Change Management

Integrating new processes, strategy, and culture into the practice.

Key Changes

- **Develop** a change management strategy for the organization.

- **Ensure** alignment to organization vision and strategies before changes are tested.

- **Scale** the preparation for the change to the size and significance of the transformation.

- **Include** multiple tests of change for scaling up and spreading innovations.

- **Ensure** leadership accountability and responsibility for implementing successful change identified by teams.

- Clearly **communicate** shared purpose and urgency for change.

- **Develop** communication and education strategies for patients and families.

- **Minimize** variation in the new processes.

- **Build** new human resources policies, including promotion strategies and resource allocation.

- Leaders **sustain** change by monitoring measures and feedback as change becomes part of the organizational culture.

Examples

- Study effective change models: Leading Change, Kotter, 2012; The Heart of Change, Kotter & Cohen, 2002; Managing Transitions, Bridges, 1991; Who killed change? Solving the Mystery of Leading People through Change, Blanchard & Britt, 2009; Switch: How to Change Things When Change is Hard, Heath & Heath, 2010; Organizational Transitions: Managing Complex Change, Beckhard & Harris, 1987.

- Select a model that aligns with organizational culture and size of the change. Using the same model over time allows staff to understand what is coming and what their role will be, making the change easier to incorporate.

- Design clear leadership sign-off processes for steps from implementation of change to spread of successful changes.

- Leaders support teams as their members' transition from the old model to the new model, including ensuring training needs are met, necessary technology is in place, and staffing is adequate; allot time to adopt the newly changed processes.

- Leaders and management design and execute a communication strategy for each stage of change: creating urgency, supporting testing, and spreading the new processes.

- Leaders and management assess and dismantle barriers such as old policies, processes, and behaviors to make way for the new model.

- Human Resources revisits career ladders, performance expectations, compensation alignment, and job descriptions to incorporate new team-based care fundamentals.

- Create opportunities for regular, meaningful, short-term wins to continue to build momentum. Reward change agents at all levels for commitment to the transformation.

- Include new processes in the strategic plan.

- Celebrate success of hard work and movement towards goals while being careful to maintain urgency for continued improvement in care delivery and population outcomes.

- Consider leadership potential for new processes in succession planning for management and leadership positions.

Search ImprovingPrimaryCare.org for more resources

Primary Care Team Guide Assessment-Related Questions

The Practice Team

	Components	Level D	Level C	Level B	Level A
2	Clinical leaders…	intermittently focus on improving quality.	have developed a vision for quality improvement, but no consistent process for getting there.	are committed to a quality improvement process, and sometimes engage teams in implementation and problem solving.	consistently champion and engage clinical teams in improving patient experience of care and clinical outcomes, and provide time, training, and resources to accomplish the work.
		1☐ 2☐ 3☐	4☐ 5☐ 6☐	7☐ 8☐ 9☐	10☐ 11☐ 12☐
3	Quality improvement activities are conducted by…	a centralized committee or department.	topic specific QI committees.	all practice teams supported by a QI infrastructure.	practice teams supported by a QI infrastructure with meaningful involvement of patients and families.
		1☐ 2☐ 3☐	4☐ 5☐ 6☐	7☐ 8☐ 9☐	10☐ 11☐ 12☐
6	Workflows for clinical teams…	have not been documented and/or are different for each person or team.	have been documented, but are not used to standardize workflows across the practice.	have been documented and are utilized to standardize practice.	have been documented, are utilized to standardize workflows, and are evaluated and modified on a regular basis.
		1☐ 2☐ 3☐	4☐ 5☐ 6☐	7☐ 8☐ 9☐	10☐ 11☐ 12☐
7	The practice…	does not have an organized approach to identify or meet the training needs for providers and other staff.	routinely assesses training needs and encourages on-the-job training for staff needing it.	routinely assesses training needs, and ensures that staff are appropriately trained for their roles and responsibilities.	routinely assesses training needs, ensures that staff are appropriately trained for their roles and responsibilities, and provides cross training to ensure that patient needs are consistently met.
		1☐ 2☐ 3☐	4☐ 5☐ 6☐	7☐ 8☐ 9☐	10☐ 11☐ 12☐

How Primary Care Teams Achieve the Quadruple Aim

During visits
- Oral Health Management
- Planned Care
- Medication Management
- Self-management Support
- Behavioral Health Integration

Between visits
- Population Management
- Referral Management
- Clinic-Community Connections
- Care Management
- Communication Management

Comprehensive Services

The Quadruple Aim
Lower costs
Better care
Healthier patients
Happier staff

Informed, Activated Patients

Capacity for Quality Care

Engaged Leadership
QI Strategy

Empanelment/Continuity
Team-Based Care