

Western University
Faculty of Health Sciences
School of Health Studies

Health Sciences 4480B
HEALTH SYSTEM CHANGE MANAGEMENT
Winter 2014

Professor: Marlene J. Le Ber, PhD
Email: marlene.leber@schulich.uwo.ca
Office: Rm 4135, The Western Centre for Public Health & Family Medicine
Office Hours: please email me through OWL Sakai for an appointment

Class Time: Thursdays 6 – 9 pm
Classroom: HSB-35

Prerequisite Checking

Unless you have either the requisites for this course or written special permission from your Dean to enroll in it, you may be removed from this course and it will be deleted from your record. This decision may not be appealed. You will receive no adjustment to your fees in the event that you are dropped from a course for failing to have the necessary prerequisites.

Please refer to the current Western Academic Calendar at <http://www.westerncalendar.uwo.ca/> for a list of prerequisites and/or antirequisites.

Course Information

... you cannot look anywhere in healthcare today without confronting the need for major organizational change. It may be transforming roles and processes to improve patient safety and customer service, reducing health disparities, or increasing access to care. It might be changing the patterns of interactions among basic scientists, clinical researchers, policy makers, industry and the public so that research findings translate more directly into better care and better health. It might be fostering interprofessional health professions education and improving the learning environment for students – the “informal curriculum” that shapes their emerging professional identities. Or it might be restructuring healthcare deliver to provide better service at lower costs. (Suchman, Sluyter & Williamson, 2011, p. 2).

While calls for health system reform abound globally, **how** to lead organizational change or transform health systems is rarely addressed. In response, health organizations and governments spend staggering sums of monies on change consulting and efforts. Still, the majority of such efforts do not succeed.

In this course, we build on classic change management theories, positive psychology, complexity science and social movement theories to analyze current, hot health system issues and to develop actionable change processes. Individual, organizational and societal elements required for successful and lasting change are emphasized through use of the case method of learning, experiential exercises and lectures.

Course Objectives:

The main objective of this course is to develop your ability to be an effective agent for change. By engaging with your colleagues and professor after studying and thinking deeply about the material presented in this course, you will be able to:

1. Explain the nature of change and the reasons why change efforts often fail at the individual, organizational and system levels.
2. Understand and appreciate change at an individual level (resistance to change, persuasion, identity, and strategic foresight).
3. Appraise the critical elements needed to lead successful and lasting organizational change, such as employee engagement, organizational design, and organizational culture.
4. Compare and contrast classic theories of change, complexity, positive psychology and social movements and apply the concepts to real life situations.
5. Create a plan for a personal change challenge related to healthy or sustainable living and analyze the implementation of the plan.
6. Design an organizational or system change effort together with a team of classmates.

Course Materials

Required course readings: Information on weekly readings for this course will be available on OWL Sakai and updated regularly. Students are responsible for acquiring and reading required reading each week prior to the week's session. Readings will be available electronically through OWL Sakai, the Internet or library internet holdings.

Required Electronic Coursepack: Cases used in class discussions must be purchased through Ivey Publishing.

Recommended: (we will discuss on the first day):

Parkin, P. 2009. ***Managing change in healthcare using action research***. Los Angeles: Sage.

Suchman, A. L., Sluyter, D. J., & Williamson, P. R. (Eds.) 2011. ***Leading change in healthcare: Transforming organizations using complexity, positive psychology and relationship-centred care***. London, UK: Radcliffe Publishing.

Westley, F., Zimmerman, B., & Patton, M. Q. 2006. ***Getting to maybe: How the world is changed***. Toronto: Random House Canada.

Evaluation

Components of Course Evaluation	Weight	Due Date
1. Participation in Learning	20%	Each session
2. Personal Change Challenge Project	35%	February 13, 5pm
3. Group Change Project	45%	April 3, 5pm: report April 10, 5pm: presentation

1. PARTICIPATION IN LEARNING (20%)

The participation mark reflects attendance, evidence of preparation and participation in weekly readings and/or assignments. The expectation is that you contribute not only for your own learning but to the learning of your classmates. We will also be using the discussion board on OWL Sakai as a way to augment our discussions held during class but not as a substitution. If you have difficulties with participating in class, please make an appointment with me to discuss – sooner rather than later.

