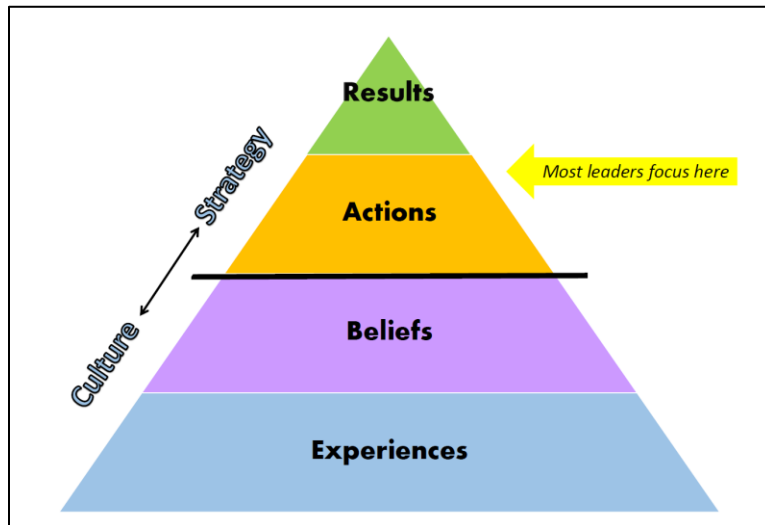


Culture and Change Management

MHLN Lean Lounge

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“Organizations that succeed in sustaining the Toyota method possess a visceral understanding of the essential role “respect for people” plays in keeping this management method alive and sustainable.” - Carolyn Corvi, Former VP – General Manager of Airplane Programs, Boeing Commercial Airplanes, and Boeing Lean management leader. *Foreward from A Leadership Journey in Health Care: Virginia Mason’s Story (2015)*

Respect for People (James P. Womack)

- Ask employees for the problems with the way the work is being done
- Have a dialogue with employees to determine the real problem
- Ask employees what is causing the problem and have a dialogue about root cause
- Ask what should be done about the problem – get multiple solutions
- Ask how everyone (manager and employees) will know when the problem has been solved – how do we measure
- Have employees set out to implement the solution

“**The Banana Principle**” (Luna and Cohen, 2017) – change is accelerated by making things easy.

(Moss-Kanter) As you’re going through change, it’s important to recognize where the team is in relation to the phases of change. What is known about change:

- Individual’s move at their own pace
- Bargaining is not unusual
- Don’t forget to attend to those who are ready to go
- We can vacillate within a short period of time especially between resistance and exploration
- Listening and consistent messaging are key
- Help your team members build skills and confidence
- Celebrate wins along the way

Kotter's Eight Steps For Successful Change: "People change what they do less because they are given analysis that shifts their thinking than because they are shown a truth that influences their feelings"



Step 1: Increase Urgency "Start with Why" (Sinek, S).

- People start telling each other, "Let's go, we need to change things."
- Show others the need for change with a compelling object that they can actually see, touch, and feel.
- Show valid and dramatic evidence from outside the organization that demonstrates change is required.



Step 2: Build the Guiding Team

- Get the right people in place who have the influence, credibility, trust, emotional commitment, and teamwork to guide difficult change.
- Show enthusiasm and commitment to help draw the right people into the group.



Step 3: Get the Vision Right

- The guiding team develops the right vision and strategy for the change effort.
- Try to see – literally – possible futures.
- Make the vision so clear that it can be articulated in one minute or written on one page.
- Have a vision that is moving – such as a commitment to serving people



Step 4: Communicate for Buy-In

- The goal is to get as many people as possible acting to make the vision a reality
- Keep communication simple and heartfelt, not complex and technocratic.
- Speak to anxieties, confusion, anger, and distrust
- Rid communication channels of junk so that important message can go through.



Step 5: Empower Action

- More people feel able to act, and do act, on the vision.
- It is all about removing barriers
- Deal effectively with obstacles that block action, especially disempowering bosses, lack of information, the wrong performance measurement and reward systems, and lack of self-confidence.



Step 6: Create Short-Term Wins

- Produce sufficient short-term wins, sufficiently fast, to energize the change helpers, enlighten the pessimists, defuse the cynics, and build momentum for the effort.
- Without sufficient wins that are visible, timely, unambiguous, and meaningful to others, change efforts inevitably run into serious problems.



