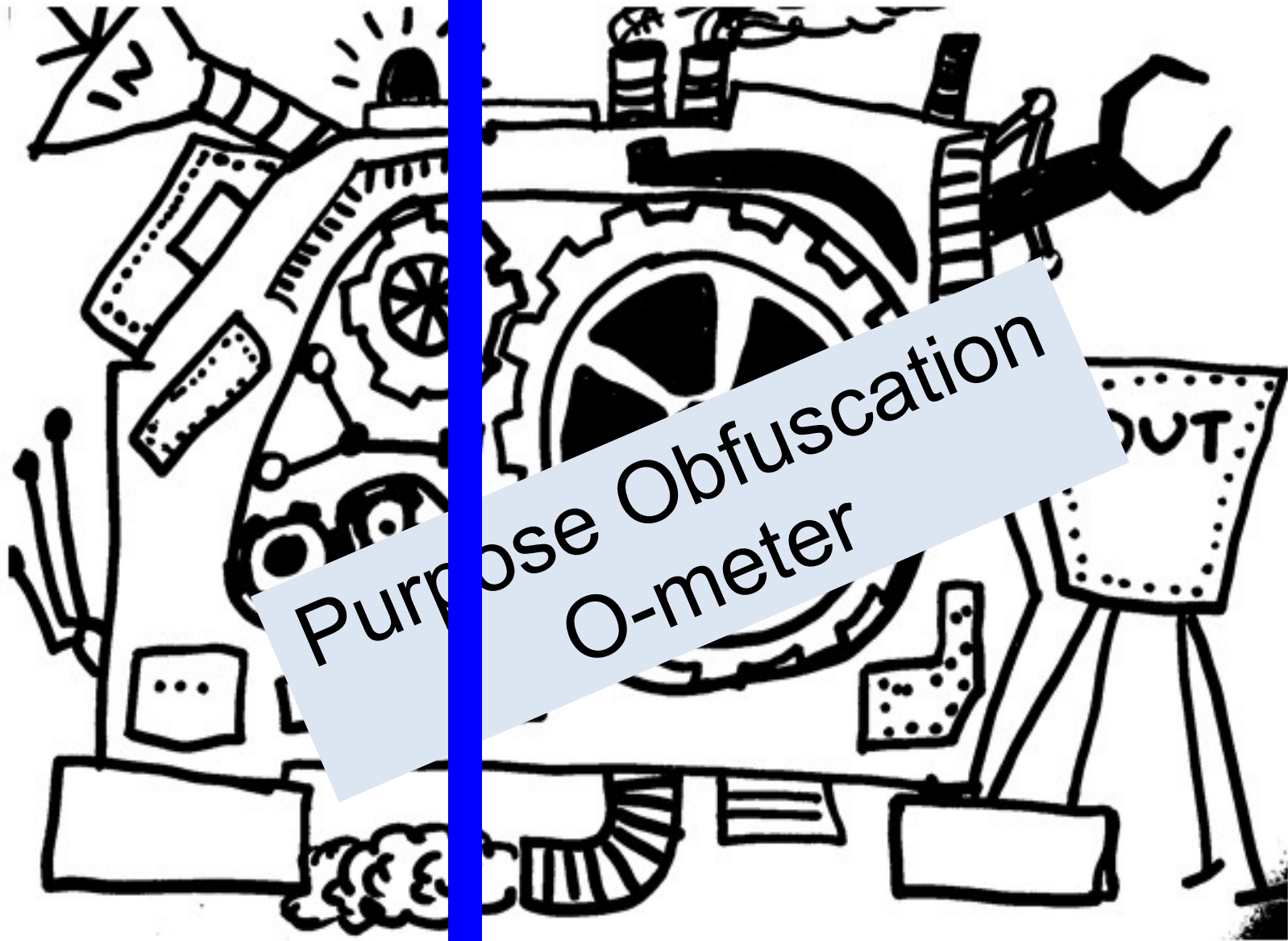
Source: *Delivering Public Services That Work: The Vanguard Method in the Public Sector*

 @HelenBevan #QS2015



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[@SimonJGuilfoyle](#) Police Inspector and systems thinker



Purpose Obfuscation
O-meter

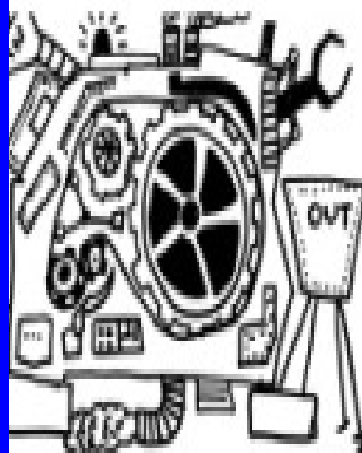


Police

Input

What the machine hears

"Please catch the person who burgled my house"

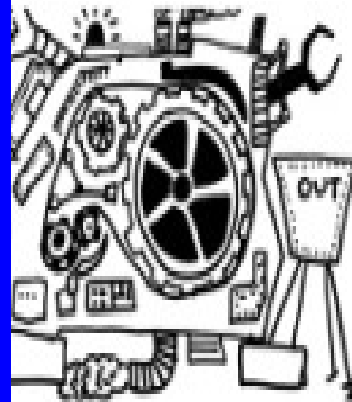


"We can only afford another 4.3 burglaries per day for the rest of the month otherwise we'll miss the reduction target"



Education

Input



What the machine hears

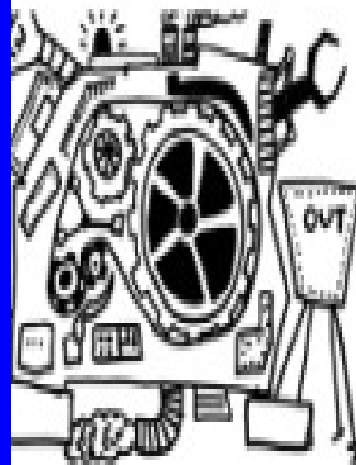
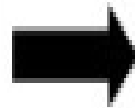
"Schools should be ranked in league tables according to the proportion of students who attain exam results at Grades A - C"



Healthcare

Input

What the machine hears



"A 95th percentile of A&E patients must be admitted, discharged or transferred within four hours of arrival in the department"



...the last era of management was about how much performance we could extract from people

.....the next is all about how much humanity we can inspire

Dov Seidman



Three ways to connect!

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@NHSIQ @TheEdgeNHS

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