The class contribution portion of your grade will be determined by your contribution to the learning of the class. The evaluation will be based not only on how frequently you speak in class, but more importantly, by the quality of what you say and how well you listen and respond to others.

High-quality contributions include: starting a class discussion with sound analysis, synthesizing class discussions, summarizing and moving class discussions ahead, giving constructive criticisms or building on others' ideas, substantiating one's views persuasively and logically, responding to others' critiques with reasoned rebuttal, graceful acceptance of new ideas, presenting well thought-out action plans, volunteering for special role-playing or presentations, recalling and sharing relevant experiences, being respectful and non-judgmental towards your classmates' opinions. Respect for the course and each other are essential.

Unsatisfactory contributions include: being absent from class without excuse, being unprepared for class, offering poorly thought-out analysis or action plans, personally criticizing classmates, being close-minded, disrespectful, or otherwise disruptive. These behaviours will lead to negative contribution grades.

Attendance at all sessions in this course is expected. Circumstances may arise which make it impossible for you to attend, e.g. illness. As a professional courtesy you are expected to advise me in advance of your absence and provide an explanation via OWL Sakai. Under University regulations, a professor can determine at what point absenteeism has become excessive and thus can prevent you writing the final exam (www.uwo.ca/univsec/handbook/exam/attend.pdf). While there is no final exam in this course, if you miss three classes, you and I will meet to discuss successful completion of the course.

2. PERSONAL CHANGE CHALLENGE PROJECT (35%)

For the Personal Change Challenge, you will select one behaviour or habit that you will try to change and then write a report reflecting your experience. The duration of the project will be 30 days, which some regard as the time needed to establish a new routine or break an old habit. We will start the challenge on January 11 morning and end February 10 morning. You may either pick a habit that you plan to break or start a new routine.

Select a habit that is related to healthy or sustainable living. We typically all have habits that are not considered healthy or sustainable. Healthy living refers to all aspects of daily activities that positively impact our biological, psychological, social and spiritual health. To find a suitable healthy habit to change, look at your exercise routines, food and drink intake, interactions with others and spiritual practices. Sustainable living refers to a reduction in our consumption (e.g. food, energy, water), and a reduction in what we waste (i.e. “use less; waste less”). To find a suitable sustainability habit to change, look at your transportation, food, energy consumption, and waste. Examples are: instead of taking your car to school, walk, bike or use public transport; no more plastic beverage bottles; eating organic, locally grown/sourced food; not buying anything except food to eat (no empty calories); etc. While I will maintain strict confidentiality about your choice and experience, we will debrief your experience as a class and it may be difficult (but not impossible) to speak about your experience without disclosing your chosen personal change challenge.

The challenge lasts only for 30 days, so challenge yourself! Pick your worst habit that is really worth changing. Feel free to check in with me before you commit to your particular change assignment. Use materials and insights about change management from the course to make your personal change project successful and to gain a deeper understanding about yourself and the challenge of changing a habit. You are welcome to use knowledge gained through other courses to aid reflection.

Please write up your experience, in an 8 to 10 page long report (11pt, 1” margins all around, 1.5 line spacing). Please include the following sections:

1. Description of the habit/behaviour: What habit did you choose and why? How did you develop this habit? For how long have you had it? Have you tried to make this change before? Include a description of what your initial expectations are about how challenging this assignment will be for you. Include what you know about your personal capacity for change.

2. Your change plan: What is your plan for achieving successful and lasting change? For example, will you make a public statement about it (e.g. on social media)? Will you enlist a friend and/or family member to support you? Will you develop an incentive plan for yourself? How will you monitor your progress? How will you deal with challenging times?

3. Description of experience: Maintain a diary for the duration of the challenge to record important details and insights. Did you change your behaviour as planned? Fully or partially? Was the change effort as easy/difficult as you had anticipated? What were some of the main challenges? Were you surprised

about yourself or others around you during this project? What did you feel over the duration of the project? Was there a pattern to your behaviour and to your emotions?