Step 7: Don't Let Up

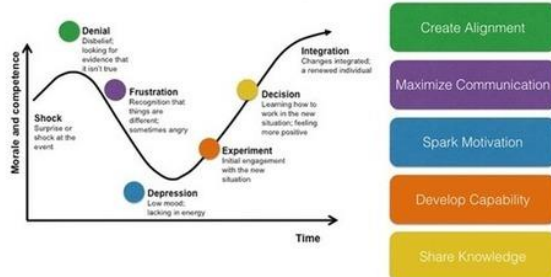
- Continue with wave after wave of change, not stopping until the vision is a reality.
- Aggressively rid yourself of work that wears you down.
- Look constantly for ways to keep urgency up.



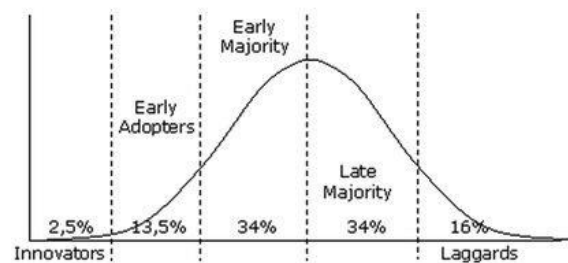
Step 8: Make Change Stick

- Embed the changes in the very culture of the enterprise so that new and winning behavior continues despite the pull tradition, turnover of change leaders, etc.
- Use new employee orientations and promotions to show what the organization cares about.
- Tell vivid stories about the new organization, what it does and why it succeeds.

The Kübler-Ross change curve



Rogers Adoption / Innovation Curve



The Concerns-Based Adoption Model (CBAM)¹ outlines seven stages of concern that implementers are likely to experience:

Stage	Expressions of Typical Concerns
0: Awareness	"I am not concerned about this initiative." "I don't really know what this initiative involves."
1: Informational	"I would like to know more about it." "There is a lot I don't know about this, but I am reading and asking questions."
2: Personal	"How will using it affect me?" "I'm concerned whether I will be able to do this well." "How much control will I have over the way I use this."
3: Management	"I seem to be spending all my time getting materials ready." "I'm concerned that we will need to spend more time in meetings."
4: Consequence	"How is this going to affect my students?" "How can I adapt this to have more impact?"
5: Collaboration	"How can I relate what I'm doing to what others are doing?"
6: Refocusing	"I have some ideas that could work even better than this."

¹Adapted from Hall, G., & Hord, S. (2001), *Implementing Change: Patterns, Principles, and Potholes*, Needham, MA: Allyn and Bacon.



- (Edmondson)
- **APATHY ZONE**– Where employees both feel psychologically unsafe and don't take responsibility, which doesn't create either learning or innovation.
 - **ANXIETY ZONE** – Where team members have a high feeling of accountability, but no safety of trust.
 - **COMFORT ZONE** – Where people like working with one another, but don't feel challenged or take responsibility for their workplace's development.
 - **LEARNING ZONE**– Constant learning and effective collaboration.

Create psychological safety in your own team (Edmondson, 2012)

1. **"We need everybody's brains and voices in this process"**
Mention that there are uncertainties with the project, and look at the work as a mission of *learning*, not a mission of execution.
2. **"I may miss something", "I've made a mistake"**
By admitting this, you acknowledge your own fallibility which creates safety for other's ideas and thoughts, and allows others to do the same. Take a chance and be a role model!
3. **"What do you think?"**
Ask and include your colleagues to participate in solving a problem, and tell people to ask questions and be curious.

Summary

- Demonstrate Respect for People – make it easy, remove burden of work
- Improvement requires change and continuous change requires a change culture
- For successful change, we need buy in and involvement from all team members
- In order for team members to see the need for change, there needs to be a compelling reason
- A change becomes more compelling when there is an emotional connection
- Start with early adopters, demonstrate early wins
- Understand where individuals are in the
- Stay in the Learning Zone – psychological safety and trust are paramount!