4. **Reflection:** What did you learn from the individual change experience in terms of your own capacity for change as well as the challenge of changing in general? Include a description of your feelings, insights, expectations confirmed, expectations disconfirmed, any surprises— whether these are positive or negative. Try to make links with the material covered in the course, your previous experiences with change, as well to other courses you may have taken. Try to integrate your learning and generate insights from these varied inputs. This section tends to contain the most valuable and unique insights of the reports. More depth means higher quality.

5. **Recommendations:** What, if anything, will you do differently the next time that you have to or want to change something about your personal or professional life? How might you help others to change successfully, for example, those in your charge in your future role as a change leader.

The report is due 5pm on February 13, 2013 via OWL Sakai. More information, including a marking scheme, on this assignment will be provided in class. Late assignments will incur a deduction of 15% per day (including weekends) and will not be accepted after three days post deadline unless medical documentation is submitted to your Dean as per the university guidelines.

2. GROUP LIVE CHANGE CASE PROJECT (45%)

For the “Live Change Case” group project, you will work in groups that I will assign randomly on the first day of class. Your group will choose a health related organizational or societal issue or initiative as the focus of your design for change. This decision should be made and communicated to me by **February 6, 5pm**.

There are multiple ways in which to choose the focus of your group project, for example:

- Personal (you or a family member) problematic interactions with the healthcare system;
- Awareness of and access to a leader of an organization that has an issue that s/he is currently working on
- An issue being addressed by one of the teams that have received a grant from Grand Challenges Canada (<http://www.grandchallenges.ca/>)
- One of the identified community organizations that are interested in having students to work on developing a change management action plan for an organizational change anticipated

As a team, you will be applying the materials and insights from this course to develop a realistic and creative plan that will help the health organization or society to achieve successful and lasting change. There are two associated deliverables: 1) a 8-10 page written report that explains your suggested plan in more detail (**Due April 3, 5pm** via OWL Sakai); and 2) a 15-minute PowerPoint presentation to the class (to be presented during class on **April 10 and submitted by 5pm prior to class**). In your presentation you will make a convincing and professional case for your proposed change implementation plan. Make sure that your presentation is informative, innovative and professional. Each member of the group must have an active role in either the preparation or delivery of the presentation. There will be a peer evaluation component worth 10% of the group grade.

The content of both your report and your presentation will include the following elements:

- 1) A description of the central health-related individual, organizational or systemic issue that is central to the change initiative and why it is important.
- 2) What does the preferred future look like?
- 3) How can this future become reality? What needs to happen to make this future a reality?
- 4) What change management processes can facilitate reaching this future in a sustainable way?
- 5) What theories of change support your choice of change management processes?
- 6) How can the effectiveness of the change processes be measured?

You are welcome to include materials and plans that others have developed BUT you need to justify why these plans are aligned with specific change theories or why you would recommend different plans.

Evaluation of the Written Report:

- 10% Description of Issue
- 5% Preferred Future
- 10% What needs to happen
- 40% Change Management Processes
- 25% Supporting Theories
- 5% Measures of Effectiveness
- 5% Grammar, Formatting, References

Evaluation of the Presentation:

- 50% Content (similar weightings to above with one change)
 - Informative
 - Description of issue
 - Preferred future
 - What needs to happen
 - Change management processes
 - Supporting theories
 - Measures of effectiveness
 - Personal learnings
- 50% Presentation (convincing, innovative, professional):
 - Appropriate to the target audience
 - Style that engages audience (visuals, involvement, opportunity for questions and how questions are answered)

More information on this assignment will be provided in class. Late assignments will incur a deduction of 15% per day (including weekends) and will not be accepted after three days post deadline unless medical documentation is submitted to your Dean as per the university guidelines.

Session Schedule

This is a draft schedule of the material we will cover in class; it is subject to change throughout the semester.

DATE	SESSION		TOPIC(S)
January 9	1	First Class	Introduction; individual assignment; formation of groups
January 16	2		Innovation Issues that trigger change
January 23	3		Leading Self
January 30	4		Resistance to Change Classic Theories
February 6	5	Selection of group project due	Positive Psychology Appreciative Inquiry
February 13	6	Assignment #1 due	Debrief of Personal Change Challenge Engaging Others
February 20		READING WEEK	
February 27	7		Organizational Structure and Culture
March 6	8		Organizational Learning and Renewal
March 13	9		Complexity Perspective of Organizations
March 20	10		Health Systems Transformation
March 27	11		Social Movements in Health
April 3	12	Assignment #2a due	Global Changes in Health
April 10	13	Assignment #2b due Last class	Group Presentations

Statement on Use of Electronic Devices

Laptop computers may be used to take notes during class and on occasion for other professor-directed uses. However, use of your laptop, tablet, cell phone, etc. during class for personal activities such as email, writing letters, surfing the Web, playing games, texting, talking, etc., is prohibited as it is distracting, counterproductive, and violates the norms of active participative learning. Students may be asked to leave class if this prohibition is repeatedly disregarded. Please turn all electronic devices (that are not used for class purposes) off when entering class.

Student Code of Conduct

The purpose of the Code of Student Conduct is to define the general standard of conduct expected of students registered at The University of Western Ontario, provide examples of behaviour that constitutes a breach of this standard of conduct, provide examples of sanctions that may be imposed, and set out the disciplinary procedures that the University will follow. For more information, visit <http://www.uwo.ca/univsec/board/code.pdf>.

English Proficiency for the Assignment of Grades

Visit the website: <http://www.uwo.ca/univsec/handbook/exam/english.pdf>.

Accommodation for Medical Illness or Non-Medical Absences

http://www.uwo.ca/univsec/handbook/appeals/accommodation_medical.pdf

The University recognizes that a student's ability to meet his/her academic responsibilities may, on occasion, be impaired by medical illness. Illness may be acute (short term), or it may be chronic (long term), or chronic with acute episodes. The University further recognizes that medical situations are deeply personal and respects the need for privacy and confidentiality in these matters. However, in order to ensure fairness and consistency for all students, academic accommodation for work representing 10% or more of the student's overall grade in the course shall be granted only in those cases where there is documentation indicating that the student was seriously affected by illness and could not reasonably be expected to meet his/her academic responsibilities.

A Western University Student Medical Certificate (SMC) is required where a student is seeking academic accommodation. This documentation should be obtained at the time of the initial consultation with the physician or walk-in clinic. An SMC can be downloaded under the Medical Documentation heading of the following website: <https://studentservices.uwo.ca/secure/index.cfm>.

Documentation is required for non-medical absences where the course work missed is more than 10% of the overall grade. Students may contact their Faculty Academic Counselling Office for what documentation is needed.

Whenever possible, students who require academic accommodation should provide notification and documentation in advance of due dates, examinations, etc. Students must follow up with their professors and their Academic Counselling office in a timely manner. Documentation for any request for accommodation shall be submitted, as soon as possible, to the appropriate Academic Counselling Office of the student's Faculty of registration. For BHSc students, you may go to the School of Health Studies Office in HSB room 222.

Scholastic Offences

Scholastic offences are taken seriously and students are directed to read the appropriate policy, specifically, the definition of what constitutes a Scholastic Offence, at the following website: http://www.uwo.ca/univsec/handbook/appeals/scholastic_discipline_undergrad.pdf

Additionally,

1. All required papers may be subject to submission for textual similarity review to the commercial plagiarism detection software under license to the University for the detection of plagiarism. All papers submitted for such checking will be included as source documents in the reference database for the purpose of detecting plagiarism of papers subsequently submitted to the system. Use of the service is subject to the licensing agreement, currently between The University of Western Ontario and Turnitin.com (<http://www.turnitin.com>).
2. Computer-marked multiple-choice tests and/or exams may be subject to submission for similarity review by software that will check for unusual coincidences in answer patterns that may indicate cheating.