An example from our work at North Shore Medical Center

Purpose: Improve patient flow from ED to inpatient floor; Inpatient RN readiness to accept admission

Scope: From Bed assigned and Orders complete to arrival on floor

Goals: Reduce burden of work for IP RN and improve patient flow (see targets below)

- Staff Walking Distance: # of steps traveled by RN in 8 hr shift
- Lead Time: Bed and Orders to Patient Arrived on D8
- Defects: % of RN time outside patient room
- Productivity Gain: Missed Meals and Intershift Overtime
- 5S: Environmental (Utility Room / WOWs / Carts / Tele Boxes) and Handoff Information

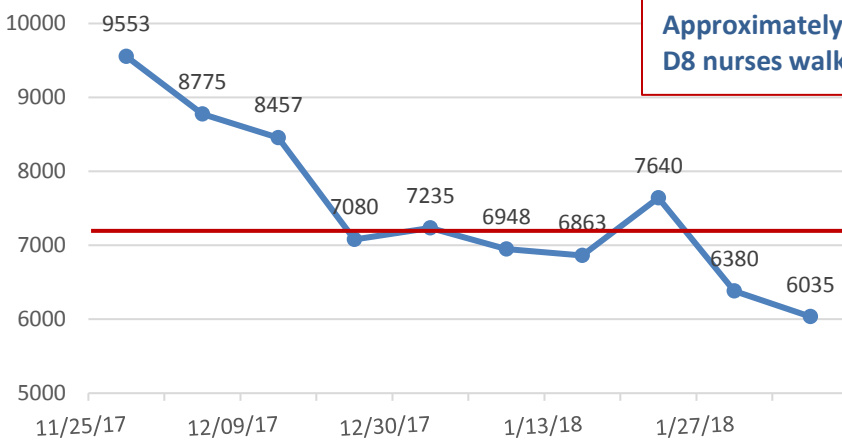
Approach: Week long Rapid Process Improvement Workshop (RPIW) in November 2017; 6 weeks of data collection, analysis, planning and Preparing the People. Harvested over 100 ideas from frontline staff. Rapid PDSA cycles on the gemba over the week. Implementation of new standard work and countermeasures, and re-measurement at 30-, 60-, and 90-days.

Results:

Metric (units of measurement)	Baseline	Target	Day 2	Day 3	Day 4	Final	30 days 12/19/17	60 days 1/16/18	90 days 2/3/18	% Change
Staff Walking Distance • # of steps traveled by RN in 8 hr shift	9553	7164 (↓ 25%)	30 days				7080	6863	6035	↓3518 steps ↓37%
Lead Time • Bed and Orders to Patient Arrived on D8	65 min	25 min	63 min	26 min	53 min	33 min	57 min	82 min	49 min	↓16 min ↓25%
Quality (defects)(%) • % of RN time outside patient room	73%	50%	-----	-----	42%	42%	36%	27%	27%	↓46%
Productivity Gain <i>(avg hrs 4 weeks – nights excluded)</i> • Missed Meals • Intershift Overtime	7.1 66.5	6.4 59.8 (↓10%)	30 days				6.35 65.31	11.18 57.12	6.87 62.4	↓3% ↓6%
5S • Environmental (Utility Room / WOWs / Carts / Tele Boxes) • Handoff Information	Level 1 Level 1	Level 4 Level 4	Level 2 Level 2	Level 2 Level 3	Level 3 Level 3	Level 3 Level 3	Level 2 Level 2	Level 2 Level 3	Level 4 Level 4	↑3 levels ↑3 levels

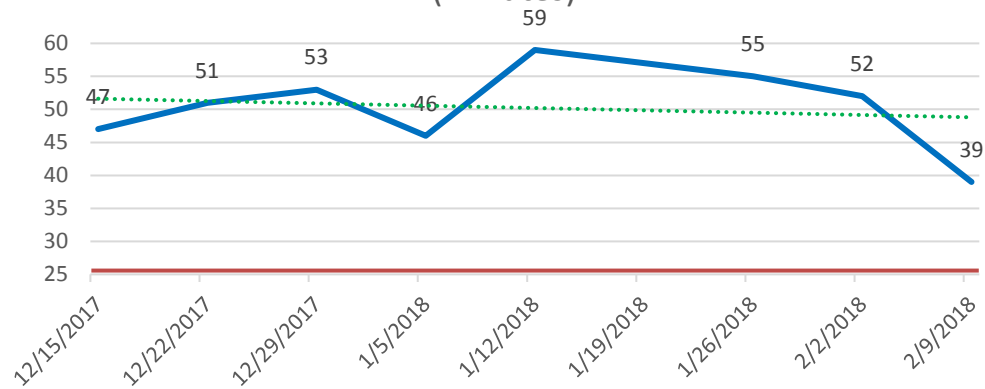
D8 Median Steps Travelled by RN

Target ≤ 7164 Steps



Approximately 2000 steps to a mile.
D8 nurses walking 1.75 miles less/shift

Median Lead Time bed and orders to arrived (minutes)



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