Support Services

There are various support services around campus and these include, but are not limited to:

1. Student Development Centre -- <http://www.sdc.uwo.ca/ssd/>
2. Student Health -- <http://www.shs.uwo.ca/student/studenthealthservices.html>
3. Registrar's Office -- <http://www.registrar.uwo.ca/>
4. Ombuds Office -- <http://www.uwo.ca/ombuds/>

Health Sciences 4091B
HEALTH SYSTEM CHANGE MANAGEMENT

Session 1

January 9, 2014

Topic: Introduction to Health Systems Change Management

Learning Objectives:

- Describe the course objectives and expectations for the term
- Identify innovative elements in the cases presented
- Apply models presented to own volunteer or work experiences

Class Activities: Presentations:

- **Yoghurt Mamas:** A Case Study of Probiotic Yoghurt Kitchens in Mwanza, Tanzania (Maimuna Kanyamala)
- **Save the Mothers:** Training Multidisciplinary Leaders for Social Transformation in Maternal and Child Health: The “Save the Mothers” Approach (Dr Jean Chamberlain Froese)

Pre-Class

Syllabus posted on OWL Sakai

Readings:

Post-Class

TEDx Johannesburg 2010 - Francois Bonnici

Reflection:

<http://www.youtube.com/watch?v=LxJF0nGeW88>

Session 2

January 16, 2013

Topic: Innovation, Triggers for Change

Learning Objectives:

- Identify triggers for change in health care
- Identify underlying values as triggers
- Explain different types of innovation (scientific/technical, business, social)
- Distinguish between innovation and change
- Analyze own learning style

Class Activities: Presentations and Class Discussion:

Kolb Learning Style Inventory – individual completion of inventory
Spatial Mapping of Class by Learning Styles

Pre-Class

Brown, T., & Wyatt, J. 2010. Design thinking for social innovation. *Stanford Social Innovation Review*, Winter: 30-35.

Readings:

Christensen, C. M., Baumann, H., Ruggles, R., & Sadtler, T. M. 2006. Disruptive innovation for social change. *Harvard Business Review*, December: 94-101.

Grand Challenges Canada/Grand Défis Canada. 2010. Integrated innovation. Grand Challenges Canada, September, 18 pages.

http://www.grandchallenges.ca/wordpress/wp-content/uploads/integratedinnovation_EN.pdf

Hwang, J., & Christensen, C. M. 2008. Disruptive innovation in health care delivery: A framework for business-model innovation. *Health Affairs*, 27(5): 1329-1335.

Kolb Learning Styles <http://learningfromexperience.com/>

Phills, J. A., Deiglmeier, K., & Miller, D. T. 2008. Rediscovering social innovation. *Stanford Social Innovation Review*, Fall: 34-43.

Post-Class

Grand Challenges Canada <http://www.grandchallenges.ca/>

Reflection:

Mauffette-Leenders, L. A., Erskine, J. A., & Leenders, M. K. 2007. Learning with cases (4th ed.). London: Richard Ivey School of Business. Chapter 2 (pp. 18-28).

Health Sciences 4091B
HEALTH SYSTEM CHANGE MANAGEMENT

Session 3

January 23, 2013

Topic:

Leading Self

Learning

Objectives:

- Evaluate self, using LEAD Leading Self framework
- Self-awareness (emotional intelligence)
- Self-regulation (managing self)
- Developing self (character strengths and virtues)
- Illustrate predictably irrational tendencies
- Compare and contrast loss aversion and gain acquisition using the rational versus emotional approaches to behaviour

Class Activity:

Experiential: Loss Aversion Coin Toss class experiment

Presentation:

Pre-Class

Readings:

Canadian College of Health Leaders:

CCHL / CCLS - LEADS in a Caring Environment Framework

http://www.cchl-ccls.ca/default_conferences.asp?active_page_id=6492

LEADS Key Points

http://www.cchl-ccls.ca/assets/LEADS/LEADS_KeyPoints_EN.pdf

LEADS Lead Self

http://www.cchl-ccls.ca/assets/LEADS/LEADS_LeadSelf_ExecutiveSummary_EN.pdf

Crossan, M., & Mazutis, D. Transcendent leadership. 2008. *Business Horizons* 51: 131–139.

Sull, D. N., & Houlder, D. 2005. Do your commitments match your convictions? *Harvard Business Review*, January: 82-91.

Post-Class

Reflection:

Character Strength Inventory

<https://www.viame.org/survey/Account/Register>

RSA Animate - 21st Century Enlightenment

<http://www.youtube.com/watch?v=AC7ANGMy0yo&feature=channel>

Session 4

January 30, 2013

Topic:

Resistance to Change

Learning

Objectives:

- Illustrate the need for alignment between the organization's strategy (why is MOE-MAR important?), structure (who are the stakeholders in the change and who has the most to lose/gain?), and systems
- Identify precursor requirements for E-health system adoption
- Describe the use of champions and expert users in the adoption of new technology
- Assess organizational readiness for change

Class Activity:

Case study: *University Health Network: The MOE/MAR Initiative*

Small group discussion and facilitated class discussion

Stakeholder role play

Case

Questions:

1. Evaluate the organizational context of the MOE-MAR initiative in terms of UHN's strategy, organization structure and people and current information systems. What particular issues should we pay attention to in hospital environments which make it distinct from other kinds of organizations?

Health Sciences 4091B
HEALTH SYSTEM CHANGE MANAGEMENT

2. Depict the way in which the MOE-MAR system is intended to work? Why do you think the pilot project failed?
3. What are the change management and information systems implications of your analysis for the renewed efforts to launch the MOE-MAR system? Develop a detailed implementation plan for the system's launch and justify your actions.

Pre-Class Readings: Canada Health Infoway/Pan-Canadian Change Management Network. 2011. *A Framework and Toolkit for Managing eHealth Change: People and Processes*. Canada Health Infoway, May: 1-122.

Kotter, J. P. 2007. Leading change: Why transformation efforts fail. *Harvard Business Review*, January: 96-103.

Session 5 February 6, 2013

Topic: Positive Psychology; Appreciative Inquiry

- Learning Objectives:**
- Describe the role of emotional intelligence training for leadership
 - Decipher when and how to use organizational development specialists during organizational change
 - Identify staff and systems supports needed for large scale organizational change
 - Design readiness work for this change initiative

Class Activity: Case study: *Leading Change at SJHC and LHSC: Burr under the Saddle or a Grain of Sand in the Oyster*

Small group discussion and facilitated class discussion

Guests:

Ellen Rosen is the former Vice President, Maternal and Child Care, London Health Sciences Centre and was responsible for the planning and implementation of the transfer of neonatal care from St. Joseph's Health Care to London Health Sciences Centre in 2009.

Val Rousom is the Director of Children's Care at London Health Sciences. Val has been engaged in a process to ensure family centered care in the NICU for the past 10 years (at St. Joseph's Health Care), based on a philosophy that was lived and promoted by Dr. Graham Chance in the 80's. Chance believed then in the philosophy of parents as partners long before the term family centered care was familiar. Val has worked as a Neonatal Nurse, a Charge Nurse and a Manager. She is a daughter, sister, friend, wife, mother, grandmother and a nurse who has navigated the health care system in all of these roles. Because of these experiences, she established a peer to peer support group for the NICU and a Family Centered and Developmental Supportive Council for the NICU.

- Case Questions:**
1. What are the most critical issues in leading the consolidation?
 2. How would you proceed to deal with the issues that you have identified?
 3. What challenges do you envision in the immediate and long(er) term future?
 4. What pressures do these challenges put on the leadership team at the two hospitals?

Pre-Class Readings: Suchman, A. L., Sluyter, D. J., & Williamson, P. R. (Eds.). 2011. *Leading Change in Healthcare*. London: Radcliffe Publishing. Chapters 3 & 5.

Health Sciences 4091B
HEALTH SYSTEM CHANGE MANAGEMENT

Session 6	<i>February 13, 2013</i>
Topic:	Engaging Others
Learning Objectives:	<ul style="list-style-type: none">· Illustrate when the positive deviance approach works and when it does not work· Outline ways to engage individuals and groups in internal group change· Design the scaling of a positive deviance approach
Class Activity:	Case study: <i>Germ Warfare: Combating Health Care-Associated Infections through Communications</i> Small group discussion and facilitated class discussion
Case Questions:	<ol style="list-style-type: none">1. How do infectious pathogens spread in healthcare environments?2. How can Health Care-Associated Infections be prevented and controlled?3. Why don't healthcare workers wash their hands?4. When does the positive deviance approach work and when does it not work?5. What challenges will Dr. Michael Gardam face in scaling this approach? What are your recommendations regarding Dr. Gardam's next steps?
Pre-Class Readings:	Canadian College of Health Leaders: LEADS Engage http://www.cchl-ccls.ca/assets/LEADS/LEADS_EngageOthers_ExecutiveSummary_EN.pdf Bielaszka-DuVernay, C. 2008. Take a strategic approach to persuasion. <i>Harvard Management Update</i> , June: 3-5. Gardam, M., Reason, P., & Rykert, L. 2010. Healthcare culture and the challenge of preventing healthcare associated infections. <i>Healthcare Quarterly</i> , 13(SI-September): 116-120. McKee, R. Storytelling that moves people. 2003. <i>Harvard Business Review</i> , June: 51-55. The Positive Deviance Initiative, Tufts University. 2010. <i>Basic Field Guide to the Positive Deviance Approach</i> . Tufts University. http://www.positivedeviance.org/pdf/Field%20Guide/FINALguide10072010.pdf
Session 7	<i>February 27, 2013</i>
Topic:	Organizational Structure and Culture
Learning Objectives:	<ul style="list-style-type: none">· Analyze the interdependencies between a leader and a follower· Assess the culture: norms, dominant values, rules, decision-making emotional climate of the organization in the case· Trace the development of "the curious inability to decide" in the case organization
Class Activity:	Experiential: <i>Trust Walk</i> Case study: <i>Paul Levy: Taking Charge of the Beth Israel Deaconess Medical Center</i> Small group discussion and facilitated class discussion
Case Questions:	<ol style="list-style-type: none">1. How would you describe the situation Levy inherited at the BIDMC? What challenges did he face? Why did previous turnaround efforts fail?2. How did Levy get started in his new job? In particular, what were his objectives and what did he accomplish:<ol style="list-style-type: none">a. Prior to his first day of work?

Health Sciences 4091B
HEALTH SYSTEM CHANGE MANAGEMENT

- b. On his first day?
- c. During his first week?
3. What (if anything) was distinctive about the way Levy went about formulating, announcing, and implementing the recovery plan? How did he overcome resistance? What is your evaluation of his approach to staffing the task forces?
4. In describing his leadership style, Levy speaks of the “CEO as teacher.” How has he defined that role? Why has he chosen to focus on it? What skills does it require? In what settings is it likely to be useful? Will Levy have to assume a new role (or roles) in the months ahead?
5. How did Levy tackle the problem of the BIDMC’s “curious inability to decide?”

Pre-Class Readings:

Garvin, D. A., & Roberto, M. A. 2005. Change through persuasion. *Harvard Business Review*, February: 104-112.

Katzenback, J. R., Steffen, I., & Kronley, C. 2012. Cultural change that sticks: Start with what’s already working. *Harvard Business Review*, July-August: 110-117.

Levy, P. F. 2001. When good teams go wrong. *Harvard Business Review*, March: 51-59.

Session 8

March 6, 2013

Topic: Organizational Learning and Renewal

Learning Objectives:

- Design an action plan for Paul Levy using Kotter’s eight steps to transforming the organization

Class Activity:

Case study: *Paul Levy: Taking Charge of the Beth Israel Deaconess Medical Center (the DVD)*

Small group discussion and facilitated class discussion

Case Questions:

1. What were Levy’s priorities in March, April, May, and June? How (if at all) did they differ from his priorities during his first two months?
2. What is your evaluation of Levy’s approach to:
 - a. The board?
 - b. The COO?
 - c. The chiefs?

Pre-Class Readings:

Canadian College of Health Leaders:

LEADS Achieve Results

<http://www.cchl->

[ccls.ca/assets/LEADS/LEADS_AchieveResults_ExecutiveSummary_EN.pdf](http://www.cchl-ccls.ca/assets/LEADS/LEADS_AchieveResults_ExecutiveSummary_EN.pdf)

Session 10

March 20, 2013

Topic: Complexity Perspective of Organizations

Learning Objectives:

- Identify own mental model that influences what is seen, how situations are analyzed and actions taken
- Discriminate among simple, complicated and complex problems
- Describe the characteristics of complex systems
- Compare and contrast the traditional “scientific” approach and the alternate complexity approach to intractable issues

Health Sciences 4091B
HEALTH SYSTEM CHANGE MANAGEMENT

Class Activity: **Presentation
Videos**

Pre-Class Canadian College of Health Leaders:

Readings:

LEADS Develop Coalitions

http://www.cchl-ccls.ca/assets/LEADS/LEADS_DevelopCoalitions_ExecutiveSummary_EN.pdf

LEADS Systems Transformation

http://www.cchl-ccls.ca/assets/LEADS/LEADS_SystemsTrans_ExecutiveSummary_EN.pdf

Suchman, A. L., Sluyter, D. J., & Williamson, P. R. (Eds.). 2011. **Leading Change in Healthcare**. London: Radcliffe Publishing. Chapter 2.

Westley, F., Zimmerman, B., & Patton, M. Q. 2006 **Getting to Maybe: How the World is Changed**. Random House Canada. Chapters 1 & 2.

Session 9 *March 13, 2013*

Topic: **Team Projects**

Class Activity: **Small Group Work on projects**

Session 11 *March 27, 2013*

Topic: **Social Movements**

Learning

· Analyse the case from a social movement theoretical perspective

Objectives:

· Design an implementation plan for the Green Cart adoption

· Illustrate the social-cultural dimensions embedded in the neighbourhoods

Class Activity: **Case study: *A City's Desert: No Apples in the Big Apple? (A) & (B)***

Small group discussion and facilitated class discussion

Guest: Dr. Danielle Battram

http://www.brescia.uwo.ca/about/our_people/our_faculty/food_nutrition/danielle_battram.html Dr. Battram will share with us her action research project, described on her website as:

"My work with children includes a culturally sensitive obesity prevention program in high-risk ethnocultural groups and an after-school program focusing on increasing physical activity and decreasing sedentary behaviours in high-risk children."

Case Questions:

1. What measures should be taken at the outset to improve adoption and long-term success?
2. How could Sabrina Baronberg and her team secure buy-in from neighbourhood residents?
3. How could traditional food cart vendors be encouraged to try the new Green Cart model?
4. What was the best way to go about raising awareness of Green Carts in select neighbourhoods?
5. How could the integrity of the city-certified Green Carts be maintained?
6. What institutional and social factors should Baronberg's team consider as it moved forward with Green Carts?
7. How should it address potential challenges?

Health Sciences 4091B
HEALTH SYSTEM CHANGE MANAGEMENT

Pre-Class Readings: Stephan, U., Patterson, M., & Kelly, C. 2013. Business-driven social change: A Systematic Review of the Evidence (Executive Summary). Network for Sustainable Business. <http://nbs.net/wp-content/uploads/NBS-Executive-Report-Social-Change.pdf>

Session 12

April 3, 2013

Topic:

Global Changes in Health

Learning Objectives:

- Describe through examples how the mission “the prevention of needless blindness” drives all organizational decisions and actions
- Critically analyse how paying customers fulfil the mission of Aravind
- Critically analyse how free customers contribute to an economically sustainable business model for Aravind
- Choose one process within the Aravind system and explain the impact of a change in this process on the other areas

Class Activity:

Case study: Aravind Eye Care System: Providing Total Eye Care to the Rural Population

Small group discussion and facilitated class discussion

Case Questions:

1. How does the Aravind Eye Care System work (think of people, processes, profits/financials)? Is this effective? Are there areas that could be improved?
2. What are the main challenges facing Aravind in the delivery of services to rural populations?
3. Of all the types of change approaches we have discussed to date, what types of approaches could address these challenges and have the desired impact?

Pre-Class Readings:

Kania, J., & Kramer, M. 2011. Collective impact. *Stanford Social Innovation Review*, Winter: 36-41.

May, M. 2012. Better health care, higher productivity. *Stanford Social Innovation Review*, Spring: 59-60.

Sandhu, J. S. Opportunities in mobile health. *Stanford Social Innovation Review*, 14-17.

Session 13

April 10, 2013

Topic:

Group Projects

Class Activity:

Group Presentations